Model Hospital Breastfeeding Policies:  
Self –Appraisal Questionnaire

Introduction to the Hospital Self-Appraisal Questionnaire

This questionnaire will help your hospital determine the strengths and challenges of current hospital practices around breastfeeding support. All hospitals are encouraged to bring their key management and clinical staff together to review the Self-Appraisal Questionnaire and develop a plan of action based on the results.

Instructions:

1. The maternity care supervisor and other key management and clinical staff members should review the Self-Appraisal Questionnaire and have a qualified staff person (lactation consultant) complete the questionnaire.
2. Return the completed questionnaire, with contact information for a manager and the person who completed the form, to the State Breastfeeding Coordinator at the address below.
3. The breastfeeding coordinator will contact your hospital to review the form by phone or via e-mail, and help you identify a plan of action based on your hospital’s goals and the results of the self-appraisal at no cost to your organization.
4. Any information from your hospital will be de-identified if it is compiled and shared for the purpose of program evaluation.

Complete the questionnaire and return it to:
Breastfeeding Coordinator
Prevention Services Division
Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South
Denver, Colorado 80246

1. Hospital Name: ____________________________________________

2. Hospital Address ____________________________________________

Please answer the following questions to the best of your ability.

Name and title of the person filling out the questionnaire:
__________________________________________________________

3. The hospital is ____________________________

☐ Solely a maternity hospital      ☐ A government hospital
(Mark all that apply)
☐ A general hospital            ☐ A private hospital
☐ A teaching hospital           ☐ Other (specify)

4. Name and title of hospital director or administrator: ____________________________

Telephone and extension: ____________________________    E-mail: ____________________________
5. Name and title of the director of maternity services: ________________________________
   Telephone and extension: ____________________________    E-mail: ____________________________
6. Name and title of the director of antenatal services/clinic: ____________________________
   Telephone and extension: ____________________________    E-mail: ____________________________
7. Number of maternity beds (postpartum): _____________
8. Average daily number of mothers with full term babies in the postpartum unit(s): _____________
9. Does the hospital have a Special Care Unit (SCN) or a Neonatal Intensive Care Unit (NICU)?
   ☐ Yes  ☐ No    If yes, average daily census: ____________________________
10. Are there rooms on the maternity floor designated as “well baby nurseries”?
    ☐ Yes  ☐ No    If yes, average daily census: ____________________________
11. What percentage of mothers attend the hospital’s antenatal (prenatal) clinic? _________
    ☐ No antenatal clinic
12. Does the hospital hold antenatal clinics at other sites outside the hospital?  ☐ Yes  ☐ No
    If yes, describe where they are held:

13. The following staff has direct responsibility for assisting women with breastfeeding (BF) or feeding breast milk substitutes (BMS)

<table>
<thead>
<tr>
<th></th>
<th>BF</th>
<th>BMS</th>
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<tbody>
<tr>
<td>Nurses</td>
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<td>General physicians</td>
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<td>Midwives</td>
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<td>Pediatricians</td>
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<tr>
<td>SCN/NICU Nurses</td>
<td></td>
<td>Obstetricians</td>
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<tr>
<td>Registered Dietitians</td>
<td></td>
<td>Infant feeding counselors</td>
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<td>Nutritionists</td>
<td></td>
<td>Lay/peer counselors</td>
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<tr>
<td>Lactation consultants (IBCLC)</td>
<td></td>
<td>Other staff (specify)</td>
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</tbody>
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14. Are there breastfeeding and/or infant feeding committees in the hospital?  ☐ Yes  ☐ No
    If yes, please describe:

**Hospital Data (Last Calendar year)**

15. Total births in the last calendar year: _______ of which:
    ____% were cesarean births
    ____% were admitted to SCN/NICU
    ____% were to mothers who did not receive antenatal care in this facility

16. Total number of babies discharged from the hospital in the last calendar year: ______ of which:
% mothers stated they wanted to breastfeed
% started breastfeeding
% were breastfeeding at discharge
% were exclusively breastfed from birth (or fed expressed breast milk)
% received at least one feed of formula, water or other fluids in the hospital
% received at least one feed of formula, water or other fluids in the hospital because of documented medical reason or mothers’ informed choice.

Are the data:  □ from records?  □ an estimate?

Please describe sources:

Below are the ten steps that represent model hospital policies that have been shown to increase breastfeeding initiation and duration rates. Please answer the questions under each step.

**STEP 1. Have a written breastfeeding policy that is routinely communicated to all health care staff.**

1.1 Does the health facility have an explicit written policy for protecting, promoting and supporting breastfeeding?

□ Yes □ No □ In Process

1.2 Does the hospital have an interdisciplinary, culturally appropriate team whose goal is to reduce institutional barriers to breastfeeding such as mother-infant separation?

□ Yes □ No □ In Process

1.3 Does the policy protect breastfeeding by prohibiting all promotion of and group instruction for using breast milk substitutes, feeding bottles and nipples?

□ Yes □ No □ In Process

1.4 Is the breastfeeding policy available so all staff who take care of mothers and babies can refer to it?

□ Yes □ No □ In Process

1.5 Is the breastfeeding policy posted or displayed in all areas of the health facility that serve mothers, infants, and/or children?

□ Yes □ No □ In Process

1.6 Is there a mechanism for evaluating the effectiveness of the policy?

□ Yes □ No □ In Process

**STEP 2. Train all health care staff in skills necessary to implement this policy.**

2.1 Are all staff aware of the advantages of breastfeeding and acquainted with the facility’s policy and services to protect, promote, and support breastfeeding?

□ Yes □ No □ In Process

2.2 Are all staff caring for women and infants oriented to the breastfeeding policy of the hospital on their arrival?
2.3 Is training on breastfeeding and lactation management given to all staff caring for women and babies within six months of hiring?

☐ Yes  ☐ No  ☐ In Process

2.4 Which of the following concepts are included in the training?

☐ Babies should be exclusively breastfed in the hospital

☐ The skin-to-skin exchange and initiation of breastfeeding within one hour of birth

☐ Rooming in

☐ No pacifier use in the hospital

☐ How to provide breastfeeding support and consultant/counselor information to a mother before discharge

2.5 Has the health care facility arranged for specialized lactation training management for specific staff members?

☐ Yes  ☐ No  ☐ In Process

**STEP 3. Inform all pregnant women about the benefits and management of breastfeeding.**

3.1 Does the facility include a prenatal care clinic or offer a pre-natal class?

☐ Yes  ☐ No  ☐ In Process

3.2 If yes, are most pregnant women attending these prenatal services informed about the benefits and management of breastfeeding?

☐ Yes  ☐ No  ☐ In Process

3.3 Do prenatal records indicate whether breastfeeding has been discussed with the pregnant woman?

☐ Yes  ☐ No  ☐ In Process

3.4 Is a mother’s prenatal record available at the time of delivery?

☐ Yes  ☐ No  ☐ In Process

3.5 Are pregnant women exposed to oral or written promotion or group instruction for artificial feeding?

☐ Yes  ☐ No  ☐ In Process

3.6 Are staff familiar with the effects of labor and delivery medications on breastfeeding?

☐ Yes  ☐ No  ☐ In Process

**STEP 4. Help mothers initiate breastfeeding within an hour of birth.**

4.1 Are mothers who have had normal, vaginal deliveries given their babies to hold skin-to-skin within 60 minutes of, and delivery allowed to remain with them for at least an hour after birth?

☐ Yes  ☐ No  ☐ In Process

4.1 Are mothers and babies encouraged to remain together as much as possible during the hospital stay?

☐ Yes  ☐ No  ☐ In Process

4.2 Are mothers offered help by a staff member to initiate breastfeeding during this first hour?

☐ Yes  ☐ No  ☐ In Process
4.3 Are mothers who have had cesarean deliveries given their babies to hold, with skin-to-skin contact, within a half hour after they are able to respond to their babies?

☐ Yes ☐ No ☐ In Process

4.4 Do the cesarean born babies experience skin-to-skin contact after birth with their mothers for 60 minutes or longer?

☐ Yes ☐ No ☐ In Process

4.5 If breastfeeding is delayed due to medical condition(s) of the mother or baby, the baby is put skin-to-skin and allowed to approach the breast as soon as possible after they are stable?

☐ Yes ☐ No ☐ In Process

**STEP 5. Show mothers how to breastfeed and how to maintain lactation, even if they should be separated from their infants.**

5.1 Does nursing staff offer all mothers further assistance with breastfeeding within six hours of delivery?

☐ Yes ☐ No ☐ In Process

5.2 Are most breastfeeding mothers able to demonstrate how to correctly position and attach their babies for breastfeeding?

☐ Yes ☐ No ☐ In Process

5.3 Does the staff assess breastfeeding techniques and effectiveness at least once every 8 hours?

☐ Yes ☐ No ☐ In Process

5.4 Are breastfeeding mothers shown how to express milk or pump and advised where they can get help should they need it?

☐ Yes ☐ No ☐ In Process

5.5 Are staff members or counselors who have specialized training in breastfeeding and lactation management available full-time to advice mothers during their stay in health care facilities and in preparation for discharge?

☐ Yes ☐ No ☐ In Process

5.6 Does a woman who has never breastfed or who has previously encountered problems with breastfeeding receive special attention and support from the staff?

☐ Yes ☐ No ☐ In Process

5.7 Are mothers of babies in special care helped to establish and maintain lactation by frequent expression or pumping of milk?

☐ Yes ☐ No ☐ In Process

**STEP 6. Do not give sterile water, glucose water, or breast milk substitutes (formula) to a breastfeeding infant without the mother’s informed consent and/or physician’s specific order.**

6.1 Are breastfeeding babies given only breast milk, unless specifically ordered for a clinical condition by physician or with the mother’s informed consent?

☐ Yes ☐ No ☐ In Process

6.2 Is education regarding supplementation, including risks of introducing formula and/or water to the newborn, discussed with the mother prior to supplementation and prior to obtaining consent for supplementation?

☐ Yes ☐ No ☐ In Process
6.3 Does the health facility and staff refuse free or low-cost supplies of breast milk substitutes, paying close to retail market price for formula?  
☐ Yes ☐ No ☐ In Process

6.4 Is all promotion of breast milk substitute, including in gift packs, absent from the facility?  
☐ Yes ☐ No ☐ In Process

**STEP 7. Practice rooming in 24 hours a day.**

7.1 Is Education regarding the benefits of rooming in provided to all mothers?  
☐ Yes ☐ No ☐ In Process

7.2 Do mothers and infants remain together 24 hours a day, except for periods of up to an hour for hospital or if separation is medically indicated?  
☐ Yes ☐ No ☐ In Process

7.3 Are mothers and babies are encouraged to remain together during the hospital stay  
☐ Yes ☐ No ☐ In Process

7.4 Does rooming-in start within an hour of a normal birth?  
☐ Yes ☐ No ☐ In Process

7.5 Does rooming-in start within an hour of when a cesarean mother can respond to her baby?  
☐ Yes ☐ No ☐ In Process

**STEP 8. Encourage breastfeeding on demand.**

8.1 By placing no restrictions on the frequency or length of breast feedings, does staff show they are aware of the importance of breastfeeding on demand?  
☐ Yes ☐ No ☐ In Process

8.2 Are mothers advised to breastfeed their babies whenever their babies are displaying feeding cues and to observe for active suckling and swallowing?  
☐ Yes ☐ No ☐ In Process

8.3 Are mothers educated on the “supply and demand” principle of milk production?  
☐ Yes ☐ No ☐ In Process

**STEP 9. Give no pacifiers to breastfeeding infants in the first month...**

9.1 Are breastfed newborns cared for without using pacifiers?  
☐ Yes ☐ No ☐ In Process

9.2 Are breastfeeding mothers taught to use a pacifier during their baby’s first month life?  
☐ Yes ☐ No ☐ In Process

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

10.1 Are breastfeeding newborns babies seen by a pediatrician or other knowledgeable and experienced health care professional at 3-5 days of age as recommended by the AAP?  
☐ Yes ☐ No ☐ In Process

10.2 Are breastfeeding mothers routinely referred to a breastfeeding support group and given the telephone number of a lactation specialist or community resource for breastfeeding assistance?  
☐ Yes ☐ No ☐ In Process
10.3 Does the facility give education to key family members so that they can support the breastfeeding mother at home?
   □ Yes  □ No  □ In Process

10.4 Are breastfeeding mothers referred to breastfeeding support groups, if any are available?
   □ Yes  □ No  □ In Process

10.5 Does the facility have a system of follow-up support for breastfeeding mothers after they are discharged, such as early postnatal or lactation clinic check-ups, home visits, telephone calls?
   □ Yes  □ No  □ In Process

10.6 Does the facility encourage and facilitate the formation of mother-to-mother or health care worker-to-mother support groups?
   □ Yes  □ No  □ In Process

Comments: