



BFHI awards are not forever

All BFHI certificates and awards are given for a specific period of time. The hospital must actively work to continue to reach (or exceed) the standards to continue to hold that level of award.

A system of monitoring and re-assessment was put in place at the end of 2006 for maternity units in Ireland with a full Baby-friendly award. This system includes to **Plan, Act, Review, Monitor and Share**.

When a hospital carries out these activities they will be re-assessed by an external assessment team five years from the date of their award. If the activities do not take place or the evidence from the self-monitoring shows practices are slipping and not remedied, external assessment takes place sooner. Full details of the re-assessment process have been sent to the hospitals involved, are outlined in this issue and are also on the BFHI Ireland web site.

*Plans without details are just dreams.
How is your 2007 BFHI Action Plan?*

BFHI Global Revision

Since the Baby-friendly Hospital Initiative (BFHI) was launched by UNICEF and WHO in 1991-1992, the Initiative has grown, with more than 19,600 hospitals having been designated in 152 countries around the world. As a result of the interest and requests for updating the BFHI package in light of experience with BFHI since the Initiative began, the guidance provided by the new Global Strategy for Infant and Young Child Feeding, the challenges posed by the HIV pandemic, including infants who are not breastfeeding, and the importance of addressing mother-friendly care within the Initiative UNICEF and WHO, undertook the revision of the materials in 2004-2005.

The global version was published in 2006. BFHI Ireland is examining the updated materials to see how they will be implemented in Ireland. The updated global course, *Breastfeeding Promotion and Support in a Baby-Friendly Hospital, a 20-hour course for maternity staff*, was distributed to hospitals in mid-2006. The revised self-appraisal and assessment tools will start to come into use from mid-2007, following information and training.

The main changes involve the inclusion of mothers who are not breastfeeding, extended skin-to-skin contact, more emphasis on staff knowledge of the Code, and of mother-friendly birth practices that assist an optimal start of mother and baby. Notice will be given of the specific changes and information materials provided.



**Focus this issue:
Supporting Breastfeeding at Work
Keeping up standards**

Baby Friendly Hospital Initiative in Ireland Re-assessment Process (Maternity)

Aim:

- To support and motivate the baby-friendly accredited maternity hospital/unit to continue best practices and to maintain baby-friendly status.
- To gain evidence that the Ten Steps are audited regularly in the facility and if required resultant action is taken to improve practices until they meet the required BFHI standard.
- To gain evidence that mothers experience positive support for breastfeeding in baby friendly facilities.
- To gain evidence that the Code of Marketing of Breast-milk substitutes and subsequent relevant resolutions are adhered to.
- To link the BFHI with the Accreditation process by providing ongoing evidence of best practice and service user satisfaction.

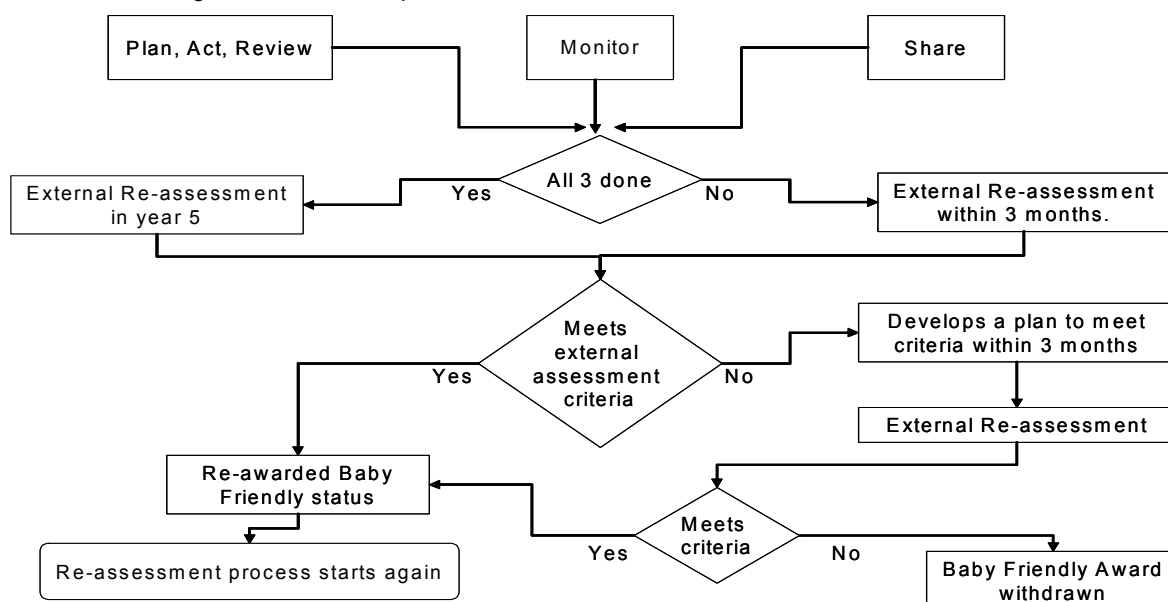
Activity	<i>Plan, Act, Review, Monitor and Share</i>	Outcome
1. Hospital self-monitors at least 2 Steps/Code each year.		Audits indicate maternal satisfaction and best practice is in place.
2. Submits Annual Action Plan including evaluation process, on areas needing attention and breastfeeding statistics.		Annual Report submitted to BFHI within 6 months of due date. Breastfeeding rates are increasing. Previous year's Action Plan is evaluated.
3. Shares experience of maintaining BFHI status at least once in 5 years.		Journal article, workshop presentation, poster or similar at regional, national or international level.

If ALL these 3 self-monitoring activities are on-going and the outcomes achieved, the hospital will be externally re-assessed five years after the date on their award.

If ANY of the self-monitoring activities are not on-going or any of the outcomes are not achieved by the end of the second year after first awarding of Baby-friendly status or any year thereafter, automatic external reassessment will take place within 3 months of the end of the year in which the activity is not done /outcome achieved.

Notes:

- ◇ All Steps/Code to be audited at least once in 5 years.
- ◇ Increase in breastfeeding rate on discharge and increase in exclusiveness of breastfeeding are most important. It is not enough to increase only the breastfeeding initiation rate. Rates must rise at least once in every two year period.
- ◇ A fee is charged to cover the cost of external assessment visits.
- ◇ Informal monitoring visits may take place by an assessor, which may or may not be notified in advance.
- ◇ In special circumstances (e.g. hospital re-location), the hospital may apply for a variation in the re-assessment timeline. Shortage of staff is not a special circumstance.



Workplace Support for Breastfeeding

Also see handout page in this issue

Breastfeeding is still important and the employer continues to benefit when breastfeeding continues after the mother returns to work.

When employers are supportive to breastfeeding women:

- Staff are more likely to be motivated to stay with that employer. If women leave because they are not supported as mothers, this turnover of staff costs an employer money
- Staff are more likely to be committed and work hard
- New staff are easier to recruit
- Public goodwill and corporate image are enhanced
- Mothers are more relaxed when their child is healthy
- Breastfed babies are healthier in the short and long term, which means less time off for the mother to care for a sick child. Reduced absenteeism results in higher productivity.

This support has very low costs when compared to the costs of not supporting breastfeeding.

Some breastfeeding employees may return to work before 26 weeks

- 26 weeks is the total time including antenatal time. If a woman takes two weeks antenatal leave (as required) and the baby arrives on her due date, she will have 24 weeks after the birth. If the baby arrives two weeks after her due date, she will have 22 weeks leave after the birth.

- Every mother is entitled to maternity *leave* but there are conditions for maternity *payment*. A new worker, a worker from a non-EU country, contract staff, and others may not have the required PRSI contributions to receive payment during maternity leave.

- The maximum maternity benefit payable is €280.00 a week (from January 2007). Some women who normally earn a higher weekly wage may choose to return to work early.



- If the woman is not replaced in her job during maternity leave there may be pressure to return early if her work is undone and piling up while she is away.
- A woman in a training programme may need to drop back a whole year to the next group if she misses more than a few weeks, and so comes back to work sooner.
- A baby may be in hospital and the employee mother chooses to return to work soon after the birth so as to have the paid maternity leave later when her baby is home.
- **Breastfeeding supports are still necessary in the workplace.**

Women working in the Civil Service get 2 years of paid lactation breaks.

Why do women working in the Public Service, including HSE employees, not get treated similarly?



Is your health facility a Breastfeeding Supportive Workplace?

Participate in the *HPH/BFHI Breastfeeding Supportive Workplace Initiative for Health Care Facilities*. There are Bronze, Silver and Gold level awards to achieve and proudly display.

This is a staff health promotion project and any health care facility can participate.

Information is available on the BFHI Ireland web site or from the HPH office.

News and Views



No need to be alarmed by breastfeeding

It's good for babies, helping to protect them against asthma and childhood diabetes as well as ear and stomach infections. Breastfeeding mums need your support - because every baby deserves the best.

www.breastfedbabies.org



The Health Promotion Agency NI has developed new posters and press advertisements promoting the breastfeeding message specifically with men in mind. These thought-provoking images will appear in the sports sections of local press and will be placed in the male washrooms of over 200 entertainment venues across Northern Ireland. You can see the lively, colourful ads at <http://www.breastfedbabies.org/>

Breastfeeding: The 1st Hour - Save ONE million babies!

WABA World Breastfeeding Week theme. Save ONE million babies – beginning with one action, one hour support and one message: beginning breastfeeding within the 1st hour of birth! Initiation of breastfeeding within the 1st hour of birth is the first and most vital step towards reducing infant and under-five mortality, by reducing the overwhelmingly high neonatal mortality rate. You can download WBW 2007 materials from www.worldbreastfeedingweek.org What international health workers see in Irish training hospitals can have life-saving (or life-threatening) effects when they return home. Make sure they see best practice.

Edmond, KM., Zandoh, C., et al Delayed Breastfeeding Initiation Increases Risk of Neonatal Mortality. 2006;117;380-386 *Pediatrics*

Infant sleep disturbances may start in pregnancy

A study of 253 pregnant women found that depressed women had more sleep disturbances and higher depression, anxiety and anger scores during pregnancy. They also had higher norepinephrine and cortisol levels. The newborns of the depressed mothers had more sleep disturbances including less time in deep sleep and more time in indeterminate (disorganized) sleep, and they were more active and cried/fussed more. This suggests more attention needs to be given to depression in pregnancy to reduce some of the post-natal difficulties. Field, T, Diego, M et al. Sleep disturbances in depressed pregnant women and their newborns. *Infant Behavior and Development* 2007. 30 (1) 127-133.



It's my birthday, give me a hug!

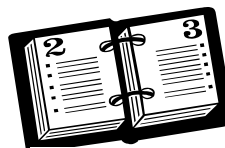
Massachusetts Breastfeeding Coalition has this slogan on their materials promoting early skin-to-skin contact. www.massbfc.org/

BFHI Link is written by Genevieve Becker, National Co-ordinator of BFHI, and reviewed by members of the BFHI Advisory Committee.

We welcome your news and suggestions.

Contact the BFHI Co-ordinator, c/o Health Promoting Hospitals Network, Connolly Hospital, Blanchardstown, Dublin 15, email: bfhi@eircom.net Web site: www.hphallireland.org then go to Links

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Diary Dates

- May 13th-20th **Breastfeeding Week UK** for events in Northern Ireland. See: www.healthpromotionagency.org.uk
- July 23rd **International Lactation Consultant Exam** Details: www.iblce-europe.org
- Aug 15th-19th **International Lactation Consultant Association Annual Conference**, San Diego, USA. Contact: www.ilca.org
- Sept tba **BFHI Hospital Co-ordinators W'Shop** Details later
- Oct 1st-7th **National Breastfeeding Week**
- Oct 5th - 6th **Association of Lactation Consultants in Ireland Annual Conference**. Park Hotel, Mullingar. Details: alci@iol.ie
- Mid-Oct **Health Promoting Hospitals National Conference**. Contact: 01-6465077

Breastfeeding and working away from home?

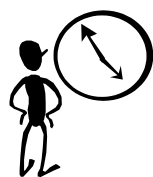
Breastfeeding continues to be good for you and for your baby after the early weeks. If you work away from home, breastfeeding helps you to feel close to your baby when you come home from work and sit down together. Breast milk can help to protect your baby from illness and a healthy baby means you take less time off from work. Time, money, space and support can help you to continue to give your baby the best.

Time

Time at home

Every pregnant employee is entitled to maternity leave. Maternity leave is now 26 weeks (including leave taken before the birth) attracting a payment and 16 weeks unpaid maternity leave.

Each parent is entitled to 14 weeks unpaid parental leave that may be "broken up" with the agreement of the employer.



Time at work

A breastfeeding employee is entitled to take 60 minutes off work each day, without loss of pay, as a breastfeeding break until the baby is 26 weeks old.

A Civil Servant breastfeeding mother is entitled to lactation breaks, without loss of pay, until the child is 2 years of age.

A pregnant woman is also entitled to paid time-off for ante-natal visits and classes.

Space

Employers are required to provide a suitable place for expressing milk / feeding baby or reduce working hours by 1 hour per 8 hour day, without loss of pay, at least until the baby is 26 weeks old.



Money

To qualify for *Maternity Benefit* you must be in insurable employment immediately before the start of maternity leave, or in insurable self-employment, and satisfy PRSI contribution conditions.

You may be able to combine your insurance record in another EU country with your Irish PRSI contributions to help you qualify for Maternity Benefit.



You may be eligible for *Health and Safety Leave* if the processes and substances in your workplace can be

hazardous to the breastfeeding mother. If a risk is identified, the employer must remove the risk/adjust the work, provide suitable alternative employment, or the employee must be granted Health and Safety Leave. Employers pay normal wages for the first 3 weeks, after which Health and Safety Benefit will be paid from the Department of Social and Family Affairs.

Support

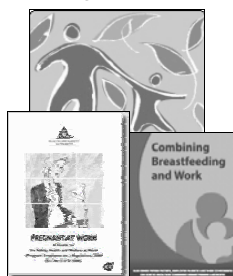
If you do not have friends who breastfed at work, you may find other mothers who did so at a breastfeeding support group. They can give you tips on expressing, co-workers and coping.



More information

The Equality Authority
Lo Call: 1890 245 545
www.equality.ie

Maternity Benefit Section, Dept
of Social and Family Affairs
LoCall: 1890 690 690
www.welfare.ie



The Health and Safety Authority
Tel: 01-614 7000
www.hsa.ie

HPU/HSE publication:
Combining Breastfeeding and Work
www.healthpromotion.ie/breastfeeding/