



# How to use the Neo-BFHI package

Tools for self-appraisal, monitoring,  
the external assessment process,  
and education material.

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*For the Nordic and Quebec Working Group*

2<sup>nd</sup> Neo-BFHI Conference

May 19, 2015

# BFHI Package (2009)

**BABY-FRIENDLY HOSPITAL INITIATIVE**  
Revised, Updated and Expanded  
for Integrated Care

**SECTION 1**  
**BACKGROUND AND IMPLEMENTATION**



2009

Original BFHI Guidelines developed 1992



**BABY-FRIENDLY HOSPITAL INITIATIVE**  
Revised, Updated and Expanded for  
Integrated Care

**SECTION 2**  
**STRENGTHENING AND SUSTAINING  
THE BABY-FRIENDLY HOSPITAL INITIATIVE  
A COURSE FOR DECISION-MAKERS**



2009

Revision of BFHI course for hospital administrators  
prepared by WHO and Wellstart International, 1996



**BABY-FRIENDLY HOSPITAL INITIATIVE**  
Revised Updated and Expanded  
for Integrated Care

**SECTION 3**  
**BREASTFEEDING  
PROMOTION AND SUPPORT  
IN A BABY-FRIENDLY HOSPITAL**  
A 20-HOUR COURSE FOR MATERNITY STAFF



2009

Original BFHI Course developed 1993



**BABY-FRIENDLY HOSPITAL INITIATIVE**  
Revised Updated and Expanded  
for Integrated Care

**SECTION 4**  
**HOSPITAL SELF-APPRAISAL  
AND MONITORING**



2009

Original BFHI Course developed 1992



# Neo-BFHI Package

## Edition 2015



# Neo-BFHI Core document with recommended standards and criteria - Example

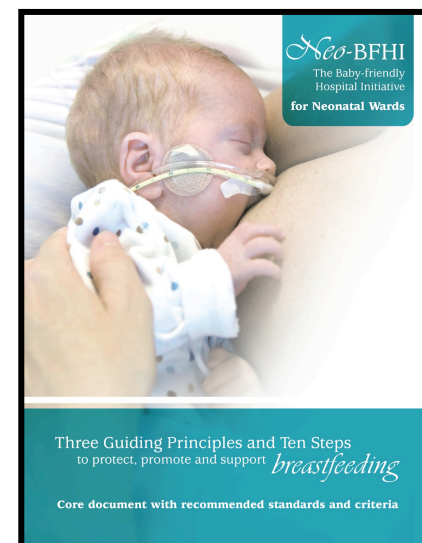
## Original Step 4

### Expansion: Encourage early, continuous and prolonged mother-infant skin-to-skin contact/KMC

*Rationale, 4 Standards, 9 Criteria (measurable)*

### *Standards*

|     |   |
|-----|---|
| 4 a | The neonatal ward has a written KMC protocol.   |
| 4 b | Parents of preterm or sick infants are informed about and encouraged to initiate skin-to-skin contact as early as possible, ideally from birth, <b>unless there are</b> medically justifiable reasons.                                |
| 4 c | Parents of preterm or sick infants are encouraged to provide skin-to-skin contact/KMC in the neonatal ward continuously or for as long and as many periods per day as they are able and willing to, without unjustified restrictions. |
| 4 d | Parents of preterm or sick infants are encouraged to continue providing skin-to-skin contact/KMC for the remainder of the hospital stay and also after early discharge.   |





## Criteria step 4 a (review)

|     |  |
|-----|--|
| 4.1 | The <b>breastfeeding</b> policy states that the neonatal ward has a protocol guiding the practice of skin-to-skin/KMC. |
|-----|--|

## Criteria step 4 b (mothers)

|     |   |
|-----|---|
| 4.4 | <p>At least 80% of randomly selected mothers of stable preterm and sick infants with vaginal delivery or cesarean section without general anesthesia confirm that their babies were placed in skin-to-skin contact/kangaroo position on them as early as possible, ideally from birth, unless there were medically justifiable reasons not to do so, according to the following levels:</p> <ul style="list-style-type: none"><li><input type="checkbox"/> Skin-to-skin contact/KMC initiated immediately or within 5 minutes after birth (level ***)</li><li><input type="checkbox"/> Skin-to-skin contact/KMC initiated during the first hour after birth (after the first 5 minutes but during the first hour) (level **)</li><li><input type="checkbox"/> Skin-to-skin contact/KMC initiated during the 2nd to 24th hour of life (later than 1 hour after the birth, but during the first day of life) (level *).</li></ul> |
|-----|---|

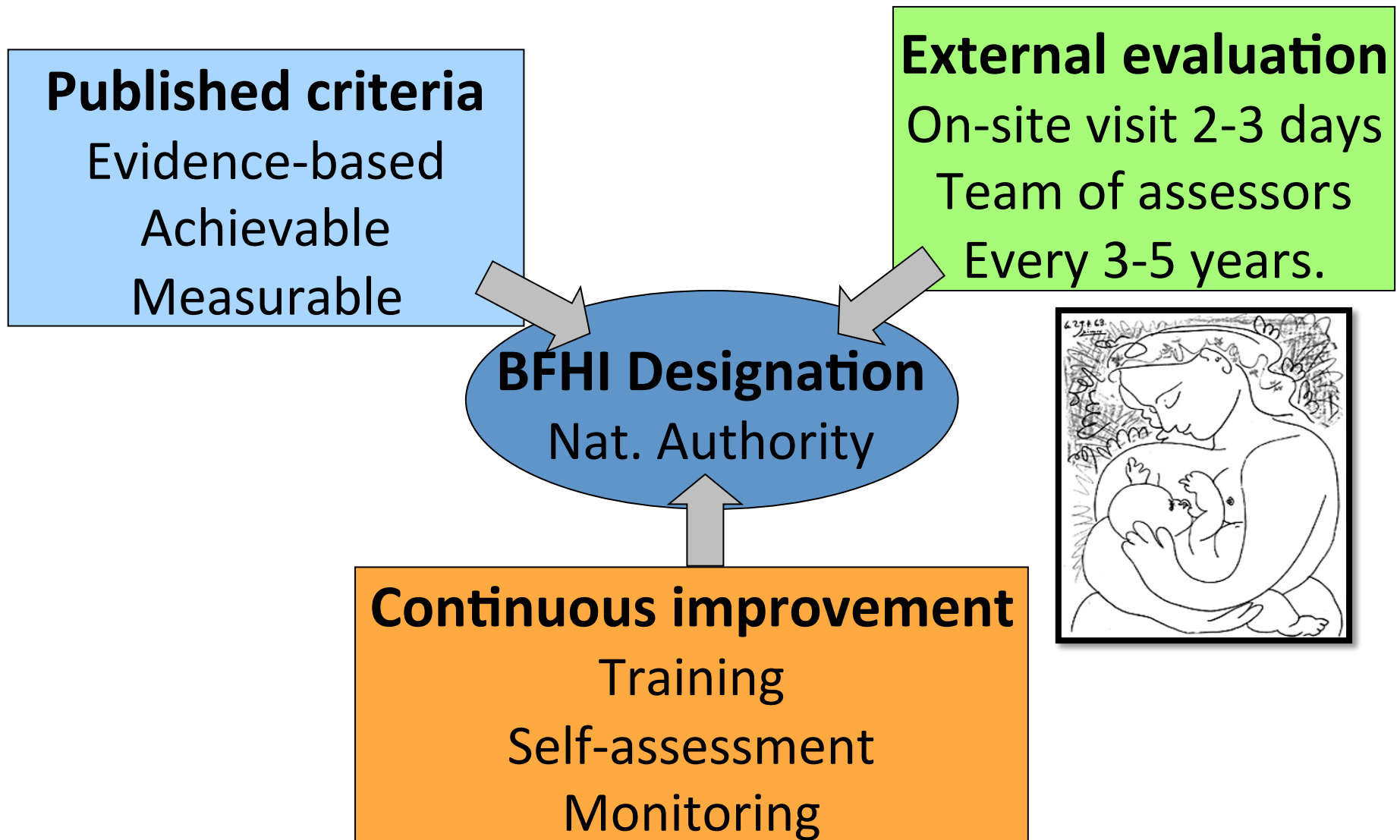
## Criteria step 4 c (clinical staff)

|     |   |
|-----|---|
| 4.8 | At least 80% of randomly selected clinical staff report that they encourage skin-to-skin/KMC continuously, or for as long and as often every day as the parents are able and willing, without unjustified restrictions. |
|-----|---|

## Criterion step 4 d (mothers)

|     |  |
|-----|--|
| 4.9 | At least 80% of randomly selected mothers confirm that they were informed and encouraged to continue providing skin-to-skin contact/KMC for the remainder of the hospital stay and also after early discharge. |
|-----|--|

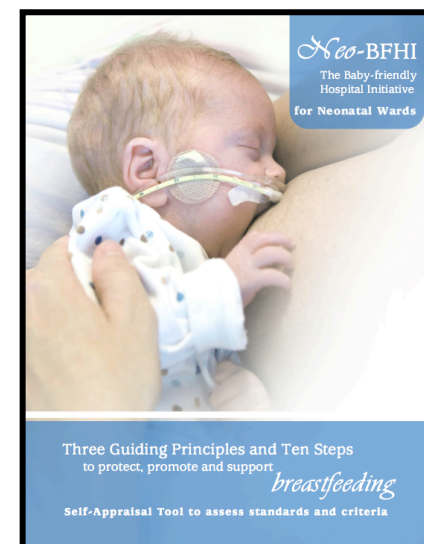
# Accreditation process



# Neo-BFHI Self-Appraisal Tool to assess recommended standards and criteria - Example

## Step 6

**Original and Expansion : Give newborn infants no food or drink other than breast milk, unless medically indicated.**



## 3 Self-Appraisal Questions

|   | YES                                 | NO                                  |
|---|-------------------------------------|-------------------------------------|
| Are infants in the neonatal ward fed only breast milk (at breast or expressed) or banked human milk, unless there are acceptable medical reasons?   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Does the neonatal ward breastfeeding protocol states that - when feasible and considering infants' feeding tolerances - appropriate feeding strategies for increasing infants' milk intake are applied before the introduction of fortifiers?           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Does the clinical staff discuss with mothers who have decided not to breastfeed or whose infants are given formula the various feeding options available and their risks and benefits, and helped them to decide what was suitable in their situations? | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

# Neo-BFHI Self-Appraisal Tool

## Neonatal ward data sheet

General information on senior staff, services and staff

### Identification of the facility

Name of the facility: \_\_\_\_\_

Person to contact: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Director general of the facility:

Nom: \_\_\_\_\_

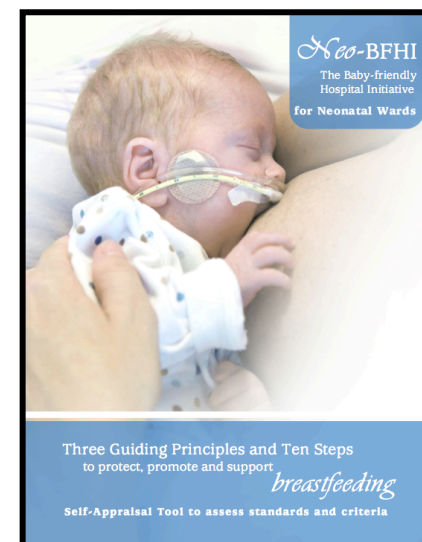
Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Head/Director of nursing services:

Nom: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

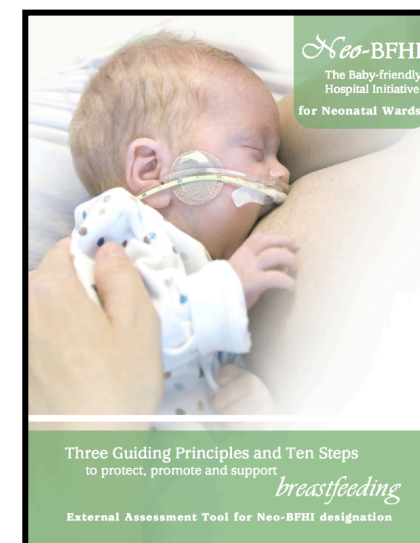
| Services available  | Yes                      | No                       | # | Comments                |
|---|--------------------------|--------------------------|---|-------------------------|
| <b>Prenatal services for pregnant women at risk of delivering a preterm or sick infants</b> |                          |                          |   |                         |
| Outpatient services for pregnant women at risk  | <input type="checkbox"/> | <input type="checkbox"/> |   |                         |
| Hospitalizations for pregnant women at risk   | <input type="checkbox"/> | <input type="checkbox"/> |   |                         |
| Other services for pregnant women at risk   | <input type="checkbox"/> | <input type="checkbox"/> |   |                         |
| <b>Neonatal services</b>  |                          |                          |   |                         |
| Intensive neonatal care unit/ward (levels III-IV)   | <input type="checkbox"/> | <input type="checkbox"/> |   | Head of the unit: _____ |
| • Maximal capacity  | <input type="checkbox"/> | <input type="checkbox"/> |   |                         |
| • Mean occupancy  | <input type="checkbox"/> | <input type="checkbox"/> |   |                         |
| Intermediate neonatal care unit/ward (levels I-II)  | <input type="checkbox"/> | <input type="checkbox"/> |   | Head of the unit: _____ |
| • Maximal capacity  | <input type="checkbox"/> | <input type="checkbox"/> |   |                         |
| • Mean occupancy  | <input type="checkbox"/> | <input type="checkbox"/> |   |                         |
| Ward/unit for late preterm/low birthweight infants  | <input type="checkbox"/> | <input type="checkbox"/> |   |                         |
| Wards with infants requiring monitoring/interventions                                       | <input type="checkbox"/> | <input type="checkbox"/> |   |                         |
| Other services: _____   | <input type="checkbox"/> | <input type="checkbox"/> |   |                         |





# Assessment Tool for Neo-BFHI designation

*Five questionnaires: Head nurse, Review, Observation, Staff (clinical and non-clinical) & Mothers*



## I.D. Neo-BFHI Observations

|                   |   |  |  |
|-------------------|---|--|--|
| S_7a<br>C_7.2     | 3 | While in the neonatal ward, observe whether:<br>- it is open to the mothers 24h/7d;<br>- the mothers' presence beside her infant is unrestricted, even during emergency situations and medical rounds.<br>Describe any restrictions : _____  | <input type="checkbox"/> Y <input type="checkbox"/> N<br><input type="checkbox"/> NA             |
| S_7a<br>C_7.3     | 4 | While in the neonatal ward, observe whether there are signs or posters listing restrictions on when mothers can be together with their infants.<br>Describe any restrictions : _____   | <input type="checkbox"/> Y <input type="checkbox"/> N<br><input type="checkbox"/> NA             |
| S_GP2b<br>C_GP2.3 | 5 | While in the neonatal ward, observe whether fathers are welcome 24/7, without restrictions.<br>Describe any restrictions : _____   | <input type="checkbox"/> Y <input type="checkbox"/> N<br><input type="checkbox"/> NA             |
| S_GP2d<br>C_GP2.6 | 6 | While in the neonatal ward, observe if all the mothers are able to rest by their infants' bedsides according to the following levels:<br><input type="checkbox"/> Bed/mattress (level ***)<br><input type="checkbox"/> Chair with armrest or recliner (level **)<br><input type="checkbox"/> Chair without armrest or recliner (level *) | Adequate<br><input type="checkbox"/> Y <input type="checkbox"/> N<br><input type="checkbox"/> NA |

# Assessment Tool for Neo-BFHI designation

*Computerised tool* with 5 questionnaires and summary tables/

|    | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O |
|----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 2  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 3  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 4  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 5  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 6  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 7  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 8  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 9  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 10 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 11 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 12 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 13 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 14 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 15 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 16 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 17 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 18 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 19 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 20 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 21 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 22 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 23 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 24 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 25 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 26 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 27 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 28 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 29 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 30 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 31 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 32 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |



## Neo-BFHI

### External Assessment Tool for Neo-BFHI designation

#### Computerized Tool

Version May 10, 2015

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**Date:**   (write the date in green cell)

Adapted by the Nordic and Quebec Working Group (see sheet 2) based on the Baby-Friendly Hospital Initiative, Revised, Updated and Expanded for Integrated Care, 2009

# Monitoring Tool to assess standards and criteria

Tailored to needs...

|  | A   | B | C | D | E | F | G | H | I | J | K | L | M | N |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1  |           |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 2  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 3  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 4  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 5  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 6  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 7  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 8  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 9  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 10   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 11   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 12   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 13   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 14   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 15   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 16   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 17   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 18   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 19   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 20   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 21   | <p><b>Neo-BFHI</b><br/>The Baby-friendly<br/>Hospital Initiative<br/>for Neonatal Wards</p> |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 22   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 23   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 24   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 25   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 26   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 27   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 28   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 29   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 30   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 31   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p><b>Three Guiding Principles and Ten Steps</b><br/>to protect, promote and support <i>breastfeeding</i></p> <p><b>Self-Appraisal Tool to assess policies and practices</b></p> |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

## Neo-BFHI

### Monitoring Tool to assess standards and criteria

#### Computarized Tool

Version May 10, 2015

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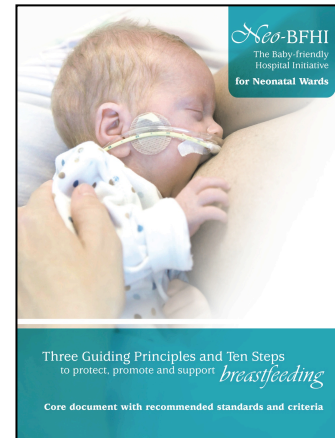
Adapted by the Nordic and Quebec Working Group (see sheet 2)  
based on the Baby-Friendly Hospital Initiative, Revised, Updated  
and Expanded for Integrated Care, 2009

# Integrating the Neo-BFHI to the BFHI...

**ORIGINAL BFHI**



**NEO-BFHI**



- Neo-BFHI follows closely the original BFHI and therefore...
  - It is more likely to be supported by the WHO/UNICEF
  - Is or can be included in global strategies and national plans
  - Can use the same accreditation process (infrastructure and authority, assessors, etc.)
- But...designation process will likely vary between countries

# Neo-BFHI Educational materials for decision-makers and staff

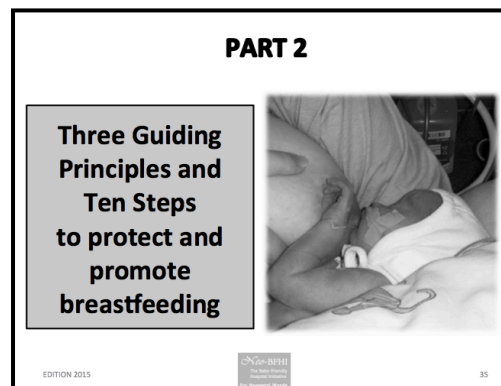
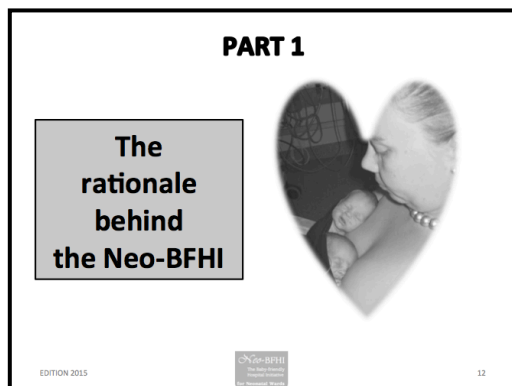
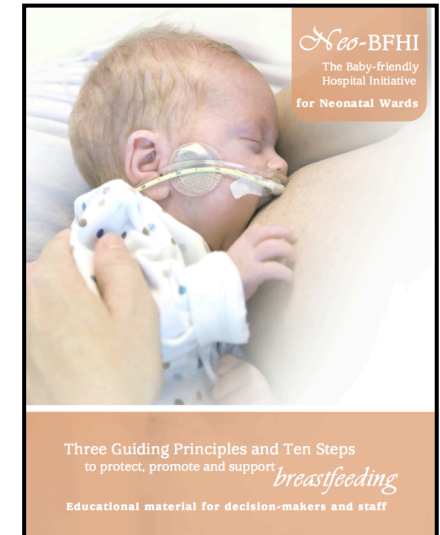
Consists of 3 hours of educational materials

1) Background and history of Neo-BFHI

- The rationale for expanding the BFHI

2) The three Guiding principals and the ten Neo-BFHI Steps

- The research evidence behind the steps
- The practice guidelines in brief for each step

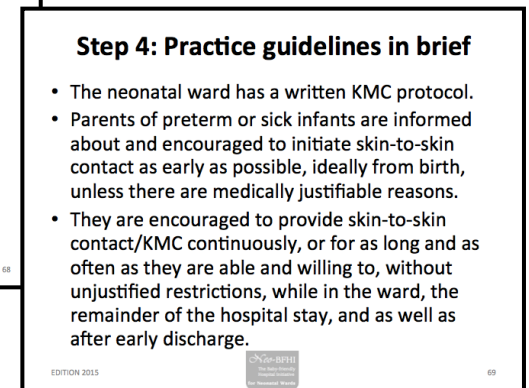
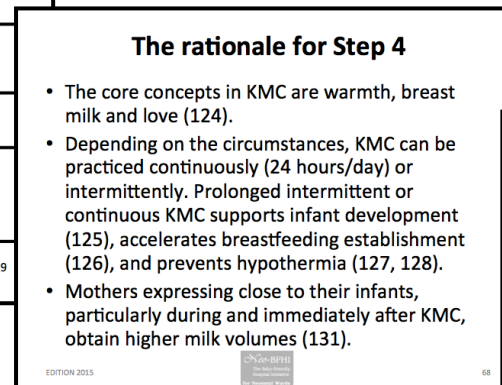
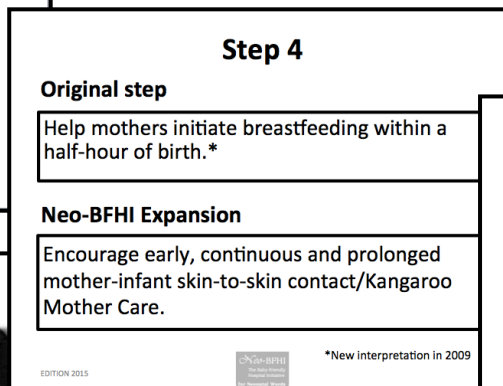
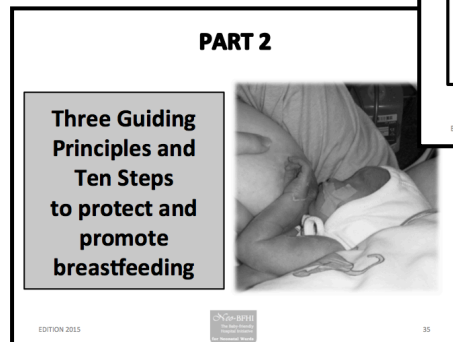
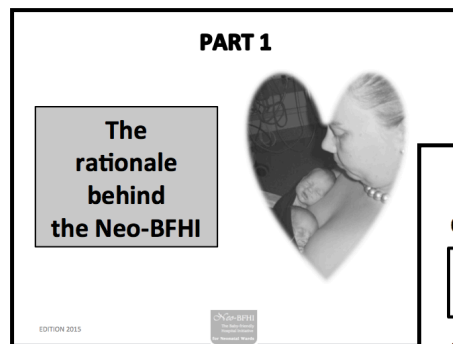
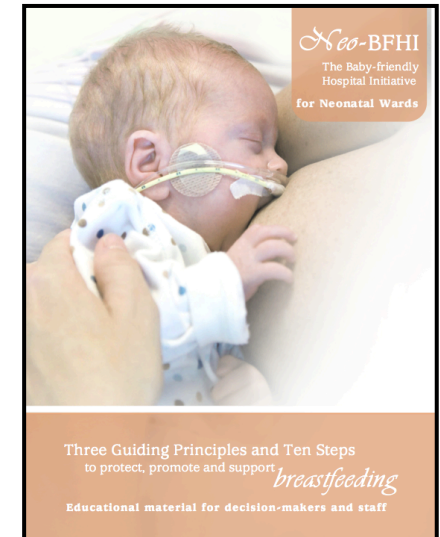




# Neo-BFHI Educational materials for decision-makers and staff - Example

## Step 4

**Expansion: Encourage early, continuous and prolonged mother-infant skin-to-skin contact/KMC**



# Questions or comments?



Working group, Uppsala, Septembre 2011