

Key aspects of “mother-friendly care” have been integrated into the revised 20-hour course, *Global Criteria* and assessment process for BFHI, as an optional module. This provides countries with an easy way to begin the process of integrating mother-friendly childbirth practices into their maternity services, if they do not yet have a full-fledged initiative of the type described above.

### **Baby-friendly neonatal intensive care and paediatric units**

Whereas BFHI is maternity based, its impact in support of post-discharge breastfeeding is limited to its community outreach – Step Ten. Therefore, the concept of baby-friendly paediatrics was considered. The following 10 steps are derived from the suggested 11 Steps developed in Australia<sup>19</sup> and are built upon the BFHI:

#### **10 Steps to Optimal Breastfeeding in Paediatrics**

1. Have a written breastfeeding policy and train staff in necessary skills.
2. When an infant is seen, for either a well visit or due to illness, ascertain the mother's infant feeding practices, and assist in establishment or management of breastfeeding as needed.
3. Provide parents with written and verbal information about breastfeeding.
4. Facilitate unrestricted breastfeeding or, if necessary, milk expression for mothers regardless of the child's age.
5. Give breastfed children other food or drink only when age appropriate or when medically indicated, and if medically indicated, use only alternative feeding methods most conducive to return to breastfeeding.
6. If hospitalization is needed, ensure facility allows 24-hours mother/child rooming in.
7. Administer medications and schedule procedures so as to cause the least possible disturbance of feeding.
8. Maintain a human milk bank, according to standards.
9. Provide information and contacts concerning community support available.
10. Maintain appropriate monitoring and records/data collection procedures to permit quality assurance assessment, progress rounds or staff meetings, and feedback.

The issue of transitioning the baby from an NICU setting to home is also extremely important. Items to include in consideration of baby-friendly treatment of the premature or ill infant should include criteria or standards for care, discharge planning, post-discharge assessment, and special support for mothers.

<sup>19</sup> Donohue L, Minchin M and C Minogue, 11 Step approach to Optimal Breastfeeding in the Paediatric Unit *Breastfeeding Review*. 1996; 4(2):88.