

## BACKGROUND

### Legal framework for breastfeeding

Vietnam has adopted a legal framework that is enabling and supporting breastfeeding in health facilities. The framework is based on the following legislation:

- **Government Decree No. 100 (2014).** Regulates the trade and use of breastmilk substitutes (BMS), feeding bottles, and artificial pacifiers for young children.
- **Ministry of Health's Decision No. 4673 (2014) and 6734 (2016).** Approves the guidelines for maternal and infant essential care during and after birth (for vaginal and cesarean deliveries).
- **Ministry of Health's Decision No. 6858 (2016).** Issues the National Hospital Standards and Accreditation that institutionalizes the World Health Organization's (WHO) 10 Steps of Successful Breastfeeding.
- **Ministry of Health's Circular No. 38 (2016).** Promotes breastfeeding in health facilities and designates baby-friendly hospitals.

## CENTERS OF BREASTFEEDING EXCELLENCE

### What are Centers of Breastfeeding Excellence?

Building on the foundation of the legal framework, hospitals can receive this designation if they create an environment that is friendly toward breastfeeding. This involves promoting skin-to-skin contact for babies, ensuring that mothers can successfully initiate early breastfeeding, and enabling mothers to exclusively breastfeed (regardless of whether they delivered vaginally or via cesarean section). This designation serves as a good reference for hospitals when families are deciding where to deliver.

### Who provides this designation?

Central hospitals are accredited by Ministry of Health (Maternal and Child Department, Medical Services Administration). Provincial hospitals are co-accredited by Ministry of Health and Provincial Department of Health. District hospitals are accredited by Provincial Department of Health.

### What is the process for receiving the designation?

After a hospital has been evaluated, it will receive a standardized signboard if the facility has met the criteria to be accredited. The accreditation is published in the media and on social media platforms serving the breastfeeding community—including the Mother-to-Mother Support Group. The accreditation might be integrated in the provincial awarding system, depending on the provincial budget. The accreditation can be withdrawn if the hospital fails to meet the supportive supervision qualification or patient satisfaction qualification.

## ACCREDITATION CRITERIA

Hospitals are being designated as Centers of Breastfeeding Excellence if they meet the following four criteria:

- ✓ **Achieving Grade 4 in the Criterion E1.3 (on Breastfeeding),** as stipulated in the National Hospital Standards and Accreditation.
- ✓ **Meeting the bi-annual qualification for supportive supervision** of Early Essential Newborn Care (EENC) and Kangaroo Mother Care (KMC), according to WHO guidelines.
- ✓ **Receiving positive feedback from quarterly patient satisfaction surveys** that are conducted via mobile phone with mothers after hospital discharge.
- ✓ **Maintaining a streamlined data system** that monitors early initiation of breastfeeding and exclusive breastfeeding practices at discharge.

## Specific criteria for designating Centers of Breastfeeding Excellence

Criteria	Means of Verification
1. The rate of health workers of the obstetric department who are trained on counseling and supporting breastfeeding accounts for at least 95%.	EENC Database Breastfeeding training/ coaching certificates
2. There are dedicated breastfeeding counselors who have received breastfeeding training and education and have received certification.	Official hospital staffing decisions on breastfeeding counselors
3. There is a group (including nurses, midwives) dedicated to supporting mothers' breastfeeding, whose staff has knowledge and skills of counseling/ guiding/supporting mothers to breastfeed their babies.	Official hospital decision on establishing a breastfeeding support group
4. The rate of mothers receiving counseling and support from health workers to appropriately breastfeed their newborns reaches 80% or higher of the total number of mothers giving birth at the hospital.	EENC Supportive Supervision Patient Satisfaction Survey
5. The rate of mothers delivering vaginally who can stay with their newborns 24 hours a day reaches 95%.	EENC Database Patient Satisfaction Survey
6. The rate of vaginal births receiving the complete procedure of maternal and EENC during and right after birth reaches at least 80%, as stipulated by the Ministry of Health.	EENC Supportive Supervision EENC Database Patient Satisfaction Survey
7. The rate of cesarean section (C-section) births receiving the complete procedure of maternal and EENC during and right after birth reaches at least 50%, meeting all conditions for EENC application, as stipulated by the Ministry of Health.	EENC Supportive Supervision EENC Database Patient Satisfaction Survey
8. The rate of newborns within the obstetric department who are exclusively breastfed is at least 80%.	Exit Interview Patient Satisfaction Survey
9. No violation of Government Decree No. 100/2014/ND-CP, dated November 6, 2014. This includes: <ul style="list-style-type: none"> <li>No logos or signs of sponsorship from breastmilk substitutes companies at hospitals.</li> <li>No prescriptions or recommendations by doctors for breastmilk substitute products, except for metabolic diseases.</li> <li>No sales or exhibition of breastmilk substitutes at hospital canteens.</li> </ul>	Periodical Monitoring Patient Satisfaction Survey
10. There is a gradual reduction of the rate of C-section at first birth down to 10-15%.	Hospital Data
11. There is a storage facility allowing mothers to store their own milk for their babies. OPTIONAL: There is a human milk bank with pasteurization services at the Grade 5 hospitals that have specialized neonatal care units.	Hospital Observation
12. The hospital maintains a streamlined data system monitoring early initiation of breastfeeding and exclusive breastfeeding practices at discharge.	Alive & Thrive data monitoring system
13. No breastmilk substitutes for young children, feeding bottles, or artificial pacifiers are used in postpartum rooms.	Periodical Monitoring Hospital Observation

Criteria 1-9 are compliant with Grade 4 in Criterion E1.3 (on Breastfeeding) of the National Hospital Standards and Accreditation institutionalizing WHO's 10 Steps of Successful Breastfeeding. Criteria 10-13 are optional and being recommended by Alive & Thrive to the Ministry of Health as a revision of the Hospital Standards, which will tentatively be effective from 2020.