



NZBA

Baby Friendly Aotearoa
New Zealand

BABY FRIENDLY HOSPITAL INITIATIVE

PART 3 B

Pre-Audit Questionnaire

Primary Facility

New Zealand Breastfeeding Alliance

[WHO & UNICEF]

Facility Name:

Date:

PART 3 B

To be used in conjunction with

PART 3 A

Information for Services

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Part 3 A:

This is not required by the New Zealand Breastfeeding Alliance (NZBA). This information is for your use, to assist you with the completion of Part 3B, it also includes templates which you may find useful for BFHI documentation.

Part 3 B:

Complete pages 4-10 and submit to NZBA with associated documentation at least 6 weeks prior to audit.

The *Pre-Audit Questionnaire* will assist the BFHI Coordinator or suitable delegate to appraise or review the facility's practices in terms of support of the principles of the Baby Friendly Hospital Initiative.

Completion of this questionnaire is recommended for all maternity services prior to being accredited / reaccredited for Baby Friendly designation.



Section 3B: General Data Sheet

Maternity Facility:
(Preferred name for the BFHI Certificate)

Address:

Telephone No:

Fax No:

Name of Manager of Maternity Service:

Name:

Telephone No:

Email:

Name of BFHI Coordinator / Liaison:

Name:

Telephone No:

Email:

Usual Days of Work:

Name of Person/s responsible for the:

Facility

Postnatal Service

Antenatal Service

Birth Suite

Director of Midwifery

BFHI Education

Quality service

Type of Facility: Primary

Type of Service: DHB Facility Community Trust Private



Total number of Staff in each education category

Level One Awareness:

Level Three Specialist

Level Four

Orientation to the Breastfeeding Policy

.....
.....
.....
.....

Services provided within the facility

Antenatal / Childbirth Education Classes

Antenatal Clinic

Birthing Suite Primary

Postnatal Beds

Facility LMC Services

Self Employed LMC

Other

.....
.....

Please give the days and times of any relevant clinics and classes you provide

Name	Day	Time	Type of Class	Provider (DHB, Plunket etc)
------	-----	------	---------------	-----------------------------

.....
.....
.....
.....
.....



Total Bed Capacity

_____	In antenatal service
_____	In labour and birthing area
_____	In the postnatal service

Total Births	during the last 12 months from	to
_____	_____	_____
_____	were low birth weight babies (<2500 grams)	LBW rate
_____		_____ %

Designation	Number of Births per year	% of births
Core LMC	_____	_____
Independent LMC	_____	_____
Other	_____	_____



Breastfeeding Data

Infant feeding data from records or staff report at discharge of mothers from the maternity facility:

An example of this table can be found in *Part 3A* on page 13.

Table A

Feeding records, at discharge, for those well infants who were birthed at the facility and discharged with their mother in the last year:

(Please note we require the actual numbers and percentages)

Month														Total
Total No of Births														
No. exclusively breastfeeding	%													%
No. fully breastfeeding	%													%
No. partially breastfeeding	%													%
Artificially feeding	%													%
Not recorded														
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

This facility's average annual exclusive breastfeeding rate on discharge is: _____%

How was the Infant Feeding Data Obtained?

From records provided by: _____ Other: _____



Transfers-in (Table B)

The data for these infants is required on discharge.

Table B:

Feeding records at discharge for those infants who transferred to the facility in the last year.

Month		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Total
Total No of Transfers In														
No. exclusively breastfeeding	%													%
No. fully breastfeeding	%													%
No. partially breastfeeding	%													%
Artificially feeding	%													%
Not recorded														
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

The average exclusive breastfeeding rate on discharge for all infants (including the transfers-in) over the past twelve months was: %

Please comment on the exclusive breastfeeding rates for the past twelve months:

Consider the following:

- How do the rates compare with your last annual survey?
- If there are any months where you can see a significant difference in numbers (either higher or lower) can you identify a reason for this variation?

Comments:

.....

.....

.....

.....

.....

How was the Infant Feeding Data Obtained?

From records provided by: _____ Other: _____



Breastfeeding Data associated with Ethnicity

Please list below the ethnic groups served by your facility and the approximate proportion of the client population each would represent:

Please note:

- Data should include numbers from the year's statistics.
- Data needs to be current and add up to 100%.
- Only groups represented by over 4% of the total should be identified individually.

An example of data required can found in Part 3A, on page 14.

In the past calendar year (enter dates from data available) there were _____ infants discharged from the facility.

Enter the number of clients from each ethnic group for the breastfeeding definitions, on discharge, in the table below. Both numbers and percentages [%] are required.

	Ever Initiated Breastfeeding	Exclusively Breastfeeding	Fully Breastfeeding	Partially Breastfeeding	Artificially Feeding	Total
NZ European	(%)	(%)	(%)	(%)	(%)	(100%)
NZ Māori	(%)	(%)	(%)	(%)	(%)	(100%)
	(%)	(%)	(%)	(%)	(%)	(100%)
TOTAL						(100%)



Clientele Ethnicity Data

Refer to *Part 3A*, page 15 for further details and example of this table.

Please list below the ethnic groups served by your maternity facility and the proportion of the client population each would represent:

The number and percentage should be from the previous year's data. These need to be current and add up to 100%

Ethnicity	Number	Percent
		%
		%
		%
		%
		%
		%
		%
		%
Total		100%



Along with pages 4-10 of Part 3B, further information to be sent to NZBA 6 weeks prior to the Audit (*electronically please*)

	Relates to	X / ✓
Breastfeeding Policy	Step 1	
A copy of the BFHI/ breastfeeding courses presented in your facility	Step 2	
A list of all current staff		
<ul style="list-style-type: none"> A summary of staff attendance at BFHI education, including ongoing education Outline of Breastfeeding for Maori Women education and contact details for facilitator 		
Current curriculum of antenatal breastfeeding education	Step 3	
Code Compliance Policy	Code	
List of contacts for the Maori Health worker/unit, community providers and Kaumatua supports, Copy of BF for Maori Women Education	Treaty	
Artificial Feeding Policy	Non- BF women	

Please do not send but have available for Auditors when they arrive

	Relates to
Consultation Process <ul style="list-style-type: none"> List of those consulted with including Maori and any ethnicity representing 5% of your birthing population Any communication received as part of this consultation 	Step 1
A copy of referral form or process for referral to <ul style="list-style-type: none"> Lactation consultant for those who are identified antenatally as having an increased risk for lactation and breastfeeding All handouts which are produced by you or others e.g MoH, including a list of support for women once they leave the facility 	Step 3 Steps 3-10
Formula use record – including price Any other code information that you use	Code
Summarised Breastfeeding Policy in Maori	Treaty
All supporting documentation which relates to the standards of care for non-breastfeeding women	Non BF Women



THANK YOU

This completes the information NZBA require you to send back.

We strongly recommend you complete the following pre-audit questionnaire to enable you to assess how your preparations are coming along.

Don't forget to attach the breastfeeding, artificial feeding and code compliance policies. Your education outlines and records.



Policy Consultation Required

Local community organisations / providers / groups involved in consultation:

Name	Consulted		
	Yes	No	N/A
Independent LMCs			
• Midwives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Obstetricians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• General Practitioners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
Childbirth Educators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
Well Child Providers			
• Plunket	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well Child, Tamaraki ora,, Whānau ora Collectives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• General Practitioners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Pacific Provider	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:(please specify)			

	Yes	No	N/A
Community Groups / Organisations			
• Māori Health Provider	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• La Leche League	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Parents Centre	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Breastfeeding Network Group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: (please specify) <i>include local breastfeeding groups</i>			



➤ **Step One – Have a written breastfeeding policy that is routinely communicated to all health care staff.**

		Comments
1.1	What is the review date for the Policy?	
1.2	<p>Consultation occurred in the development of the Policy. as per page 11.</p> <p>Note: <i>If a facility is using a DHB-issued Breastfeeding Policy local consultation must also occur.</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.3	Does the Breastfeeding Policy cover all of <i>The Ten Steps to Successful Breastfeeding</i> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.4	<p>Does the Policy or supporting documentation contain the key points of the <i>International Code of Marketing of Breast-milk Substitutes and subsequent relevant WHA resolutions</i> to:</p> <ul style="list-style-type: none"> prohibit the acceptance of free and low cost supplies of infant formula? <p>Please comment on how you ensure this is adhered to.</p> <ul style="list-style-type: none"> prohibit all promotion of, and group instruction for using infant formula, feeding bottles and teats? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.5	Does the Policy direct staff and the facility to comply with the <i>International Code</i> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.6	<p>Does the Policy explicitly prohibit the acceptance of free and low cost supplies of infant formula?</p> <p>Please comment on how you ensure this is adhered to</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No



1.7	In order to protect breastfeeding does the Policy prohibit all promotion of, and group instruction for using infant formula, feeding bottles and teats?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
1.8	Does the Policy ensure that mothers and/or babies, for whom breastfeeding is not recommended due to clinical indications, receive the appropriate guidance / counselling on feeding options suitable to their situation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
1.9	Is the Treaty of Waitangi/ te Tiriti o Waitangi acknowledged and integrated through your Breastfeeding Policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
1.10	Are all staff orientated to the Policy and notified of updates / review?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
1.11	Is the Policy available to all staff who provide care of mothers and babies?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
1.12	Is a full Policy or an abridged version of the Breastfeeding Policy displayed in English, Māori, and other relevant languages in all areas of the maternity and neonatal service?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
1.13	Are women aware that a copy of the full Policy is available to them on request?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
1.14	Is the Policy reviewed three-yearly?	<input type="checkbox"/> Yes <input type="checkbox"/> No	



1.15	Are the dates for review of the Policy and its associated procedures and guidelines apparent in the Policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
1.16	Does the breastfeeding policy align with your DHB's cultural policies and plans, e.g. Māori Health Plan, Māori Health Policy, models of care for Māori patients, cultural safety?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
1.17	Are clinical guidelines associated with your Policy accurate, evidence-based and current? e.g. the use of nipple shields	<input type="checkbox"/> Yes <input type="checkbox"/> No	



➤ **Step Two – Train all providers in the skills necessary to implement the breastfeeding policy.**

Note: All staff employed by the facility who have any contact with pregnant women, mothers, and/or babies, must have received the appropriate level of education according to their role.

				Comments
2.1	Are new staff orientated to the Breastfeeding Policy on their arrival to the facility?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
2.2	Does the facility ensure that those who are scheduled for education, appropriate to their role, are given it within six months of commencing employment with the service?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
2.3	Does the core content of the education and training programme for clinical staff working directly with breastfeeding mothers, reflect <ul style="list-style-type: none"> • the <i>Ten Steps to Successful Breastfeeding</i>? • the <i>International Code of Marketing of Breast-milk Substitutes</i> and subsequent relevant <i>World Health Assembly resolutions</i>? • compliance to the Treaty of Waitang i/ te Tiriti o Waitangi? • support for the non-breastfeeding mother and her baby? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
2.4	Do Level Three Specialist staff receive education in relation to Breastfeeding for Māori Women?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
2.5	Does the mandatory level of training for Level Three Specialist staff include three hours of clinical education?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
2.6	Does the facility maintain records of the: <ul style="list-style-type: none"> • employees start date? • education hours? • content of the education sessions attended by each employee? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	



2.7	Do your education records confirm 80% of: <ul style="list-style-type: none"> • Level One Awareness • Level Two Generalist • Level Three Specialist • IBCLC/ BFHI coordinator have received education as per the New Zealand standard in <i>Part 2- Step 2</i> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.8	Is there access to appropriate ongoing education available for the Level Four IBCLC to maintain their International Board Certified Lactation Consultant certification?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Complete the following table:

Staff Designations	Number of Staff
New Employees	
Orientation to Policy Only	
Anaesthetists	
Level One Awareness	
Level Two Generalists	
Level Three Specialist	
Level Four Expert	
Other	



➤ **Step Three – Inform pregnant women about the benefits and management of breastfeeding**

To determine how Step Three will be assessed indicate which of the following applies to the service.

Group A: This facility

- is the provider of primary care
- holds breastfeeding classes or antenatal classes
- accepts handover of care during pregnancy

Group B: This Facility

- has pregnant women who are referred for obstetric consultation only

Group C: This facility:

- has a combination of both Group A and Group B

For those services who have identified any area applicable to them in either Group A or Group C please complete all points below.
 For those services for whom Group B only is applicable please complete points 3.5 to 3.8

			Comments
3.1	Can you provide a written description of the antenatal education provided by yourselves or a contractor?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.2	Does the content of the antenatal programme include the following: <ul style="list-style-type: none"> • explanation of the facility Breastfeeding Policy? • the importance of exclusive breastfeeding for the first six months? • the importance of breastfeeding? • the importance of early skin-to-skin contact? • early initiation of breastfeeding? • rooming-in on a 24 hours basis? • safe and unsafe sleep practices/information? 	<input type="checkbox"/> Yes <input type="checkbox"/> No	



	<ul style="list-style-type: none">• responsive (cue-based or baby-led) feeding?• frequent feeding to help ensure enough breastmilk?• the implications of giving a breastmilk substitute to a baby?• good positioning and attachment of the baby at the breast?• the implications of using pacifiers, teats and bottles on the establishment of breastfeeding?• breastfeeding support services in the community• the effect of drugs, used in labour, on both the newborn and the initiation of breastfeeding? that breastfeeding continues to be important after six months when other foods may be introduced?		
3.3	Do antenatal records show the breastfeeding topics discussed with pregnant women?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.4	Is there documentation used when a pregnant women is admitted that identifies which breastfeeding topics have been discussed with her?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.5	Does the antenatal service provide handouts, links to apps/websites that cover these topics as in 3.2 above?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.6	Are written materials / website links / apps about breastfeeding made available to women current, ethnically and culturally appropriate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.7	Is all promotional material in your facility compliant with <i>The Code</i> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No	



3.8

What processes are in place, when a potential breastfeeding risk factor has been identified, to ensure this woman achieves the optimal breastfeeding outcome for her situation?

Tick those that apply:

Early referral to a:

- Lactaton consultant
- LMC
- Peer support
- La Leche League
- Other

Comments:



➤ **Step Four – Help mothers initiate breastfeeding within a half-hour of birth.**

Step 4 is interpreted as: *Keep babies in skin-to-skin contact with their mothers immediately following birth for at least an hour and encourage mothers to recognise when their babies are ready to breastfeed, offering help if needed.*

		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Comments
4.1	<p>Can mothers can confirm that:</p> <ul style="list-style-type: none"> they are given the appropriate support to provide skin-to-skin contact with their babies in accordance with <i>Step Four</i>? are taught how to recognise signs that their babies are ready to feed? 	<input type="checkbox"/>	<input type="checkbox"/>	
4.2	<p>Do you have processes in place to ensure that postnatal women are able to confirm:</p> <ul style="list-style-type: none"> that their babies were in skin-to-skin contact with them immediately or within five minutes after birth and that this contact continued for at least an hour, except for brief bed-transfer interruption or if there were medically justifiable reasons for delayed contact they were encouraged to look for signs for when their babies were ready to breastfeed during this first period of contact and offered help with breastfeeding, if needed? 	<input type="checkbox"/>	<input type="checkbox"/>	
4.3	<p>Does the facility record when a baby is placed skin-to-skin and for what length of time following birth?</p>	<input type="checkbox"/>	<input type="checkbox"/>	
4.4	<p>If mothers transfer into the service, do you ask if they received skin-to-skin at birth and do you encourage further skin-to-skin contact postnatally?</p>	<input type="checkbox"/>	<input type="checkbox"/>	



➤ **Step Five – Show mothers how to breastfeed, and how to maintain lactation even if they should be separated from their infants.**

				Comments
5.1	Is support provided to women who have never breastfed, or who have previously encountered problems?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
5.2	Are there processes in place to ensure that postnatal women: <ul style="list-style-type: none"> • are shown how to position and attach their babies to the breast and were able to demonstrate this correctly? • are shown how to hand express their breastmilk? • are advised what to do about their breasts if they became uncomfortably full? • are given information on how to store and use their breastmilk and that this information? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
5.3	Are there processes are in place to ensure that Level Three Specialist staff: <ul style="list-style-type: none"> • teach mothers about positioning/attachment and are able to demonstrate correct teaching of positioning/attachment? • teach an acceptable technique for hand expressing breastmilk, and explain when a mother should initiate this if her baby is unable to breastfeed? • teach mothers to store and use their breastmilk safely? • offer further assistance with breastfeeding when the baby indicates readiness or within six hours of birth? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	



5.4	Does the facility provide written materials / website links / apps information on the following topics and is this discussed with mothers: <ul style="list-style-type: none">• the importance of exclusive breastfeeding for six months?• the importance of skin-to-skin contact?• rooming-in?• avoiding the use of dummies and teats while establishing breastfeeding?• hand expressing and safe storage and handling of breastmilk?• safe and unsafe sleep practices?the importance of a smoke-free environment?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5.5	A review of the written materials / website links / apps provided to postnatal women confirms they are current, ethnically and culturally appropriate (including compliance with <i>The Code</i>)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	



➤ **Step Six – Give newborn infants no food or drink other than breastmilk, unless *medically* indicated.**

				Comments
6.1	Does hospital data indicate that at least 75% of well babies, discharged from the maternity service in the last year have been exclusively breastfed from birth to discharge?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
6.2	Is there a process in place to ensure that breastfed well babies do not receive other foods or fluids unless clinically indicated during their stay at the facility?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
6.3	For those babies who received foods or fluids other than breastmilk, the facility can confirm that 80% of the sample received a breastmilk substitute for an acceptable sound clinical reason? (Refer to Part 2: The New Zealand Criteria, page 30.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
6.4	Does the facility have a system / consent process to ensure postnatal women are provided with information to make fully informed decisions regarding the risks of giving a breastmilk substitute to a baby?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
6.5	Are all policies and protocols related to breastfeeding in-line with BFHI standards and current best practice?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
6.6	Do Level Two and Level Three staff have a clear understanding of the acceptable reasons for giving food or drink other than breastmilk to the breastfeeding baby and is this information included in the education programme?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	



➤ **Step Seven – Practise rooming-in – allow mothers and infants to remain together – 24 hours per day.**

				Comments
7.1	Do you have a process in place to ensure that postnatal women and their well babies remained together 24 hours per day?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
7.2	If separation occurs, the facility can confirm that it is either clinically indicated (for a separation period of up to one hour) or at maternal insistence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
7.3	If separation occurs due to maternal insistence, can the facility ensure: <ul style="list-style-type: none"> • that it was through maternal insistence and that staff did not offer to remove the baby (unless clinically indicated)? • that removal of the baby is recorded in the mother's notes? • that staff have discussed with the mother the implications of separation? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
7.4	Can the facility confirm that there is no hospital nursery (or similar room) available for the purpose of mother-baby separation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
7.5	Can Level Three Specialist staff give three reasons why rooming-in 24 hours a day, while in hospital, is important for the mother and her baby?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
7.6	Do you provide pregnant women, mothers and their families with written materials / website links / apps about safe and unsafe sleep practices and discuss these with them?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	



➤ **Step Eight – Encourage breastfeeding on demand.**

				Comments
8.1	Does the facility encourage responsive (cue-based / baby-led) feeding?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
8.2	Are postnatal mothers: <ul style="list-style-type: none"> • taught how to identify their babies' readiness to feed (feeding cues)? • not restricted on the frequency or length of the breastfeed? • able to identify that their babies are feeding effectively? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
8.3	Handouts / information offered by the facility do not suggest or promote scheduled or limited feeding?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

➤ **Step Nine – Give no artificial teats or pacifiers (also called dummies or soothers) to breastfeeding infants.**

				Comments
9.1	Does the facility have guidelines / protocols in place for informing staff of the appropriate use of bottles and teats /nipple shields / dummies / pacifiers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	



➤ **Step Ten – Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic.**

				Comments
10.1	<p>Does the facility ensure that:</p> <ul style="list-style-type: none"> • mothers are given information on where they can get support if they need help with breastfeeding after returning home? • visits by external providers are supported by the facility? • mothers are informed of the breastfeeding support groups / services for Māori, Pacific people and other ethnic groups in the community? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
10.2	<p>Does the facility routinely refer mothers, for whom they are responsible, to Well Child, Tamariki ora, Whānau ora collectives / services in their area, including marae-based health clinics and other personally appropriate services?</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
10.3	<p>Does the facility provide education to key family / whānau members so that they can support the breastfeeding mother at home?</p>			
10.4	<p>Do mothers receive information that there is skilled breastfeeding support in the community and they can access it?</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
10.5	<p>Does the facility ensure that Level Three Specialist staff are able to describe the types of support available to mothers in the community?</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	



10.6	Are there processes are in place to ensure postnatal mothers, who are breastfeeding or are planning to breastfeed, are given information on: <ul style="list-style-type: none">• the hospital / LMC follow-up support on breastfeeding after discharge?• at least one breastfeeding support group appropriate to their cultural needs in their local community?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10.7	Is information on support group services available in the community displayed in the antenatal, postnatal and neonatal areas?	<input type="checkbox"/> Yes <input type="checkbox"/> No	



➤ **The International Code of Marketing of Breastmilk Substitutes and subsequent relevant WHA resolutions review.**

				Comments
11.1	<p>Are all products, within the scope of <i>The Code</i>:</p> <ul style="list-style-type: none"> • bought at wholesale or not less than 80% of the retail price? • kept out of view of pregnant women, mothers and their families? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
11.2	<p>How often is the infant formula brand rotated by the facility?</p> <ul style="list-style-type: none"> • 3 monthly <input type="checkbox"/> • 6 monthly <input type="checkbox"/> • Yearly <input type="checkbox"/> • Other <input type="checkbox"/> 			
11.3	<p>Does the facility have a written policy on Code Compliance which identifies the person who formula representatives must contact?</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
11.4	<p>Does the facility ensure that marketing personnel are denied contact with pregnant women, mothers and their families?</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
11.5	<p>Is there a process in place to ensure that the facility and staff refuse free gifts, non-scientific literature, materials or equipment, money or support for in-service education or events from manufacturers or distributors of products within the scope of <i>The Code</i>?</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	



11.6	Are pregnant women who plan not to breastfeed and non-breastfeeding women taught about formula feeding on an individual basis?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11.7	Do education materials for pregnant women explain: <ul style="list-style-type: none"> • the importance of breastfeeding? • the social and financial implications of the use of infant formulas? • the health implications of unnecessary or improper use of formula? 	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11.8	Do all materials used by staff contain only scientific and factual information, free of company logos and other branding, and is this information presented in a way that implies (or creates a belief) that bottle-feeding is not equivalent or superior to breastfeeding?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11.9	Can the facility confirm that there are no words / pictures displayed in the facility that idealise the use of products, including pictures of infants on the labels of products?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11.10	Can the facility confirm that products which are promoted or advertised by the facility or staff to the general public do not contravene <i>The Code</i> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11.11	Does the service provide any free gifts, e.g. gift bags, magazines?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11.12	Are formula samples given to mothers, pregnant women or their families?	<input type="checkbox"/> Yes <input type="checkbox"/> No	



11.13	Do staff understand why it is important not to give any free samples or promotional materials from formula companies to mothers?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11.14	Are there processes in place to ensure that no free or subsidised supplies are given to health workers?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11.15	Are samples given to health workers only used for professional evaluation or research?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11.16	Does the facility refrain from giving pregnant women, mothers and their families any marketing materials, samples or gift bags, that contain products that could interfere with the successful initiation and establishment of breastfeeding, for example, feeding bottles, teats, pacifiers or infant formula?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11.17	As part of the education programme, are staff able to report an understanding of the <i>International Code of Marketing of Breastmilk Substitutes</i> and its impact on their practice?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11.18	Does the facility only use infant formula company literature for professional education?	<input type="checkbox"/> Yes <input type="checkbox"/> No	



➤ **Responsiveness to Maori**

			Comments
12.1	<ul style="list-style-type: none"> Is the Treaty of Waitangi / te Tiriti o Waitangi integrated throughout the breastfeeding policy? 	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12.2	<p>Has there been consultation with local iwi, Māori health providers and other relevant Māori organisations or community groups?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12.3	<ul style="list-style-type: none"> Do staff records indicate 80% of Level Three Specialist staff meet the requirements for breastfeeding for Māori women which incorporates the Treaty of Waitangi/te Tiriti o Waitangi? Who provides the education session and does it incorporate the Treaty of Waitangi/te Tiriti o Waitangi? 	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12.4	<p>Does the Māori health unit, Māori health services or cultural advisor have input with advisory / consultation groups and within the service?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12.5	<p>Are relationships developed and maintained between the service and relevant community based Māori health providers and community organisations, e.g. Well Child Tamariki ora, Whānau ora collectives, Māori Women's Welfare League?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12.6	<p>Are whānau recognised as an integral part of the pregnant and breastfeeding mothers care?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12.7	<p>Do staff access kaumatua, Māori health worker or other</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	



	culturally appropriate support, if required?		
12.8	Is there a process in place for Māori to participate in the review, development and evaluation of the service?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12.9	Do observations in the service indicate an environment that is culturally appropriate and supportive for Māori women and their whānau	<input type="checkbox"/> Yes	<input type="checkbox"/> No



➤ **Standards of Care for the non-breastfeeding mother.**

Artificial Feeding Policy		Comments
13.1	What is the review date for the Policy?	
13.2	<p>Does the policy include:</p> <ul style="list-style-type: none"> • information for staff regarding implications associated with the use of infant formula? • the implications of feeding a baby a breastmilk substitute? • the importance of skin-to-skin contact? • safe preparation of infant formula? • safe handling and feeding of formula and sterilisation of equipment? • responsive (cue-based/ baby-led) feeding with guidelines for appropriate intake? • rooming-in 24 hours a day, safe and unsafe sleep practices? • referral to parenting or well child services? • a minimum three yearly review date which is clearly visible? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
13.3	Does the policy address the main points of <i>The Code</i> and subsequent relevant WHA resolutions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13.4	Is the artificial feeding policy accessible so staff who take care of mothers and babies can refer to it and is it away from public display?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13.5	<p>Is the policy:</p> <ul style="list-style-type: none"> • audited and evaluated regularly? • reviewed three yearly along with associated protocols? 	<input type="checkbox"/> Yes <input type="checkbox"/> No



13.6	Are Level Three Specialist staff orientated to the artificial feeding policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13.7	Does the education curriculum for Level Three Specialist staff fully meet the education standards for the support of the non-breastfeeding mother as stipulated in the Artificial Feeding Policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13.8	Do mothers receive information or staff discuss / demonstrate on an individual basis infant formula preparation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13.9	Is there a process in place to ensure that all written materials / handouts regarding artificial feeding are: <ul style="list-style-type: none">• appropriate?• separate from breastfeeding information?• contain the implications of feeding a breastmilk substitute to an infant?• Code compliant?• free from promotion of a particular brand of formula?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13.10	Are there processes in place to ensure that non-breastfeeding mothers have the following topics discussed with them: <ul style="list-style-type: none">• the importance of skin-to-skin contact• rooming-in 24 hours a day?• safe and unsafe sleep practices?• implications associated with feeding a baby a breastmilk substitute?• recognising their babies feeding cues?• safe feeding technique and being able to recognise when their babies were feeding effectively?	<input type="checkbox"/> Yes <input type="checkbox"/> No	



- what to do if their breasts become uncomfortably full?
- community support groups available in the community post discharge?
- provision of written guidelines for appropriate intake?
- how to prepare and feed infant formula and how to clean and sterilise equipment?
- information on how and where to get help in the community, if they have feeding problems?



