CT DPH CPPW Project:  
Connecticut Breastfeeding Initiative Hospital Committee Interview

Introduction

[Start the conversation with the hospital representative(s) who we will have already spoken with on the initial call.]

First, thank you for taking the time to talk with us today. Before we get started, we would like to introduce ourselves. My name is ______, and I work for Professional Data Analysts in Minneapolis, MN. The Connecticut Department of Public Health contracted with us to conduct a formative evaluation that focuses on your experiences working toward the Baby-Friendly designation with the support of CT DPH and the Connecticut Breastfeeding Coalition. Our goal is to learn about and then share successes and areas for improvement so that in the future, those implementing similar grants can learn from your experiences. The information you share with me today will be used for program improvement, and we may highlight success stories or lessons learned that may be useful for other states or organizations who would like to work with hospitals to work toward Baby Friendly designation.

We discussed on our initial/last call who you thought should join this conversation today. We would like to have each person who is on the call introduce him or herself, and tell us a little bit about your background in lactation practices. Would you like to start, [name of hospital rep] [If there are 1-3 people, ask in this way. If there are more people, simply ask about how many years they have worked in the field]?

[Take notes about who is on the call]

Thank you! It’s great to learn a little bit about each of you. Before we move forward with the questions, I’d like to talk about the format briefly. There are ten main content areas that we would like to talk with you about. For each question, each of you is free to comment individually, to provide unique perspectives, or to indicate you agree with something that was already said. It is not necessary that each of you comment on every question, unless you would like to do so. As we only have one hour for this interview, I may occasionally interrupt you in order to ensure that we cover all key areas within our allotted time. You can always follow-up with me after the interview if you want to share something that we do not get to during the interview.

Finally, to ensure we capture the details of this call, we would like to record this conversation to ensure we accurately capture this conversation. We will keep this recording confidential. Do you have any objections to this? [If they are okay with recording, GREAT! If not, take notes🙂].

Great, let’s get started.
Survey Questions

1. First, why did your hospital choose to participate in this project? What was appealing about the project? What were your expectations? [5 minutes max]

Next, I’d like us to talk a bit about your experiences with the five steps of the Baby-Friendly program that CT DPH and CBC focused on with you for this project. I’d like to spend no more than 10 minutes discussing the progress you’ve made with these five steps [questions 2+2a = 10 minutes].

2. The focus for this project was on five of the ten steps. What have you done so far to achieve each step?
   - Step 1 – Written BF policy that is routinely communicated to all staff
   - Step 2 – Training of staff in all necessary skills related to this policy
   - Step 4 – Help mothers initiate BF within one hour of birth (skin-to-skin contact for one hour, despite feeding method)
   - Step 7 – Practice rooming in – 24 hours a day
   - Step 10 – Foster establishment of BF support groups, and refer mothers upon discharge from the birthing center or hospital
   - Have you worked on or achieved any of the other five steps? Please describe any work you have done on the five steps that were not part of this initiative.
     a. What was successful for each of these steps? What were the barriers?
     b. The long-term goal of this grant is to assist hospitals in ultimately achieving the Baby Friendly designation. Has participation in this project changed your view on whether this is a realistic goal for your hospital? What about this process would you recommend for similar grants moving forward? Would an alternative process have been more helpful (such as a focus on the 4-D Pathway instead of the five steps)? What about the goal was positive? What was challenging? [5 minutes max]
     c. Where are you right now in terms of receiving Baby-Friendly designation (where on the 4-D Pathway)? Where do you see yourself being in a year from now? [5 minutes max]

Next, I’d like to discuss the consultant time. I understand there were two main components – the training for the maternity staff and the consultation hours.

3. First, did you take advantage of the trainer that was provided by the grant, or did you use a train-the-trainer or online model? Why did you choose this model to train your staff? Would you recommend this model? What, if any, barriers did you encounter with this mode of training? [5 minutes max]
4. How do you plan to train new or other staff in the future? Why? [2-3 minutes max]

5. What technical assistance (consultation) did you receive from the consultant using your allotted 40 hours of consultation? What was most helpful? What was least helpful? Do you think the consultation hours were maximized? [10 minutes]
   [Possible technical assistance listed below – use as probes if necessary:]
   a. Assistance with the BFHI Self-Appraisal Tool
   b. The tool-kit provided by DPH for this grant – what in this tool-kit helped you?
      i. Hospitals may have also gotten a tool-kit from Baby-Friendly USA and combined it with their DPH tool-kit. If they mention this, prompt mainly for what was useful about the DPH tool-kit.
   c. Telephone meetings, in person meetings, and the like
      a. What has it been like working with 9 other hospitals? Advantages/disadvantages to this approach?
   d. Mock survey [if conducted at the time of the interview]
   e. Other types of assistance received?

6. Please describe any institutional policy changes that have come about at least in part as a result of the CT Breastfeeding Initiative. How did this come about? What were barriers & lessons learned? [5 minutes max]
   a. Are there any other institutional policy changes that would be necessary in the future in order for you to become designated as Baby-Friendly?
   b. If so, what are they, and why are they important?

7. What could have the CT Department of Public Health and/or the CT Breastfeeding Coalition done to make it easier for you to achieve administrative buy-in? [note: a hospital administrator did have to sign off on this work at the beginning of the project]. [5 minutes max]

8. Would you tell us about an overall success story related to your hospital’s implementation of the Baby-Friendly Steps? [note: some successes will probably be brought up earlier, but asking in this way we may get something different] [5 minutes]

9. [Ask only if there is time] What advice would you give to other hospitals who want to achieve the Baby-Friendly designation?

10. [Ask only if there is time] Is there anything else we should know that we have not already discussed?
Thank you for your time and input!

We will summarize the information you shared with us today, and put it in a narrative form. Before we share this summary with anyone, we will send it to you to review for accuracy, and to ensure we have not missed or misconstrued any details. Once you have finalized the summary, we will share the summary with the CT DPH, CBC, and CDC (the funder) in our final evaluation report.

Please feel free to contact us at any point in time if you have questions, concerns, or other comments. Make sure they have our contact information – key hospital contacts should have Melissa’s contact info from initial calls and emails.