



WOMENS AND NEWBORNS HEALTH NETWORK

BABY FRIENDLY HEALTH INITIATIVE – HOSPITAL BREASTFEEDING POLICY 2014

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1. Policy statement

This Baby Friendly Health Initiative - hospital breastfeeding policy promotes, supports and encourages breastfeeding as the optimal way for a woman to feed her baby. WA Health acknowledges that breastfeeding offers important health benefits for both the mother and child.

WA Health recognises and supports the importance of creating and delivering a health care environment in hospitals with maternity facilities, where breastfeeding is encouraged, promoted and supported by all staff to parents.

WA Health hospitals with maternity facilities are to follow and appropriately educate and train all staff on the 'Ten Steps to Successful Breastfeeding'. WA Health staff are not to discriminate against any woman in her chosen method of infant feeding and are to fully support her when she has made that choice.

The policy recognises that all mothers have the right to receive clear and impartial information to enable them to make a fully informed choice as to how they feed and care for their babies after birth. Mothers are to be supported to feed their infants in all areas of the hospital. Signs are to be displayed throughout the hospital informing all staff and parents that breastfeeding is welcome.

Staff members wishing to return to work while continuing to breastfeed are entitled to flexible lactation breaks and management support consistent with the [WA Health Employee Breastfeeding Policy \(OD 0520/14\)](#).

2. Aims of the policy

1. To ensure the health benefits of breastfeeding and the potential health risks associated with breast milk substitute feeding are discussed with all women and their families as appropriate in hospitals with maternity facilities, so they can make an informed choice about how they are to feed their babies.
2. To enable WA Health staff to create an environment where more women choose to breastfeed their babies, and are given sufficient information and support to enable them to breastfeed exclusively for six months, and then as a part of their infant's diet beyond the first year of life.
3. To promote consistency between all health professionals and develop a breastfeeding culture throughout WA Health hospital's with maternity facilities to avoid conflicting advice.
4. To encourage consistent, comprehensive and evidence based breastfeeding information is provided to parents by all health care professionals working in hospitals with maternity facilities.
5. To adhere to the World Health Organization (WHO) Code of marketing of breast milk substitutes.
6. To encourage WA Health hospitals with maternity facilities to demonstrate a commitment to breastfeeding by seeking BFHI accreditation status.

3. Scope of the policy

All WA Health staff are required to adhere to the Baby Friendly Health Initiative - hospital breastfeeding policy to avoid conflicting advice. Any deviation from the policy must be justified and recorded as a variance of care in the mother's and/or the baby's health care record.

The Baby Friendly Health Initiative - hospital breastfeeding policy is to be used by all public health staff, in conjunction with both the [Women and Newborns Health Service clinical guidelines for newborn feeding](#) and the WA Health Baby Friendly Health Initiative - hospital breastfeeding policy: Information flyer.

Individual health services may choose to develop and utilise their own evidence-based Clinical Guidelines.

The policy is directed to mothers of healthy babies born at term. If a baby is unwell or pre-term it may require more flexible practices in relation to feeding. It is the responsibility of all health professionals to liaise with the baby's medical attendants (paediatrician, general practitioner) if concerns arise about the baby's health.

This policy is to be reviewed every three years.

3.1 Baby Friendly Health Initiative - hospital breastfeeding policy and infant breast milk substitute feeding in hospitals with maternity facilities.

WA Health Facilities are prohibited from promoting and receiving free and subsidised breast milk substitute, nor can they sell breast milk substitute on their premises.

The display of information and distribution of materials promoting breast milk substitute or breast milk substitute feeding, bottles, teats or dummies is not permissible in WA hospitals with maternity facilities. The acceptance of gifts, non-scientific literature, money, or support for in-service, infant feeding related education or events is not permitted from breast milk substitute manufacturing companies. Materials such as calendars and stationary or equipment displaying manufacturer's logos are also prohibited. No literature provided by manufacturers of breast milk substitute is permitted to be distributed to families. Educational materials for distribution to women or families must be approved by hospital management. WA Health staff may not give samples of breast milk substitute to the general public.

WA Health facilities must restrict access to the facility and its staff to representatives from companies which distribute or market products within the scope of the WHO Code, nor must they have access to women and their families.

Any research being undertaken in a WA Health Facility that involves mothers and babies must be carefully scrutinised for potential implications on infant feeding, or interference with the full implementation of the policy.

Parents who have made a fully informed choice to feed their babies with breast milk substitute are to be shown how to prepare breast milk substitute feeds correctly, on an individual basis, in the postnatal period. No group instruction must be provided.

4. The Baby Friendly Health Initiative (BFHI) overview

BFHI is a joint World Health Organisation (WHO) and United Children's Fund (UNICEF) project. The aim is to give every baby the best start in life by creating a health care environment where breastfeeding is the norm and practices known to promote the health and well-being of all babies and their mothers are followed.

The ten steps to successful breastfeeding is the global standard by which healthcare facilities are assessed and accredited. A 'baby friendly' facility is one where mother's informed choice of feeding is encouraged, respected and supported.

5. Policy principles

The Baby Friendly Health Initiative – hospital breastfeeding policy principles reflect the key elements of the 'Ten Steps to Successful Breastfeeding'. This policy is to be implemented at all hospitals with maternity facilities in WA.

5.1 Step 1: Have a written breastfeeding policy that is routinely communicated to all health care staff

- 1.** The WA Health Baby Friendly Health Initiative – hospital breastfeeding policy is to be communicated to all health care staff in contact with pregnant women and mothers. All staff are to be able to access a copy of the WA Health Baby Friendly Health Initiative – hospital breastfeeding policy or information flyer from the Women's and Newborns' Health Network website.
- 2.** All new staff are to be orientated on how to locate the WA Health Baby Friendly Health Initiative – hospital breastfeeding policy and provided with a copy of the information flyer at orientation.
- 3.** The information flyer is to be displayed in all areas throughout the hospital.

5.2 Step 2: Train all health care staff in the skills necessary to implement this policy

- 1.** Health professionals have a responsibility to support breastfeeding women and assist and educate them to overcome related breastfeeding problems.
- 2.** All professional and support staff who have contact with pregnant women and mothers are to be trained in breastfeeding management at a level appropriate to their professional group. New staff are to receive training within six months of commencing their contract.
- 3.** All clerical and ancillary staff are to be orientated to the policy and receive training to enable them to refer breastfeeding queries appropriately.
- 4.** The responsibility for providing training lies with designated personnel who are to record training attendance.
- 5.** Written curricula clearly covering all ten steps to successful breastfeeding are to be available for staff training.

5.3 Step 3: Inform all pregnant women about the benefits and management of breastfeeding

- 1.** It is the responsibility of professional staff to ensure that all pregnant women are aware of the benefits of breastfeeding and the potential health risks of breast milk substitute feeding.
- 2.** All pregnant women are to be given the opportunity to discuss infant feeding on a one-to-one basis with a health professional. Such discussion is not to be solely attempted during a group parenting class.
- 3.** The physiological basis of breastfeeding is to be clearly and simply explained to all pregnant women, together with evidence-based management practices, which have proven to protect breastfeeding and reduce common problems. The aim is to give women confidence in their ability to breastfeed.
- 4.** All materials and teaching are to reflect WHO/UNICEF baby friendly best practice standards.

5.4 Step 4: Place babies skin to skin contact with their mothers immediately following birth for at least an hour and encourage mothers to recognise when their babies are ready to breastfeed, offering help if needed

- 1.** All mothers are encouraged to hold their babies with skin to skin contact as soon as possible after birth in an unhurried environment, regardless of their intended feeding method.
- 2.** In the case of caesarean section births mothers and babies are to remain together whenever possible, only being interrupted for medical reasons.
- 3.** If skin to skin contact is interrupted for clinical reasons, it is to be commenced/resumed as soon as mother and baby are able.
- 4.** All women are encouraged to offer the first breastfeed when the mother and baby are ready. Help from a midwife is to be available if needed.

5.5 Step 5: Show mothers how to breastfeed and how to maintain lactation even if they are separated from their infants

- 1.** All breastfeeding mothers are to be offered further assistance with breastfeeding during their hospital stay if required. The transfer of care for mothers and babies to community child health nurses is to follow standard procedure in the form of written communication to ensure a seamless transition.
- 2.** Midwives and health professionals are to ensure that mothers are offered the support necessary to acquire the skills of positioning their baby to ensure effective attachment for successful breastfeeding. They are to be able to explain the necessary technique to the mother, thereby helping her acquire this skill for herself.

3. All breastfeeding mothers are to be shown how to hand express their milk. Information outlining the process are to be provided for women to use for reference. [A consumer pamphlet on breastfeeding and breast care is available for parents.](#)
4. It is the responsibility of those health professionals caring for both mother and baby to ensure the mother is given help and encouragement to express milk and maintain lactation during periods of separation from her baby. A [consumer pamphlet for parents on expressing breast milk for their baby](#) is available.
5. Mothers who are separated from their babies are encouraged to express milk at least six to eight times in a 24 hour period. They are shown how to express by hand and pump.

5.6 Step 6: Give newborn infants no food or drink other than breast milk, unless medically indicated

1. For the first six months, breastfed babies should receive no other fluids, except in cases of medical indication or fully informed parental choice. In hospital no breast milk substitute is to be given to a breastfed baby unless prescribed by a medical practitioner.
2. Every effort is to be made to encourage mothers to express breast milk, for supplementation, if extra fluids or calories are required.
3. Parents must be consulted if breast milk substitute is recommended and the reasons discussed in full. Any breast milk substitute prescribed must be recorded in the baby's hospital notes or health record along with the reason for supplementation and accompanied by a consent signed by the parent.
4. Parents who request breast milk substitute are to be made aware of the possible health implications and the negative effect such action may have on breastfeeding to enable them to make a fully informed choice. This discussion is to be recorded in the health records/ consent form. A [consumer pamphlet for parents on breast milk substitute feeding](#) is available.
5. All mothers are to be encouraged to breastfeed exclusively for at least six months and continue breastfeeding for at least the first year of life. All weaning information is to reflect this ideal.
6. Data on infant feeding showing prevalence of both exclusive and partial breastfeeding is to be collected during their hospital stay and on discharge and transferred to community child health staff.

5.7 Step 7: Practice rooming-in; allow mothers and infants to remain together 24 hours a day

- 1.** Mothers are to assume primary responsibility for the care of their babies.
- 2.** Separation of mother and baby while in hospital is to occur only when the health of either the mother or her baby prevents care being offered in the postnatal areas.
- 3.** If the facility has a well baby area/treatment room it is not to be used to routinely care for babies.
- 4.** Babies are not to be routinely separated from their mothers at night. This applies to babies who are fed with breast milk substitute as well as those babies who are breastfed. Mothers who have delivered by caesarean section are to be given appropriate care but the policy of keeping mother and baby together is to apply.
- 5.** Mothers are to be encouraged to continue to keep their babies near them when they are at home, so they can learn how to interpret their baby's needs and feeding cues.
- 6.** All mothers are to be given appropriate information about safe infant sleeping that is consistent with the [WA Health Safe Infant Sleeping Policy and Framework 2013. Operational Directive OD 474/13](#) in WA Health hospitals and health services. A [consumer pamphlet guiding parents and carers on optimal safe infant sleeping practices](#) is available.

5.8 Step 8: Encourage breastfeeding on demand

- 1.** Feeding according to need is encouraged for all babies unless clinically contraindicated. Hospital procedures are not to interfere with this principle.
- 2.** Mothers are to be encouraged to continue to practise baby-led feeding throughout the time they are breastfeeding. The importance of night-time feeding for milk production is to be explained to mothers.

5.9 Step 9: Give no artificial teats or dummies to breastfeeding infants

- 1.** Artificial teats or dummies are not recommended for healthy term babies during the establishment of breastfeeding. Parents wishing to use them are to be advised of the possible detrimental effects on breastfeeding to allow them to make a fully informed choice. The information given and the parents' decision are to be documented in the appropriate health record.
- 2.** Nipple shields are not to be recommended without full assessment by an experienced midwife or lactation consultant. Any mother using a nipple shield must have its use fully explained. A mother is to be given information to assess when the baby is able to feed without the shield.

5.10 Step 10: Foster the establishment of breastfeeding support groups and refer mothers to them on discharge

1. All facilities support cooperation between health professionals and voluntary support groups whilst recognising that health care facilities have their own responsibility to promote breastfeeding.
2. All breastfeeding mothers are to be provided with contact details of health professionals who can support them with breastfeeding, including community midwives, community child health nurses, certified lactation consultants and Australian Breastfeeding Association counsellors.
3. Telephone numbers (or other means of contact) for community child health nurses, voluntary breastfeeding counsellors and support groups are to be issued to all mothers and be routinely displayed in all areas relevant to maternity and child health. A National 24 hour toll-free breastfeeding helpline has been established by the Federal Government. The hotline is run by the Australian Breastfeeding Association (ABA) and provides trained counsellors to assist and support parents with issues on breastfeeding. The hotline number is 1800 686 2 68 (otherwise know as 1800 mum 2 mum).
4. Contact details of professional and voluntary support are to be regularly updated by hospital staff to ensure correct information is given to mothers.
5. Representatives from breastfeeding support groups are to be invited to continue further development of the breastfeeding policy through involvement in appropriate meetings.
6. Culturally and linguistically diverse breastfeeding support information is available on-line from the [Australian Breastfeeding Association](#) and is to be made available to culturally and linguistically diverse women and their families.
7. The [Breastfeeding Centre of WA \(BFCWA\)](#) also provides online information for women.

6. Outcome/Performance measure/s

- All staff members who give breastfeeding advice to mothers and families have completed the necessary education and maintain the standards set down within the [Baby Friendly Health Initiative accreditation requirements](#). This is to be reviewed and documented by hospital clinical management.
- All women are provided with the opportunity to breastfeed or provide breast milk for their infants. Data is to be collected according to the [Baby Friendly Health Initiative accreditation requirements](#).
- Improved breastfeeding rates by promoting awareness of "[The Ten Steps to Successful Breastfeeding](#)".
- Implementation, monitoring and evaluation of this policy by hospital clinical management.

7. Australian breastfeeding reports

The following reports support the principles contained within the Baby Friendly Health Initiative - Hospital Breastfeeding Policy:

[Marketing in Australia of Infant Formulas \(1992\)](#)

Eat for Health

[Infant Feeding Guidelines: information for health workers \(2012\)](#)

[Improving Maternity Services – WA Policy and Framework](#)

Objective 5.2

[National Breastfeeding Strategy 2010-2015](#)

8. Reference

World Health Organization. *Protecting, Promoting and Supporting Breastfeeding: The special role of maternity services*. Accessed 13 June 2014.

<http://whqlibdoc.who.int/publications/9241561300.pdf>

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