

**BFI Interim Report**

|  |  |  |
| --- | --- | --- |
| **Facility** | |  | | --- | |  | |
| **Name of Contact Person:** |  |
| **Address:**  **E-mail:**  **Tel:** | |  | | --- | |  | |

|  |  |
| --- | --- |
| **Report submitted to: Name of Lead Assessor:** | Marg La Salle, Lead Assessor |
| **E-mail:** | [mlasalle0868@rogers.com](mailto:mlasalle0868@rogers.com) |
|  |  |
| **Report submitted by:** |  |
| **Date:** |  |

**BFI Interim Report**

|  |
| --- |
| **Please submit** :   * Any changes in prenatal and/or postpartum services provided by your facility * Infant feeding surveillance methods * Most recent breastfeeding data: exclusive and non-exclusive breastfeeding rates and duration rates * New or revised policies * Changes to staff education * Changes to prenatal curricula * Changes to any postpartum/parenting curricula * New resources * Partnerships – Any new partnerships? Any discontinued partnerships?   Evidence of collaboration with key partners to identify and address issues revealed in breastfeeding surveillance information and any barriers as evidenced by breastfeeding surveillance information.  It is most helpful to review the BCC Baby-Friendly Initiative Ten Steps and WHO Code Outcome Indicators and Appendices as you prepare the report. |

The Ten Steps and WHO Code Outcome Indicators:

|  |
| --- |
| **Step 1. Have a written infant feeding policy that is routinely communicated to all staff, health care providers and volunteers.** |

|  |
| --- |
| **Step 2. Ensure all staff, health care providers and volunteers have the knowledge and skills necessary to implement the infant feeding policy**. |

|  |
| --- |
| **Step 3. Inform pregnant women and their families about the importance and process of breastfeeding.** |

|  |
| --- |
| **Step 4. Place babies in uninterrupted skin-to-skin contact with their mothers immediately following birth for at least an hour or until completion of the first feeding or as long as the mother wishes. Encourage mothers to recognize when their babies are ready to feed, offering help as needed.** |

|  |
| --- |
| **Step 5. Assist mothers to breastfeed and maintain lactation should they face challenges including separation from their infants.** |

.

|  |
| --- |
| **Step 6. Support mothers to exclusively breastfeed for the first six months, unless supplements are medically indicated.** |

|  |
| --- |
| **Step 7. Facilitate 24 hour rooming-in for all mother-infant dyads: mothers and infants remain together.** |

**Step 8. Encourage responsive, cue-based feeding. Encourage sustained breastfeeding beyond six months with appropriate introduction of complementary foods.**

**Step 9. Support mothers to feed and care for their breastfeeding babies without the use of artificial teats or pacifiers (dummies or soothers).**

**Step 10. Provide a seamless transition between the services provided by the hospital, community health services and peer support programs. Apply principles of Primary Health Care and Population Health to support the continuum of care and implement strategies that affect the broad determinants that will improve breastfeeding outcomes.**

|  |
| --- |
| **Compliance with the International Code of Marketing of Breast Milk Substitutes** |

**Summary/Comments:**