The Role of Helper Groups
Who are the Helper Groups?

They are individuals/organizations who are interested in assisting hospitals with adopting evidence based practices that support breastfeeding.
Examples of Helper Groups

- State and Local Health Departments
- State and Local Breastfeeding Coalitions
- Academic Institutions
- Quality Improvement Organizations
- Non-profit Maternal Child Health (MCH) Organizations
The Role of Helper Groups

• Generate interest in the Baby-Friendly Hospital Initiative (BFHI) among key hospital personnel
• Encourage and support the hospital through the change process
• Facilitate discussions that allow hospitals to consider their options for practice change
The Role of Helper Groups

• Connect hospitals who have solved a particular problem with those who are still wrestling with that issue
• Assist with training (all/part of Step 2)
• Assist with Continuity of Care issues (Steps 3 and 10)
The Role of Helper Groups

- Provide training on Quality Improvement techniques
- Offer collaborative learning sessions
- Help with fund raising to defray costs
What Should Helper Groups Avoid?

Doing the work for the hospital
  Writing the infant feeding policy, training plan, etc.

Creating extra work for the hospital
  Be sensitive when writing grant proposals not to agree to cumbersome additional requirements

Establishing goals outside of the BFHI
Examples of Goals Outside of BFHI?

- Reduce C-Section rates
- Co-sleeping promotion
- Additional requirements for Physician education
- Mother baby couplet care
- Graphic designs for flyers
- New “Code” compliant gift bags for moms
What Should Helper Groups Avoid?

Promising to have a hospital Baby-Friendly designated within an unrealistic timeframe

Effective, sustainable practice change should be the focus, not an unrealistic date

BFUSA may need to spread assessment requests over a period of time
Tips for Helpers

Become familiar with the most current version of the *Guidelines and Evaluation Criteria*.

Use the *Guidelines and Evaluation Criteria* as the basis for practice change and problem solving.
Tips for Helpers

Know the difference between a Guideline and a Criteria
BFUSA Guidelines and Evaluation Criteria On-line

https://www.babyfriendlyusa.org/get-started/the-guidelines-evaluation-criteria

Guideline - the standard of care to strive to achieve for all patients

Criteria for Evaluation – the minimum standard that must be achieved in order to become designated as Baby-Friendly

Always strive to achieve 100%.
Tips for Helpers

Familiarize yourself with the 4-D Pathway

Familiarize yourself with what Baby-Friendly is and what it is NOT

Familiarize yourself with the Baby-Friendly website

www.babyfriendlyusa.org
Visit our website

"Health care systems should ensure that maternity care practices provide education and counseling on breastfeeding. Hospitals should become more "baby-friendly" by promoting and supporting breastfeeding."

Find us on Facebook
BFUSA is the accrediting body for the BFHI in the United States

The primary function of the organization is to assess compliance with the Guidelines and Evaluation Criteria
The Role of Baby-Friendly USA

Answer questions and clarify our processes and the Guidelines and Evaluation Criteria
The Role of Baby-Friendly USA

Throughout the 4-D Pathway we review and assess hospital policy, training plans, patient education and data collection plans.

BFUSA assesses the documents for compliance with our Guidelines and Evaluation Criteria. We do not “approve” these materials.
The Role of Baby-Friendly USA

• BFUSA does not “approve” commercially provided (neither profit nor non-profit) training programs or patient education materials
• Companies making that claim are making false claims
• There is no such thing as a Baby-Friendly discharge bag
Use of the Term “Baby-Friendly®”

• “Baby-Friendly” is Registered Certification Mark

• The purpose of a certification mark is to inform the public that the goods or services of the party displaying the mark meet established standards, in this case, those of the Baby-Friendly Hospital Initiative

• The certification mark is a statement not only that the goods and services meet the standards, but also that they have been checked, tested, or in some way verified by a third party
Use of the Term “Baby-Friendly®”

BFUSA appreciates the efforts of all organizations that support the goals of the Baby-Friendly Hospital Initiative.

However, to allow organizations to call themselves Baby-Friendly without any supervision or control from BFUSA, would impair the ability of BFUSA to enforce the mark in the future.
Key Rule is the Avoidance of Confusion and Misrepresentation

If the use of the term creates a likelihood of confusion with the Baby-Friendly mark, implies Baby-Friendly USA “approval” when it has not been given, or suggests a relationship with BFUSA, it could prevent BFUSA the ability to enforce the mark in the future.
Acceptable Use of the Term

The structure of the use of the term is key in creating the correct perception.

Baby-Friendly (name) implies relationship to or approval by Baby-Friendly USA – NOT Acceptable

Focus on the BFHI rather than the mark– Acceptable
(name) State Program to support the Baby-Friendly Hospital Initiative
(name) State Committee for Baby-Friendly Hospital Initiative
(name) Training designed to comply with Baby-Friendly Hospital Initiative