

Implementing Point One

Requirements for Point One

Have a written breastfeeding policy that is routinely communicated to all staff and volunteers.

The health service needs to have a written Breastfeeding Policy that addresses all of the Seven Points and protects breastfeeding by adhering to the International Code.

Any additional guidelines or policies which may impact on the care of breastfeeding mothers and babies should be evidence-based, accurate and effective.

Mothers who have medical indications for which breastfeeding is not recommended, or mothers of babies with such medical indications, must receive counselling on infant feeding and guidance on selecting options likely to be suitable for their situation.

The policy must be developed in consultation with Maori, other ethnic groups, consumer organisations and other providers using the service. The policy must also support the Treaty of Waitangi (protection, participation and partnership) which needs to be stated and apparent throughout the document.



The policy or a synopsis of it in the form of a "Parents Guide - a summary of the Breastfeeding Policy" should be on display and effectively communicated to pregnant women and parents, using languages most commonly understood by clientele and staff.

The policy should be easily locatable and available at all times for staff and users to refer to. A description of how staff are orientated to and are made aware of the policy is to be included; verification that this occurs is to be supported by training documentation.

The policy is to be self audited annually. This is achieved by carrying out a annual self appraisal questionnaire; this document is available from the NZBA.

The policy must be reviewed three yearly.

A sound policy helps to ensure good practice and high standards of care

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1. The policy and accompanying guidelines

A sound breastfeeding policy helps ensure good practice and high standards of care and therefore underpins the principles of the *Seven Point Plan*. The focus of the policy is to protect breastfeeding as a human right.

The main points of the International Code of Marketing of Breast-milk Substitutes must be included within the document or the service must have a separate policy to cover these points.

Additionally, the service should have an *artificial feeding* policy that is separate from the breastfeeding policy.

Health services in the community may wish to develop a policy that is common to their *BFCI* group of services individualised with amendments that address specific requirements as necessary. *BFCI* leaders may wish to collaborate to develop regional policies and NZBA have provided a *sample breastfeeding policy* and a *parents guide—a summary of the breastfeeding policy*. Services in the community are welcome to use these policies in their entirety or parts can be incorporated into an existing policy or a service may choose to use a different approach. It should be noted that local consultation is essential.

A well-written policy provides standards that can be measured easily. It is important to note that there is a difference between a policy and guidelines for practice. The policy sets out the aims, principles and standards that should be achieved. Guidelines provide further supporting information on the practicalities of implementing the policy, but are not in themselves sufficient to meet the criteria for this point.

The policy should indicate a designated individual/group responsible for issues concerning breastfeeding that includes:

- monitoring breastfeeding initiation/establishment and duration rates
- developing initiatives to enhance breastfeeding
- reviewing policies, procedures and guidelines for practice
- auditing compliance with the policy on an annual basis
- disseminating relevant research findings
- ensuring staff/workers and volunteers receive orientation to the document
- initial breastfeeding education requirements and the continuing education

NZBA have produced sample policies which may be used to develop a facility's own policy

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The policy should identify clearly the service provider(s) who will act as the point of first referral for mothers experiencing breastfeeding challenges. Services in the community may decide it is appropriate to adopt guidelines for the management of breastfeeding challenges. All such guidelines must be evidence-based. The aim of a guideline is to identify best practice and to agree on how this may be implemented most successfully in the area covered by the service. This will facilitate consistent information between different disciplines, and between health practitioners and others.

There should be a reliable system in place that ensures continuity of care between hospital maternity services and services in the community, particularly where any part of the LMC service is fractionated. Every effort should be made to ensure that communication between the various breastfeeding support individuals in the community is as comprehensive as is permissible and that mothers participate actively in discussions about their care and follow-up.

2. Communicating the Policy

The essence of the policy must be communicated to staff/workers and clientele to ensure they are made aware of what standard of care to expect from the service.

Compliance with the policy is compulsory for all staff/workers and volunteers and each should be given their own copy of the breastfeeding policy as part of the orientation process. It is expected that the policy will include the provision for staff/workers to continue to breastfeed on their return to work and to have facilities for the expression and storage of their breastmilk, if required.

The general policy should be displayed and/or available in English, Maori and languages most commonly understood by clientele and staff/workers in all locations where services to mothers and babies are provided. If a parents' guide (rather than the full policy) is displayed and/or available it should be clearly stated that parents may see a copy of the complete policy on request. The full policy should always be accessible and details of where to view a copy should be included on the displayed/available information. If the service does not own its own premises, it will nevertheless be expected to make an effort to display the policy. If this is not possible, other means of communicating the policy to pregnant women and breastfeeding mothers must be adopted.

The policy must be communicated to users of the service so that they know what standard of care to expect

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3. Audit of the policy

Annual audit of compliance with the breastfeeding policy is required once the service has been accredited as a Baby Friendly Service; to assist you with this requirement the NZBA have developed the Annual Self Appraisal Questionnaire, which is available on request.

The audit monitors the effectiveness of both the policy, the staff/worker orientation program and the needs of clientele.

The policy must also be reviewed three yearly.

Key requirements for the development of the Breastfeeding Policy

1. The policy fully covers all of the Seven Points.
2. The policy or supporting documentation contains the key points of the International Code of Marketing of Breast-milk Substitutes and subsequent relevant WHA resolutions.
3. The policy indicates staff and service compliance with the International Code.
4. The policy indicates that mothers and / or babies for whom breastfeeding is not recommended due to medical indications, receive the appropriate guidance / counselling on feeding options suitable to their situation.
5. The policy indicates which health care provider will act as the point of first referral for mothers experiencing common breastfeeding challenges.
6. Consultation occurred in the development of the policy with the following groups:
 - staff/workers in the service;
 - service providers (includes LMC's);
 - Maori (including Maori health units, Kaumatua and Iwi);
 - consumer organisations;
 - Pacific Peoples; and
 - other ethnic groups

Annual audit of compliance with the policy is required following accreditation

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Key requirements for the development of the Breastfeeding Policy

7. Documentation of the consultation process is available.
8. The Principles of the Treaty of Waitangi or protection, partnership and participation are included in the Breastfeeding Policy and are clearly identifiable.
9. The policy is communicated to staff /workers and volunteers.
10. The policy is easily locatable and the person responsible for the service can describe how staff/workers are orientated to the policy.
11. The policy is available and easily locatable for all staff/workers who take care of mothers and babies.
12. A full policy or a "Parents Guide Summary" of the breastfeeding policy is displayed in an easily understood form in all areas providing services to mothers and babies; a copy of which is available to mothers on request.
13. The policy or a summary of such is displayed in the language(s) and wording most commonly understood by consumers and staff/workers in highly visible areas throughout the service.
14. A mechanism exists to audit the policy on an annual basis.
15. The dates of the audit and a review of the policy and procedures and guidelines are apparent in the policy.
16. The policy is reviewed at least every three years.
17. Guidelines (if any exist) are accurate and evidence based.
18. The policy makes provision for staff/workers to continue to breastfed on their return to work and provides facilities for expressing and storing breastmilk.

The policy or an abridged version should be visibly posted in all areas of the service

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Documentation required for Point One prior to Assessment

1. A copy of the Breastfeeding Policy.
2. Documented evidence of the consultation process:
 - correspondence notifying interested parties that the service was seeking consultation on the Breastfeeding Policy;
 - records of face to face meetings; and
 - evidence of feedback received.
3. Other supporting policies (if applicable):
 - International Code of Marketing of Breastmilk Substitutes and Subsequent relevant World Health Assembly resolutions; and
 - "Parents Guide Summary" of the Breastfeeding Policy

The policy must be supported by evidence based guidelines

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