

Model Hospital Breastfeeding Policies: June, 2005 Self-Appraisal Questionnaire

1. Hospital name and Address:
2. The hospital is: Solely a maternity hospital A government hospital
(Mark all that apply) A general hospital A private hospital
 A teaching hospital Other (specify)
3. Name and title of hospital director or administrator:
 Telephone and extension: _____ E-mail: _____
4. Name and title of the director of maternity services:
 Telephone and extension: _____ E-mail: _____
5. Name and title of the director of antenatal services/clinic:
 Telephone and extension: _____ E-mail: _____
6. Number of maternity beds (postpartum): _____
7. Average daily number of mothers with full term babies in the postpartum unit(s): _____
8. Does the hospital have a Special Care Unit or a Neonatal Intensive Care Unit?
 yes no *(If yes, average daily census: _____)*
9. Are there rooms on the maternity floor designated as "well baby nurseries"?
 yes no *(If yes, average daily census: _____)*
10. What percentage of mothers attend the hospital's antenatal clinic? _____ % No antenatal clinic
11. Does the hospital hold antenatal clinics at other sites outside the hospital? Yes No
(If yes, describe where they are held: _____)
12. The following staff has direct responsibility for assisting women with breastfeeding (BF) or feeding breast milk substitutes (BMS)

	BF	BMS		BF	BMS
Nurses	<input type="checkbox"/>	<input type="checkbox"/>	General physicians	<input type="checkbox"/>	<input type="checkbox"/>
Midwives	<input type="checkbox"/>	<input type="checkbox"/>	Pediatricians	<input type="checkbox"/>	<input type="checkbox"/>
CSBU/NICU Nurses	<input type="checkbox"/>	<input type="checkbox"/>	Obstetricians	<input type="checkbox"/>	<input type="checkbox"/>
Dietitians	<input type="checkbox"/>	<input type="checkbox"/>	Infant feeding counselors	<input type="checkbox"/>	<input type="checkbox"/>
Nutritionists	<input type="checkbox"/>	<input type="checkbox"/>	Lay/peer counselors	<input type="checkbox"/>	<input type="checkbox"/>
Lactation consultants (IBCLC)	<input type="checkbox"/>	<input type="checkbox"/>	Other staff (specify)	<input type="checkbox"/>	<input type="checkbox"/>

13. Are there breastfeeding and/or infant feeding committees in the hospital? Yes No
If yes, please describe:

Hospital Data (Last Calendar year)

14. Total births in the last calendar year: _____ of which:
 _____% were cesarean births
 _____% were admitted to SCN/NICU
 _____% were to mothers who did not receive antenatal care in this facility
15. Total number of babies discharged from the hospital in the last calendar year: _____ of which:
 _____% mothers stated they wanted to breastfeed
 _____% started breastfeeding
 _____% were breastfeeding at discharge
 _____% were exclusively breastfed from birth (or fed expressed breast milk)
 _____% received at least one feed of formula, water or other fluids in the hospital
 _____% received at least one feed of formula, water or other fluids in the hospital because of documented medical reason or mothers' informed choice.

Are the data: from records? and estimate? Please describe sources:

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1 Hospital promotes and supports breastfeeding

	Yes	No	In process
1.1: Hospital has an interdisciplinary, culturally appropriate team comprised of hospital staff whose goal is to reduce institutional barriers to breastfeeding such as mother-infant separation, fragmentation of care and routine supplementation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.1.1: The team develops, implements and monitors hospital policies and practices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.1.2: The team ensures that all staff receives ongoing education.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.1.3: The team performs evaluations based on guidelines similar to the <i>Baby Friendly Hospital Initiative Guidelines and Criteria</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2: The team members review the <i>International Code of Marketing Breastmilk Substitutes</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3: A team member(s) is(are) designated as responsible for assessing needs, planning and monitoring interventions, implementing and updating competency-based training in breastfeeding for all staff caring for mothers, infants and/or children.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.4: ALL hospital departments serving mother, infants and/or children have written breastfeeding policies that are routinely communicated to all health care staff, beginning with hospital orientation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.5: Nurses who are in contact with mothers, infants or children receive standardized education and training on the support and management of lactation. (Lactation management is part of orientation and included in ongoing training and competency evaluation for both nurses and physicians.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.6: The hospital demonstrates support for breastfeeding by fostering the formation of breastfeeding support groups by			
1.6.1 : providing space and/or covering operational costs to support local community lactation support groups or hospital-based support groups.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.7: Hospital demonstrates support for breastfeeding employees by providing education and assistance to pregnant and lactating staff, by providing a clean, comfortable break space and time to express milk.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospital offers additional services including:			
1.7.1: Electric breast pumps for staff to use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.7.2: Extended maternity or paternity leave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.7.3: On-site child care for breastfeeding infants of hospital staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.7.4: Private space and time for a mother to nurse her baby during breaks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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2 Nurses, certified nurse midwives, physicians and other health professionals with expertise regarding the benefits and management of breastfeeding educate pregnant and postpartum women when the opportunity for education exists. For example: during prenatal classes, in clinical settings, and at discharge teaching.

	Yes	No	In process
2.1: Pregnant and postpartum women are provided information prior to birth, following birth, and before discharge regarding the benefits and management of breastfeeding and the risks associated with artificial feeding. This information includes how to maintain lactation when separated from their infants. Classes and teaching materials are selected which consider the woman's cultural background, education and preferred language.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.2: Education is provided using a combination of techniques such as one-to-one teaching, group classes, pamphlets and/or video taped instruction. Hospitals work with prenatal providers to inform and encourage pregnant women and their partners to attend available breastfeeding classes during the prenatal period.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.3: Classes, pamphlets and videos reflect the cultural background, education, and language of the population being served.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4: Materials that promote the use of commercial products known to interfere with breastfeeding are not used to teach breastfeeding.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.5: Teaching methods are tailored to the age of the client.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.6: Regardless of feeding choice, discharge teaching includes the benefits of keeping the baby in close physical proximity. As part of the continuum of care, mothers are provided discharge education on sleeping with their infants.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.7: Physicians are encouraged to support breastfeeding enthusiastically, according to the recommendation of the American Academy of Pediatrics, and educate patients based on AAP guidelines.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.8: Mothers are instructed in a method of hand expression of breast milk. Instruction is offered to all mothers regardless of feeding choice, prior to hospital discharge.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.9: The breastfeeding mother is instructed in the correct use of a hospital grade electric breast pump by an experienced perinatal caregiver when the infant consistently demonstrates inadequate suckling or when prolonged separation of the mother and infant is expected because of prematurity or illness. The mother is given the opportunity to pump as soon after birth as medically feasible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.10: Discharge planning for breastfeeding mothers who are likely to be separated from their infants includes methods of expressing breast milk including hand expression and/or pumping. A support person is included in the teaching process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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	Yes	No	In process
4.6: Information regarding the cost of purchasing artificial infant milk is provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.7: The mother's health status is considered in relation to HIV serology, chemical dependency, chemotherapy treatments and other medical conditions or therapies where breastfeeding may be contraindicated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.8: Other medical conditions that require extra counseling and supervision or a change from a less desirable to a more desirable medication in a given class are addressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.9: Nurses, certified nurse midwives, physicians and registered dietitians discuss exclusive breastfeeding with mothers and provide written material and specific resources for follow-up. The information includes normal breastfeeding patterns and normal output of urine and stool. Mothers receive a tool to assess adequate feeding/output, e.g. feeding log.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.10: All breastfeeding newborn infants are seen by a pediatrician or other knowledgeable and experienced health care professional at 3-5 days of age as recommended by the AAP.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5 Nurses, certified nurse midwives, and physicians encourage new mothers to hold their newborns skin to skin during the first two hours following birth and as much as possible thereafter, unless contraindicated

	Yes	No	In process
5.1: Assuming baby and mother are stable, the mother and baby is skin-to-skin during the first several hours following birth. This includes the post-cesarean mother and baby, when alert and stable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.1.1 Babies are usually most ready to breastfeed during the first hour following birth, so normal newborns are allowed to breastfeed prior to such interventions as: the newborn bath, glucose sticks, foot printing, and eye treatments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.1.2 During the first day of life, skin-to-skin time and breastfeeding takes priority over other routine events such as infant bathing, pictures, and visitors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.1.3 If breastfeeding is delayed due to medical condition(s) of mother or baby, the baby is put skin-to-skin and allowed to approach the breast as soon as possible after they are stable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.1.4 The baby is encouraged to breastfeed without restriction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.1.5 Nursing policies and practices support care of the mother and infant <u>together</u> and are documented in nursing charting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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6 Mothers and their infants are assessed for effective breastfeeding and mothers are offered instruction in breastfeeding as needed.

	Yes	No	In process
6.1 Nurses, certified nurse midwives and physicians assist the mother with breastfeeding and provide guidance and support.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.1 When an assessment (for example, FAIB or LATCH) identifies a dysfunction or the infant displays signs of inadequate intake, a lactation consultation is ordered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.2 A functional reassessment of the infant at the breast is performed by a trained physician, nurse, or lactation specialist within 8 hours of birth, by utilizing an assessment tool such as FAIB or LATCH, and at least once every 8 hours while in the hospital.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.2 Pillows are available to support mother's arms and bring the baby to breast level.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.3 Nurses, certified nurse midwives, and physicians respond to complaints of nipple soreness by assessing the source of the discomfort and assisting the mother in resolving the problem.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.4 Mothers are educated on the "supply and demand" principle of milk production.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.5 Frequency and duration of feedings at the breast are infant-led. Non-timed feedings and cue-based offerings are the basis for mother-infant care. The infant needs to have active suckling and swallowing time at the breast during each feeding.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.6 Mothers are assisted in identifying infant's hunger cues and readiness to feed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.6.1 Breastfeeding according to baby's cues is supported by nurses and physicians who help mothers respond to those cues.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.6.2 Mothers are encouraged to monitor their own and the infant's signs of adequate/inadequate intake and output.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.6.3 If the nurse or physician is concerned with the baby's intake before discharge, consultation is sought and the problem defined and addressed prior to discharge.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.7 The nurse, certified nurse midwife or physician discusses the importance of colostrum with the mother. After appropriate education, however, a mother who feels very uncomfortable giving colostrum is encouraged to pump and may discard the colostrum. This may be all that is needed to ensure an adequate beginning with breastfeeding. The nurse, certified nurse midwife, or physician are aware of cultural differences regarding colostrum and are trained to address these issues sensitively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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7 Artificial nipples and pacifiers are discouraged for healthy breastfeeding infants.

7.1 Pacifiers are not given to breastfeeding infants. Mothers are encouraged to breastfeed frequently in response to hunger cues.

Yes	No	In process
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7.2 Mothers are encouraged to hold and breastfeed their infants during routine painful procedures such as heel sticks and intra-muscular injections. If the mother chooses not to breastfeed during the painful procedure, a pacifier may be used and discarded after the procedure.

8 Sterile water, glucose water, and artificial milk are not given to a breastfeeding infant without the mother's informed consent and/or physician's specific order.

8.1 Breastfeeding infants are given only breast milk, unless specifically ordered for a clinical condition by the physician or with the mother's informed consent.

Yes	No	In process
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8.2 When supplementation is medically indicated, an alternate feeding method is utilized to maintain mother-infant breastfeeding skills. Alternate feeding methods include cup, dropper, gavage, finger or syringe.

8.2.1 Artificial feeding does not exceed the physiologic capacity of the newborn stomach.

8.3 Education regarding supplementation is presented prior to obtaining consent for supplementation. Risks of introducing artificial infant milk and/or water to the newborn are discussed with the mother prior to supplementation.

9 Mothers and infants are encouraged to remain together during the hospital stay.

9.1 Babies are cared for at their mothers' bedside. Both the mother and family are encouraged to assist with infant care.

Yes	No	In process
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9.2 Mother and family are educated that rest and recovery for the mother and infant is vital.

9.2.1 The nurse protects the dyad from disturbances that impact their ability to recover.

9.2.2 Night feeding are explained as a normal and healthy pattern for the infant.

9.3 If, after encouragement to room in, the mother requests the baby to stay in the nursery at night, the infant is brought to the mother to breastfeed when the baby displays hunger cues or every three hours, whichever comes first. If the mother chooses not to breastfeed at night, she is educated on the potential for breast engorgement.

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9.4 Evidence of patient teaching and professional recommendations are documented in the patient's chart.

9.4.1 An informed consent for supplementation plus a statement indicating the mother's request not to breastfeed during the night is included in the patient chart.

9.5 If the mother is unable or refuses to feed her infant during the night, the infant is fed in a manner that is consistent with preserving breastfeeding and reflects the skills and knowledge of the perinatal caregivers in consultation with the infant's physician. Alternative feeding methods such as cup, finger, or tube feedings are used to provide adequate calories to the newborn. Alternative feedings include colostrum or breastmilk, if available. The use of pacifiers, bottles with artificial nipples and water feedings are discouraged.

9.5.1 Mothers who receive sedative drugs, are out of the room for surgical procedures, or have an altered state of alertness do not bed-in with their newborn.

Yes	No	In process
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10 At discharge, mothers are given information regarding community resources for breastfeeding support.

10.1 Breastfeeding mothers are routinely referred to a breastfeeding support group and given the telephone number of a lactation specialist or community resource for breastfeeding assistance.

10.2 Gift packs, if given, are appropriate for breastfeeding or formula feeding mothers. Commercial advertising of artificial infant milk or promotional packs are not be given to breastfeeding mothers.

Yes	No	In process
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>