HOSPITAL DATA SHEET

If no nursery for normal well newborns exists, write “none” in space provided.

Hospital Name______________________________________________________
Address ____________________________________________________________
City, District, or Region _________________________________________________
Country _____________________________________________________________

Key Personnel:

<table>
<thead>
<tr>
<th>Name</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chief Hospital Administrator</td>
<td>__________________________</td>
</tr>
<tr>
<td>Senior Nursing Officers (or other personnel in charge) for the Facility</td>
<td>__________________________</td>
</tr>
<tr>
<td>Senior Nursing Officers for the Maternity Ward</td>
<td>__________________________</td>
</tr>
<tr>
<td>Senior Nursing Officers for the Antenatal Service</td>
<td>__________________________</td>
</tr>
</tbody>
</table>

Name of person to be contacted for additional information:

Type of Hospital:

- [ ] Government
- [ ] Mission
- [ ] Private—Not for Profit
- [ ] Private—For profit
- [ ] Teaching
- [ ] Other (Explain)

Explanation of Other:________________________________________________________________________
Hospital Census Data:

Total bed capacity: 

- Labor and Delivery Area 
- Maternity Ward 
- Normal Nursery 
- Other areas for Mothers & Children

Total Deliveries in year 200__

- Cesarean
- Low birth-weight babies (<2500g)
- Special Care

Rate %

Infant Feeding Data for Deliveries from records or staff reports:

Mothers/infants pairs discharged in the past month:

- pairs breastfeeding at discharge in the past month 
- pairs breastfeeding exclusively from birth to discharge in the past month 
- infants discharged in the past month who have received at least one bottle-feed since birth

Rate %

How was the infant feeding data obtained?

q From Records 
q Percentages are an estimate

Source of estimate 

Name of person(s) filling out this form: 
**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 that addresses all 10 steps to successful breastfeeding in maternity services?  
**Yes q No q**

1.2 Does the policy protect breastfeeding by prohibiting all promotion of and group instruction for using breastmilk substitutes, feeding bottles and pacifiers?  
**Yes q No q**

1.3 Is the breastfeeding policy available so all staff who take care of mothers and babies can refer to it?  
**Yes q No q**

1.4 Is the breastfeeding policy posted or displayed in all areas of the health facility which serve mothers, infants, and/or children?  
**Yes q No q**

1.5 Is there a mechanism for evaluating the effectiveness of the policy?  
**Yes q No q**

**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 q No q**

2.2 Are all staff caring for women and infants oriented to the breastfeeding policy of the hospital on their arrival?  
**Yes q No q**

2.3 Is training on breastfeeding and lactation management given to all staff caring for women and infants within six months of their arrival?  
**Yes q No q**

2.4 Does the training cover at least eight of the Ten Steps to Successful Breastfeeding?  
**Yes q No q**

2.5 Is the training on breastfeeding and lactation management at least 18 hours in total, including a minimum of 3 hours of supervised clinical experience?  
**Yes q No q**

2.6 Has the healthcare facility arranged for specialized training in lactation management of specific staff members?  
**Yes q No q**

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

3.1 Does the hospital include an antenatal care clinic? Or an antenatal inpatient ward?  
**Yes q No q**

3.2 If yes, are most pregnant women attending these antenatal services informed about the benefits and management of breastfeeding?  
**Yes q No q**

3.3 Do antenatal records indicate whether breastfeeding has been discussed with the pregnant woman?  
**Yes q No q**

3.4 Is a mother’s antenatal record available at the time of delivery?  
**Yes q No q**

3.5 Are pregnant women protected from oral or written promotion or group instruction for artificial feeding?  
**Yes q No q**

3.6 Does the healthcare facility take into account a woman’s intention to breastfeed when deciding on the use of a sedative, an analgesic, or an anesthetic, (if any) during labor and delivery?  
**Yes q No q**

3.7 Are staff familiar with the effects of such medications on breastfeeding?  
**Yes q No q**

3.8 Does a woman who has never breastfed or who has previously encountered problems with breastfeeding receive special attention and support from the staff of the healthcare facility?  
**Yes q No q**
STEP 4. Help mothers initiate breastfeeding within a half-hour of birth.

4.1 Are mothers whose deliveries are normal given their babies to hold, with skin contact, within a half-hour of completion of the second stage of labor and allowed to remain with them for at least the first hour? Yes □ No □

4.2 Are the mothers offered help by a staff member to initiate breastfeeding during this first hour? Yes □ No □

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

4.4 Do the babies born by cesarean stay with their mothers, with skin contact, at this time for at least 30 minutes? Yes □ No □

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 □

5.2 Are most breastfeeding mothers able to demonstrate how to correctly position and attach their babies for breastfeeding? Yes □ No □

5.3 Are breastfeeding mothers shown how to express their milk or given information on expression and/or advised of where they can get help, should they need it? Yes □ No □

5.4 Are staff members or counselors who have specialized training in breastfeeding and lactation management available full-time to advise mothers during their stay in healthcare facilities and in preparation for discharge? Yes □ No □

5.5 Does a woman who has never breastfed or who has previously encountered problems with breastfeeding receive special attention and support from the staff of the healthcare facility? Yes □ No □

5.6 Are mothers of babies in special care helped to establish and maintain lactation by frequent expression of milk? Yes □ No □

STEP 6. Give newborn infants no food or drink other than breastmilk, unless medically indicated.

6.1 Do staff have a clear understanding of what the few acceptable reasons are for prescribing food or drink other than breastmilk for breastfeeding babies? Yes □ No □

6.2a Do breastfeeding babies receive no other food or drink (Breastmilk only) Yes □ No □

6.2b Do breastfeeding babies receive some other food or drink than Breastmilk unless medically indicated? Yes □ No □

6.3 Are any breastmilk substitutes including special formulas which are used in the facility purchased in the same way an any other foods or medicines? Yes □ No □

6.4 Do health facility and health care workers refuse free or low-cost (below 80% open-market retail cost. Breastmilk substitutes intended for experimental use of “professional evaluation” should also be purchased at 80% or more of retail prices.) supplies of breastmilk substitutes, paying close to retail market price for any? Yes □ No □

6.5 Is all promotion of infant foods or drinks other than breastmilk absent from the facility? Yes □ No □
**STEP 7. Practice rooming-in—allow mothers and infants to remain together—24 hours a day.**

7.1 Do mothers and infants remain together (rooming-in or bedding-in) 24 hours a day, except for periods of up to an hour for hospital procedures or if separation is medically indicated?  
Yes    No

7.2 Does rooming-in start within an hour of a normal birth?  
Yes    No

7.3 Does rooming-in start within an hour when a cesarean mother can respond to her baby?  
Yes    No

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

8.1 By placing no restrictions on the frequency or length of breastfeeds, do staff show they are aware of the importance of breastfeeding on demand?  
Yes    No

8.2 Are mothers advised to breastfeed their babies whenever their babies are hungry and as often as their babies want to breastfeed?  
Yes    No

**STEP 9. Give no pacifiers (also called dummies or soothers) to breastfeeding infants.**

9.1 Are babies who have started to breastfeed cared for without any bottlefeeds?  
Yes    No

9.2 Are babies who have started to breastfeed cared for without using pacifiers?  
Yes    No

9.3 Do breastfeeding mothers learn that they should not give any bottles or pacifiers to their babies?  
Yes    No

9.4 By accepting no free or low-cost feeding bottles, teats, or pacifiers, do the facility and the health workers demonstrate that these should be avoided?  
Yes    No

**STEP 10. Foster the establishment of breastfeeding support and refer mothers to them on discharge from the hospital or clinic.**

10.1 Does the hospital give education to key family members so that they can support the breastfeeding mother at home?  
Yes    No

10.2 Are breastfeeding mothers referred to breastfeeding support groups, if any are available?  
Yes    No

10.3 Does the hospital 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

10.4 Does the facility encourage and facilitate the formation of mother-to-mother or healthcare worker-to-mother support groups?  
Yes    No

10.5 Does the facility allow breastfeeding counseling by trained mother-support group counselors in its maternity services?  
Yes    No