



NZBA

Baby Friendly Aotearoa
New Zealand

BABY FRIENDLY HOSPITAL INITIATIVE

PART FIVE:

Annual Survey – Self-Assessment Tool Primary Facility

New Zealand Breastfeeding Alliance

[WHO & UNICEF]

Facility Name:

Date of Completion:



BFHI Annual Survey

Facility Name:

Address:
.....

Telephone No:

Fax No:

Name of Manager of Maternity:

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:

Birthing Suite:

BFHI Education:

Type of service DHB Community Trust Private



Breastfeeding Data:

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

The standard required is at least 75% of infants are exclusively breastfed at discharge

The facility needs to have results that are consistently over 75% per month.

Occasionally there may be one month that does not meet the standard.

NZBA requires data for one full year to verify this.

The breastfeeding rates for primary units are taken **from the births** at the facility.

Primary units need to complete *Tables A, B1 and B2*:

The breastfeeding data needs to include information on:

1. births in the facility (*Table A*)
2. infants transferred in to the facility (*Tables B1 & B2*)

The exclusive breastfeeding rate is obtained from:

- the number of those infants born in the facility and those who, at the time of transfer, are exclusively breastfed
- the number of those exclusively breastfed at discharge.

Note: If you require further explanation on breastfeeding data or record keeping, please contact NZBA

Table A: An example of a completed table can be seen in *Part 3A*, page 12.

Births at the facility each month and the infant feeding data at discharge

(Please note we require the actual **numbers** as well as percentages)

Month		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Total
Total No of Births														
Ever initiated breastfeeding	%													%
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 babies born in the facility, for the past twelve months was: %



Transfers-in (Tables B1 and B2)

The data for these infants, is required on admission and also at discharge.

Table B1:

Feeding records at admission 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 Births														
Ever initiated breastfeeding	%													%
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%

Table B2:

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 Births														
Ever initiated breastfeeding	%													%
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: %

An example of how to calculate this percentage can be found in *Part 3A*, page 13.



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 and percentages from the year's statistics
- Data needs to be current
- Percentages should add up to 100%
- Only groups represented by over 2% of the total should be identified individually.

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

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

Enter the ethnicity data associated with each group for the breastfeeding definitions, on discharge (including transfer data for primaries), in the table below.

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

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

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



Clientele Ethnicity Data (See *Part 3A*, page 14 for further details)

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

(Numbers and percentage from the year's statistics. Please note these need to be current and add up to 100%)

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



1. Step 1: Breastfeeding Policy

Please indicate the current status of your Breastfeeding Policy by ticking any box applicable.

- The review date remains current. Yes No
- The Policy is currently under review. Yes No
- Consultation for updating the Policy is currently being undertaken. Yes No
- All new staff receive orientation to the Breastfeeding Policy. Yes No
- The Policy (or summary of the Policy) is displayed in all areas. Yes No
- The Policy is displayed in English, Māori & languages appropriate to your cultural diversity. Yes No
- All documentation of consultation, changes to policies/guidelines, related to The Breastfeeding Policy, is retained and available for review. Yes No

2. Step 2 : Staff Education

How many hours of ongoing staff education have been undertaken, for the designations below, over the past twelve months?

Levels	No. on staff	No. of staff attending education	No. of staff education hours
<i>Level One</i>			
<i>Level Two</i>			
<i>Level Three</i>			
<i>Level Four</i>			

Are all education programmes, records of attendance and education data records available? Yes No

Does the facility meet the breastfeeding education requirements, in line with the BFHI criteria, for all newly employed staff members? Yes No

Has the education delivered over the past year been sufficient to ensure 80% of each Level of staff has maintained their required education hours in accordance with the BFHI Standards for *Step Two*? Yes No

Fill in the following details and compare them with your data from last year. This will ensure you are maintaining a high compliance with the standard and prevent a 'catch-up' prior to your next assessment:

Level One Staff	Total	out of	(%)
Level Two Staff	Total	out of	(%)
Level Three Staff	Total	out of	(%)
Level Four Staff	Total	out of	(%)
Staff numbers	Total	out of	(%)

Comment on your education data:



3. Step Three: Antenatal services

The facility:

- Provides Primary Care. Yes No
- Provides breastfeeding and/or antenatal classes. Yes No
- Accepts handover of care during pregnancy. Yes No

If the answer is 'Yes' to at least one of the above, then answer the following questions:

If the answer is 'No' to all three questions above, this Step is not applicable to the facility.

Antenatal information covers the following:

- the facility breastfeeding policy. Yes No
- the importance of exclusive breastfeeding for the first six months. Yes No
- the importance of breastfeeding. Yes No
- the disadvantages of formula feeding. Yes No
- the effect of drugs, used in labour, on both the newborn and the initiation of breastfeeding. Yes No
- the importance of early skin-to-skin contact. Yes No
- early initiation of breastfeeding. Yes No
- rooming-in on a 24 hour basis including safe and unsafe sleep practices. Yes No
- responsive (cue-based or baby-led) feeding. Yes No
- frequent feeding to help ensure enough breastmilk. Yes No
- optimal positioning and attachment of baby at the breast. Yes No
- the implications of giving water, formula or other supplements to a baby in the first 6 months. Yes No
- the implications of using pacifiers, teats and bottle on the establishment of breastfeeding. Yes No
- breastfeeding support services in the community. Yes No
- all hand-outs comply with the *International Code of Marketing of Breastmilk Substitutes* Yes No
- there is no group instruction or demonstration on breastmilk substitutes Yes No

4. Step Four: Initiation of Breastfeeding (skin-to-skin contact)

Interviews with five postnatal breastfeeding mothers on the postnatal ward confirm a minimum of 80% continuing compliance by the facility to *Step Four*.

*(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 clinically justifiable reasons for separation.)* Yes No



5. Step Five: Mothers shown how to breastfeed

Interviews with **five** postnatal breastfeeding mothers confirm that they:

- have been shown how position/attach their baby's to the breast. Yes No
- can recognize when their baby is feeding effectively. Yes No
- have been shown how to received information about hand expressing their breastmilk. Yes No
- have been given information from staff on storage of expressed breastmilk. Yes No
- are aware of staff availability to assist with breastfeeding 24 hours a day as required. Yes No
- know how to express breastmilk when their breasts are uncomfortable Yes No

6. Step Six : No food or drink other than breast milk unless *medically* indicated

An audit of **five** postnatal breastfed babies' clinical notes currently in the ward, or who have been in the facility recently, confirms nothing other than breastmilk has been given to them unless clinically indicated. (80% compliance) Yes No

Number of babies reviewed:

Number of babies exclusively breastfeeding:

Of those babies who have required anything other than breastmilk, please identify the reason this was offered:

Comments:

7. Step Seven: Rooming-in

Interviews with **five** postnatal breastfeeding mothers currently in the postnatal ward, or who have recently used this service, confirm they have had their baby's with them 24 hours a day since birth. Yes No

Reason(s) given for separation:



8. Step 8: Responsive (cue-based / baby-led) feeding

Interviews with **five** postnatal breastfeeding mothers, currently in the postnatal ward, or who have recently used this service, confirm that there have been no restrictions placed on the frequency or length of time their baby's breastfeed. Yes No

This audit also confirms the mothers can:

- recognise their baby's cues for feeding. Yes No
- recognise their baby is feeding effectively. Yes No

Comments:

9. Step Nine: No bottles, teats or pacifiers are given to breastfeeding babies

Where a breastfeeding baby, within your postnatal ward, requires anything other than breastmilk this is offered to the baby by which method(s)?

Comments:

10. Step Ten: Community breastfeeding support

Interviews with five postnatal breastfeeding mothers, currently in your ward, or who have recently used this service, confirm they are aware of appropriate breastfeeding support groups in the community and are able to name at least two of these groups. Yes No

Comments:



11. Compliance with The Code

- 11.1 All supplies of infant formula and all other products within the scope of The Code, are bought at wholesale or no less than 80% of the retail price. Yes No
- 11.2 There is a policy on infant formula rotation and how it selects the formula it will consider purchasing. Yes No
- 11.3 The amount of formula used in the last year has decreased over time. Yes No
- 11.4 Formula purchase records are available. Yes No
- 11.5 Is infant formula stored out of sight? Yes No
- 11.6 Does the facility have a written policy which identifies who formula company representatives can have contact with in the facility? Yes No
- 11.7 Are marketing personnel denied contact with pregnant women, mothers and their families? Yes No
- 11.8 Are pregnant women and non-breastfeeding mothers taught individually about formula feeding? Yes No
- 11.9 Do all educational materials for pregnant women and mothers explain:
- a) the importance and superiority of breastfeeding? Yes No
- b) the social and financial implications of the use of infant formula? Yes No
- c) the health implications of unnecessary or improper use of formula? Yes No
- 11.10 [i] Does the material used by staff contain only scientific and factual information? Yes No
- [ii] Is this information presented in a way that implies (or creates a belief) that bottle-feeding is equivalent or superior to breastfeeding? Yes No
- 11.11 Does the facility advertise or promote products (identified in the scope of The Code) to pregnant women, mothers or the general public? Yes No
- 11.12 Are formula samples given to mothers, pregnant women or their families? Yes No
- 11.13 Are free or subsidised supplies given to health workers? Yes No
- 11.14 Are free gifts, materials or money, from infant formula companies, given to health workers or the facility? Yes No
- 11.15 Are any samples, other than those to be used for professional evaluation or research, given to health workers? Yes No
- 11.16 Is there any promotion of products by health workers or any other staff in the facility? Yes No
- 11.17 Are there any words or pictures displayed in the facility, which idealise the use of products, including pictures of infants on the labels of products? Yes No
- 11.18 [i] Are any gift bags or packs given out to mothers by the facility? Yes No
- [ii] Are these 'packs' free of promotional material and products which contravene the requirements or the spirit of The Code? Yes No N/A
- 11.19 The facility has a policy to ensure that these packs contain nothing that might interfere with the successful initiation and establishment of breastfeeding, for example, feeding bottles and teats, pacifiers and infant formula. Yes No N/A
- 11.20 Is there Infant formula company literature used by this facility for things other than professional education? Yes No



12. Responsiveness to Maori

Can you verify that:

- 12.1 The Treaty of Waitangi/ te Tiriti o Waitangi is integrated into the Breastfeeding Policy? Yes No
- 12.2 The Breastfeeding Policy aligns with other DHB cultural policies and plans e.g. Māori Health Plan, Māori Health Policy, models of care for Māori patients, cultural safety? Yes No
- 12.3 Consultation processes include local Iwi, Māori health providers and community organisations?: Yes No
- 12.4 Staff education records indicate 80% of Level Three Specialist staff meet the requirements for breastfeeding for Māori women, which incorporates the Treaty of Waitangi? Yes No
- 12.5 Relationships exist within the District Health Board between the facility and the Māori health services, e.g. Māori Health Unit, cultural advisor and/or relevant Māori health services? Yes No
- 12.6 Relationships exist with relevant community based Māori health providers and community organisations e.g. Māori Women's Welfare League? Yes No
- 12.7 Whānau are recognised as an integral part of the pregnant and breastfeeding mother's care? Yes No
- 12.8 Processes are in place for Māori to participate in the review, development and evaluation of the service? Yes No
- 12.9 Access to kaumatua support, a Māori health worker or other culturally appropriate support is available if required? Yes No
- 12.10 Observations within the facility indicate an environment that is culturally appropriate and supportive? Yes No
- 12.11 The full, or abridged, version of The Breastfeeding Policy is available in Māori? Yes No

13. Review of the Artificial Feeding Policy

Is there an artificial feeding policy, which ensures appropriate support is afforded to the mother who has decided to feed her baby infant formula? Yes No

Does this policy include:

- the disadvantages of formula feeding? Yes No
- the importance of skin-to-skin contact? Yes No
- safe preparation of infant formula ? Yes No
- safe handling and feeding of formula and sterilization of equipment? Yes No
- responsive (cue-based / baby-led) feeding with guidelines for appropriate intake? Yes No
- rooming-in 24 hours a day, safe and unsafe sleeping practices? Yes No
- referral to parenting / Well child / Tamariki ora services? Yes No
- a minimum three yearly review date? Yes No

14. Care of the non-breastfeeding mother and baby



Do women who have decided to feed their baby with infant formula:

1. Receive counselling on infant feeding and guidance on selecting options likely to be suitable for their situations? Yes No

2. Receive antenatal education which covers the following topics:
 - the importance of exclusive breastfeeding for the first six months? Yes No
 - the importance of breastfeeding? Yes No
 - the disadvantages of formula feeding? Yes No
 - the importance of skin-to-skin contact at birth? Yes No
 - rooming-in on a 24 hour basis including safe and unsafe sleep practices? Yes No
 - responsive (cue-based/baby-led feeding) with guidelines for appropriate intake? Yes No
 - support services in the community? Yes No

3. Receive postnatal education which includes:
 - the importance of rooming-in with baby 24 hours per day? Yes No
 - safe and unsafe sleep practices? Yes No
 - the importance of skin-to-skin contact at birth? Yes No
 - responsive (cue-based/baby-led) feeding with guidelines for appropriate intake? Yes No
 - the associated disadvantages of feeding a baby a breastmilk substitute? Yes No

Interviews with non-breastfeeding mothers (if available) confirm all aspects of the above questions are occurring. (See attached audit tool)

Does the Level Three Education include:

- orientation to the artificial feeding policy? Yes No
- the disadvantages of formula feeding? Yes No
- how to provide support for non-breastfeeding mothers? Yes No
- the safe preparation, handling and feeding of formula? Yes No
- the care of formula feeding equipment? Yes No
- the importance of skin-to-skin contact and rooming-in 24 hours a day, irrespective of method of feeding? Yes No
- safe and unsafe sleep practices? Yes No
- parenting and well child services available on discharge? Yes No
- updates to ensure competency is maintained? Yes No

Is there one or more designated staff member(s) assigned to the role of educating the non-breastfeeding mother with the practical aspects of artificial feeding on a one-to-one basis, if required? Yes No



A review of your documents shows the following recommendations, from the last audit.

(Please insert the recommendations, from each step of your last assessment, and indicate your progress on the implementation of these recommendations).

Recommendation	Completed	In Progress	No Action



Assessment of BFHI Standards of Care

On the following pages is a short survey to assist in the evaluation of the BFHI standards of care in your facility.

The forms are designed to use in the interview process of five breastfeeding mothers, and three non-breastfeeding mothers.

Each small square may be used to enter either a time (for example: 1hr) or a ✓ or **X** representing each mothers answer.

An example of answers from interviews with five women:

1. How soon after birth did you hold your baby? (Time in Minutes)

3	5	1	5	2
---	---	---	---	---

2. Was this skin-to-skin? Y/N

Y	Y	Y	N	Y
---	---	---	---	---

Once all of these interviews have been recorded the percentages can be gleaned from the results and placed into the tally sheet at the end of the survey.

While not all aspects of the *Ten Steps to Successful Breastfeeding* have been included in this survey you will be able to ascertain from the feedback which areas of care, if any, need improvement.



Questions to ask breastfeeding mothers on the postnatal ward
(after verbal consent given)

1. How soon after birth did you hold your baby? (Time in minutes)

Comments:

2. Was this skin-to-skin? Y/N

(If there is a sound clinical reason why this did not occur please insert N/A)

Comments:

3. How long did the uninterrupted skin-to-skin contact continue? (Time in minutes)

Comments:

4. Have you been shown how to position and latch your baby to the breast? Y/N

Comments:

5. Have staff discussed with you how to hand express your breastmilk? Y/N

Comments:

6. Have staff given you information on the storage of breastmilk? Y/N

Comments:

7. Are staff available 24 hours a day to assist you with breastfeeding if required? Y/N

Comments:

8. In what circumstances would you need to express? [*key points: full uncomfortable breasts, when baby is away from me, if I need to go out*]

Comments:



9. Has your baby received anything other than breastmilk since birth? Y/N

Comments:

If 'Yes' how was it given, was it given for a clinical reason, or at maternal request?

- 1.....
- 2.....
- 3.....
- 4.....
- 5.....

10. Have you and your baby remained together in the same room, at all times, since arriving in the postnatal ward? Y/N [If 'No' was there an acceptable reason for separation?]

Comments:

11. What are your baby's cues that show you s/he wants to be fed? (Correct? Y/N)

Comments:

Have there been any restrictions placed on your baby's frequency or length of feeding time? (Y/N)

Comments:

12. How do you recognise when your baby is feeding effectively? (Correct? Y/N)

Comments:

13. Have you been told of breastfeeding support groups in the community? (Appropriate to mothers cultural needs) Can you name two support groups in the community? (Correct: Y/N)

Comments:



**Questions to ask the non-breastfeeding mothers on the postnatal ward
(after verbal consent given)**

Antenatal

1. Were the disadvantages of formula feeding discussed with you? Y/N

Comments:

2. Was the importance of skin-to-skin contact discussed with you? Y/N

Comments:

Postnatal

1. How soon after birth did you hold your baby? (Time in Minutes)

Comments:

2. Was this with skin-to-skin contact? Y/N

Comments:

3. How long did the uninterrupted skin-to-skin contact continue? (Time in minutes)

Comments:

4. In what circumstances would you need to express? *[key points: full uncomfortable breasts, when baby is away from me, if I need to go out]*

Comments:

5. Have you and your baby remained together in the same room, at all times, since arriving in the postnatal ward? Y/N

Comments:



6. Was the importance of rooming-in, and safe/unsafe sleeping practices discussed with you? Y/N

Comments:

7. What are your baby's cues that show you s/he wants to be fed? (Correct? Y/N)

Comments:

8. Have you been shown by staff how to prepare formula and feed it to your baby?

Comments:

Enter the results of the interviews in the tables below:

The Breastfeeding Mother:

	Number meeting standard	Number not meeting standard	Percentage meeting standard
Q1.			
Q2.			
Q3.			
Q4.			
Q5.			
Q6.			
Q7.			
Q8.			
Q9.			
Q10.			
Q11.			
Q12.			
Q13.			

Comments:



The Non-Breastfeeding Mother:

Antenatal Questions

Q1.			
Q2.			

Postnatal Questions

Q1.			
Q2.			
Q3.			
Q4.			
Q5.			
Q6.			
Q7.			
Q8.			

Comments:



NEW ZEALAND BREASTFEEDING ALLIANCE FEEDBACK

The New Zealand Breastfeeding Alliance (NZBA) recognises the importance of good communication between health services, high standard of documentation and quality assessment practices. We would appreciate some feedback to monitor our own standards in these areas.

A brief explanation of your views would be appreciated in order for us to fully understand any issues you raise which we can then address.

Could you please complete this questionnaire and forward it to the New Zealand Breastfeeding Alliance. It can be sent anonymously and separately from the *BFHI Annual Survey*, if preferred.

1. The New Zealand Breastfeeding Alliance staff have been:

- easy to contact Yes No N/A
- approachable Yes No N/A
- helpful Yes No N/A

Comments:

2. Written/verbal feedback from NZBA has been useful? Yes No N/A

Comments:

3. Have you visited the New Zealand Breastfeeding Alliance website? Yes No
www.babyfriendly.org.nz

Did the website answer your questions about BFI in New Zealand?

Comments:

4. Do you have any suggestions about how we can improve our services? Yes No

Comments:

5. Do you have any constructive suggestions regarding this self-assessment, and how it can be improved?

Comments:

Thank you for giving us your feedback.