



Call for Applications (CFA) Georgia 5-STAR Hospital Initiative

Call for Applications:

The Georgia SHAPE Initiative announces the second round of funding for the Georgia 5-STAR Hospital Recognition Program. This program will support activities to recognize hospitals as they move toward Baby-Friendly® designation. One star will be awarded for every two steps implemented of *The Ten Steps to Successful Breastfeeding*, as defined by Baby-Friendly USA, the official credentialing agency of the Baby-Friendly Hospital Initiative (BFHI). Hospitals will be required to complete the Georgia Breastfeeding Program-Scorecard Tool to receive stars.

The BFHI is a WHO/UNICEF program that encourages and recognizes hospitals that offer optimal promotion and support for breastfeeding, including supportive hospital policies and practices, staff education and post-discharge community referrals, collectively referred to as *The Ten Steps to Successful Breastfeeding*.

The program will provide funding opportunities for up to six (6) Georgia hospitals. Applicants are eligible to receive up to \$7,000.00 to defray costs associated with improving the quality of maternity care related to breastfeeding and pursuing Baby-Friendly® designation. The Georgia Department of Public Health will provide a one-week Train-the-Trainer session for hospital staff and monthly technical support from BFHI experts. Successful applicants will demonstrate intent to create policy, practice and environmental improvements within their hospital to support their BFHI efforts.

The \$7,000.00 award may be used to pay the required fees for the 4-D Pathway to Baby-Friendly Designation or to provide reimbursement for costs associated with staff training and travel to attend the required two (2) one (1) day Collaborative Learning Sessions and one (1) five (5) day Train-the-Trainer Session.

Up to (6) successful applicants will be selected and will represent:

- **Strong institutional capacity and support of executive leadership**
- **Institutions serving a high percentage of minority and Medicaid-eligible families**
- **Institutions with low breastfeeding initiation rates and high rates of pre-discharge formula supplementation of breastfeeding newborns**
- **Institutions serving a culturally diverse population**
- **A variety of geographic areas, including rural and medically underserved regions**
- **Hospitals at various stages of implementation of the *Ten Steps to Successful Breastfeeding* (see Appendix A)**
- **Various hospital classification levels (e.g., regional perinatal center, etc.)**

Background Information:

This funding opportunity has become available as one component of the Georgia collaborative initiative to prevent obesity through Governor Nathan Deal's Georgia SHAPE initiative for health, fitness and nutrition. Numerous studies have confirmed that breastfeeding reduces the risk of obesity. Any breastfeeding vs. no breastfeeding confers from 4 to 24% reduction in obesity, whereas exclusive breastfeeding for 6 months vs. any other form of feeding results in a 31% decrease in the prevalence of obesity. Increasing breastfeeding rates in Georgia is therefore critical to reducing obesity rates.

Healthy People 2020 set national goals for breastfeeding, specifically to increase the rate of breastfeeding initiation to at least 81.9% in the early postpartum period, and increase the maintenance rates of breastfeeding to 60.6% at six months of age and 34.1% at one year of age. Additional goals include targets for exclusive breastfeeding.

Although the overall incidence and duration of breastfeeding has increased steadily over the past decade, Georgia rates still fall short of the Healthy People 2020 goals, and rates of exclusive breastfeeding are especially problematic. In Georgia, 26.6% of breastfeeding infants are supplemented even before leaving the hospital.¹

Georgia ranked 40th in the U. S. in breastfeeding care delivered in maternity facilities according to research conducted by the Centers for Disease Control and Prevention (CDC)². Therefore, opportunities exist within Georgia maternity hospitals to improve the care provided in order to better promote health and wellness early in the lives of children. Published evidence shows that implementation of *The Ten Steps* results in dramatically increased breastfeeding initiation and exclusivity rates and decreased rates of breastfeeding-preventable illnesses³.

¹ <http://www.cdc.gov/breastfeeding/data/reportcard2.htm>

² <http://www.cdc.gov/breastfeeding/pdf/mPINC/states/mPINC2011Georgia.pdf>

³ BIRTH 32:2 June 2005; JAMA 2001; 285(4):413-420).

Application Guidelines and Submission Procedure:

The attached application form must be completed by each applicant.

Maximum Award: \$7,000.00

Project Period: 8 months: February 2014 through September 2014

Copies to submit: 1 original application and one hard copy via US Mail plus
1 electronic copy via e-mail

Page Maximums: Please note space limitations in each section of the application.

**Send Application by
1/31/2014 to:**

By Mail:

Georgia Department of Public Health/MCH Program
Georgia 5-STAR Hospital Initiative Application
Attn: Rhonda Simpson, Perinatal Health Director
2 Peachtree Street, NW, 11th Floor
Atlanta, GA 30303-3142

By E-Mail: rsimpson@dhr.state.ga.us
rimagee@dhr.state.ga.us

Grant Deadline: Application must be received by 3/17/2014, 5:00 PM (Eastern Time)
Application notified by 4/1/2014, 5:00 PM (Eastern Time)

Requirements for the Application:

- Only hospitals/birthing centers in Georgia with a maternity service (births routinely occurring in the facility) may apply for this funding.
- In accordance with CDC guidelines, preference will be given to hospitals serving minority and underserved populations.
- Hospitals must commit to the 4-D Process as defined by Baby-Friendly USA and complete, during the project, at least four (4) of *The Ten Steps to Successful Breastfeeding*, including Step One: "Have a written breastfeeding policy that is routinely communicated to all health staff." For more information about the 4-D Pathway: <http://www.babyfriendlyusa.org/eng/04.html> See Appendix A for a list of *The Ten Steps to Successful Breastfeeding*.
- Hospitals are required to attend the following meetings: (Location TBD)
 - Pre-Project Collaborative Learning Session (4/9/2014)
 - 5-day Train-the Trainer Session (5/5/2014-5/9/2014)

- Project Close Out Meeting (9/25/2014)

Applications must include the following:

- Seven (7) signatures:
 - The hospital Chief Executive Officer (or Chief Operating Officer); and
 - Six (6) members of a multi-disciplinary Leadership Team who will coordinate the project; the team must include at least one physician and management level hospital employees from Pediatrics, Obstetrics, Women's Services or Maternal & Child Unit, Labor and Delivery and Lactation Services.

Required Components: Please only use space allocated. See Application Form, which begins on page seven (7) of this document.

Element 1 – Capacity Summary (20 points): This section will focus on the organization's mission and vision statement as well as demographic data and current breastfeeding rates.

Element 2 – Potential Impact (15 points): This section will focus on the organization's work to improve health outcomes for vulnerable populations and strategies to address issues of cultural competency.

Element 3 – Project Description (35 points): This section will focus on the steps and processes used to make quality improvements to maternity services, experience with implementing the Baby-Friendly Hospital Initiative, as well as identifying any barriers and the strategies used to overcome these obstacles. Staff education/training and community resources to support the program will also be discussed.

Element 4 - Evaluation (15 points): This section will focus on the criteria your organization will use to evaluate the success of the project, using measurable goals and objectives, evaluation tools, etc.

Element 5 – Budget (5 points): This section will focus on the budget, indicating all income, expenditures and the source of income/funding. Please note any in-kind or matching funds that will support your efforts as part of your budget detail.

Element 6 – Sustainability (10 points): This section will describe efforts to sustain improvements and continue to develop the program after the grant ends.

Requirements for Participation:

All successful applicants must commit to participate in the following four (4) project activities:

1) A pre-project Collaborative Learning Session for Leadership Teams from all participating hospitals. Ideally your team would include, in addition to at least one physician, four or more management level employees representing Pediatrics, Obstetrics, Nursing/Midwifery, Mother/Baby and Lactation Services.

A minimum of three (3) members of the Leadership Team must attend the one-day session:

- One physician
- One Mother/Baby or Postpartum Unit Manager and
- One Lactation Consultant

Team members should reserve all of the following dates:

- Pre-Project Collaborative Learning Session (4/9/2014)
- 5-day Train-the Trainer Session (5/5/2014-5/9/2014)
- Project Close Out Meeting (9/25/2014)

2) A 5-day Train-the-Trainer session: two or three (2-3) lactation specialists from each participating hospital must attend the entire 5-day training session (provided by DPH and BFHI experts.) The purpose of this 5-day session is to train hospital lactation specialists to provide ongoing breastfeeding education to current (and future) employees. The session will equip hospital staff to teach all 15 topics required for Step Two of *The Ten Steps to Successful Breastfeeding*, employing evidence-based, cost-effective methods. The date for the 5-day Train-the Trainer Session (5/5/2014-5/9/2014) Location to be determined.

3) Monthly technical assistance webinars and as-needed conference calls from BFHI experts.

4) A post-project Collaborative Celebration for Leadership Teams for all participating hospitals. The purpose of this event will be to share accomplishments and lessons learned and to discuss plans for continued progress after the project ends.

5) Provide monthly data to BFHI experts and to GPH Department.

6) Conduct 3 month and 6 month breastfeeding follow-up assessments on a sample of Georgia 5-STAR post-partum moms and submit data reports to GPH Department.

7) Submit Required Reports (Monthly by the 10th Day)

- Georgia 5-STAR Post-Partum Baby Friendly status report 9/30/2014
- Submit bi-monthly activity report to DPH (Template will be provided)
- Baby Friendly pocket guide evaluations are due by 9/30/2014 (Evaluation Tool to be provided)

Additionally, each participating hospital must enter into Baby-Friendly USA's 4-D Pathway, if not already registered, within one week of the start of the project. There is no fee to enter the Discovery Phase (Phase I) on the 4-D Pathway; it requires only a few minutes to complete the online registration form. <http://www.babyfriendlyusa.org/eng/index.html>

Review Process

- Applications received by 3/17/2014 5:00 PM (Eastern Time) will be screened for compliance with the CFA.

- Applications that are incomplete or do not conform to the application requirements will be disqualified.

A diverse review committee will assess each application according to the CFA requirements.

Evaluation Criteria

Applications will be reviewed in accordance with the Evaluation Criteria contained in the CFA.

- Capacity Summary (20 points)
- Potential Impact (15 points)
- Project Description (35 points)
- Evaluation (15 points)
- Budget (5 points)
- Sustainability (10 points)

An application must receive a minimum score of 70 points to be eligible for funding. Georgia Department of Public Health Program staff will review the budget request and may negotiate specific line items that it determines to be inappropriate, excessive or contrary to policy.

Award Notification

Award decisions will be announced on or before 4/1/2014. Applicants selected for funding will be notified by phone and e-mail.

Applicants selected for funding will be responsible for submitting quarterly program and financial updates. A brief reporting template will be made available.

Instructions for Submission of applications

Please mail one original with signatures and one hard copy of your complete application to:

Rhonda Simpson, MS, State Breastfeeding Coordinator
Georgia Department of Public Health/Maternal and Child Health Program
2 Peachtree Street, NW, 11th Floor
Atlanta, GA 30303-3142

Additionally, please send an electronic copy to Rhonda Simpson, Perinatal Health Director, at rlsimpson@dhr.state.ga.us and to Ricky Magee at rimagee@dhr.state.ga.us

Appendix B provides FAQs. If you have additional questions please contact Rhonda Simpson at 404-657-2465.

Application Deadline: All documents (2 hard copies and 1 electronic copy) must be received by 3/17/2014 5:00 PM (Eastern Time)



**Georgia Department of Public Health
Georgia 5-STAR Hospital Initiative Project**

Application Form

Name of Hospital: _____

Address: _____ City _____ ZIP _____

Contact Person Completing Application:

Name, with Credentials: _____

Title: _____

Phone Number: (____) _____

Email Address: _____

Supporting Signatures, printed names, credentials and positions:

1) CEO or COO _____

Printed name, credentials and position _____

2) Pediatrician _____

Printed name, credentials and position _____

3) Obstetrician _____

Printed name, credentials and position _____

4) Director of Women's Services or Maternal and Child Health _____

Printed name, credentials and position _____

5) Lactation Services Coordinator _____

Printed name, credentials and position _____

6) Mother/Baby or Postpartum Unit Manager _____

Printed name, credentials and position _____

7) Labor and Delivery Manager _____

Element 1: Capacity Summary (20 points)

Describe your hospital's mission and vision.

How does this project fit within the mission/vision of the institution?

Number of births per year_____

Percent of births by race and ethnicity in most recent year:

___ % Asian

___ % Biracial

___ % Black

___ % Hispanic

___ % White

___ % Other. Please specify:

Breastfeeding Rates:

- 2013 breastfeeding initiation rate (all infants who did any breastfeeding/all well babies born in 2013). If available, provide rate broken down by race/ethnicity.
- 2013 exclusive breastfeeding rate at discharge (all infants who received only breastmilk/well babies born in 2013). If available, provide rate broken down by race/ethnicity.
 - Do you have an active Breastfeeding Task Force? Y___ N ___
 - If yes, how often does it meet?
 - What services or departments are represented on the Breastfeeding Task Force?
 - Well baby nurses
 - Pediatricians
 - Obstetricians
 - Midwives
 - Patients
 - NICU nurses

- Unit managers
 - Other (please specify)_____
- **Optional:** What was your hospital's most recent mPINC score? Please attach a copy of your report. (The review committee will keep mPINC data strictly confidential.)

Element 2- Potential Impact (15 points) [500 characters]

What hospital practices or procedures are in place to address issues of racial/ethnic disparities? Include information about staff training, if applicable, for cultural and linguistic competency.

Describe a project or specific strategy, if applicable, that your hospital has undertaken to eliminate racial, ethnic, linguistic, or other cultural barriers to healthcare. **[500 char.]**

How would your hospital benefit from participating in the Georgia 5-STAR Hospital Initiative?

Element 3- Project Description (35 points)

Please select the box that best reflects your hospital's status on implementation of each of the Ten Steps

The Ten Steps to Successful Breastfeeding

1. Have a written breastfeeding policy that is routinely communicated to all health staff.
 - Precontemplation
 - Contemplation
 - Preparation/Determination
 - Implementation
 - Maintenance
 - Backsliding
2. Train all health care staff in skills necessary to implement this policy.
 - Precontemplation
 - Contemplation
 - Preparation/Determination
 - Implementation
 - Maintenance
 - Backsliding
3. Inform all pregnant women about the health benefits and management of breastfeeding.
 - Precontemplation
 - Contemplation
 - Preparation/Determination
 - Implementation
 - Maintenance
 - Backsliding
4. Help mothers initiate breastfeeding within one hour of birth.
 - Precontemplation
 - Contemplation
 - Preparation/Determination
 - Implementation
 - Maintenance
 - Backsliding
5. Show mothers how to breastfeed and how to maintain lactation, even if they are separated from their infants.
 - Precontemplation
 - Contemplation
 - Preparation/Determination
 - Implementation
 - Maintenance
 - Backsliding

6. Give newborn infants no food or drink other than breastmilk unless *medically* indicated.

- Precontemplation
- Contemplation
- Preparation/Determination
- Implementation
- Maintenance
- Backsliding

7. Practice “rooming in” – allow mothers and infants to remain together 24 hours a day.

- Precontemplation
- Contemplation
- Preparation/Determination
- Implementation
- Maintenance
- Backsliding

8. Encourage breastfeeding on demand.

- Precontemplation
- Contemplation
- Preparation/Determination
- Implementation
- Maintenance
- Backsliding

9. Give no pacifiers or artificial nipples to breastfeeding infants.

- Precontemplation
- Contemplation
- Preparation/Determination
- Implementation
- Maintenance
- Backsliding

10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic.

- Precontemplation
- Contemplation
- Preparation/Determination
- Implementation
- Maintenance
- Backsliding

If you are registered with Baby-Friendly USA, please indicate what Phase you have completed.

- Discovery
- Development
- Dissemination
- Designation

If you are not yet registered with Baby-Friendly USA, do you commit to doing so by entering the Discovery Phase within one week of acceptance into the project? (This is required for project participation and is free of charge.) Y ____ N ____

Does your facility give out industry sponsored discharge bags or sample packs? Y ____ N ____
If yes, what is your plan to eliminate this practice?

If you decide to create an alternate discharge bag, how will this be funded? **[500 char.]**

How are hospital staff and practitioners in your hospital trained in breastfeeding care? **[500 char.]**

Who provides lactation education or training for staff and practitioners? What format is used?
How many hours are required and how often is the education or training offered? **[500 char.]**

Who provides direct breastfeeding care to patients in your institution? **[300 char.]**

How many FTE International Board Certified Lactation Consultants (IBCLCs) does your hospital employ? What is their role in breastfeeding education, promotion and support in your institution?
If your facility employs no IBCLCs, are you willing to hire at least one in within three (3) months of the start of the project? Y ____ N ____

Does your hospital offer outpatient lactation consults? Y ____ N ____
If so, in what setting and at what hours? **[300 char.]**

Do you offer a mother to mother support group? Y____ N ____
If yes, when and where does it meet? **[500 char.]**

Please list the community resources to which you refer mothers for breastfeeding support after discharge. **[500 char.]**

Who will take the lead in making the changes required for Ten Step implementation, and what is this person's job description? **[500 char.]**

How will you get buy-in for the project from other disciplines and departments? (Departments might include Prenatal Services, Pediatrics, OB/GYN, Medical Records, Purchasing, Pharmacy, Gift Shop and others.) **[500 char.]**

Element 4- Evaluation (5 points)

Please select the items for which you currently document:

- Intention to breastfeed at admission
- Initial skin-to-skin contact
- Ongoing skin-to-skin contact
- Breastfeeding observations and consults
- Patient education re: infant feeding, supplementation, supplementation mode (bottle, syringe, spoon, etc.) & supplementation volume
- Separations of mother and baby (removal to nursery)
- Duration of separations
- Discharge teaching

Please select the items for which you routinely collect and analyze data.

- Intention to breastfeed at admission [check boxes]
- Initial skin-to-skin contact
- Ongoing skin-to-skin contact
- Breastfeeding observations and consults
- Patient education re: infant feeding, supplementation, supplementation mode (bottle, syringe, spoon, etc.) & supplementation volume
- Separations of mother and baby (removal to nursery)
- Duration of separations
- Discharge teaching

Who will be responsible for data collection for the project year? **[300 char.]**

Are you able to make improvements to the medical record to prompt, document and review practice improvements? Y ____ N ____

What other methods of evaluation of breastfeeding care (if any) are currently in use? **[500 char.]**

Element 5- Budget (5 points)

How do you plan to use the funding? Include any plans for in-kind or matching funds. (Please see **Appendix B: Application FAQs** for more information on the use of funds.) **[500 char.]**

Element 6- Sustainability (10 points)

How will you monitor compliance with the Steps you have implemented after the project period? **[500 char.]**

How will you work to maintain the Steps you have implemented after the project period? **[500 char.]**

How will you continue to develop and improve implementation of the Ten Steps after the project period? **[500 char.]**

Describe any additional plans for sustainability (e.g., Achieving steps not implemented within the one-year grant time frame, continued financial support for steps already implemented). Who will be responsible and how will it be monitored? **[500 char.]**

Type of facility:

☐ Free Standing Birth Center

☐ Hospital – Government Funded

☐ Federal

☐ State

☐ County

☐ City

☐ Military

☐ Other _____

☐ Hospital – Private Not-For-Profit

☐ Hospital – Private For-Profit

Is the facility part of a larger system? No ☐ Y ☐ Please specify: _____

Teaching Programs: Nurses ☐

Medical Students ☐

Medical Residents ☐

☐ Other (Please specify)

Appendix A – *The Ten Steps to Successful Breastfeeding*

1. Have a written breastfeeding policy that is routinely communicated to all health staff.
2. Train all health care staff in skills necessary to implement this policy.
3. Inform all pregnant women about the health benefits and management of breastfeeding.
4. Help mothers initiate breastfeeding within one hour of birth.
5. Show mothers how to breastfeed and how to maintain lactation, even if they are separated from their infants.
6. Give newborn infants no food or drink other than breastmilk unless *medically* indicated.
7. Practice “rooming in” – allow mothers and infants to remain together 24 hours a day.
8. Encourage breastfeeding on demand.
9. Give no pacifiers or artificial nipples to breastfeeding infants.
10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic.

Appendix B: Application FAQs

Q. How long does it take to register with Baby-Friendly USA for Phase One?

A. *It takes just a few minutes to go online, fill out the one-page form and submit it to Baby Friendly USA. There is no letter of support or fee required for registration.*

Q. Our hospital has been selected for the NICHQ Best Fed Beginnings project. May we also apply for this grant funding?

A. *Hospitals that have been selected to participate in the Best Fed Beginnings project will not be eligible to apply for additional funds from this project. This will allow more Georgia hospitals to join the movement toward Baby-Friendly® designation.*

Q. Why do we need the signature of our Chief Executive Officer / Chief Operating Officer in order to apply for funding?

A. *For a hospital to make significant progress toward achieving Baby-Friendly® designation it is essential to have the full support of its executive leadership.*

Q. Why is at least one physician required to participate on the Leadership Team?

A. *In order for a hospital to implement changes in policies and procedures that affect patient care and education, it is imperative for physicians to take a leadership role.*

Q. Why do we need management level representatives on the Leadership Team?

A. *Changes in patient care policies and procedures require leadership and buy-in from the hospital decision-makers.*

Q. Is membership on the Leadership Team limited to the representatives required for this project?

A. *DPH encourages Leadership Teams to include stakeholders from many areas inside and outside the system, such as Prenatal Services, Newborn Nursery, Pediatrics, NICU, Nutrition Services, and Family Medicine. External partners could include WIC Peer Counselors and Peer Counselor supervisors, Public Health District Breastfeeding Coordinators, the EPIC Breastfeeding Program⁴, local Breastfeeding Coalition leaders, and a mother who has recently delivered a baby in your facility. Community partners can be especially helpful during planning for and implementation of Step 10 of The Ten Steps.*

Q. Are we allowed to use the funds to pay for travel and per diem costs for the Collaborative Learning Sessions and the 5-day Train-the-Trainer session?

⁴ <http://www.gaaap.org/education/epic-breastfeeding.html>

A. Yes, funds may be used to defray the costs associated with travel for the required Collaborative Learning Sessions and the 5-day course. You may also use the funds to defray the costs of replacement staff during their absence.

Q. How long will the pre-project Collaborative Learning Session last and where will it be held?

A. The pre-project Collaborative Learning Session will be one day: February 20, 2014; the tentative location is The Loudermilk Center in Atlanta.

Q. Who should attend the 5-day Train-the-Trainer session?

A. Hospitals that are selected for the project are encouraged to confer with DPH staff regarding whom to send. Examples include: Lactation Consultants, Mother/Baby RNs with expertise in breastfeeding care, Clinical Specialists, Nurse Educators or a combination of these job classifications. We encourage each hospital to send employees who are the “breastfeeding champions” in their facility and who are enthusiastic about providing staff training on an on-going basis.

Q. Where will the 5-day Train-the-Trainer session be held?

A. The 5-day Train-the Trainer Session will be 5 days: March 24, 2014-March 28, 2014; the tentative location is the Marriott Macon Center in Macon Georgia.

Q. How long will the Project Close Out Meeting last and where will it be held?

A. The Project Close Out Meeting will be one day: September 25, 2014; the tentative location is The Loudermilk Center in Atlanta.

Q. Who will provide the training and monthly technical assistance?

A. Training and technical assistance will be provided by a team of experienced lactation educators who are specifically qualified to help hospital Leadership Teams implement The Ten Steps to Successful Breastfeeding and overcome barriers to achieving Baby-Friendly® designation. This team’s activities will be funded by DPH; the educators will be available to hospital teams for training and consultation for the entire project year. DPH staff will also be available to provide technical assistance during and after the project year.

Q. Are hospitals required to have IBCLCs on staff to be eligible for this project?

A. Hospitals should have at least one IBCLC on staff or be willing to hire one within three (3) months of project start. At least one IBCLC must be appointed to the Leadership Team to help guide the process and plan for sustainability after the project ends.