



Communicating in a Credible and Effective Way [Domain 2] Foundational Skills

Competency 3: Use listening and learning skills whenever engaging in a conversation.

Performance Indicators: 11, 12

Competency 4: Use skills for building confidence and giving support whenever engaging in a conversation.

Performance Indicators: 13, 14

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
Prepared for the consultation <ul style="list-style-type: none"> Staff aware of engaging in meaningful conversations that ENCOURAGES* the patient and family members. 			
Established rapport <ul style="list-style-type: none"> Introduced self and supervisor. Explained reason for communication. Asked permission to continue. 			
C3 PI 11: Demonstrate at least 3 aspects of listening and learning skills when talking with a mother.			
<ul style="list-style-type: none"> Asked open ended questions. Used responses and gestures which show interest (smile, nod head, etc.). Reflected back what the mother says. Empathized – expressed they understood how mother feels in a culturally appropriate manner. Avoided words which sound judgmental (good-bad-normal-wrong). 			
C3 PI 12: Demonstrate at least 3 ways to adapt communication style and content when talking with a mother.			
<ul style="list-style-type: none"> Used helpful non-verbal communication (sat down with mother, avoided crossing arms over chest, used or avoided eye contact as culturally appropriate, etc.). Responded to particular barriers the individual mother faced. Used sensitivity and care to address challenges the mother may be facing. Responded to individual mothers' and families' needs, preferences and values. 			



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Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C4 PI 13: Demonstrate at least 2 ways to encourage a mother to share her views, taking time to understand and consider these views.			
<ul style="list-style-type: none"> Gave time to mother to explain her concerns to get clear picture of what to emphasize. Acknowledged what she thinks and feels. Addressed her concerns with factual information provided in a sensitive and respectful manner. Assisted her to identify workable solutions responsive to specific concerns and circumstances. 			
C4 PI 14: Demonstrate at least 3 aspects of building confidence and giving support when talking with a mother.			
<ul style="list-style-type: none"> Elicited respectfully what she knows. Recognized and affirmed what was going well for dyad. Gave positive feedback/emotional support to support mothers' confidence and self-efficacy in breastfeeding. Determined what needed improvement. Enabled mother to achieve her goals for breastfeeding. Gave practical help. 			
Ensured mother had sufficient information about breastfeeding <ul style="list-style-type: none"> Covered ALL information on Checklist, sharing evidence-based information accurately. 			
Completed documentation as appropriate			

Adapted from the Baby-Friendly USA, Inc. "Guidelines and Evaluation Criteria for Facilities Seeking Baby-Friendly Designation, Sixth Edition" and the WHO competency verification toolkit, ensuring competency of direct care providers to implement the baby-friendly hospital initiative Web annex A Competency verification form (sorted by domain and competency). *ENCOURAGES = Empathize, Non-judgmental, Confirm, Open-ended questions, Use competent skills, Responsive care, Affirm, Give evidence-based information, Empower, and Support.



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Competency 5: Engage in antenatal conversation about breastfeeding (Step 3).

Performance Indicators: 15, 16, 17

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
Prepared for the consultation <ul style="list-style-type: none"> Staff aware of engaging in meaningful conversations that ENCOURAGES* the patient and family members. 			
Established rapport <ul style="list-style-type: none"> Introduced self and supervisor. Explained reason for communication. Asked permission to continue. 			
C5 PI 15: Engage in a conversation with a pregnant woman on 3 aspects of the importance of breastfeeding.			
<ul style="list-style-type: none"> Global recommendations on early initiation of breastfeeding and skin-to-skin immediately following birth and for at least one hour. Global recommendations on exclusive breastfeeding for first 6 months. Global recommendations on breastfeeding until 2 years old or more. Risks of non-breastfeeding for both mother and baby. For baby: <ul style="list-style-type: none"> ✓ Microbiota of non-exclusively breastfed infants is different from exclusively breastfed ones. ✓ Artificial milk supplementation significantly alters the intestinal microflora. ✓ Higher risk of the following: Acute diseases (respiratory infections, diarrheas, otitis, dermatitis); Allergies and infections; Chronic diseases (asthma, diabetes, obesity); Cancers during infancy, leukemia; Death before 2 years old from all causes; Necrotizing enterocolitis; SIDS (sudden infant death syndrome); Decreased cognitive development. For mother, using formula means: <ul style="list-style-type: none"> ✓ Offering unneeded supplements may endanger adequate milk production. ✓ Higher risk of the following: Postnatal depression; Breast cancer; Ovarian cancer; Hypertension; Type 2 diabetes. 			



Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C5 PI 16: Assess at least 3 aspects of a pregnant woman's breastfeeding knowledge in order to fill the gaps and correct inaccuracies.			
<ul style="list-style-type: none"> Used Foundational Skills to discuss additional information on breastfeeding according to needs and concerns including: advantages of exclusive breastfeeding; how to initiate and establish breastfeeding after birth; importance of skin-to-skin contact immediately after birth; typical breastfeeding patterns; responsive feeding and feeding cues; rooming-in; importance of colostrum; healthcare practices and help mother will receive after birth. Support in a respectful manner a woman who may not be considering breastfeeding to make an informed decision about feeding her infant. 			
C5 PI 17: Engage in a conversation with a pregnant woman about at least 4 care practices a dyad will experience at the birthing facility that will support breastfeeding.			
<ul style="list-style-type: none"> Used Foundational Skills to discuss the following: <ul style="list-style-type: none"> Importance of a positive childbirth experience. Immediate and uninterrupted skin-to-skin. Breastfeeding initiation within the first hour. Recognition of feeding cues. Prompt response to feeding cues Basics of good positioning and attachment. How breastfeeding functions. Milk expression (why, how, practice touching breast, get familiar with massage etc.) 			
Ensured mother had sufficient information about breastfeeding <ul style="list-style-type: none"> Covered ALL information on Checklist, sharing evidence-based information accurately. 			
Completed documentation as appropriate			

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Competency 6: Implement immediate and uninterrupted skin-to-skin (Step 4).

Performance Indicators: 20, 21

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
Prepared for the consultation <ul style="list-style-type: none"> Staff aware of engaging in meaningful conversations that ENCOURAGES* the patient and family members. 			
Established rapport <ul style="list-style-type: none"> Introduced self and supervisor. Explained reason for communication. Asked permission to continue. 			
C6 PI 20: Demonstrate at least 3 points of how to routinely implement immediate, uninterrupted and safe skin-to-skin between mother and infant, regardless of method of birth.			
<ul style="list-style-type: none"> Naked baby is immediately placed prone on the mother's bare chest and not placed under the warmer or elsewhere before this contact. Baby is not dried before being placed on the mother. When the baby has been placed skin-to-skin, his head and back are well dried to prevent evaporation. Valid for vaginal births or caesareans under regional anesthesia. Baby is assessed while on his mother as the skin-to-skin contact will reduce his stress of being born. Stability of the baby (e.g. absence of apnea, desaturation and bradycardia) is assessed after it is placed on the mother. 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C6 PI 21: Demonstrate at least 3 safety aspects to assess when mother and baby are skin-to-skin during the first 2 hours postpartum, regardless of method of birth.			
<ul style="list-style-type: none"> • Observation of newborn (colour, breathing and free movement of head and chest). • Observation of mother (well-being, alertness, pain level). • Describe to parents what to observe and who to contact. • Observation done regularly by one designated healthcare professional according to written procedure (policy, protocol, procedure or guideline). • Support of baby in case of caesarean section, to avoid falls. 			
Ensured mother had sufficient information about breastfeeding <ul style="list-style-type: none"> • Covered ALL information on Checklist, sharing evidence-based information accurately. 			
Completed documentation as appropriate			

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Competency 7: Facilitate breastfeeding within the first hour, according to cues (Step 4). Performance Indicators: 25, 26, 27	Competency 8: Discuss with a mother how breastfeeding works (Steps 3, 5, 6 and 9). Performance Indicators: 29, 30, 31
Competency 9: Assist mother getting her baby to latch (Step 5). Performance Indicators: 32, 33, 34	Competency 10: Help a mother respond to feeding cues (Steps 7 and 8). Performance Indicators: 35, 69
Competency 11: Help a mother manage milk expression (Steps 5 and 6). Performance Indicators: 40	

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
Prepared for the consultation <ul style="list-style-type: none"> Staff aware of engaging in meaningful conversations that ENCOURAGES* the patient and family members. 			
Established rapport <ul style="list-style-type: none"> Introduced self and supervisor. Explained reason for communication. Asked permission to continue. 			
C7 PI 25: Engage in a conversation with a mother including at least 3 reasons why suckling at the breast in the first hour is important, when the baby is ready.			
<ul style="list-style-type: none"> Use Foundational Skills to discuss reasons why it is important: <ul style="list-style-type: none"> Triggers the production of breast milk. Facilitates the progress of lactogenesis. Increases uterine contractions. Reduces risk of infant mortality. Mother learns how to recognize her infant's cues and effective latch. 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C7 PI 26: Demonstrate at least 3 aspects of safe care of the newborn in the first 2 hours post-birth.			
<ul style="list-style-type: none"> • Mother is in a semi-recumbent position (elevate the head of the mother's bed/stretcher to 30 degrees or more to avoid the baby's flat prone position). • Position the newborn on the mother to facilitate visual contact and recognition of the baby's awakening and hunger cues by the mother. • Ensure the infant can spontaneously lift his head at all times to facilitate optimal breathing and first sucking. • Visually check the infant's breathing, colour, responsiveness to stimulation when checking the mother's vital signs and without removing the blanket to avoid a decrease in temperature. • Ensure the infant's nose and mouth are visible at all times. • Ensure the mother is responsive. • Ensure both mother and support person know what to assess and how to get help if needed. 			
C7 PI 27: Describe to a mother at least 3 pre-feeding behaviours babies show before actively sucking at the breast.			
<ul style="list-style-type: none"> • The pre-feeding behaviors of the baby include: <ul style="list-style-type: none"> ◦ A short rest in an alert state to settle to the new surroundings. ◦ Bringing their hands to their mouth and making sucking motions and sounds. ◦ Touching the nipple with the hand. ◦ Focusing on the dark area (areola) of breast, which acts like a target. ◦ Moving towards breast and rooting. ◦ Finding the nipple area and attaching with wide-open mouth. 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C8 PI 29: Engage in a conversation with a mother regarding at least 3 reasons why effective exclusive breastfeeding is important.			
<p>Use Foundational Skills to discuss the importance of exclusivity:</p> <p>For baby:</p> <ul style="list-style-type: none"> ○ Baby will learn to breastfeed more quickly. ○ Baby will learn how to self-regulate. ○ Provides all the nutrients needed for physical and neurological growth and development. ○ The effects of breastfeeding are greater when breastfeeding is exclusive. ○ Colostrum is rich in protective factors. ○ The microbiota (intestinal flora) of the non-exclusively breastfed infant is different from the exclusively breastfed one. ○ Even one dose of formula changes the microbiota. <p>For mother:</p> <ul style="list-style-type: none"> ○ Frequent, exclusive breastfeeding helps build up a mother's milk supply. ○ Less risk of engorgement. ○ Breasts will feel more comfortable due to regular emptying. 			
C8 PI 30: Engage in a conversation with a mother regarding 2 elements related to infant feeding patterns in the first 36 hours of life.			
<p>Using Foundational Skills, explain that:</p> <ul style="list-style-type: none"> • Minimum feeding frequency is 8 times per 24 hours. • Cluster feeding (many cue-based feedings close together in time) is common and normal in the first 24-36 hours and is not an indication of inadequate supply. 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C8 PI 31: Describe to a mother at least 4 signs of adequate transfer of milk in the first few days.			
Using Foundational Skills, explain that: <ul style="list-style-type: none"> • Baby sucks regularly, rhythmically at the breast with occasional pauses. • Rhythmic swallowing is seen or heard. • No clicking sounds when feeding. • Breasts can feel softer after feeds and regain fullness in between feeds. • Urine output is progressively increasing to at least 4 heavy diapers/nappies per day and is pale yellow. • Number of stools is progressively increasing after the first day. • Stools changing from meconium (dark) to yellow. • Baby appears satisfied, not crying. • Weight stabilizes by day 4. 			
C9 PI 32: Evaluate a full breastfeeding session observing at least 5 points.			
Using Foundational Skills, assess the following: <ul style="list-style-type: none"> • Infant is able to latch and transfer milk. • Infant has rhythmic bursts of suckling with brief pauses. • Infant releases the breast at the end of feed in obvious satiation. • Infant shows similar behaviors if they takes the second breast. • Mother's hand supports the baby's neck and shoulders, without pushing the baby's head onto the breast. • Mother ensures the baby's postural stability. • Mother's breasts and nipples are comfortable and intact after the feed. • Mother admits no breast or nipple pain. • Signs/symptoms that could require further evaluation and monitoring as assessed. 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C9 PI 33: Demonstrate at least 3 aspects of how to help a mother achieve a comfortable and safe position for breastfeeding within the first 6 hours after birth and later as needed during the hospital stay.			
Using Foundational Skills: <ul style="list-style-type: none"> • Make sure the mother understands why it's important to adopt a comfortable and safe position. • Explain why to remove blankets or clothes that are in between mother and infant. • Help the mother identify how to hold her baby to best facilitate the baby's innate reflexes and latching. • Explain principles of position or holding baby (baby faces breast, close to mother, whole body supported). • Use a hands-off (or hands-on-hands) approach to promote a mother's empowerment. Hands-on is only used after asking permission and when additional help is necessary. • Offer additional help to a mother who had a caesarean to attain a comfortable position. • Help the mother identify useful positions for a weaker baby. 			
C9 PI 34: Demonstrate how to help a mother achieve an effective and comfortable latch, noting at least 5 points.			
Using Foundational Skills: <ul style="list-style-type: none"> • First observe mother breastfeeding before recommending changes. • Make sure the mother brings the baby to the breast and not the breast to the baby. • Infant's mouth is wide open. • Infant's chin is touching the breast. • More areola visible above the baby's mouth than below. • Lower lip is everted. • Infant's cheeks are full, and no dimpling is evident. • Nipples are intact and not pinched after the feeding. • Absence of maternal pain. • Explain/demonstrate to mother how to release a latch that is painful or shallow without hurting herself. • Inform the mother to release or remove the baby. 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C10 PI 35: Engage in a conversation with a mother regarding 2 aspects related to the importance of rooming-in 24h/day			
<p>Using Foundational Skills, discuss the importance of rooming-in (in mother's room to ensure correct identification of the infant):</p> <ul style="list-style-type: none"> • To learn how to recognize and respond to her baby's feeding cues. • To facilitate establishment of breastfeeding. • To facilitate mother and baby's bonding/attachment. • To enable frequent, unrestricted responsive feeding. • To increase infant's and mother's well-being (less stress). • To improve infection control (lower risk of spreading infectious diseases). 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C10 PI 69: Demonstrate at least 3 safety aspects to assess when mother and baby are skin-to-skin during the postpartum hospitalization, regardless of method of birth.			
<p>Using Foundational Skills:</p> <ul style="list-style-type: none"> Frequent and repetitive assessments, including observation of newborn breathing, activity, color, tone, and position. Support of the baby in case of caesarean section, to avoid falls. Position the newborn on the mother to facilitate visual contact and recognition of the baby's awakening and hunger cues by the mother. <ul style="list-style-type: none"> Infant's face can be seen Infant's head is in "sniffing" position Infant's nose and mouth are not covered Infant's head is turned to one side Infant's neck is straight, not bent Infant's shoulders and chest face mother Infant's legs are flexed Infant's back is covered with blankets Ensure the infant can spontaneously lift his head at all times to facilitate optimal breathing and first sucking. Visually check the infant's breathing, color, responsiveness to stimulation when checking the mother's vital signs and without removing the blanket to avoid a decrease in temperature. Ensure the infant's nose and mouth are visible at all times. Ensure the mother is responsive. Mother-infant dyad is monitored regularly by staff on the postpartum unit. When mother wants to sleep, infant is placed in bassinet or with another support person who is awake and alert. 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C11 PI 40: Demonstrate to a mother how to hand express breast milk, noting 8 points.			
Use Foundational Skills to discuss the importance of: <ul style="list-style-type: none"> • Creating a comfortable environment to facilitate the let-down Reflex. • Washing hands. • Having a clean bowl/container to catch the milk. • Massaging the whole breast gently. • Shaping a “C” around the breast with fingers, push back toward the chest wall away from the areola. • Pushing fingers towards the chest and squeeze fingers together rhythmically, then pause. • Expressing milk from both breasts. • Expecting that a session will last 10-20 minutes as milk flow decreases. 			
Ensured mother had sufficient information about breastfeeding Covered ALL information on Checklist, sharing evidence-based information accurately.			
Completed documentation as appropriate			

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Competency 12: Help a mother to breastfeed a low-birth-weight or sick baby (Steps 5, 7 and 8) Performance Indicators: 43, 44, 45, 46	Competency 13: Help a mother whose baby needs fluids other than breast milk (Step 6) Performance Indicators: 51, 52
Competency 14: Help a mother who is not feeding her baby directly at the breast (Step 9) Performance Indicators: 53, 54, 56	Competency 15: Help a mother prevent or resolve difficulties with breastfeeding (Steps 5, 8, 9 and 10) Performance Indicators: 57

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
Prepared for the consultation <ul style="list-style-type: none"> Staff aware of engaging in meaningful conversations that ENCOURAGES* the patient and family members. 			
Established rapport <ul style="list-style-type: none"> Introduced self and supervisor. Explained reason for communication. Asked permission to continue. 			
C12 PI 43: Help a mother achieve a comfortable and safe position for breastfeeding with her preterm, late preterm, or weak infant at the breast, noting at least 4 points.			
Using Foundational Skills: <ul style="list-style-type: none"> First observe a mother breastfeeding before recommending changes. Preterm, late preterm, or some weaker infants will require more time, more patience as they may not open mouth upon stimulation or may not open their mouths wide enough. Guide a mother to bring baby to the breast and not breast to baby. Help a mother identify the most useful positions for weaker babies. Show how to do breast compression which may be useful with preterm, low tone or babies with a weak suck. Show a mother how to express milk into the baby's mouth. Help a mother identify how and when to release a latch that is painful or shallow (more frequent with preterm infants) without hurting herself. 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C12 PI 44: Engage in a conversation with a mother of a preterm, late preterm, or low-birth-weight infant not sucking effectively at the breast, including at least 5 points.			
<p>Using Foundational Skills, discuss the following:</p> <ul style="list-style-type: none"> • Facilitate prolonged skin-to-skin (Kangaroo Mother Care) to improve stabilization of temperature, breathing and heart rate. • Engage in a conversation with a mother about why it may be necessary to wake up the baby within 3-4 hours if he doesn't demonstrate cues. • Observe the baby latch + suck + swallow. • Monitor closely for frequently encountered problems such as hypoglycemia, poor feeding, hyperbilirubinemia. • Engage in a conversation with a mother about how to avoid excessive neonatal weight loss (more than 7% on day 3) and adjust feeding plan accordingly. • Suggest frequent hand expression and compression of the breast to a mother. • Explain how to hand express milk (see below). • Explain/demonstrate how to cup feed the expressed breastmilk. • Explain the negative effects of pacifiers and teats while breastfeeding is being established. • Describe medications that can affect breastfeeding. • Explain safe sleeping. • Explain the signs of undernourishment or dehydration in the infant. • Explain appropriate storage and handling of expressed breastmilk. • Describe maintenance of lactation during separation or illness of mother or baby. 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C12 PI 45: Engage in a conversation with a mother separated from her preterm or sick infant regarding at least 2 reasons to be with her infant in the intensive care unit.			
Using Foundational Skills, discuss the following: <ul style="list-style-type: none"> • She will help her baby heal and grow better. • She will be able to breastfeed sooner and better. • She will be able to express breast milk more easily. • She can feed her baby (using tube or other means). • Her baby needs her touch, her warmth and her voice. • When the mother is not able, the presence of significant others is also important. 			
C12 PI 46: Engage in a conversation with a mother of a preterm, late preterm or vulnerable infant (including multiple births) regarding the importance of observing at least 2 subtle signs and behavioral state shifts to determine when it is appropriate to breastfeed.			
Using Foundational Skills, discuss the following: <ul style="list-style-type: none"> • Breastfeeding at the breast is guided by the infant's competence and stability rather than a certain gestational/postnatal/postmenstrual age or weight. • How to recognize discrete signs of transition from deep to active sleep and waking up. • Mother is guided not to interrupt the deep sleep stage just for routine feeding. • Mother encouraged to observe her infant's signs of interest in rooting and sucking. • Mother breastfeeds when her infant shows such signs. 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C13 PI 51: Engage in a conversation with a mother who intends to feed her baby formula, noting at least 3 actions to take.			
Use Foundational Skills to: <ul style="list-style-type: none"> Elicit information about why she intends to mixed feed. Assess a breastfeed to evaluate the presence of medical indications for supplementation. Manage common breastfeeding difficulties. Respond to the individual mother's and family's needs, concerns, preferences and values related to mixed feeding. Encourage mother to continue exclusive breastfeeding in the first 6 months. 			
C13 PI 52: Demonstrate at least 3 important items of safe preparation of infant formula to a mother who needs that information.			
Using Foundational Skills, demonstrate: <ul style="list-style-type: none"> Cleaning and sterilizing feeding and preparation equipment. Use of boiled water. Add powdered formula while water >70C/158F degrees. Exact amount of formula as instructed on the label. Cool the feed quickly to feeding temperature. Check temperature of formula before feeding. Discard formula not used within 2 hours. For using liquid formula concentrate: follow manufacturer's instructions. 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C14 PI 53: Demonstrate to a mother how to safely cup-feed her infant when needed, showing at least 4 points.			
Use Foundational Skills to demonstrate the following: <ul style="list-style-type: none"> • Hygienic measures for preparation (hands and utensils). • How to express breast milk. • How to store expressed breast milk. • How to handle expressed breast milk. • How to safely prepare formula. • Ensure the baby is fully awake, alert and interested in feeding. • Hold the baby fairly upright for feeds. • Tip the cup so the milk just reaches the baby's lips. • Let the baby lap the milk at his own pace. • When baby ends the feed in satiation, hold baby upright and gently rub or pat his back to bring up any wind. • Look out for and respect satiation cues. 			
C14 PI 54: Describe to a mother at least 4 steps to feed an infant a supplement in a safe manner.			
Using Foundational Skills, explain the following: <ul style="list-style-type: none"> • Hold the baby fairly upright for feeds. • Allow the baby to drink at his/her own pace. • Baby may need short breaks during the feed and may need to burp sometimes (paced feeding). • When the baby ends the feed in satiation, hold the baby upright and gently rub or pat his back to bring up any wind. • Look out for and respect satiation cues. 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C14 PI 56. Engage in a conversation with a mother who requests feeding bottles, teats, pacifiers and soothers without medical indication, including at least 3 points.			
<p>Use Foundational Skills to:</p> <ul style="list-style-type: none"> • Explore the reasons for a mother's request for a feeding bottle, teat or pacifier. • Address her concerns behind her request. • Educate on the risks of feeding bottles, teats or pacifier use, especially on suckling and nutritional status. • Suggest alternatives to calm a baby. • List possible hygiene risks related to inadequate cleaning of feeding utensils. • Explain that suckling from a feeding bottle and teat may cause breastfeeding difficulty, especially if use starts before breastfeeding is established or bottle use is prolonged. • Suggest that pacifiers may replace suckling, which can lead to a reduction of maternal milk production. • Alert the mother that a pacifier prevents the mother from observing the infant's subtle feeding cues, which may delay feeding. • Explain that the use of feeding bottles with teats in preterm infants interferes with learning to suckle at the breast. 			

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C15 PI 57: Engage in a conversation with a mother regarding at least 4 different ways to facilitate breastfeeding in order to prevent or resolve most common conditions of the lactating breasts (sore nipples, engorgement, mother who thinks she doesn't have enough milk, infants who have difficulty sucking).			
Use Foundational Skills to discuss: <ul style="list-style-type: none"> • Frequent skin-to-skin. • 24h rooming-in. • Importance of skin-to-skin and rooming-in for both parents. • Infant's cues, signs of a good latch and milk transfer, infant swallowing, and how to remove a baby from the breast if in pain. • Baby can remain at her breast for as long as he desires. • Unrestricted frequency and responsive feeding. • Avoidance of pacifiers/dummies and/or bottles during the first weeks. • Typical feeding patterns: day and night for the first weeks and at least 8 times per 24h, expecting more often during the first week. • Mother's perception of adequate milk supply (also versus colostrum). • How the mother can confirm reliable and adequate milk production by observing specific signs in the baby. • Breastfeeding takes practice, patience, and persistence. 			
Ensured mother had sufficient information about breastfeeding			
Covered ALL information on Checklist, sharing evidence-based information accurately.			
Completed documentation as appropriate			

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Competency 16: Ensure seamless transition after discharge (Step 10)

Performance Indicators: 62, 63

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
Prepared for the consultation <ul style="list-style-type: none"> Staff aware of engaging in meaningful conversations that ENCOURAGES* the patient and family members. 			
Established rapport <ul style="list-style-type: none"> Introduced self and supervisor. Explained reason for communication. Asked permission to continue. 			
C16 PI 62: Develop individualized discharge feeding plans with a mother that includes at least 6 points.			
<p>Using Foundational skills, assess a feed and the general health of mother and baby, then choose appropriate points that are relevant to the specific mother's and baby's needs to develop a plan, such as:</p> <ul style="list-style-type: none"> Review mother's understanding of her baby's unique feeding cues. Review baby's ability to achieve a comfortable latch, and Review signs of milk transfer with infant swallowing. Review signs of adequate of adequate intake (stools and urine). Review mother's understanding of her baby's need to feed frequently at least 8 times in 24 hours or more. Review with mother the importance of eye-to-eye contact with baby while feeding. Remind mother to let the baby finish nursing on the first breast, then offer the other breast until the baby seems satisfied by releasing the breast. Review mother's position (how she holds baby) to assure comfortable, pain-free feeds. <p style="text-align: right;"><i>(Continues... next page)</i></p>			



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Date Completed: _____

Checked by: _____



- Review mother's understanding of ensuring / enhancing milk production and let-down.
- Review mother's understanding of hand-expressing colostrum/breastmilk and why this is helpful.
- Reinforce mother's awareness of risks of other fluids and importance of exclusive breastfeeding for 6 months.
- Reinforce mother's awareness of risks and uses of pacifiers and teats.
- Reinforce that very few medications or illnesses are contraindicated during breastfeeding.
- Provide mother with accurate sources of information and how to get help if needed.
- Provide the mother with information for continued breastfeeding and general health support in the community.
- Remind mother that adequate food and drinks support her general health because special foods are not needed for breastfeeding.
- *as applicable* Appropriate guidance specific to the mother/infant dyad.
- *as applicable* Reinforce mother's understanding of safe sleeping (breastfeeding and co-sleeping) arrangements.
- *as applicable* Observe mother's ability to correctly use and care for her breast pump.
- *as applicable* Observe mother's ability to correctly prepare and use infant formula.

Name/ID: _____

Date Completed: _____

Checked by: _____

Knowledge, Skills and Attitudes (KSA) Displayed	Competent	Needs to improve	Comments
C16 PI 63: Describe to a mother at least 4 warning signs of infant undernourishment or dehydration for a mother to contact a health care professional after discharge.			
Using Foundational Skills, explain the following signs: <ul style="list-style-type: none"> • Usually sleeping for more than 4 hours. • Baby apathetic. • Irritable or weak cry. • Always awake. • Never seeming satisfied. • Inability to suck. • More than 12 feeds per day. • Most feeds lasting more than 30 minutes. • No signs of swallowing with at least every 3–4 sucks. • Scant urine per day. • No stools 			
Ensured mother had sufficient information about breastfeeding <ul style="list-style-type: none"> • Covered ALL information on Checklist, sharing evidence-based information accurately. 			
Completed documentation as appropriate			

Adapted from the Baby-Friendly USA, Inc. "Guidelines and Evaluation Criteria for Facilities Seeking Baby-Friendly Designation, Sixth Edition" and the WHO competency verification toolkit, ensuring competency of direct care providers to implement the baby-friendly hospital initiative Web annex A Competency verification form (sorted by domain and competency). *ENCOURAGES = Empathize, Non-judgmental, Confirm, Open-ended questions, Use competent skills, Responsive care, Affirm, Give evidence-based information, Empower, and Support.