

#### ASSESSMENT TOOL

## BREASTFEEDING COUNSELLING (BFC) AND HIV COUNSELLING TRAINING: FOLLOW-UP ASSESSMENT TOOL



Family and Reproductive Health Cluster

# BREASTFEEDING COUNSELLING (BFC) AND HIV COUNSELLING TRAINING: FOLLOW-UP ASSESSMENT TOOL

## FORM A OBSERVATION OF THE COUNSELLOR/HEALTH WORKER TRAINED IN BFC AND HIVC

District Facility Name Facility Level: Referral[] District Starting TimeEnding	Facility Type: Gov [] Health/Maternity (	[] NGO[]     Inter Centre[] Other(specify	view No
Cadre of counsellor/health worke Medical officer [] Midwife [] Public Health Nurse []	er <i>(Tick Applicable)</i>	Sex of C/HW: Male[] Clinical officer [] Nurse [] Lay Counsellor	-
Other [] (specify)			
Which of the following training h i) PMTCT Basic Counselling ii) Breastfeeding, HIV & Infant fe iii) General Counseling iv) None of the above	[] [ eeding Counselling []	)ate	date):
Where observation is done: Ante Other (specify)		'	ard[]
Has the client been before for in If Yes: number of previous visits	<b>G</b>		

Assessment	V. good	Good	Fair
1. Does the health worker establish a rapport with the client?			
• Greet the client			
Introduce her/him-self			
Observe confidentiality			
Introduce the topic			
Appropriate gesture and body language			
• Show interest (5-6=Very good 3-4=Good < 3=Fair)			
2. Does the health worker use Listening & Learning skills:			
Use non-verbal communication			
Ask open ended questions			
Use responses and gestures which show interest			
Reflect back what the mother thinks & feels			
<ul> <li>Empathise (show that s/he understands how the mother feels)</li> </ul>			

• Use non-judging words? (5-6= very good 3-4= good <3= fair)		
3. Does the health worker build mother's confidence and give support?		
Accept what the mother thinks and feels?		
Recognise and praise what the mother and baby are doing right?		
Give practical help?		
Give a little relevant information ?		
Use simple language?		
Make suggestions and not commands?  (All the 6=very good 4-5=good < 4=fair)		

4. Has the health worker given adequate information on all potential feeding options to the mother?			
<ul> <li>Exclusive breastfeeding for 3-6 months followed by rapid cessation and reverting to replacement feeding (?within two weeks)</li> </ul>			
Commercial Infant Formula			
Animal milk (modified or unmodified)			
• Wet nursing (Information to include advantages, disadvantages, cost implication, availability, time factor, preparation methods) (Adequate information on all the 4 feeding options =very good, 2-3=good, < 2=fair)			
5. Does the health worker seem to be biased and direct the mother towards her/his choice of feeding method?	Yes	N	lo
Does the mother make an actual choice of feeding method?	Yes	N	lo
6. (Where applicable) Demonstration of feeding options			
	V.Good	Good	Fair
A) If breastfeeding is chosen, does the health worker give correct information/support concerning:			
Positioning a baby at the breast?			
Attachment of baby to the breast?			
<ul> <li>Inquires about any breastfeeding difficulties and gives correct support when possible?</li> <li>(All 3=very good, 2=good, &lt; 2=fair)</li> </ul>	re		
B) If replacement feeding is chosen (specify it)  Does the demonstration include:			
Use of clean boiled and cooled water			
Use of clean dry feeding utensils			
Observation of personal and food hygiene			
Use of correct measurements			
(All 4=very good, 3=good, <3=fair)  7. Does the health worker suggest and discuss the importance of next			

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## FORM B INTERVIEW WITH THE COUNSELLOR/HEALTH WORKER TRAINED IN BFC AND HIVC

District	Facility T Health/Mate	Type: ( ernity	Gov[] No Centre [	GO[] [] Other(spe	Interview	No
Cadre of counsellor/health worker (Tri Medical officer [] Midwife [] Public Health Nurse [] (Specify) Other [] (specify) Which of the following training have y i) PMTCT Basic Counselling ii) Breastfeeding, HIV & Infant feeding iii) General Counseling iv) None of the above	you receive g Counselli	ed? <i>(Ti</i> [] [ ing []	Clir Nu Lay <i>iick applid</i> Date Date Date	irse y Counsellor cable and sta	[] [] ate date):	Female []
Assessmen	t			V. good	Good	Fair
<ul> <li>1) Does the health worker know the imposition</li> <li>Protection from diseases</li> <li>Adequate nutrient and water up to 6 mon</li> <li>Easily digested</li> <li>Less expensive</li> <li>LAM</li> <li>Other (specify)</li></ul>	nths	/Feedi	ng?			
<ul> <li>2) Does the health worker know factors to fbreastmilk?</li> <li>Frequency of breastfeed</li> <li>Emptying of the breast</li> <li>Positioning and attachment</li> <li>Maternal environment/psychological well to the company of the specify with the company of the present of the company of the company of the present of the company of the company of the present of the company of the company</li></ul>	t <b>hat influenc</b> being					
<ul> <li>3) Does the h/worker know the main cau</li> <li>Hunger</li> <li>Discomfort (colicky pain, wet nappies, cole</li> <li>Illness</li> </ul>	ises of a cryi	ing bal	oy?			

Habit

			1
• Other (specify)			
(4 or more-very good, 2-0-good, 22-1an)			
4) Using the '100' mother card, how many mothers will transmit HIV to their babies overall?  (If s/he mentions 20 tick yes, else, tick No)	Yes		No
5) Using the '100' mother card, how many mothers will transmit HIV to their babies through breastfeeding? (If s/he mentions 3 tick yes, else, tick No)	Yes	ſ	No
	V. good	Good	Fair
6) What information should be included in the general health education package in the Ante-natal Clinic about HIV?			
Basic facts about HIV Availability of services:			
Voluntary Counselling and Testing			
Breastfeeding & infant feeding counselling  (all 3 years good 1 fair)			
(all 3=very good, 2=good 1=fair)  7) What factors increase the risk of mother to child transmission of HIV?			
Some Obstetric procedures (esp. traumatic ones)			
Recent infection with HIV			
Severity of HIV infection			
Prolonged duration of breastfeeding			
Mixed feeding			
Breast conditions, eg. cracked nipple, mastitis, abscess			
Child's condition:- sores in the mouth			
Infection with STDs			
• Other (specify) (6 or more=very good, 4-5=good <4= fair )			
(6 or more=very good, 4-5=good <4= fair )			
8) What are the safe feeding options for the first six months of life?			
Exclusive breastfeeding followed by rapid cessation			
• Fresh animal milk (modified or un-modified)			
Commercial infant formula			
• Wet nursing			
Other (specify)			
(4 or more=very good, 3=good, <3= Fair)  9) If an HIV-positive woman decides to breastfeed her baby, how			
can the baby be protected from being infected with HIV?  • Exclusive breastfeeding			
Zhoideil e di edeli eeding			
<ul> <li>Proper positioning and attachment</li> <li>Rapid cessation of breastfeeding</li> </ul>			
(all 3=very good, 2=good 1=fair)			
10) If a mother decides to give fresh cows' milk to her baby < 6 months, how should this milk be modified?			
Should be diluted with clean boiled water			
Sugar should be added			
• Infant should be give micronutrient supplements			
(all 3=very good, 2=good 1= fair)  11) Why do HIV positive mothers need continuous support in the			
feeding of their infants?		1	

To avoid mixed feeding		
In case of changing feeding options		
To monitor child's growth and development		
To adjust feeding according to age of infant		
To share experience with peers		
● To solve feeding related problems (5-6=very good, 3-4=good, <3=fair)		
12) What should a mother consider before introducing other foods:		
Time of starting complementary foods		
Type of food - a variety		
Number of feeds per day		
Observe cleanliness during preparation, feeding and storage		
• Active participation in feeding of the baby/child (4-5=very good, 2-3=good, <2=fair)		
<b>13) Mention any five of the Ten Steps to Successful Breastfeeding:</b> (5 or more=very good, 4=good, <4=fair)		
14) Mention any three of the Ten Provisions of the International Code of Marketing of Breastmilk Substitutes:  (3 or more=very good, 2=good, <2=fair)		
15) What are the advantages of cup feeding as compared to bottle feeding?		
Available in all households		
Easier to clean		
Ensures contact between caregiver and the baby during feeding		
Less risk of diarrhoea, ear infection and tooth decay		
• Other (specify)		

### BFC AND HIVC TRAINING: FOLLOW-UP ASSESSMENT TOOL

## FORM C EXIT INTERVIEW WITH MOTHER COUNSELLED BY A COUNSELLOR/HEALTH WORKER TRAINED IN BFC AND HIVC

	Facility Type: Gov[] It [] Health/Maternity Centre	NGO[] Interview No [] Other(specify)
Starting TimeEnd	ing TimeTime taken	
Has the client been before for in If Yes: number of previous visits	0	
If postnatal, state age of the bal If antenatal, state duration of pr		

	1		1= .
Assessment	V. good	good	Fair
1. When can a mother with HIV infection pass it to her baby?			
During pregnancy			
During labour & delivery			
<ul><li>During breastfeeding</li><li>(All 3=very good, 2=good, 1=fair)</li></ul>			
2. Suppose 20 mothers in your area are infected with HIV and all their babies are breastfeeding: How many of them will pass the infection to their babies through breastfeeding? (If she mentions 3=very good, 2=good, other or does not know=fair)  3. Can you tell me some ways by which an HIV infected mother could feed her baby?			
Exclusive breastfeeding and early cessation			
Home prepared animal milk			
Wet Nursing			
Commercial baby formula			
• Other (specify)			
4. Why is breastfeeding important?			
Breastmilk is nutritious			
It protects against infection			
It prevents pregnancy			
It is inexpensive Others (specify) (3 or more=very good, 2= good, < 2 fair)			
5. What helps to increase the flow of breastmilk?			
Frequent breastfeeding			

	□ NO (explain	why)	
10. Were you satisfied with the session/counselling with the health worker today?	☐ YES (explain	why)	
<ul> <li>Actively participate in feeding of the baby/child</li> <li>(4-5=very good, 2-3=good, &lt;2=fair)</li> </ul>			
Observe cleanliness during storage, preparation and feeding     Ather to a setting to be feed than to be feed that			
Number of feeds per day – start with one, increase to several			
Types of food - a variety			
Appropriate time of starting			
9. What should a mother consider before introducing other foods?			
• Other (specify)			
Baby might prefer breastmilk to artificial milk and refuse the formula			
More chances of the baby getting the HIV infection			
C. For all replacement feeding mothers: What is the danger of giving breastmilk in addition to replacement feeding?			
(2=very good, 1=good, <1= fair)			
Clean water			
Powdered infant formula			
B. Using commercial formula, what is required?			
<ul> <li>Vitamin/mineral supplements</li> <li>(all4=very good, 3=good, &lt;3= fair)</li> </ul>			
• Sugar			
Clean water			
Un-diluted animal milk			
8. For the HIV positive mother, if she is replacement feeding:  A. Using fresh animal milk, what is required?			
(3 or more=very good, 2=good, <2=fair)			
• Other (specify)			
Stopping breastfeeding suddenly before the baby is 6 months old			
Holding the baby properly onto the breast			
Giving the baby only breastmilk			
How can breastfeeding be done without making it very likely to pass the virus to the baby?			
(3 or more=very good, 2=good, <2=fair) 7. For the HIV positive mother, if she decided to breastfeed:			
Worries/discomfort of the mother			
Improper holding of the baby to the breast			
Allowing the baby to suckle for only short periods			
Putting the baby to the breast infrequently			
6. Why may a baby not obtain adequate breastmilk?			
<ul> <li>Good feelings by the mother</li> <li>(3 or more=very good, 2=good, &lt;2=fair)</li> </ul>			
Support from family/friends/health workers			
Putting the baby correctly to the breast			
Making sure that the breast is always emptied			

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**FORM D** 

#### FACILITY SUPPORTS: CHECKLIST OF EQUIPMENT AND SUPPLIES

District	Date	/	/	Ir	itervie	ewer		
Facility Name	Facilit	y Type: G	ov[] NGC					_
Facility Level: Referral [] Dist								
Starting TimeEnd					` '	3.		
· ·	J							
Where the observation is done	: Antenat	al [] pos	tnatal []	YCC [] p	aedia	itric war	d []	
Other (specify)		-						
Record number of staff wh	o attende	d various	s types o	f training	in P	MTCT n	rograi	nmes
	Medical	Clinical	Midwives			lic Health		ner worke
Type of training	Officers	Officers			Nur	ses	(sp	ecify)
General Counselling								
2. BFC, HIVC								
3. PMTCT							-	
4. Home Based Care							-+	
1. + 2. 2. + 3.							-+	
3. + 4.							-	
1. + 2.+ 3.							_	
2.+ 3.+ 4.								
Other training (Specify)								
		•						
Patient Accommodation						YES	NO	
Counselling room available where priv	acy is assured	1						
Clean safe water available nearby								
Functional toilet or latrine	all and an earl							
Are breastfeeding information posters		d by majarity	of Clionto?					
If yes, are they displayed in a Language	ge understood	т бу тајонту	or chems?					<del></del>
Practical materials available:								
Measuring and mixing utensils								
Samples of locally available milks								
Samples of Micronutrient supplements	(Vit. A capsu	les. Fe/FO. N	/ultivitamin)					
Samples of Micronatherit supplements	(vit. // capsa	103, 1 0/1 0, 1	nannvitariiii)					
Locally available foods for demonstrat	ion							
•								
Scales for small young infants and old	er children (If	all are avail	ahle tick Ves	: alsa Nn)				
scales for small young infants and old	cr criliareri (ii	an are avail	ubic tick res	, 0130, 140)				
Reference Materials								
A. Counselling Area								
20 mother-baby cards								
Feeding option cards							-	
recaing option cards								
B-R-E-A-S-T-Feed Observation Forms								
Breastfeeding History Forms							1	$\overline{}$
<u> </u>								
Councelling Skills Charlist								
Counselling Skills Checklist								

Poster: 12 Steps to Successful Breastfeeding		
B. Post-natal side	<u> </u>	
Immunisation kits		
Child health cards		
Vitamin A capsules		
Fe/FO tablets		
IEC posters on infant and young child feeding		
Weighing scale		
Iron and folic acid		
Vitamin A capsules		
Mebendazole		
Anti-malarial: (Fansidar/Chloroquine)		
Drugs for STDs		
Condoms		
Paracetamol		
Record keeping		
Is a mother's register available and being used?		
If yes, is it up to date?		
Documentation		
Number of infant feeding counselling sessions held in the last month		
Number of mothers counselled in the last month		
Average number of mothers counselled per day		
Commonly selected types of feeding options (indicate how many mothers selected a given method in the last month):		
Exclusive breastfeeding		
Use of animal milk		
Use of commercial infant formula		
Other (specify)		

ITEM	Number of days of stock-outs/30 days
Vaccines	
Child health cards	
Mebendazole	
Infant formula	
Iron/Folic	
Vitamin A Capsules	
Fansider/Chloroquine	
Paracetamol	
Condoms	
Drugs for STDs	
Milk for practicals	