Neo-BFHI
The Baby-friendly Hospital Initiative
for Neonatal Wards

# Global pilot testing of the Neo-BFHI package

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2nd Neo-BFHI Conference

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# Plan of the presentation

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- Explain the "why, how and where" of the pilot-testing
- Give some examples of results
- Discuss the impact on the development of the tool

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# Why a pilot-testing?

- To validate the expanded standards and criteria to ensure they reflect a global perspective
- To make sure the assessment questionnaires capture the complexity of neonatal care
- To evaluate the feasibility, acceptability and comprehensibility of the questionnaires in a NICU setting
- To explore the pertinence of using the methodology developed in Quebec to measure compliance with the Neo-BFHI standards for either assessment or monitoring purposes

# How was pilot-testing performed?

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Sites received the following documents:

- A draft of the Core document with the Standards and Criteria
- The Assessment Tool with 5 questionnaires (paper and computarized)
- A questionnaire for the interviewer and one for participating mothers and staff that participated.

Interview with staff
Pilot test in Argentina

- Instructions to question at least 2 mothers and 2 staff members, and review the other questionnaires

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# Who participated?
# 2 pilots in 2013-2015

**Americas**
Argentina
Brazil
Canada
United States

**Asia**
Kuwait
Philippines

**Oceania**
Australia
New Zealand

**Europe**
Belgium
Croatia
Denmark
Estonia
France
Greece
Ireland
Luxembourg
Poland
Russia
Spain
Sweden

# Confidentiality

of the Assessment Tool:

An important concern

Confidentiality Agreement

## The NEO-BFHI: The Baby-Friendly Hospital Initiative Expanded For Neonatal Intensive Care

The Neo-BFHI is a project being proposed by the Nordic and Quebec Working Group. The active members of the group are listed below. You can find more information about the project in the ICLA website (http://www.ilca.org/i4a/pages/index.cfm?pageid=4214). This document contains a confidentiality agreement in the context of the pilot testing undertaken by the Working Group. It will be done by or in collaboration with the BFHI Country Coordinators.

The general objectives of the project are:

- To develop and adapt existing BFHI criteria to protect, promote and support breastfeeding in the neonatal ward. These expanded criteria are included in a Core document.
- To develop assessment, self-assessment and monitoring tools to measure compliance with the standards outlined in the Neo-BFHI Core document. The assessment tool is for certification purposes and is CONFIDENTIAL.
- To conduct an evaluation of the feasibility, acceptability and comprehensibility of using the assessment tool, and validate its appropriateness for use in certification of neonatal wards.

The final version of the confidential Assessment Tools will be sent to BFHI Country Coordinators after being revised for use and adaptation in each of their countries.

As a participant in the pilot testing of the Assessment Tool expanded to include the Neo-BFHI,
I _____ (print name) agree to:

1. Keep all the draft documents received during the pilot testing confidential by not discussing or sharing the information in any form or format with anyone other than the Nordic and Quebec Working Group or BFHI Country Coordinators;
2. Keep all draft documents in any form or format secure while they are in my possession;
3. Return all information in any form or format to the Nordic and Quebec Working Group or BFHI Country Coordinators when I have completed the pilot testing tasks;
4. After performing the pilot test, erase or destroy all draft documents in any form or format that are not returnable to the Nordic and Quebec Working Group or BFHI Country Coordinators (e.g. information stored on a USB or computer hard drive).

Participant:

_____ _____
(Print name) (Signature)

_____ _____
(Titles/positions) (Institutions)

_____
(Date)

If you have any questions or concerns about this study, please contact any of the active members of the Nordic and Quebec Working Group. The contact information is in the next page.

# 1st International Pilot-Testing (2013-14)
# Sample sizes and description (8 countries)

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| 2013-14 | Argentina | Brazil | Croatia | Philippines | Quebec | Total |
|---|---|---|---|---|---|---|
| HOSPITAL | 1 BFHI certified | 4 | 1 | 1 | 3 (1 BFHI) | 10 hospitals |
| STAFF | 1 nurse 1 MD | 9 nurses 3 MDs 9 others | 2 nurses | 2 nurses | 29 nurses 3 MDs | 48 staff |
| MOTHERS | 2 | 22 | | 2 | 74 | 94 mothers |

* Interviews mean duration: staff **36 min**, mothers **28 min**
*(consider familiarity and translation)*

- Australia, Belgium and Sweden: No data on sizes

# Assessment feasibility, acceptability and comprehensibility

## Questions for the interviewer

**Version: October 27, 2014**

Please answer the following questions after each interview or after a group of interviews. You can use a paper version of this document, or type your answers here. You can add pages, if needed.

*1) Related to the QUESTIONNAIRES for staff and mothers:*

**For STAFF:**

1) Does each question relate directly to the criteria it is supposed to measure?
   **Yes**

2) Is every respondent able to answer every question (unless instructed otherwise)?
   **Yes - Medical staff in the unit assessed would not meet the educational standards and experience with breastfeeding to complete the questionnaire**

3) Is each question phrased so that all respondents interpret it the same way?
   **Yes**

4) Do the questions provide answers to what you need to know (and not for example what would be nice to know?)
   **Yes**

5) Please provide any suggestions for improvements to the staff questionnaire:

   **Target different levels of clinical staff**

Comment: **Paper version takes some time to be comfortable with . Electronic works much better_**

**Questions for the respondent** — Mother

*Thanks for participating in this research project.*

*In a scale of 1 to 5, how would you grade the following statement regarding your participation to this research project?*

**SCALE:**
**1 = strongly disagree**
**2= somewhat disagree**
**3= nor agree nor disagree**
**4= somewhat agree**
**5 = strongly agree**

**Concerning the interview:**

1. I felt comfortable answering the questions
   1 2 3 4 5
2. The length of the interview was acceptable
   1 2 3 4 5
3. This kind of interview should be done face-to-face
   1 2 3 4 5
4. This kind of interview should be done over the phone
   1 2 3 4 5

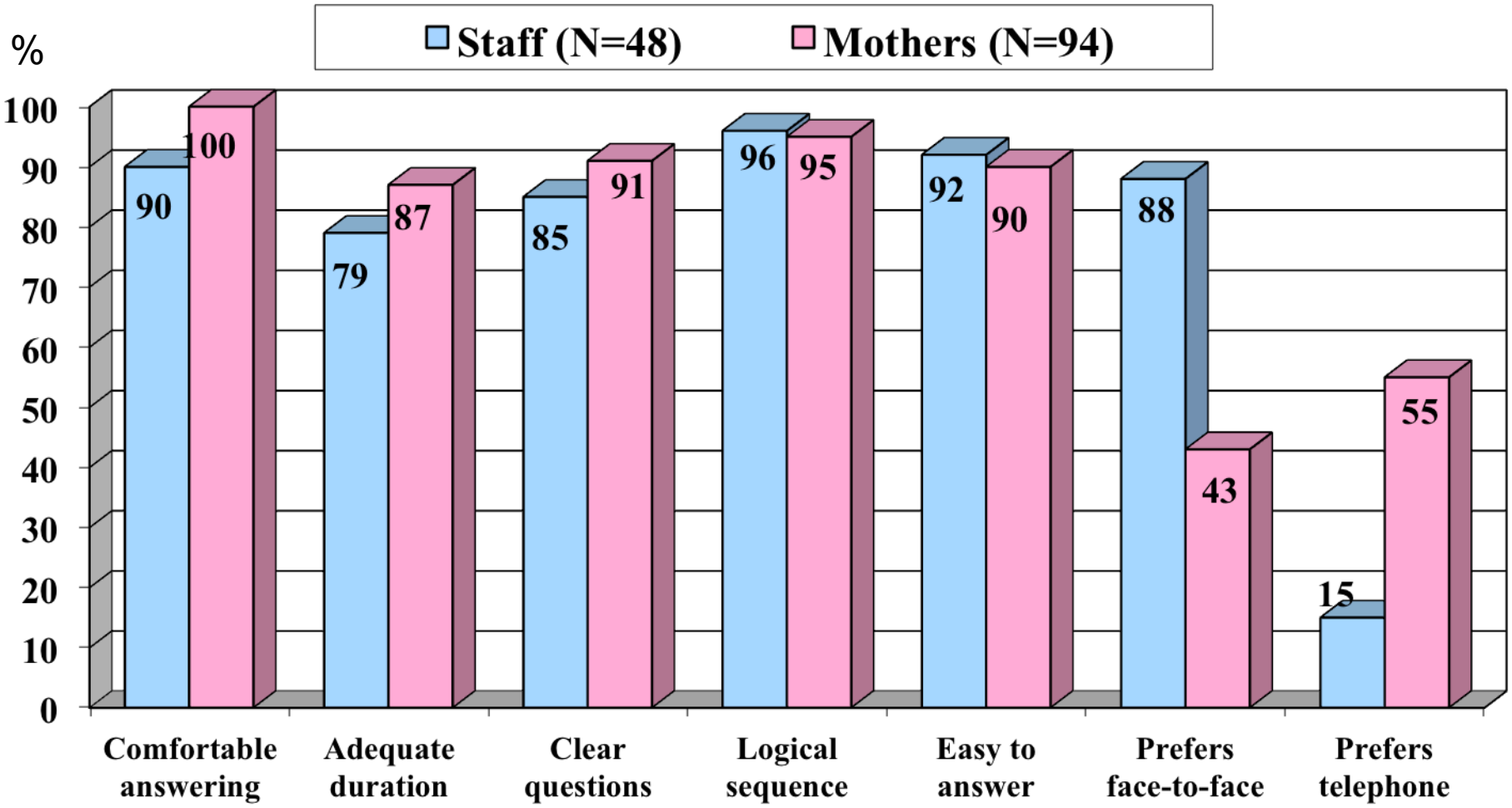
**The questions were:**

5. clear and understandable (if not, identify any questions that should be modified)
   1 2 3 4 5

6. asked in a logical order
   1 2 3 4 5
7. easy to answer
   1 2 3 4 5

Commentaires : A little long. Feels like a test - bit stressful. Word it better: "what were some of the useful things you were told" would sound less like judgement.

# 1st International Pilot-Testing Questionnaire acceptability and comprehensibility




* Percent that answered somewhat agree or strongly agree

# 2nd International Pilot-Testing (2014-15)
# Sample sizes and description (15 countries)

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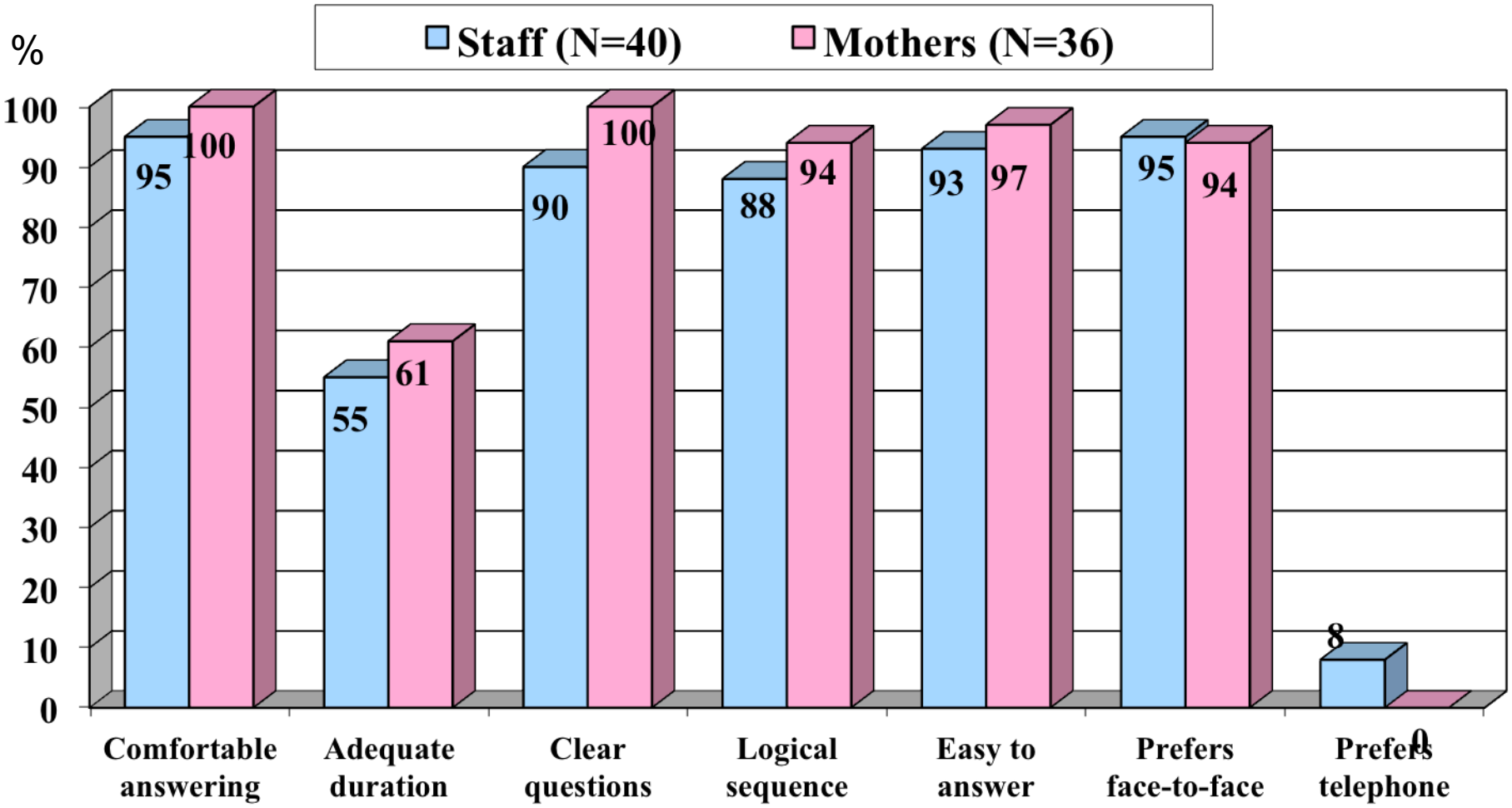
| 2014 | Arg | Au | Be | Ca | Cr | Dk | Es | Fr | Gr | Ku | Lux | NZ | Phi | Ru | Sp | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| HOSPITAL | 1 | 2 | 1 | 3 | 1 | 1 | 1 | 2 | 4 | 1 | 1 | 1 | 2 | 6 | -- | 27 |
| STAFF | 4 | 2 | 2 | 9 | 3 | 1 | 2 | 4 | 14 | 2 | 1 | 2 | 6 | 12 | 4 | 68 |
| MOTHERS | 3 | 1 | 2 | 6 | 2 | 1 | 2 | 2 | 11 | 2 | 2 | 1 | 2 | 12 | -- | 49 |

Arg: Argentina
Au: Australia
Be: Belgium
Ca: Canada
Cr: Croatia
Es: Estonia
Dk: Denmark
Fr: France
Gr: Greece
Ku: Kuwait
Lu: Luxembourg
NZ: New Zealand
Phi: Philippines
Ru: Russia
Sp: Spain

* Interviews mean duration: staff **43 min**, mothers **39 min**
*(consider familiarity and translation)*

# 2nd International Pilot-Testing Questionnaire acceptability and comprehensibility




* Percent that answered somewhat agree or strongly agree

# 2nd International Pilot-Testing Head nurse questionnaire acceptability and comprehensibility

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| 2014 – 15 HEAD NURSE (HN) | | | | | | |
|---|---|---|---|---|---|---|
| **Appreciation and duration of interviews** | Argentina (1 HN) | Croatia (1 HN) | Kuwait (1 HN) | Greece (4 HN) | New Zealand (1 HN) | Philippines (2 HN) |
| **Felt comfortable answering the questions** | **100%** | **100%** | **100%** | **100%** | **100%** | **100%** |
| **Length of interview acceptable** | **100%** | **100%** | **100%** | **100%** | **100%** | **100%** |
| **Questions were clear & understandable** | **100%** | **100%** | **100%** | **100%** | **0%** | **100%** |
| **Questions were asked in a logical order** | **100%** | **100%** | **100%** | **100%** | **100%** | **100%** |
| **Questions were easy to answer** | **100%** | **100%** | **100%** | **100%** | **100%** | **100%** |
| **Interview should be face-to-face** | **100%** | **100%** | **100%** | **100%** | **100%** | **100%** |
| **Interview should be over the phone** | **0%** | **0%** | **0%** | **0%** | **0%** | **0%** |

*** Percent that answered somewhat agree or strongly agree**

# International Pilot-Testing
# Compliance with Neo-BFHI Ten Steps – Examples

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***Presented in the conference but deleted from the file posted in website***

# International pilot-testing
# Analysis of feedback

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- **MANY comments, THANKS!!!**
- **General comments:**
  - Structure, length, choice of answers, scale for GPs, English
- **Comments we could resolve**:
  - Documenting informed consent added to GP1
  - NICU open to parents without levels changed in GP 2 and Step 7
- **Comments we put in "stand-by" for future revisions**
  - Fortifiers considered as a medication instead of a BMS in Step 6
- **Comments we decided not to change**
  - How to assess adequacy of breastfeeding/lactation information hospitalized pregnant women at risk of premature birth in Step 3
  - Separate tools for neonatal units of maternity & children hospitals

# International Pilot-Testing
# Lessons learned

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- The pilot-test revealed the challenges of measuring Baby-Friendly practices in neonatal settings, given the complexity and variability of neonatal care.
- It is feasible and acceptable to use NICU managers/staff and mothers as a source of information to monitor the Neo-BFHI and certify neonatal units as "Baby-Friendly".
- Mothers interviewed by phone or skype were more favorable to this type of interview.
- Present day technology facilitates international collaborative BFI-related projects when there is a shared interest in a particular subject.

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# Questions or comments?