

tive communication skills is a key element. Adopting a non-judgemental attitude can therefore create a positive relationship with the patient and lead to a successful partnership for quitting.

- ❖ To help change attitudes by delivering a programme that provides help that is simple to understand, relatively easy to comply with and offers something to every smoker who is sufficiently motivated to attend.
- ❖ To support and empower patients who are ready to quit smoking and provide encouragement for those who are contemplating quitting.
- ❖ To identify lifestyle risk factors and promote healthier choices.
- ❖ To encourage hospital colleagues to take a proactive role with their smoking patients.
- ❖ To research the cardiovascular effects of smoking and cessation of smoking.

The nurse sees patients referred to her from the outpatients, inpatients and cardiac rehabilitation departments. Each patient's smoking status, smoking habits and motivation to quit is assessed; also the model of change devised by Prochaska and Diclemente (1984)<sup>9</sup> is helpful in identifying the individual's position within this cycle of events. This assessment is important in identifying individual's needs, thus enabling the targeting of the appropriate intervention. Recent guidelines (Raw *et al* 1998)<sup>10</sup> have stated the importance of determining the level of intervention required.

At present, the smoking cessation work being carried out involves counselling on an individual basis over a six week period. This service targets smokers at risk or who have coronary heart disease and, as they are a highly dependent group, this might have an impact on cessation rates. Thus the service aims not for total abstinence but to move patients from one stage of the cycle to another.

References available from *The Office for Health Gain*

For further information please contact Cannel Doherty, Smoking cessation nurse specialist. CREST. St. James's hospital. Dublin. Telephone 4103580 14103000 Bleep 120 E-mail cdoherty@stjames.ie

# BABY FRIENDLY HOSPITAL INITIATIVE IN IRELAND

Genevieve Becker, National BFHI Coordinator, National HPH Network

Breastfeeding is best. In 1994, the Department of Health and Children stated a commitment to promote breastfeeding as the infant feeding method of choice. The National Breastfeeding policy for Ireland endorsed the WHO/UNICEF *Ten Steps to Successful Breastfeeding* as the basis for educational and service development towards the achievement of an overall increase in national breastfeeding rates.

In line with a commitment to support joint action, the Irish National HPH Network became the authorising body for the WHO/UNICEF Baby Friendly Initiative in Ireland, in 1998. The Baby Friendly Hospital Initiative (BFHI) is a global campaign by the World Health Organisation and UNICEF, which recognises that implementing best practice in the maternity service is crucial to the success of programmes to promote breastfeeding.

The goals of the BFHI are:

- ❖ To transform hospitals and maternity facilities through the implementation of the "Ten Steps to Successful Breastfeeding".
- ❖ To end the practice of marketing and distribution of free and low cost supplies of breastmilk substitutes to maternity wards and hospitals.

The Initiative was launched in 1991 and by the end of 2000 more than 15,000 hospitals/maternity units worldwide, including over 300 in Europe, had been officially recognised as Baby Friendly.

The initiative is about the progress towards supportive practices as much as the achievement of awards. Hospitals/maternity units start by carrying out a self-appraisal of their practices using the checklist provided. This checklist is returned to the BFHI co-ordinator

with an action plan to address one or more areas that need to be addressed. It is at this point that hospitals/units in Ireland are designated as *Members of the Baby Friendly Hospital Initiative*.

The hospital/unit is then assessed according to the globally established criteria, either informally as part of assistance in developing plans to improve standards or an official external assessment for the Baby Friendly Award. If a hospital/unit meets the global criteria fully and has a high breastfeeding rate it can be awarded *Baby Friendly Status*.

A National Level Award for hospitals/units who have high standards but do not reach the breastfeeding rate required of the international standard is also available. However, if the hospital/unit is unable to meet the global criteria fully at this time, a Certificate of Commitment is awarded and the hospital/unit is considered *Committed to Baby-Friendly*.

Hospitals/units are required to provide yearly evaluation/audit reports, plan of action for continued improvement and can receive spot checks.

The Initiative was adopted as a project of the Irish Health Promoting Hospitals Network in autumn 1998. In May 2001, out of a total of 22 maternity units/hospitals in Ireland, 17 were members of the Initiative, with 2 more in the process of membership. Of the 17 members, two hospitals have Certificates of Commitment with one further hospital in the process. Though the focus is on maternity services, the Initiative is expanding with a similar project for paediatric units in the pilot stage as well as a breastfeeding supportive workplace project with participating hospitals in the planning stage.

The Baby Friendly Hospital Initiative can be viewed as a quality initiative

