

# Ten Steps Facility Self-Assessment Tool

*Adapted from the National Institute for Children's Health Quality (NICHQ) Ten Steps Self-Assessment Tool used in the Texas Breastfeeding Learning Collaborative, 2012. Do not distribute or reproduce without written permission (email [info@nichq.org](mailto:info@nichq.org)).*

This self-assessment tool is designed to give each facility an assessment of their progress towards the Ten Steps to Successful Breastfeeding.<sup>1</sup> It was created by NICHQ and adapted by the Texas Ten Step program, drawing from other similar assessment tools and The Baby-Friendly Hospital Initiative Guidelines and Evaluation Criteria for Facilities Seeking and Sustaining Baby-Friendly Designation.<sup>3</sup>

The survey asks you about specific components of the Ten Steps that your facility may be working to implement. To accurately complete the survey, you will need to be familiar with details regarding your facility's status on the Ten Steps. It may be helpful to have the following documents or information on hand while filling out this survey:

- Your facility's breastfeeding policy and procedure modules (if one exists)
- Your facility's training processes for the policy (and any related Human Resources and training records)
- Observations of the facility setting (for information, posters, etc.)
- Access to other professionals involved in the process towards implementing the Ten Steps (e.g. CFO, materials manager, prenatal providers)

The survey should be filled out by a senior nurse leader of the facility's obstetric department, at minimum. Ideally, a core team composed of facility staff plus community partners would collectively provide input on responses to this survey. This team could include a staff nurse, lactation consultant, the medical director and/or a senior administrator, a breastfeeding mother who delivered in your facility (and who is representative of your patient population), and a WIC local staff member (or other community partner) on your team. It will take approximately 20 minutes to complete this survey.

<sup>1</sup> Baby-Friendly USA. The Ten Steps to Successful Breastfeeding. East Sandwich, MA: Baby-Friendly USA Available at: <https://www.babyfriendlyusa.org/> Accessed July 27, 2011.

<sup>3</sup> Baby-Friendly USA. "Interim Guidelines and Evaluation Criteria for Facilities Seeking and Sustaining Baby-Friendly Designation." Albany, NY: Baby-Friendly USA, 2019.



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Each step has 5 components, and you will be asked to indicate the level of progress that your facility has accomplished for each component. Each component will be rated on a scale of 1-5, where:

■ **1 = No Progress**

The facility has not started work in this component, but we acknowledge work to be done

■ **2 = Early Stage Progress**

The facility has identified a team to guide the work in this component, and planning is taking place

■ **3 = Moderate Progress**

The facility has identified an aim for work in this component; there are specific activities and/or changes identified and being tested or implemented for this component; data on a measure of progress towards this component is being collected

■ **4 = Substantial Progress**

Most to all of the work in this component has been accomplished; work for this component has been built into policies and procedures within the facility such that the work will occur reliably moving forward

■ **5 = Fully Implemented/Complete**

In addition to the criteria for “substantial progress”, we are confident that 80% of randomly selected staff or mothers surveyed would say that this component is in place at our facility

For example, for Component 1 of Step 1: Our facility has a written maternity care and infant feeding policy that addresses all Ten Steps, protects breastfeeding, and adheres to the International Code of Marketing of Breast-milk Substitutes.

- **A score of 1:** Our facility does not have a policy and has not initiated plans to draft a policy
- **A score of 2:** Our facility has interest in having a policy and has begun preliminary planning to develop one
- **A score of 3:** Our facility has drafted a policy; it is in the process of being reviewed and is close to being finalized
- **A score of 4:** There is a final and approved policy that addresses the above-mentioned issues and it is incorporated into trainings within the facility
- **A score of 5:** Our policy is finalized and 80% of staff acknowledge awareness of this policy and that it is in place in the facility

The sum of the scores for all 5 of the components will be calculated for each step. The maximum score for each step is 25 points and the minimum score for each step is 5 points. The maximum score for the entire survey is 250 points (complete components for all 10 Steps) and the minimum score for the entire survey is 50 (“no progress” in any of the components for all 10 steps).

*While completing this assessment, please keep in mind that the Baby-Friendly USA evaluation criteria states that of a randomly selected sample of mothers or staff at your facility (depending on the component), at least 80% must confirm that the listed component in each step is in place at your facility (i.e., received a rating of 4 or 5 for each of the components in all 10 steps).*



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## STEP 6:

### Give infants no food or drink other than breastmilk unless medically indicated.

Component	Stage of Completion (check one per row)				
	No Progress	Early Stage Progress	Moderate Progress	Substantial Progress	Fully Implemented/ Complete
1) In our facility, babies do not receive food or drink other than breastmilk. Formula is only given for a medically acceptable reason or in response to a parental request.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
2) In our facility, if a mother specifically states she has no plans to breastfeed, or requests that her breastfeeding baby be given a breastmilk substitute, staff explores the reasons for this request and addresses any concerns raised.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
3) In our facility, if a mother specifically states that she has no plans to breastfeed, or requests that her breastfeeding baby be given a breastmilk substitute, our staff <b>educates</b> her about the possible consequences to the health of her baby and/or the success of breastfeeding. If the mother still requests a substitute, our facility grants her request and <b>documents</b> the process and the informed decision.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
4) Our facility tracks its rate of formula supplementation and strives to reach state and national targets for exclusive breastmilk feeding.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
5) Our facility provides written instruction, not specific to a particular brand, and verbal information about safe preparation, handling, storage and feeding of infant formula to all mothers who have chosen to formula/mixed feed. Teaching is documented and not provided in a group setting.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
<b>TOTAL</b> (Tally the points in rows above)					

Total Score.....



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What has helped our facility's progress towards achieving Step 6: (optional)

What has challenged our facility's progress towards achieving Step 6: (optional)

As you pilot test this assessment of progress along Step 6, do you have any comments or suggestions on how we could improve this section or provide clearer instructions? (optional)



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