



Breastfeeding Committee for Canada

The National Authority for the WHO/UNICEF Baby-Friendly Hospital Initiative (BFHI) in Canada

Using the Baby-Friendly Hospital Initiative Self-Appraisal Tool

Any hospital/maternity facility interested in becoming Baby-Friendly should begin by appraising its current practices in relation to the Ten Steps to Successful Breastfeeding. The following Self-Appraisal Tool has been developed to examine current routines and policies for comparison with the Ten Steps, and other recommendations as seen in the 1989 WHO/UNICEF Joint Statement entitled, Protecting, Promoting and Supporting Breastfeeding: The Special Role of Maternity Services.

The self-appraisal tool is a checklist that permits a hospital/maternity facility to make a quick initial appraisal of its practices in regard to breastfeeding. Completion of this initial self-appraisal is the first step in the process, but does not qualify a hospital as Baby-Friendly. The checklist will help to clarify the international standards of the Baby-Friendly Hospital Initiative (BFHI). These standards should be used by staff when evaluating the effectiveness of their breastfeeding program.

Analysing the Self-Appraisal Results

Hospitals are encouraged to bring their key management and clinical staff together to review the Self-Appraisal Tool. Developing a plan of action based on the results of the completed self-appraisal is the next step to becoming designated as a Baby-Friendly Hospital.

A hospital with many “yes” answers on the Self-Appraisal Tool, and an exclusive breastfeeding rate of 75% from birth to discharge may wish to study The Global Criteria to learn the details of the international standards. The hospital may then wish to consider taking further steps toward being designated as a Baby-Friendly Hospital and receiving global recognition. This distinction involves assessment, using Global Criteria, by a team of BFHI Assessors external to the facility.

When a hospital is ready for assessment, a Pre-Assessment is required prior to the External Assessment. This can be arranged by contacting your Provincial/Territorial Baby-Friendly Initiative (P/T BFI) Implementation Committee or if such a committee has not yet been established, contact the Breastfeeding Committee for Canada, (BCC). When the Pre-Assessment report has been successfully completed the P/T BFI Implementation Committee will notify the BFHI National Authority, the Breastfeeding Committee for Canada, who will then make arrangements for the External Assessment.

A hospital with many “no” answers on the Self-Appraisal Tool, or where the exclusive breastfeeding rate from birth to discharge is not yet 75%, may want to develop an action plan. The aim of the plan might be to eliminate practices that hinder initiation of exclusive breastfeeding and to expand those that enhance it. Information may be provided, for example about staff education or hospital policy development, by your Provincial or Territorial BFI Implementation Committee.

The Breastfeeding Committee for Canada

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HOSPITAL DATA SHEET:

Date _____, _____

If no nursery for normal well newborns exists, write "none" in space provided.

Hospital Name: _____

Address: _____

City, District, or Region: _____ Country: _____

Name of Chief Hospital Administrator: _____ Telephone: _____

Names of senior Nursing Officers (or other personnel in charge):

For the Facility: _____ Telephone: _____

For the Maternity Ward: _____ Telephone: _____

For the Antenatal Service: _____ Telephone: _____

Name of person to be contacted for additional information: _____

Type of Hospital: Government _____ Private - Not for profit _____ Private - For profit _____
 Mission _____ Teaching _____ Other: _____

HOSPITAL CENSUS DATA:

Total bed capacity: _____

- _____ In labour and delivery area
- _____ In the maternity ward
- _____ In the normal nursery
- _____ In the special care nursery
- _____ In other areas for mothers and children

Total Deliveries in year 199__ or 200__

- _____ Were by Caesarean Caesarean rate _____%
- _____ Were low birth weight babies (<2500g) Low birth weight rate _____%
- _____ Were in special care Special care rate _____%

Infant feeding data for deliveries from records or staff reports:

- _____ Mother/infant pairs discharged in the past month
- _____ Mother/infant pairs breastfeeding at discharge in the past month
- _____ Mother/infant pairs breastfeeding exclusively from birth to discharge in the past month _____%
- _____ Infants discharged in the past month who have received at least one bottlefeed since birth _____%

How was the infant feeding data obtained?

- _____ From records
- _____ Percentages are an estimate, provided by: _____

Name of person(s) filling out this form: _____

STEP 1. Have a written breastfeeding policy that is routinely communicated to all health care staff.

- 1.1 Does the health care facility have an explicit written policy for protecting, promoting, and supporting breastfeeding that addresses all 10 steps to successful breastfeeding in maternity services Yes No
- 1.2 Does the policy protect breastfeeding by prohibiting all promotion of and group instruction for using breastmilk substitutes, feeding bottles and teats? Yes No
- 1.3 Is the breastfeeding policy available so all staff who take care of mothers and babies can refer to it? Yes No
- 1.4 Is the breastfeeding policy posted or displayed in all areas of the health care facility which serve mothers, infants, and/or children? Yes No
- 1.5 Is there a mechanism for evaluating the effectiveness of the policy? Yes No

STEP 2. Train all health care staff in skills necessary to implement this policy.

- 2.1 Are all staff aware of the advantages of breastfeeding and acquainted with the facility's policy and services to protect, promote, and support breastfeeding Yes No
- 2.2 Are all staff caring for women and infants oriented to the breastfeeding policy of the hospital on their arrival? Yes No
- 2.3 Is training on breastfeeding and lactation management given to all staff caring for women and infants within six months of their arrival? Yes No
- 2.4 Does the training cover at least eight of the "Ten Steps to Successful Breastfeeding"? and the promotions of breastfeeding? Yes No
- 2.5 Is the training on breastfeeding and lactation management at least 18 hours in total, including a minimum of 3 hours of supervised clinical experience? Yes No
- 2.6 Has the health care facility arranged for specialized training in lactation management of specific staff members? Yes No

STEP 3. Inform all pregnant women about the benefits and management of breastfeeding.

- 3.1 Does the hospital include an antenatal care clinic? Or an antenatal inpatient ward? Yes No

- 3.2 If yes, are most pregnant women attending these antenatal services informed about the benefits and management of breastfeeding?..... Yes No
- 3.3 Do antenatal records indicate whether breastfeeding has been discussed with the pregnant woman?..... Yes No
- 3.4 Is a mother's antenatal record available at the time of delivery?..... Yes No
- 3.5 Are pregnant women protected from oral or written promotion of group instruction for artificial feeding?..... Yes No
- 3.6 Does the health care facility take into account a woman's intention to breastfeed when deciding on the use of a sedative, an analgesic, or an anesthetic, (if any) during labour and delivery?..... Yes No
- 3.7 Are staff familiar with the effects of such medicaments on breastfeeding? Yes No
- 3.8 Does a woman who has never breastfed or who has previously encountered problems with breastfeeding receive special attention and support from the staff of the health care facility? Yes No

STEP 4. Help mothers initiate breastfeeding within a half-hour of birth.

- 4.1 Are mothers whose deliveries are normal given their babies to hold, with skin contact, within a half-hour of completion of the second stage of labour and allowed to remain with them for at least the first hour?..... Yes No
- 4.2 Are the mothers offered help by a staff member to initiate breastfeeding during this first hour? Yes No
- 4.3 Are mothers who have had caesarean deliveries given their babies to hold, with skin contact, within a half-hour after they are able to respond to their babies? Yes No
- 4.4 Do the babies born by caesarean stay with their mothers, with skin contact, at this time for at least 30 minutes? Yes No

STEP 5. Show mothers how to breastfeed and how to maintain lactation, even if they should be separated from their infants.

- 5.1 Does nursing staff offer all mothers further assistance with breastfeeding within six hours of delivery?..... Yes No
- 5.2 Are most breastfeeding mothers able to demonstrate how to correctly position and attach their babies for breastfeeding?..... Yes No

- 5.3 Are breastfeeding mothers shown how to express their milk or given information on expression and/or advised of where they can get help, should they need it? Yes No
- 5.4 Are staff members or counselors who have specialized training in breastfeeding and lactation management available full-time to advise mothers during their stay in health care facilities and in preparation for discharge? Yes No
- 5.5 Does a woman who has never breastfed or who has previously encountered problems with breastfeeding receive special attention and support from the staff of the health care facility? Yes No
- 5.6 Are mothers of babies in special care helped to establish and maintain lactation by frequent expression of milk? Yes No

STEP 6. Give newborn infants no food or drink other than breastmilk, unless medically indicated.

- 6.1 Do staff have a clear understanding of what the few acceptable reasons are for prescribing food or drink other than breastmilk for breastfeeding babies? Yes No
- 6.2 Do breastfeeding babies receive no other food or drink Breastmilk only - Yes
(than breastmilk) unless medically indicated? Some other food/drink - No
- 6.3 Are any breastmilk substitutes including special formulas which are used in the facility purchased in the same way as any other foods or medicines? Yes No
- 6.4 Do health care facility and health care workers refuse free or low-cost* supplies of breastmilk substitutes, paying close to retail market price for any? Yes No
- 6.5 Is all promotion of infant foods or drinks other than breastmilk absent from the facility? Yes No

STEP 7. Practice rooming-in — allow mothers and infants to remain together — 24 hours a day.

- 7.1 Do mothers and infants remain together (rooming-in or bedding-in) 24 hours a day, except for periods of up to an hour for hospital procedures or if separation is medically indicated? Yes No
- 7.2 Does rooming-in start within an hour of a normal birth? Yes No

* Low cost below 80% open-market retail cost. Breastmilk substitutes intended for experimental use of “professional evaluation” should also be purchased at 80% or more of retail price.

7.3 Does rooming-in start within an hour when a caesarean mother can respond to her baby? Yes No

STEP 8. Encourage breastfeeding on demand.

8.1 By placing no restrictions on the frequency or length of breastfeeds, do staff show they are aware of the importance of breastfeeding on demand?..... Yes No

8.2 Are mothers advised to breastfeed their babies whenever their babies are hungry and as often as their babies want to breastfeed? Yes No

STEP 9. Give no artificial teats or pacifiers (also called dummies or soothers) to breastfeeding infants.

9.1 Are babies who have started to breastfeed cared for without any bottlefeeds? Yes No

9.2 Are babies who have started to breastfeed cared for without using pacifiers? Yes No

9.3 Do breastfeeding mothers learn that they should not give any bottles or pacifiers to their babies? Yes No

9.4 By accepting no free or low-cost feeding bottles, teats, or pacifiers, do the facility and the health workers demonstrate that these should be avoided? Yes No

STEP 10. Foster the establishment of breastfeeding support and refer mothers to them on discharge from the hospital or clinic.

10.1 Does the hospital give education to key family members so that they can support the breastfeeding mother at home?..... Yes No

10.2 Are breastfeeding mothers referred to breastfeeding support groups, if any, are available? Yes No

10.3 Does the hospital have a system of follow-up support for breastfeeding mothers after they are discharged, such as early postnatal or lactation clinic check-ups, home visits, telephone calls? Yes No

10.4 Does the health care facility encourage and facilitate the formation of mother-to-mother or healthcare worker-to-mother support groups? Yes No

10.5 Does the health care facility allow breastfeeding counseling by trained mother-support group counselors in its maternity services?..... Yes No