

# The Baby Friendly Hospital Initiative Staff Acknowledgement

1. I have received a copy of the *Ten Steps to Baby Friendly*.

Yes      No

2. I am aware of our current breastfeeding policy.

Yes      No

3. I have had an opportunity to speak with one of the lactation consultants and to ask questions about Baby Friendly.

Yes      No

4. I am familiar with the Baby Friendly Task Force & Teams.

Yes      No

5. I understand that the hospital's goal is to receive the Baby Friendly Award in 20xx.

Yes      No

6. I know who to contact for further information.

Yes      No

Additional Comments/Questions:

Name: \_\_\_\_\_

Unit: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_