**Application form**

**Stage 1 assessment**

**University**

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| **University name:** |  |
| **Contact name, email & telephone:** |  |
| **Assessment date(s):** |  |

**Introduction**

In order for newly qualified midwives and specialist community public health nurses/health visitors to be able to practice in accordance with Baby Friendly standards, their pre-registration education programmes must equip them with the necessary knowledge and skills. Stage 1 of the Baby Friendly assessment procedure for these disciplines is designed to ensure that the planned curriculum will enable appropriate learning to take place. Please provide information which is as full as possible in relation to each section.

**The Baby Friendly Initiative standards for Universities**

In order to ensure the highest level of education in support of the Baby Friendly standards, all appropriate departments in universities providing education to student midwives and/or health visitors/public health nurses should:

1. Make a written commitment to adhere to these standards.
2. Ensure all students are equipped with the knowledge and skills to implement the Baby Friendly Standards in the relevant clinical setting.
3. Provide teaching without involvement, sponsorship or promotional materials from the artificial feeding industry.

**Additional documents we will need**

The information provided in each section of the submission form needs to be supported by documents which provide confirmatory evidence of the information given. These may include:

* The document that best explains the overall programme structure – e.g. curriculum, module specifications etc.
* Relevant lesson plans, slides, teaching aids to provide examples of methods and content used
* Examples of assessments used – e.g. examination papers, OSCE forms, practice based assessments etc.
* An example of the documentation used to record clinical practices / competence
* Evidence of the education of lecturers to Baby Friendly standards
* Evidence of the orientation of practice mentors to Baby Friendly standards

**What do I do once I am ready to submit?**

Please contact the Baby Friendly office to arrange an assessment date, and we will confirm who your assessor will be. You will need to send a copy of this form and related documents electronically to [bfi@unicef.org.uk](mailto:bfi@unicef.org.uk) at least **two weeks before the assessment date.**

**Declaration**

The application formshould be signed by the Head of Department who will confirm agreement with the submission and the information provided.

🖳 To help you to complete this form and for more detailed guidance on the standards for universities, please refer to the *Guidance notes for implementing the Baby Friendly Initiative standards in universities* or contact the Baby Friendly office on [bfi@unicef.org.uk](mailto:bfi@unicef.org.uk)

We care about keeping your data safe; for more information about Unicef UK’s privacy policy please visit [unicef.org.uk/legal/cookies-and-privacy-policy/](https://www.unicef.org.uk/legal/cookies-and-privacy-policy/)

*Please complete the following information about your programme*

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| **Head of Department** | |
| **Name** |  |
| **Job title** |  |
| **Telephone** |  |
| **Email address** |  |
| **Lead Midwife for Education or**  **Programme Lead for Specialist Community Public Health Nursing/Health Visiting** | |
| **Name** |  |
| **Job title** |  |
| **Telephone** |  |
| **Email address** |  |
| **Baby Friendly lead for implementing the Baby Friendly standards** | |
| **Name** |  |
| **Job title** |  |
| **Telephone** |  |
| **Email address** |  |

**Programme details**

*Please complete the following information about your programme*

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| **Programme title (e.g. BSc (Hons) and full name of the programme** |  |
| **Length of Programme** |  |
| **Number of cohorts per year** |  |
| **Number of students in each cohort** |  |
| **Please list the Trusts that are placement areas for your students, and the Baby Friendly award held for each area** | |
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| **Programme structure**  **Please give a brief overview of the structure of the programme *or* in which documents and where within the document the assessor can find the programme structure explained (e.g. Chapter 1, page 6 etc):** | |
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**Implementing the UNICEF UK Baby Friendly standards in universities:**

**Learning outcomes and topic areas**

*Please confirm ✓ that each learning outcome is covered. It is recognised that midwifery and health visiting programmes will give a greater focus to some topics and less to others – please make comments below if required.*

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| **Theme 1** | | **Understand breastfeeding** | | | | | | | **✓** |
| **Learning Outcomes** | | By the end of the course students will:   1. Have sufficient knowledge of anatomy of the breast and physiology of lactation to enable them to support mothers to successfully establish and maintain breastfeeding. 2. Appreciate the importance of human milk and breastfeeding on the health and wellbeing outcomes of mothers, babies and the wider family. | | | | | | |  |
| **Topics to include** | | * Anatomy of the breast and changes in pregnancy * Physiology of lactation and hormonal influences on both milk production and instinctive mothering behaviour * The role of the Feedback Inhibitor of Lactation (FIL) * Fetal glucose homeostasis and counter-regulation * Breastfeeding and public health; for the mother and baby, as well as the societal, environmental and economic impact. * Constituents of colostrum and human milk, including protective and developmental factors * Constituent differences between human milk and infant formula * Epigenetics and the microbiome related to infant feeding and very early child development * Applying theory to practice; implications for current midwifery and health visiting practice | | | | | | | |
| **Comments:** | | | | | | | | | |
| **Theme 2** | | **Support infant feeding** | | | | | | | **✓** |
| **Learning Outcomes** | | By the end of the course students will:   1. Have an understanding of infant feeding culture within the UK and the various influences and constraints which impact on women’s infant feeding decisions. 2. Be able to apply their knowledge and understanding of the physiology of lactation to support women to get breastfeeding off to a good start. 3. Be able to apply their knowledge of physiology and the principle of reciprocity to support mothers to keep their babies close and respond to their cues for feeding, love and comfort. 4. Have the knowledge and skills to support mothers and babies to maximise breastmilk and breastfeeding, to continue to breastfeed for as long as they wish and to introduce solid foods at an appropriate time. 5. Be able to support parents who formula feed to do so responsively and as safely as possible. 6. Understand the importance of the WHO International Code of Marketing of Breastmilk Substitutes and subsequent WHA resolutions (the Code) and how it impacts on practice. | | | | | | |  |
| **Topics to include** | | * Overview of infant feeding culture in the UK and what has influence changing breastfeeding rates in the UK and worldwide. * Importance of skin-to-skin contact to support a good start to breastfeeding and mothering (for all mothers irrespective of feeding type) and how to facilitate this within practice. * Responsive feeding and how mothers and babies develop a reciprocal relationship when they remain close (to include feeding and comfort cues). * How a baby breastfeeds – understanding principles and mechanisms of attachment and positioning for effective feeding. * How to support mothers and babies as they ‘learn’ to breastfeed including an understanding of instinctive behaviour, e.g. laid back breastfeeding. * Recognising effective breastfeeding; assessing milk production and milk transfer, assessing a breastfeed in practice. * Supporting breastfeeding mothers to maximise the amount of breastmilk their baby receives. * Responsive bottle feeding, including how to hold a baby during a bottle feed and how to pace the feeds. * Support parents who are bottle feeding to minimise the risks, to make up feeds safely and to understand how to sterilise equipment. * For mothers who are formula feeding, how and where to access independent information on infant formula. * Appropriate introduction of other foods including developmental readiness, ways to feed and achieving a balanced diet. * Practical skills reviews. * Evidence based interventions that promote, protect and support breastfeeding – including the WHO/Unicef Baby Friendly Initiative. * The WHO International Code of Marketing of Breastmilk Substitutes and subsequent resolutions: rationale, history and impact on practice. | | | | | | | |
| **Comments:** | | | | | | | | | |
| **Theme 3** | **Support close and loving relationships** | | | | | | | | **✓** |
| **Learning Outcomes** | By the end of the course students will:   1. Develop an understanding of the importance of secure mother-infant attachment and the impact this has on their health and emotional wellbeing. 2. Be able to apply their knowledge of attachment theory to promote and encourage close and loving relationships between babies, their mothers and families, irrespective of feeding method. | | | | | | | |  |
| **Topics to include** | * Overview of infant brain development and importance of love and nurture to ensure optimal outcomes. * Overview of attachment theories and how this applies to practice. * Supporting parents through pregnancy, birth and beyond to develop close and loving relationships with their baby. | | | | | | | | |
| **Comments:** | | | | | | | | | |
| **Theme 4** | | **Manage the challenges** | | | | | | | **✓** |
| **Learning Outcomes** | | By the end of the course students will:   1. Be able to apply their knowledge of the physiology of lactation and infant feeding to support effective management of challenges which may arise at any time during breastfeeding. 2. Have an understanding of the special circumstances which can affect lactation and breastfeeding (e.g. when mother and baby are separated, including preterm and sick infants) and be able to support mothers to overcome the challenges. 3. Draw on their knowledge and understanding of the wider social, cultural and political influences which undermine breastfeeding, to promote, support and protect breastfeeding within their sphere of practice. | | | | | | |  |
| **Topics to include** | | * Manage common breastfeeding challenges for both mother and baby e.g. sore nipples, engorgement, mastitis, thrush, insufficient milk supply, hypoglycaemia, jaundice etc., including appropriate referral. * Expression of breastmilk to include hand and pump expression technique. * Initiating and sustaining lactation when mother and baby are separated including sick and preterm infants. * Supporting parents to stay with and care for their baby in transitional and neonatal care. * Maximising human milk feeding and breastfeeding where breastfeeding may be compromised. * Supporting breastfeeding when there are maternal health issues. * Role of specialist infant feeding support, peer support groups and voluntary organisations. * Situations when breastfeeding is not recommended, use of donor human milk. * Normalising breastfeeding: protecting, promoting and supporting breastfeeding; exploring the politics of breastfeeding that impact on practice and care of women. | | | | | | | |
| **Comments:** | | | | | | | | | |
| **Theme 5** | | **Promote positive communication** | | | | | | | **✓** |
| **Learning Outcomes** | | By the end of the course students will:   1. Have an understanding of the principles of effective communication and current thinking around public health promotion strategies and approaches. 2. Be able to apply their knowledge of effective communication to initiate sensitive, mother centred conversations with pregnant women and new mothers. 3. Have the knowledge and skills to access the evidence-based information that underpins infant feeding practice and know how to keep up to date (e.g. e-alerts, research summaries). | | | | | | |  |
| **Topics to include** | | * Debrief of students’ personal infant feeding stories. * Effective communication skills; theory and practice. * Importance of an authentic presence, listening and reflecting back for effective communication. * Importance of compassion, sensitivity and kindness, * Public health theory and practice; supporting women to make informed decisions, creating an environment when behaviour change is possible. * Mother centred care; theory and practice. * Skills development to support midwives and health visitors to facilitate conversations with pregnant women, new mothers and families. * Skills to support families where English is not the first language. * Skills required for providing telephone support. * Working with others in a multidisciplinary environment to support infant feeding. * Sensitive communication of safer sleep messages. | | | | | | | |
| **Comments:** | | | | | | | | | |
| **Taught sessions** | | | | | | | | | |
| *Please complete the table below to outline for the assessor the relevant taught sessions within the programme. Relevant taught sessions are those where the majority\* of the content is related to addressing the Baby Friendly Initiative learning outcomes.*  **The example is for illustration only and can be deleted prior to completing the table.**  *\* The Baby Friendly learning outcomes will be touched on in many of the students’ taught sessions. However, for the purposes of this assessment, only those where the majority of the content is addressing Baby Friendly themes / learning outcomes need be included here.* | | | | | | | | | |
| **Taught session title** | | | **Year / module** | **Content** | **Methods** | **Duration** | **Theme** | **Learning outcomes** | |
| ***Example***  *Positioning and attachment of the baby at the breast* | | | *Year 1*  *Module – Women and reproduction (number)* | *Revision of anatomy and physiology of breast based on student workbooks (see below).*  *Practice skills workshop supporting mothers to position and attach the baby at the breast* | *Practice skills workshop*  *Quiz*  *Group discussion*  *Scenario based skills* | *2 hours* | *1*  *2* | *1*  *2* | |
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| **Self directed / other learning** | | | | | |
| *Please complete the table below to outline for the assessor any non-taught learning that the student is expected to undertake which is directly related to the Baby Friendly learning outcomes.*  **The example is for illustration only and can be deleted prior to completing the table.** | | | | | |
| **Title** | **Description** | **Year / module** | **Expected learning time** | **Learning outcomes covered** | **Assessed** |
| ***Example***  *Baby Friendly Initiative workbook* | *3 workbooks for each year of Programme containing activities, quizzes, required reading list and practice scenarios linking theory to practice. Enables students to consolidate and apply learning to practice* | *Year 1, 2 and 3* | *20 hours per year* | *All* | *Reviewed by practice lecturer and mentor with student at the end of each year* |
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| **Assessment of learning** | | | | | |
| *Please complete the table below to outline for the assessor how the Baby Friendly Initiative learning outcomes are assessed during the Programme (do not include practice based assessments – see below).*  *Please include in the description whether the assessment is formative, summative, compulsory course work etc.*  **The example is for illustration only and can be deleted prior to completing the table.**  **Please note that it is a requirement that Baby Friendly accredited university programmes to include a formal assessment of students’ ability to support mothers with positioning and attachment, and hand expression. Therefore, details of that assessment must be included here.** | | | | | |
| **Title** | **Description** | **Year / module** | **Expected learning time** | **Learning outcomes covered** | **Assessed** |
| ***Example***  *Baby Friendly Initiative workbook* | *3 workbooks for each year of Programme containing activities, quizzes, required reading list and practice scenarios linking theory to practice. Enables students to consolidate and apply learning to practice* | *Year 1, 2 and 3* | *20 hours per year* | *All* | *Reviewed by practice lecturer and mentor with student at the end of each year* |
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| **Practice based assessment of learning** |

*Please describe briefly how the students’ competence to practice in accordance with the Baby Friendly Standards is assessed during clinical placements. Include the documentation that is required and details of who is responsible for declaring the students as fit for practice.*

**Please note that it is a requirement of Baby Friendly accredited midwifery programmes to expect students to holistically support at least 20 mothers with breastfeeding and of accredited health visiting programmes to expect students to holistically support at least 10 mothers. Details of how this requirement is addressed should be included here.**

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| **Orientation of mentors to the Baby Friendly standards** |

*Please describe briefly how the mentors are orientated to the Baby Friendly standards and what action is taken to ensure that they continue to be updated.*

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| **Education for lecturers** |

*Please describe briefly how the lecturers are educated to support them to teach, support and assess the Baby Friendly standards according to role and responsibility.*

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🖉 **Signature page – Stage 1 assessment**

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| **Declaration by Head of Department** |

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| **Name of university:** |  | | |
| **I confirm that the information in this application form is accurate, to the best of my knowledge** | | | |
| **Name:** |  | | |
| **Job title:** |  | | |
| **Signed** |  | **Date:** |  |

**The application form must be signed by Head of Department and sent with accompanying documents direct to your assessor, however please also send a copy by email to** [**bfi@unicef.org.uk**](mailto:bfi@unicef.org.uk)