



Hospital breastfeeding/infant feeding policy checklist

(Note: A hospital policy does not have to have the exact wording or points as in this checklist, but should cover most or all of these key issues. Care should be taken that the policy is not too long. Shorter policies (3 to 5 pages) have been shown to be more effective as longer ones often go unread).

The policy should clearly cover the following points:		YES	NO
Step 1a	The policy prohibits promotion of breast-milk substitutes.		
	The policy prohibits promotion of bottles, teats, and pacifiers or dummies.		
	The policy prohibits the distribution of samples or gift packs with breast milk substitutes, bottles or teats or of marketing materials for these products to pregnant women or mothers or members of their families.		
Step 1b	The policy is routinely communicated to all (new) staff.		
	A summary of the policy that addresses the Ten Steps is displayed in all appropriate areas in languages and with wording that staff and mothers and their families can easily understand.		
Step 1c	A protocol for an ongoing monitoring and data management system to comply with the eight key clinical practices		
	Frequency with which BFHI committee member at the facility meet to review implementation of the plans		
Step 2	Training for all clinical staff (according to position) includes: Breastfeeding and lactation management (20 hours minimum or covering all essential topics, including at least 3 hours of clinical practice).		
	Feeding the infant who is not breastfed.		
	The role of the facility and its staff in upholding the International Code of Marketing and subsequent WHA resolutions.		
	New staff members are trained within 6 months of appointment.		
Step 3	All pregnant women are informed of: Basic breastfeeding management and care practices		
	The risks of giving supplements to their babies during the first six months.		



Step 4	All mothers and babies receive: Skin-to-skin contact immediately after birth for at least 60 minutes.		
	Encouragement to look for signs that their babies are ready to breastfeed and offer of help if needed.		
Step 5	All breastfeeding mothers are offered further help with breastfeeding within 6 hours of birth.		
	All breastfeeding mothers are taught positioning and attachment.		
	All mothers are taught hand expression (or given leaflet and referral for help).		
	Management of common Breastfeeding difficulties.		
	All mothers who have decided not to breastfeeding are: Informed about risks and management of various feeding options and helped to decide what is suitable in their circumstances		
	Taught to prepare their feedings of choice and asked to demonstrate what they have learned.		
	Mothers of babies in special care units are: Offered help to initiate lactation, offered help to start their breast milk coming and to keep up the supply within 6 hours of their babies' births.		
	Shown how to express their breast milk by hand and told they need to breastfeed or express at least 8 -12 times in 24 hours to keep up their supply		
	Given information on risks and benefits of various feeding options and how to care for their breasts if they are not planning to breastfeed.		
Step 6	Supplements/replacement feeds are given to babies only: If medically indicated.		
	If mothers have made a "fully informed choices" after counseling on various options and the risks and benefits of each.		
	Reasons for supplements are documented.		
Step 7	All mothers and babies' room-in together, including at night		
	Separations are only for justifiable reasons with written documentation.		
Step 8	Mothers are taught how to recognize the signs that their babies are hungry.		
	No restrictions are placed on the frequency or duration of breastfeeding.		



Step 9	Breastfeeding babies are not fed using bottles and teats		
	Mothers are taught about the risks of using feeding bottles.		
	Breastfeeding babies are not given pacifiers or dummies		
Step 10	Information is provided on where to access help and support with breastfeeding/ infant feeding after return home, including at least one source (such as from the hospital, community health services, support groups or National IYCF hot line).		
	The hospital works to foster or coordinate with mother support groups and/or other community services that provide infant feeding support		
	Mothers are provided with information about how to get help with feeding their infants soon after discharge (preferably 2-4 days after discharge and again the following week).		

Modified from UNICEF/WHO BFHI Section 4: Hospital Self-Appraisal and Monitoring 2009