

 **BFI Interim Report**

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| **Facility** |

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

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

**BFI Interim Report**

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| **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’s Baby-Friendly Initiative (BFI) Implementation Guideline and BFI Guideline Checklist as you prepare the report. |

The Ten Steps to Successful Breastfeeding in Canada

**Critical Management Procedures**

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| **Step 1a. Comply with the International Code of Breast-milk Substitutes and relevant World Health Assembly resolutions.** |

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| **Step 1b. Have a written Infant Feeding Policy that is routinely communicated to all staff, pregnant women/persons and parents.** |

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| **Step 1c. Establish ongoing BFI monitoring and data management systems.** |

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| **Step 2. Ensure that staff have the competencies (knowledge, attitudes and skills) necessary to support mothers/birthing parents to meet their infant feeding goals.**.  |

**Key Clinical Practices**

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| **Step 3. Discuss the importance and process of breastfeeding with pregnant women/persons and their families.** |

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| **Step 4. Facilitate immediate and uninterrupted skin-to-skin contact at birth. Support mothers/birthing parents to respond to the infant’s cues to initiate breastfeeding as soon as possible after birth.** |

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| **Step 5. Support mothers/parents to initiate and maintain breastfeeding and manage common difficulties.** |

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

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| **Step 7. Promote and support mother-infant togetherness.** |

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

**Step 9. Discuss the use and effects of feeding bottles, artificial nipples and pacifiers with parents.**

**Step 10. Provide a seamless transition between the services provided by the hospital, community health services and peer support programs.**

**Summary/Comments:**