

# Texas 10 Step Application

New     Renewal    Date: .....

## Demographic Information

Facility Name: .....

Applicant Contact Name/Credentials: .....

Job Title: .....

Email: .....

Address for shipment of WIC materials (include all pertinent delivery information):

Name: .....

Address: .....

Telephone: ..... Fax: .....

WIC Materials Catalog Contact (if different than application contact):

Name/Credentials: .....

Job Title: .....

Email: .....

Telephone: ..... Fax: .....

What level is your facility designated in the Texas Mother-Friendly worksite program?  Gold     Silver     Basic

## Facility Lactation Support Information

INPATIENT BREASTFEEDING SUPPORT SERVICES	Dedicated* hours per week	Time of day covered
International Board Certified Lactation Consultant (IBCLC)		
State of Texas Trained Breastfeeding Educator**		
Other Lactation Support Staff (CLC, or other; list credential below)		

\* FTE for non-nursing hours fully dedicated to lactation care. If less than 1 FTE, please record as a decimal. For example, 40 hours per week = 1 FTE, 20 hours per week = 0.5 FTEs, and 10 hours per week = 0.25 FTEs.

\*\* Requires completion of WIC breastfeeding courses: Lactation Principles and Advanced Lactation Management. Designation expires after five years.



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COMMUNITY-BASED BREASTFEEDING SUPPORT SERVICES	Yes	No	Cost?
Does your facility offer prenatal breastfeeding classes for the public?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your facility offer breastfeeding support groups (online or in-person)?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your facility offer breastfeeding visits after discharge (online or in-person)?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your facility offer a breastfeeding warm or hotline?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your facility partner with outside organizations to offer breastfeeding support or services?			<input type="checkbox"/> Yes <input type="checkbox"/> No

## Breastfeeding and Birth Rate | Quality Improvement Information

Complete the items in this section using data from the previous calendar year.

Total live births\*: .....

\*Total number of live births includes vaginal and Cesarean (C-Section) deliveries. For multiple births, count each newborn as a separate live birth.

Average breastfeeding initiation rate (include any attempt to breastfeed or provide expressed breastmilk): .....

WHAT PERCENT OF HEALTHY NEWBORNS ARE FED THE FOLLOWING DURING THE FACILITY STAY?	Enter Percentage (%)	Select One
Only breastmilk • No water or formula at any time during the hospital stay • No glucose water or sucrose solution except during painful procedures		<input type="checkbox"/> Actual value <input type="checkbox"/> Estimated value
Breastmilk AND any formula, water or glucose water		<input type="checkbox"/> Actual value <input type="checkbox"/> Estimated value
No breastmilk		<input type="checkbox"/> Actual value <input type="checkbox"/> Estimated value

Among breastfed newborns who are supplemented and not in a special care nursery or neonatal intensive care unit, how many receive donor human milk?

- Not offered at this facility
- Few (0–19%)
- Some (20–49%)
- Many (50–79%)
- Most (80%+)

If applicable, does your facility obtain milk from a donor human milk bank listed on the Human Milk Banking Association (HMBANA.org) website?

- Yes
- No

What is the highest level of neonatal care provided at your facility?

- Level 1: Well newborn nursery
- Level 2: Special care nursery
- Level 3: Neonatal Intensive Care Unit
- Level 4: Regional Neonatal Intensive Care Unit
- Not applicable

Definition used to track Exclusive Breastfeeding Rate (EBF) is obtained from [The Joint Commission \(current version\)](#):

- Yes
- No

If not using the Joint Commission definition linked above, define the measurement or process used (include numerator/denominator) to track breastfeeding rates.

Describe the process and frequency with which your facility reviews and shares EBF and formula supplementation rate data with internal stakeholders (staff, physicians, leadership). Provide examples of how your data is shared and with whom.

Does your facility have a breastfeeding task force or perinatal review committee that addresses breastfeeding data, policies and practices? List disciplines of members who are represented (i.e. nursing, physician, lactation).



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## Breastfeeding Training

- Training must include didactic and skills-based components.
- Training must have a completion rate of >50% of maternal-infant and NICU front-line nursing staff.
  - > Do not include training for which <50% staff have attended.
  - > Do not include training *specific for lactation staff only*.
- Training must include dates from previous two years only.

<b>WIC ONLINE TRAINING</b>	Year Completed	Percentage of Staff Completion
(This covers didactic topics* listed below, so no need to send content outlines for review.) Location: <a href="#">Texas WIC Partner Training site</a>		
Breastfeeding Management		
Anatomy of Breastfeeding		
Common Breast Complications Associated with Breastfeeding		
Breastfeeding the Compromised Infant		
Others (list on separate sheet)		

<b>WIC LIVE TRAINING</b>	Year Completed	Percentage of Staff Completion	Location
Lactation Principles			
Advanced Lactation Management			

<b>NON-WIC TRAINING MUST INCLUDE THE FOLLOWING TOPICS:</b>	Title of Training	Year Completed	Percentage of Staff Completion
(Send full content or content outline for all training listed for review.)			
Health risks to mom and baby of suboptimal exclusive breastfeeding (not achieving medical recommendations).			
Anatomy and physiology, breastmilk components and milk production.			
The importance of early breastfeeding and intake of colostrum; assessing good/poor milk transfer.			



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How to solve common breastfeeding problems (sore nipples, engorgement, blocked ducts, sleepy and fussy infant, etc.).			
Impact of introducing formula, artificial nipples and pacifiers before breastfeeding is established.			
The International Code of Marketing of Breastmilk Substitutes.			
Labor and birth practices that support early breastfeeding. Regardless of feeding method: the importance of early skin-to-skin contact, rooming-in and feeding on-cue.			
Knowledge of discharge referral process and arranging follow-up suitable to the mother's situation to include familiarity of available community resources.			
Orientation includes supervised clinical experience (shadowing) with IBCLC, CLC or other staff with additional breastfeeding education beyond basics.			

<b>SKILLS-BASED CONTENT:</b> (Send competency check-off sheet for training listed for review.)	Title of Training	Year Completed	Percentage of Staff Completion
Counseling with pregnant and postpartum women about infant feeding choices that include evidenced-based practices.			
Observe, assess and assist with breastfeeding position and latch.			
Teach hand expression, pump setup and use, and safe storage of milk.			
Teach safe formula preparation and feeding (paced feeding, newborn stomach capacity).			



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## Additional Information

If applicable, state which phase of the Baby-Friendly Hospital Initiative (BFHI) your facility is currently in and what year you entered the 4D Pathway.

Phase: ..... Year: .....

Has your facility ever researched or developed a plan to purchase infant formula and related breastmilk substitutes at fair market value?

- Yes
- No

Has your facility ever participated in the CDC's Maternity Practices in Infant Nutrition and Care (mPINC) survey?

- Yes
- No
- Unsure

Year submitted .....

If yes, what was your facility's most recent score? .....

DOES YOUR HOSPITAL COLLABORATE WITH YOUR LOCAL WIC IN ANY OF THE FOLLOWING WAYS?	Yes	No
WIC staff or Peer Counselors provide bedside breastfeeding support.		
Our facility staff help schedule WIC appointments.		
Our facility routinely communicates WIC client birth information to WIC staff.		
WIC and our facility have a written agreement or Memorandum of Understanding (MOU) to promote breastfeeding through outreach or collaboration		
Other:		

To connect with your local WIC clinic, visit <https://texaswic.org/about-wic/contact-us>

Describe any barriers to the Texas Ten Step Program or Baby-Friendly Hospital Initiative for which your facility would like any additional information or assistance.



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