

Sample Breastfeeding Policy

Overview

This sample policy covers *The Seven Point Plan for the Protection, Promotion and Support of Breastfeeding in the Community*. It is suitable for health services which are provided in the community and which are outside of hospitals/ maternity facilities or birthing centres. This sample policy can be adapted to meet the needs of the entity.

Principles

This health service supports breastfeeding as the natural way for a woman to feed and nurture her baby and also recognises the important health benefits for both the mother and her child.

All mothers have the right to make fully informed decisions as to how they feed and care for their babies. The timely provision of clear and impartial information to all mothers regarding infant and young child feeding is essential.

Once they have ensured that the family / whanau have received accurate information, our health workers have the responsibility to support mothers and families regardless of the decision made. This policy is designed to ensure good professional practice and support, not to dictate the decision for mothers.

Aims

1. To ensure that the health benefits of exclusive breastfeeding to 6 months and sustained breastfeeding along with the health risks of *artificial feeding* are discussed with all women and their families/whanau (as appropriate), to enable the making of informed decisions about how they will feed their babies.
2. To create an environment where more women choose to breastfeed their babies and where, given sufficient information and support, more women breastfeed exclusively for six months and continue breastfeeding, with the addition of appropriate, adequate and safe complementary foods, to two years of age or beyond.
3. To enable all health care providers who have contact with breastfeeding women to provide full and competent support through specialised education and training in all aspects of current breastfeeding management.
4. To promote collaboration and cooperation with other health care providers, hospitals/maternity facilities and community groups in the delivery of a seamless service to enhance breastfeeding outcomes.
5. To support the development of a breastfeeding culture throughout the local community.
6. To protect breastfeeding by adhering to the Code of Marketing of Breastmilk Substitutes.

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Note: *The service must either incorporate the main points of The Code into their Breastfeeding / Artificial Feeding Policy or have a separate Policy detailing how the service adheres to the Code of Marketing of Breastmilk Substitute.*

In Support of this Policy

This policy is directed towards the protection, promotion and support of breastfeeding for healthy breastfeeding mothers and babies. It is the responsibility of all health care providers to consult with others should concerns arise about the baby's health. Health practitioners are encouraged to refer to lactation specialists (International Board Certified Lactation Consultants) in special or complex situations.

The policy and any associated procedures or guidelines will be reviewed at least three yearly. Compliance with the policy will be monitored on an annual basis by self-appraisal.

No advertising of breastmilk substitutes, feeding bottles, teats or dummies is permissible in this health service. The display of logos of manufacturers and marketers of these products on such items as calendars and stationary is also prohibited.

No literature provided by manufacturers and marketers of artificial baby milks is permitted for distribution to families/whanau but services may have accurate scientific literature for their own education. Any educational material, including electronic information for distribution to women or their families must reflect BFCI policies and complies with The Code.

In the postnatal period and in an individualised session, parents, who have made a fully informed decision to feed their baby a breastmilk substitute; will be shown how to prepare the selected breastmilk substitute feed correctly. No routine group instruction on the preparation of breastmilk substitutes will be given in the antenatal period, as this does not provide timely information and has the potential to undermine confidence in breastfeeding.

The Policy

This service works within the Principles of the Treaty of Waitangi (partnership, participation and protection) to improve outcomes for Maori and non-Maori in our community.

Communicating the Breastfeeding Policy

- 1.1. This policy will be communicated to all health workers and volunteers. All health workers will receive a copy.
- 1.2. All new staff will be orientated to the policy (appropriate to their roles and responsibilities within the service) as soon as their employment begins.
- 1.3. Wherever health services are provided in the community, this policy will be displayed in all public areas and made available where the service is not delivered from a site. The Parent's Guide Summary of the Breastfeeding Policy and *The Seven Point Plan* will be available in the languages of the main ethnic groups.

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- 1.4 This policy and associated procedures and guidelines will be reviewed and audited for compliance at least three yearly.

Education and Training of Health Care Providers

- 2.1 Childbirth educators, general practitioners, lactation consultants, lead maternity carers, midwives, obstetricians, paediatricians, practice nurses and plunket nurses/tamariki Ora and other well child providers will have the primary responsibility for supporting breastfeeding women, and those preparing to breastfeed, and for helping them to meet any challenges.
- 2.2 All professional, clinical, clerical, ancillary or support health care workers who have contact with pregnant women and mothers will receive education and training in breastfeeding management at a level appropriate to their role. New staff will receive training within six months of starting their position.
- 2.3 A designated person in the health service will be responsible for facilitating the breastfeeding education and training program and will monitor efficacy of the programme and kept records of all dates, times and programmes and list of attendees for audit purposes.

Informing Pregnant Women of the Benefits and Management of Breastfeeding

- 3.1 Every effort will be made to ensure that all pregnant women are aware of the importance of *exclusive breastfeeding* and of the health risks associated with using artificial baby milks.
- 3.2 A pregnant woman who has contact with the service will be given information and an opportunity to discuss infant feeding on a one-to-one basis with her lead maternity carer and other practitioners as appropriate.
- 3.3 Antenatal education, when provided by this health service, will include information to help a woman and her family/whanau make an informed decision about infant feeding. The basics of current breastfeeding practice and the common experiences that may be encountered will be included. The aim is to give a woman confidence in her ability to breastfeed.
- 3.4 All materials and teaching will reflect the WHO / UNICEF Baby Friendly best practice standards.

Supporting and Sustaining *Exclusive Breastfeeding*

- 4.1 This service will support evidence-based practices, which are known to facilitate the initiation and establishment of *exclusive breastfeeding*, such as skin-to-skin contact, mother and baby together, keeping baby near and cue-based feeding. *Exclusive breastfeeding* to six months will be encouraged.
- 4.2 Lead maternity carers and/or other providers will ensure that mothers are able to correctly position and latch their babies to the breast and assess for effective feeding, adequate hydration.
- 4.3 This service will not advise the use of bottles, teats, dummies or nipple shields before all possible solutions to breastfeeding challenges have been explored.

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- 4.4 Breastfeeding progress will be assessed at each client contact to enable early identification of potential concerns with breastfeeding.
- 4.5 All breastfeeding mothers will be shown how to hand express their milk, if required, and will be provided with information on hand expressing and, if required, the use of breast pumps.
- 4.6 Health practitioners will ensure that a mother is given support and encouragement to maintain lactation during periods of separation from her baby and advice about breastcare and the storage and use of expressed breastmilk.
- 4.7 The service will provide all mothers with information on how to access breastfeeding and parenting support on a 24 hour basis.
- 4.8 Health workers will refer breastfeeding mothers to a lactation specialist should breastfeeding issues arise outside their own scope of practise.
- 4.9 Safe sleep practices will be discussed with all mothers in contact with the service.

Breastfeeding beyond Six Months

- 5.1 This service will reflect the aim of *exclusive breastfeeding* to six months and continued breastfeeding to two years or beyond with the introduction of appropriate, adequate and safe complementary foods and support and inform breastfeeding mothers accordingly.
- 5.2 Mothers will be informed about sustaining breastfeeding should they return to work and about information available from the Department of Labour and the Human Rights Commission.
- 5.3 Health workers in the service will be offered information regarding teething, tandem feeding, contraception compatible with breastfeeding and the importance of a Smokefree environment.
- 5.4 As necessary, this service will support its own staff to breastfeed by the provision of facilities, appropriate work hours and/or breaks.

A Welcome for Breastfeeding Families

- 6.1 Breastfeeding is regarded as the optimal way to feed babies and young children. Mothers will be enabled and supported to feed their children in all public areas in this facility.
- 6.2 Facilities will be available for mothers who prefer privacy.
- 6.3 All health workers and volunteers will demonstrate a positive attitude towards breastfeeding.
- 6.4 Signs in all public areas of this service will inform users of this policy.

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- 6.5 All health workers and volunteers will ensure that their practices adhere to *The International Code of Marketing of Breast-milk Substitutes*, and all subsequent relevant WHA resolutions. The service will be free of educational support materials sponsored by companies that market items covered under the scope of *The International Code*. The service will be free from the promotion of artificial baby milks and related products and there will be no distribution of these products by staff or volunteers.
- 6.6 Breastfeeding information will be displayed and/or available for mothers in languages representative of the service's clientele.
- 6.7 A formal complaint process / mechanism for feedback, which can be completed confidentially is available and visible to the general public.

Encouraging Community Support for Breastfeeding

- 7.1 The service will have a reliable, formal system for communicating a mother's baby-feeding choice and progress from the LMC/hospital to this service in the community.
- 7.2 This health service in the community will encourage collaboration with other health care providers and community based breastfeeding support programmes.
- 7.3 Representatives of local community based breastfeeding support programmes (e.g. mother to mother or peer breastfeeding counsellors) will be invited to participate in the development of breastfeeding policies and related breastfeeding initiatives through multidisciplinary committees.
- 7.4 The staff of this health service will use their influence to advocate for a breastfeeding culture in the local community through collaborative partnerships with community groups, businesses, schools, local government and the media.
- 7.5 Mothers and health workers will be informed and given contact details of local breastfeeding support groups and other support services including cultural / ethnic groups.

The Code

The service is committed to upholding the WHO / UNICEF International Code of Marketing of Breast-milk Substitutes and subsequent relevant WHA resolutions. Refer to the policy on The Code.