

STEP 1: Have a written breastfeeding policy that is routinely communicated to all health care staff and is in accordance with the Ten Steps to Successful Breastfeeding.

Recommendations

Develop a written breastfeeding/infant feeding policy that:

- establishes breastfeeding as the standard for infant feeding
- is evidence-based
- addresses each of the *Ten Steps to Successful Breastfeeding*
- contains specific language that protects breastfeeding by:
 - prohibiting the promotion and group instruction of formula feeding, use of bottles and/or pacifiers
 - referencing the *International Code of Marketing of Breastmilk Substitutes*
- prohibits distribution of gift packs with commercial samples, coupons, or other materials that promote use of formula, bottles and/or pacifiers to pregnant women and new mothers

Communicate and make breastfeeding policy readily available to all health care staff that care for mothers and babies in the prenatal, intrapartum, and postnatal setting including obstetricians, nurse midwives, pediatricians, family physicians, nurses, and medical assistants.

Ensure that health care staff members refer to the breastfeeding policy when needed.

Display a summary of the hospital's breastfeeding policy in all areas of the health care facility that serve mothers, infants, and/or children and ensure that this summary:

- refers to the *Ten Steps To Successful Breastfeeding*
- refers to the *International Code of Marketing of Breastmilk Substitutes*
- is written with wording / language most commonly understood by mothers and staff

Ensure a mechanism is in place for evaluating the effectiveness of the breastfeeding/infant feeding policy.

Review all institutional policies and protocols related to breastfeeding and infant feeding including all policies related to the care of childbearing women and children, and ensure that policies:

- are in line with current evidence-based standards
- have language that protects, promotes and supports breastfeeding
- are communicated to all current and new health care staff



A Tool to Evaluate Your Hospital's Breastfeeding Policy

Evaluation Criteria	Yes	No	Suggestions for Improvement
Does the written breastfeeding policy establish breastfeeding as the standard for infant feeding?			
Does the policy address Steps 2 – 10 of the <i>Ten Steps to Successful Breastfeeding</i>? <ul style="list-style-type: none"> <input type="checkbox"/> Step 2: Train all staff in skills necessary to implement policy. <input type="checkbox"/> Step 3: Inform all pregnant women about the benefits & management of breastfeeding. <input type="checkbox"/> Step 4: Place all babies (regardless of feeding method) in skin-to-skin contact with their mothers immediately following birth for at least an hour and encourage mothers to recognize when their babies are ready to feed, offering help if needed. <input type="checkbox"/> Step 5: Show mothers how to breastfeed & how to maintain lactation even if they are separated from their infants, including instruction on technique of hand expression. <input type="checkbox"/> Step 6: Give infants no food or drink other than breastmilk (e.g., formula, water) unless medically indicated and provide education if mother requests formula in absence of medical indication. <input type="checkbox"/> Step 7: Practice rooming-in – allow infants to remain together 24 hr/day with no more than 1 hr spent outside of room for medical procedures. Educate mothers regarding benefits of rooming-in for those who request infant spend time in nursery. <input type="checkbox"/> Step 8: Encourage / allow infants to breastfeed on cue / on demand without limitations on frequency or duration of feedings. <input type="checkbox"/> Step 9: Give no pacifiers or artificial nipples to breastfeeding infants, and provide education to mothers if they request bottle or pacifier use in absence of medical indication. <input type="checkbox"/> Step 10: Foster/list available breastfeeding support groups and resources and refer mothers to these upon discharge. 			
Does the policy contain specific language that protects breastfeeding by prohibiting the promotion of formula, use of bottle feeding and/or artificial nipples?			
Does the policy reference the <i>International Code of Marketing of Breastmilk Substitutes</i> ?			
Does the policy contain specific language that protects breastfeeding by prohibiting group instruction regarding formula feeding, use of bottles and/or artificial nipples?			
Does the policy prohibit distribution of gift packs with commercial samples, coupons or promotional materials that promote use of formula, bottles and/or artificial nipples to pregnant women and new mothers?			
Is the breastfeeding policy in line with current evidence-based standards?			

NH's Ten Steps to Successful Breastfeeding: Step by (baby) Step



Adapted from materials developed by Baby-Friendly USA with their permission

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Evaluation Criteria	Yes	No	Suggestions for Improvement
Is a summary of the breastfeeding/infant feeding policy, including the <i>Ten Steps To Successful Breastfeeding</i> , the <i>International Code of Marketing of Breastmilk Substitutes</i> and subsequent WHO resolutions posted or displayed in all areas of the health facility that serve mothers, infants, and/or children?			
Is the summary of the breastfeeding/infant feeding policy posted in languages and written with wording most commonly understood by mothers and staff?			
Is there a mechanism for evaluating the effectiveness of the policy?			
Are all policies or protocols related to breastfeeding and infant feeding in line with current evidence-based standards?			
Do all areas of the facility that interact with childbearing women and children have language in their policies about protecting, promoting and supporting breastfeeding?			
Are there procedures in place to orient new staff to the breastfeeding/infant feeding policy?			
Does health care staff refer to the policy when needed?			



References and Resources:

- Academy of Breastfeeding Medicine (ABM). Clinical Protocol #7: Model Breastfeeding Policy. Available at: http://www.bfmed.org/Resources/Download.aspx?filename=Protocol_7.pdf.
- Academy of Breastfeeding Medicine. Position on Breastfeeding. *Breastfeed Med*. 2008;3:267-270. Available at: <http://www.liebertonline.com/doi/pdfplus/10.1089/bfm.2008.9988?cookieSet=1>
- American Academy of Family Physicians. 2008 AAFP Policy Statement on Breastfeeding. Available at: <http://www.aafp.org/online/en/home/policy/policies/b/breastfeedingpositionpaper.html>
- American Academy of Pediatrics Section on Breastfeeding. Breastfeeding and the use of human milk. *Pediatrics*. 2012;129:e827-841.
- American Academy of Pediatrics (AAP). Sample Hospital Breastfeeding Policy for Newborns. Available at: <http://www.aap.org/breastfeeding/samplehospitalpolicy.pdf>.
- American College of Nurse Midwives. 2004 Clinical Practice Statement on Breastfeeding. Available at: http://www.midwife.org/siteFiles/position/Breastfeeding_05.pdf
- American College of Obstetricians and Gynecologists. 2004 *Breastfeeding Position Statement*. Available at: <http://www.acog.org/departments/underserved/breastfeedingStatement.pdf>
- American Dietetic Association. Position of the American Dietetic Association: Promoting and Supporting Breastfeeding. *J Am Diet Assoc*. 2005;105:810-818. Available at: <http://www.eatright.org/ada/files/serve/p.pdf>
- Association of Women's Health, Obstetric and Neonatal Nurses(AWHONN). 2007 Breastfeeding Clinical Position Statement. Available at: <http://www.usbreastfeeding.org/HealthCareSystem/TrainingforHealthCareProfessionals/tabid/96/Default.aspx>
- Fairbank, *et al*. A systematic review to evaluate the effectiveness of interventions to promote the initiation of breastfeeding. *Health Technol Access*. 2004;4:1-171.
- International Lactation Consultant Association. 2005 - Clinical guidelines for the establishment of exclusive breastfeeding. Available at: <http://www.ilca.org/pubs/ClinicalGuidelines2005.pdf>.
- Pediatric National Association of Nurse Practitioners. NAPNAP Position Statement on Breastfeeding. *J Pediatr Health Care*. 2007;21:39A-40A. Available at: <http://download.journals.elsevierhealth.com/pdfs/journals/0891-5245/PIIS0891524506007322.pdf>
- Perrine CG, *et al*. Baby-Friendly Hospital Practices and Meeting Exclusive Breastfeeding Intention. *Pediatrics*. 2012;130:54.
- Rosenberg, *et al*. Impact of hospital policies on breastfeeding outcomes. *Breastfeeding Med*. 2008;3:110-116.
- Tarrant M, *et al*. Impact of baby-friendly hospital practices on breastfeeding in Hong Kong. *Birth*. 2011;38:238-245.
- *The Surgeon General's Call to Action to Support Breastfeeding, 2011*. Available at: <http://www.surgeongeneral.gov/topics/breastfeeding/index.html>.
- United States Breastfeeding Committee. *Benefits of breastfeeding [issue paper]*. Raleigh,NC: Author, 2002. Available at: <http://www.usbreastfeeding.org/Publications.html>
- United States Breastfeeding Committee. *Breastfeeding in the United States: A national agenda*. Rockville MD: U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. Available at: <http://www.usbreastfeeding.org/Publications.html>
- United States Breastfeeding Committee. *Economic benefits of breastfeeding [issue paper]*. Raleigh, NC: Author, 2002. Available at: <http://www.usbreastfeeding.org/Publications.html>
- United States Department of Health and Human Services. *HHS Blueprint for Action on Breastfeeding*. Washington, DC: Author, 2000. Available at: <http://www.4women.gov>.
- Venancio SI, *et al*. The Baby-Friendly Hospital Initiative shows positive effects on breastfeeding indicators in Brazil. *J Epidemiol Community Health*. 2012;66:914-918.



Implementing Step 1: Barriers and Strategies to Overcome Barriers

Barriers	Strategies