# The Baby Friendly Hospital Accreditation Process 2020

In New Zealand, all maternity facilities are required to achieve and maintain BFHI accreditation. New Zealand Breastfeeding Alliance (NZBA) is here to help and guide facilities through this process. The standards of care and services provided are audited by the NZBA.

Once initial accreditation is achieved the facility must:

- Complete and return to NZBA, an annual update of contact details
- Be reaccredited three-yearly to maintain accreditation, or every four years for those facilities services who meet the additional criteria

### **Process for BFHI Audit**

## Preparations for the Audit - NZBA is moving to audit by DHB

- New Zealand Breastfeeding Alliance (NZBA) notifies the maternity managers in the DHB approximately six months prior to expiry of their accreditation.
- NZBA will negotiate with services to bring them into DHB groups to be audited in one visit.
- All audit detail is collected electronically
- NZBA offers a pre-audit discussion with the BFHI Coordinator during which the audit process and any issues are covered. This will include action on previous audit recommendations and annual breastfeeding survey data.
- Date or dates for the audit are agreed between management and NZBA. This date must be prior to when their current accreditation period expires. In special circumstances this date can be negotiated with NZBA.
- The service is required to complete and send to NZBA, at least six weeks prior to the audit, the following:
  - A completed Part 3B: Pre-Audit Questionnaire
  - Annual breastfeeding data / ethnicity data
  - Copies of the Breastfeeding Policy with consultation documentation and the Artificial Feeding Policy
  - Facility staff education records
  - Other associated policies and information for mothers
  - Antenatal and/or postnatal mother consents for interviews\* and
  - A site map.

<sup>\*</sup> The service will need to begin collecting informed consent from mothers and forwarding them to NZBA, at least three to four months prior to the audit. This is especially important for smaller services and consents may need to be collected and sent many months prior to the audit for an adequate sample of a minimum of ten mothers. The consents collected need to be forwarded to NZBA as soon as possible after collection. Interviews need to be completed by NZBA at least six weeks prior to the audit.

- The manager/BFHI Co-ordinator will inform NZBA of the name of the person who will meet the team and where they will meet. The Team Leader may contact the BFHI coordinator/maternity manager and confirm the time and place to meet.
- NZBA needs to be informed if there is to be a formal welcome. If this is to be a Māori welcome (powhiri or mihi whakatau) then NZBA may request a cultural support person / kaumatua to support the audit team.
- The service is invoiced for the audit fee which needs to be paid prior to the audit.
- If the audit is cancelled after confirmation, a fee equal to 25% of the audit costs will be incurred.

### Please have the following available for the visit of the Audit Team:

- Name of a site liaison contact person for the BFHI audit team
- Arranged time for the BFHI audit team to meet the relevant management
- > The security requirements of the facility (especially after hours) and health and safety procedures
- A secure room for auditors to work in and to keep documents, ideally within the maternity units, or in close proximity to the ward(s)
- > Secure stable WIFI log ins for auditors as all data is collected electronically
- Internet and phone access in a room where interviews can be performed in private
- A staff duty roster
- A complete list of all facility staff at the maternity facility
- A current list of mothers with the type of birth and the method of feeding and
- > Copies of any information sheets and completed consent forms given out by the maternity facility.

### The Audit Visit

#### The Audit Team:

- Will conduct the audit
- The Team Leader will provide initial feedback on the findings to management and facility staff at a suitable time prior to their departure.
- A team may include any or all of the following:
  - Lead auditor
  - Māori auditor
  - Consumer auditor
  - Trainee auditor
- The Team Leader is unable to indicate whether a facility has been successful until the final documents have been reviewed offsite.

#### **Post-Audit**

### Following the audit:

The Team Leader completes the audit documentation and sends it to NZBA for review.

- NZBA informs the facility of the outcome of the audit in writing.
- If the findings show that the service is required to complete further follow-up work to meet the requirements of the audit, then a letter and report will be sent to the service management/ BFHI Coordinator/ Director of Midwifery outlining the follow-up required.
- The service has six months from the date of the letter requesting further follow-up to meet the requirements outlined in the preliminary report.
- When the requirements have been completed the report may go to the NZBA Moderation Panel (consisting of selected NZBA Board Members) to be reviewed.
- In the above case the NZBA Moderation Panel makes the decision as to whether to award BFHI accreditation to the service.
- The service is contacted, informing them of the Moderation Panel's decision, and is sent the completed Final Report.

## a) If the service does not meet all of the criteria:

- The service has a period of six months following receipt of the Audit Report, to fulfil the requirements.
- The service may be invoiced by NZBA for additional time If:
  - the audit exceeds the expected timeframe
  - o an auditor is required to revisit the facility and incurs any of the following costs: additional staff or auditor time, travel, meals, accommodation, administration expenses.

### **Provisional Pass Information**

- If, after meeting the BFHI standards, the NZBA Board is not satisfied that the service will maintain the BFHI standards (e.g. it takes nearly the full six months to meet the BFHI standards, or the service has to be audited a number of times for some components before passing) the maternity facility may be given a <a href="Provisional Pass">Provisional Pass</a> (i.e. the maternity facility must undergo a further review administered by a BFI auditor at the time of the BFHI Annual Survey and must pass to achieve full accreditation). Note: The service will be invoiced for the costs of this visit.
- If, following the above measures, the service is unable to meet the standards required for BFHI accreditation, i.e. within the six month time given to address their issues, the designation as a BFHI facility is withdrawn. The certificate must be removed from view and NZBA will notify the Ministry of Health.
- Where a service fails to undertake re-audit within six months from the due recertification date the designation as a BFHI facility will be withdrawn. The certificate must be removed from view and NZBA will notify the Ministry of Health. In some instances the reason for delay may be due to extraordinary circumstances (i.e. moving to new premises, natural disasters, etc.) and in these instances NZBA will work with the service on an individual strategy

### b) When the service passes the Audit:

### **Certificate and Public Acknowledgement**

- An Accreditation Ceremony may be arranged by the service with NZBA.
- An NZBA staff member may present the service with the BFHI Certificate if their attendance is requested.

- Formal certificate presentations most usually take place after the first and fourth accreditations.
- In most circumstances the Certificate will be couriered to the facility.
- Once the Certificate has been received, the service is encouraged to schedule its own gathering / hui / fono to acknowledge staff commitment to BFHI. It is suggested that local media be invited in order to publicise the facility's achievement.
- Comms support and photos can be provided by NZBA for such events so articles can appear in local newspapers and DHB publications.

#### **Process for BFHI Re-audit**

The Ministry of Health requires all services to be BFHI accredited and it is important that DHBs do not allow their accreditation to lapse.

The procedure for re-audit is the same as that for an audit. During the re-audit, the team will review the previous Audit Report and recommendations made to see if these have been implemented.

## **Four-Yearly Accreditation**

Services will be considered for four-yearly accreditation if they have:

- maintained accreditation through regular audits every three years
- been accredited a minimum of three times
- consistently maintained the BFHI criteria to a high standard.

### The Certificate

- The service will be awarded a certificate for each subsequent re-audit.
- The service will be dated with the anniversary date of the previous BFHI presentation, i.e. three years after the previous presentation. This is the case even if the service takes a considerable amount of time to achieve all of the standards, or if the service has a delayed re-audit.
- For Certificate presentation see Certificate and Public Acknowledgement above.

### **Resolution Procedure**

NZBA provides a resolution process which deals with complaints or grievances in a professional manner with consideration given to cultural and ethnic sensitivities.

If a service or provider wishes to make a complaint or register a grievance in relation to the BFHI audit process, the NZBA Executive Officer should be contacted.