

# Breastfeeding & Infant Feeding Module



# Partnering Organizations:



# Objectives

- Describe benefits of breastfeeding:
  - Baby – Mother – Provider
- Explain role of child care environment in promoting and supporting breastfeeding and healthy infant feeding practices.
- Explain breastmilk storage guidelines, infant feeding cues and techniques.
- Describe 10 Steps to Breastfeeding-Friendly Child Care.





# Breastfeeding Recommendations

- American Academy of Pediatrics (AAP)
  - Breastfeed for **at least 12 months**, and longer as “mutually desired”
  - Exclusive breastfeeding for the first 6 months
  - Complimentary foods not introduced until 6 months
- World Health Organization (WHO)
  - Breastfeeding through the first two years of life as long as mutually desired

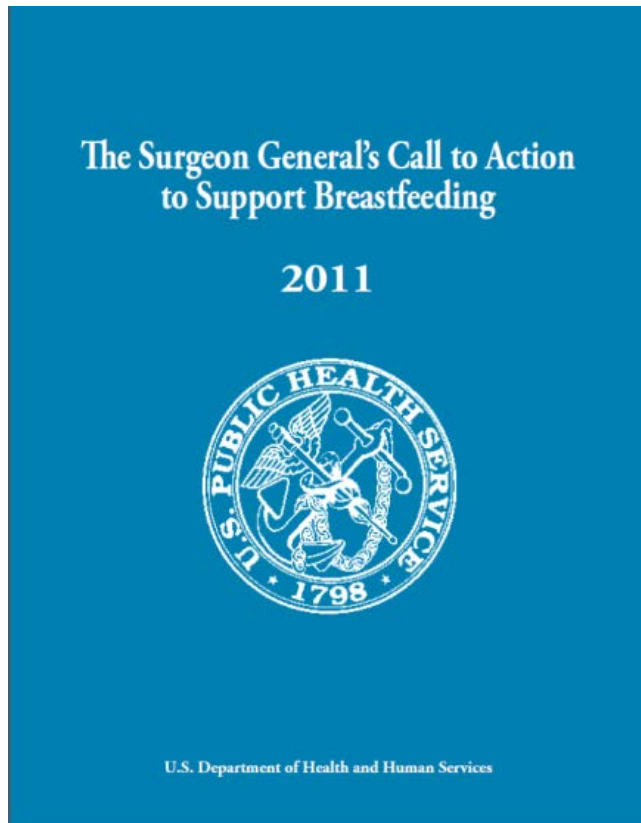




# U.S. Surgeon Generals Call to Action

“One of the most highly effective preventive measures a mother can take to protect the health of her infant and herself is to breastfeed.”

**Action #16:** “Ensure that all child care providers accommodate the needs of breastfeeding mothers & infants.”







# Nebraska Breastfeeding Rates

At birth, 80% initiate BF (Breastfeeding)

At 3 months, 50% exclusively BF

At 6 months, 21%  
exclusively BF

At 12 months,  
22% some BF



**Breastfeeding**  **Report Card**  
United States / 2013

National Center for Chronic Disease Prevention and Health Promotion  
Division of Nutrition, Physical Activity, and Obesity



Source: Gretchen Swanson Center for Nutrition, 2013 Breastfeeding Report Card

# Activity: Personal Reflection



- Do you have + or – feelings?
  - Personal Experience
  - Experience of family or friend
- How do you think your feelings help/hinder your Child Care facility?
- Could you think differently about breastfeeding?
- **GOAL: Help mothers breastfeed their baby through the first year of life, as recommended.**





# Role of Child Care & Breastfeeding Support

- Baby Business
- Key support when mom and baby are separated
- Recognize critical transition – back to work/child care
- Educate and encouraging mom & families
- Show your support: verbally and visually







# BREASTFEEDING

It Rocks!

# The Breastfed Baby

## **Immune system.**

Responds better to vaccinations. Human milk helps to mature immune system. Decreased risk of childhood cancer.

## **Skin.**

Less allergic eczema in breastfed infants.

## **Joints and muscles.**

Juvenile rheumatoid arthritis is less common in children who were breastfed.

## **Throat.**

Children who are breastfed are less likely to require tonsillectomies.

## **Eyes.**

Visual acuity is higher in babies fed human milk.

## **Ears.**

Breastfed babies get fewer ear infections.

## **Higher IQ.**

Cholesterol and other types of fat in human milk support the growth of nerve tissue.

## **Endocrine system.**

Reduced risk of getting diabetes.

## **Mouth.**

Less need for orthodontics in children breastfed more than a year. Improved muscle development of face from suckling at the breast. Subtle changes in the taste of human milk prepare babies to accept a variety of solid foods.

## **Bowels.**

Less constipation.

## **Urinary tract.**

Fewer infections in breastfed infants.

## **Appendix.**

Children with acute appendicitis are less likely to have been breastfed.

## **Kidneys.**

With less salt and less protein, human milk is easier on a baby's kidneys.

## **Respiratory system.**

Breastfed babies have fewer and less severe upper respiratory infections, less wheezing, less pneumonia and less influenza.

## **Digestive system.**

Less diarrhea, fewer gastrointestinal infections in babies who are breastfeeding. Six months or more of exclusive breastfeeding reduces risk of food allergies. Also, less risk of Crohn's disease and ulcerative colitis in adulthood.

## **Heart and circulatory system.**

Breastfed children have lower cholesterol as adults. Heart rates are lower in breastfed infants.

thealphaparent.com

# Obesity Prevention



30%: Breastfeeding for 9 months reduces a baby's odds of becoming overweight by more than 30%.



# Benefits of Breastfeeding for Mothers

- Health Benefits:
  - Lower risk for breast & ovarian cancer, diabetes, and postpartum depression
- Burns calories – weight loss
- Money Saver (\$1500/yr)
- Less Absenteeism at Work
- Bonding time with Baby
- Convenient





# Benefits for Child Care Providers

- Breastfed babies are healthier
- Reduced risk of SIDS
- Less: diaper odor, rash and spit up
- Breastfed babies are rarely constipated
- Baby is happier - less severe separation anxiety
- Eat a wider variety of foods when starting solids
- Business is more marketable to breastfeeding moms!



# Brainstorm

## Keeping it real!



- What has been your experience when caring for breastfed babies?
- What are the challenges?
- What are the successes?



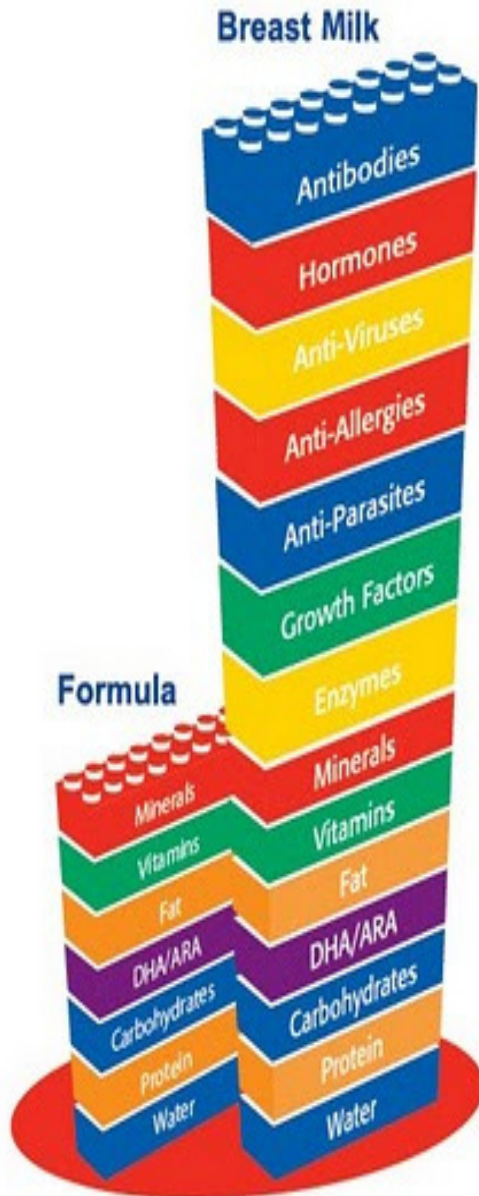


# Breastfeeding Basics

- Breastmilk is “alive”
- Breastmilk = daily immunization
- Breastmilk is easily digested.
- Baby may feed more often in smaller amounts.
  - Every 1 ½ - 3 hours, 2-4 oz. each feeding.
- Breastmilk is released in “waves” - not a continual flow.
- Baby must work to express the milk.



# Breastmilk vs. Formula



## Appearance of Breastmilk is Different:

- Thin-looking
- Bluish-tint
- Separation and small pieces of fat
- Sometimes a soapy smell

The amount of breastmilk that a baby needs does NOT increase over time.

The composition changes daily – based on baby's age, time of feeding, health.



# Species Specific Milk



Photo courtesy of MilkWorks



Human milk changes to meet the needs of the infant.



# Making Milk

- Amount Varies Greatly between Moms
- LIQUID GOLD = Breastmilk
  - Takes consistent effort to supply
- On average: moms make about 27 oz/day
- Frequent removal is key to keeping supply
- Helping mom decrease milk waste is key





# How Much is Enough?

- Typical feeding: 2-4 ounces
- This amount does not change over time
- Avoid overfeeding – may not keep up with mom's supply.
- Important to know babies hunger and fullness cues



# Finishing the Bottle

- Although tempting – do not encourage baby to “finish”
  - Leads to over-feeding and waste
- **BIG QUESTION: If baby does not finish the bottle – does the milk need to be thrown out?**
  1. Talk with the mom about her preference
  2. If baby shows hunger signs within 2 hours – it’s ok to re-offer the unfinished bottle. Do not add fresh milk to the unfinished bottle.
  3. It is reasonable to discard the remaining milk within 1-2 hours after the baby finished feeding. (ABM Protocol #8)





# Human Milk is **NOT** Classified as a Body Fluid\*

- **Breastmilk is classified as “Food”**
- You do **NOT** need to store human milk in a separate refrigerator.
- You do **NOT** need to wear gloves to handle human milk.
- Touching human milk is **NOT** hazardous.

Source: CDC and OSHA



# Mixed-Up Milk

- **BIG CONCERN:** My baby got the wrong milk!
- What should a Provider do?

Good Source:

[http://www.cdc.gov/breastfeeding/recommendations/other\\_mothers\\_milk.htm](http://www.cdc.gov/breastfeeding/recommendations/other_mothers_milk.htm)





# CACFP Meal Pattern

- Breastmilk IS part of the Meal Pattern:
  - It's a **reimbursable component** of infant meal pattern.
    - However - If the mother comes to breastfeed her child at the center, then the meal is not reimbursable (if not fed other foods).
  - If an employee of the center, breastfeeds her own child, then the meal is reimbursable.
- Children >12 months: Breastmilk can substitute cow's milk in the meal pattern for reimbursement.
  - No need for a medical statement



# Infant Feeding Practices



- **“Fed on Demand”**
  - Feeding when baby signals they are hungry
  - Flexible, not fixed schedule
- Watch & listen for **Hunger & Fullness Cues**
- Use **Responsive Feeding Techniques**
  - Examples: making eye contact, talking, not propping bottles



# Hunger Cues

## Signs an infant can show they are hungry:

- Rooting
- Sucking on fingers or fist
- Licking or smacking lips
- Fussing
- Wake and toss
- Look like he or she is going to cry
- Making excited arm & leg movements
- **Crying: LATE Hunger Cue**



# Fullness Cues

## Signs an infant can show they are full:

- Slowing the pace of eating
- Turning head or body away
- Arching back
- Becoming fussy
- Refusing more food
- Sealing their lips together
- Turning or pushing away from the bottle
- Spitting out the food or the nipple





# Tips: Bottle Feeding the Breastfed Baby



- Offer bottle at first feeding cue
- Hold baby in comfortable, upright position, belly-to-belly, with horizontal bottle.
- Make eye contact with baby
- Pace the feeding: Drop the bottle or remove it every 1-4 sucks to give baby time to swallow.
  - Slow-flow nipples are better
- Burp baby after each ounce or two
- Let baby stop the feeding when full
  - Baby doesn't need to "finish" the bottle



# 10 Steps to Breastfeeding-Friendly Child Care

## Ten Steps to Breastfeeding-Friendly Child Care

The following Ten Steps describe ways that child care centers can provide optimal support for breastfeeding families. Below each step are specific actions to support that step.

**Step 1. Make a commitment to the importance of breastfeeding, especially exclusive breastfeeding, and share this commitment with fellow staff.**

- 1.1 Our center has a written policy for promoting and supporting breastfeeding, and it is regularly communicated to our staff and families.
- 1.2 Staff evaluations document a review of breastfeeding support activities.
- 1.3 Our center's breastfeeding support is part of our discussion with all potential families.

**Step 2. Train all staff in the skills to support and promote optimal infant and young child feeding.**

- 2.1 All staff at our center receive training on age-appropriate infant feeding practices, including proper storage and handling of human milk.
- 2.2 All staff at our center receive training on recognizing infant hunger cues and feeding in response to these cues.
- 2.3 All staff at our center receive training in breastfeeding protection, promotion, and support, including support of exclusive breastfeeding.
- 2.4 All staff at our center receive training on the risks and benefits of different infant feeding options.

**Step 3. Inform women and families about the importance of breastfeeding.**

- 3.1 We provide all our families with our written policy for promoting and supporting breastfeeding.
- 3.2 Culturally appropriate educational materials on breastfeeding, and on the risks and benefits of different feeding options are displayed in several areas.
- 3.3 Culturally appropriate educational materials on breastfeeding, and on the risks and benefits of different infant feeding options are actively distributed to the families we serve.

**Step 4. Provide learning and play opportunities which normalize breastfeeding for children.**

- 4.1 We provide toys and books that illustrate nursing animals and babies, for children of all ages.
- 4.2 We discuss interactions between mothers and babies with children of all ages, including how they feed.

**Step 5. Ensure that all breastfeeding families we serve are able to store and label milk properly for child care center use.**

- 5.1 We provide sufficient refrigerator and freezer space to accommodate all of our breastfeeding families' storage needs.
- 5.2 We instruct all breastfeeding families on the proper way to store and label human milk for child care center use, and all milk at our center is properly labeled.
- 5.3 We discuss with all families how expressed milk will be handled at our child care center.

**Step 6. Provide a breastfeeding-friendly environment.**

- 6.1 We actively invite breastfeeding mothers to come to the center to nurse their babies while under our care.
- 6.2 There is a clean and comfortable place in our center, other than a bathroom, for mothers to sit and nurse their babies, or pump (express) milk if desired.
- 6.3 Our center displays posters and distributes materials, including photos reflecting the families we serve, that show our support of breastfeeding and demonstrate best practices.

**Step 7. Support breastfeeding employees.**

- 7.1 Breastfeeding employees are given appropriate breaks so that they may express milk and/or nurse their babies as needed.
- 7.2 The center provides a clean, comfortable, private place for employees to pump/express milk and/or nurse their babies as needed.

**Step 8. Ensure that each infant has a feeding plan that supports best feeding practices.**

- 8.1 We develop a written feeding plan with each new family at our center, which is accessible and regularly updated.
- 8.2 Breastfeeding support is explicitly included in all feeding plans, as part of the standard form.
- 8.3 We respond to infants' hunger cues rather than feeding on a schedule, and we encourage mothers to feed this way at home.
- 8.4 We encourage mothers to introduce solid foods at a developmentally appropriate time.

**Step 9. Contact and coordinate with local skilled breastfeeding support and actively refer.**

- 9.1 Our center has a list of community breastfeeding resources to be used for referral.
- 9.2 Our center regularly refers families to community breastfeeding resources.
- 9.3 Our center tracks community referrals and follows up with families as needed.

**Step 10. Continue updating and learning about protection, promotion, and support of breastfeeding.**

- 10.1 Our center has up-to-date materials on hand that include information on breastfeeding and human milk feeding.
- 10.2 Each staff member receives at least one hour per year of continuing education on human milk feeding and breastfeeding support.
- 10.3 Our center provides a resource list, for our staff, of local lactation consultants and community providers who can answer breastfeeding and human milk feeding questions.



# Step 1: Make a Commitment

1. Commit to supporting breastfeeding in your facility
2. Establish a policy
3. Share this commitment with staff



# Step 1: Make a Commitment

1. Policy should include statements on the commitment to:

- Provide a private, clean space to nurse/express
- Provide a refrigerator/freezer for storage
- Seek professional development on breastfeeding
- Provide educational materials for families
- Provide breastfeeding support for employees

Policy Sample:



# Sample Child Care BF Policy

## Sample Childcare Center Breastfeeding Policy

Because breastfeeding has been shown to be the superior form of infant nutrition, providing a multitude of health benefits to both infant and mother, and because breastfeeding employees need ongoing support from childcare providers to provide their milk for their babies. <<Childcare Center Name>> subscribes to the following policy.

**1. Breastfeeding mothers shall be provided a place to breastfeed or express their milk.**

Breastfeeding mothers, including employees, shall be provided a private and sanitary place to breastfeed their babies or express milk. This area provides an electrical outlet, comfortable chair, and nearby access to running water.

**2. A refrigerator will be made available for storage of expressed breastmilk.**

Breastfeeding mothers and employees may store their expressed breast milk in the center refrigerator. Mothers should provide their own containers, clearly labeled with name and date. The center will follow guidelines from the American Academy of Pediatrics and Centers for Disease Control in ensuring that breastmilk is properly treated to avoid waste. Universal precautions are not required in handling human milk.

**3. Sensitivity will be shown to breastfeeding mothers and their babies.**

The childcare center is committed to providing ongoing support to breastfeeding mothers, including providing an opportunity to breastfeed their baby in the morning and evening, and holding off giving a bottle, if possible, when mom is due to arrive. Artificial baby milks (formula) and solid foods will not be provided unless the mother has requested. Babies will be held closely when feeding and bottles will never be propped.

**4. Staff shall be trained in handling human milk.**

All childcare center staff will be trained in the proper storage and handling of human milk, as well as ways to support breastfeeding mothers.

**5. Breastfeeding employees shall be provided flexible breaks to accommodate breastfeeding or milk expression.**

Breastfeeding employees shall be provided a flexible schedule for breastfeeding or pumping to provide breastmilk for their children. The time allowed would not exceed the normal time allowed for lunch and breaks. For time above and beyond normal lunch and breaks, sick/annual leave must be used, or the employee can come in a little earlier or leave a little late to make up the time.

# Step 2: Train Staff on Breastfeeding & Infant Feeding

1. All staff should receive training on:

- Age-appropriate infant feeding
- Storage/handling of breastmilk
- Hunger cues and feeding response
- Risk/benefits of feeding options
- Protect, promote and support breastfeeding





# Step 3: Inform Moms & Families about Breastfeeding

1. Share a copy of your written policy promoting and supporting breastfeeding.
2. Display culturally appropriate educational materials.
3. Give educational handout to moms and families.
  - Benefits, community support, milk storage info.



# From Mom

“My child care provider is always encouraging about breastfeeding and maintains open communication with me.

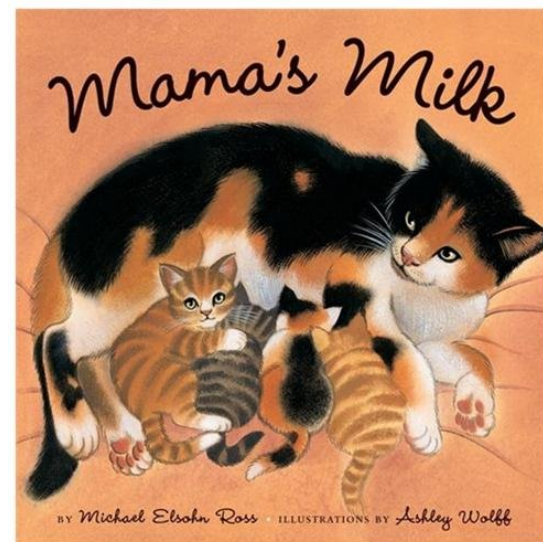
She lets me drop off the milk I pumped at work each day so that I don't have to take it home and bring it back the next day.

She does all she can to help ensure **NOT A DROP OF MY BREAST MILK IS WASTED.”**

- Rebecca Kay

# Step 4: Learn & Play Opportunities

1. Normalize breastfeeding for children
2. Provide toys/books that illustrate nursing animals and babies
3. Discuss how moms take care of their babies, including how they feed.



# Step 4: Learn & Play Opportunities



Photo courtesy of MilkWorks

**Role-playing – it's OK!**



# Step 5: Support Safe Storage of Breastmilk



1. Provide sufficient refrigerator and freezer space.
2. Instruct families on proper storage and labeling (info sheet).
3. Discuss with families how expressed milk is handled.

Photo courtesy of MilkWorks



# Milk Storage

- Fresh milk is better than frozen
  - Use oldest fresh milk first
  - Use freezer milk when fresh is gone
- Defrost
  - Best: in fridge
  - Ok: Running water or sitting in warm water
  - **Do not microwave**

Swirl to mix the fat into the milk, do not shake





# 2013 NE Child Care Licensing R&R

- **44 3-006.29A Storage of Breast Milk and Formula:** All prepared formula or breast milk must be refrigerated and clearly labeled with the child's name, date received, and date expressed and date frozen if applicable.
  1. Unused prepared formula must be discarded as indicated by the label.
  2. Unfrozen breast milk must be discarded after 48 hours.
  3. Frozen breast milk must be kept in a freezer for no more than three months.



# Labeling

- All bottles need to be labeled in the fridge and freezer.

Mommy's Milk	
<b>Baby's Name:</b>	
<b>Date to Provider*</b>	
<b>Amount:</b>	
<i>Date Frozen</i>	
<i>Date Expressed</i>	

- *Use unfrozen (fresh) milk within 48 hours or give back to parents*
- No label? Throw it out.



# Storage

## Child Care Facility vs. Home Storage Guidelines

### Child Care Facility Storage: NE Child Care Licensure Regulations (2013)

	Refrigerator	Freezer
Unfrozen (Fresh) Milk	Up to 48 hours	-
Frozen Milk	-	Up to 3 months

### Home Storage: Academy of Breastfeeding Medicine Protocol #8 (2010)

	Refrigerator	Freezer
Fresh Milk (Never Frozen)	72 hours (optimal) 5 -8 days (under very clean conditions)	6 months (optimal) 12 months (acceptable)
Thawed Milk (Previously Frozen)	Use within 24 hours after thaw	Do not refreeze



# Safe Handling of Breastmilk

- To prevent the spread of germs, wash your hands before preparing any bottle.
- Refrigerate or freeze breast milk promptly.
- Do not refreeze previously-frozen milk.
- NEVER use a microwave to thaw or warm human milk.
- Store milk towards the back of the freezer or refrigerator, where temperature is most constant.



# Important Reminders & Tips



- Keep records of babies feeding patterns.
- Prevent waste – Ask the family to provide containers of breastmilk in the amount that the infant is likely to eat at one time, usually about 2-4 ounces.
- If the fresh milk (not previously frozen) has not been used in 2 days (48 hours), give back to the parent or freeze for back-up (use within 3 months).



# Step 6: Provide a Breastfeeding-friendly Environment

1. Actively invite mothers to nurse
2. Provide a clean, comfortable place (not a bathroom)
  - to nurse or express milk
3. Display posters and educational materials

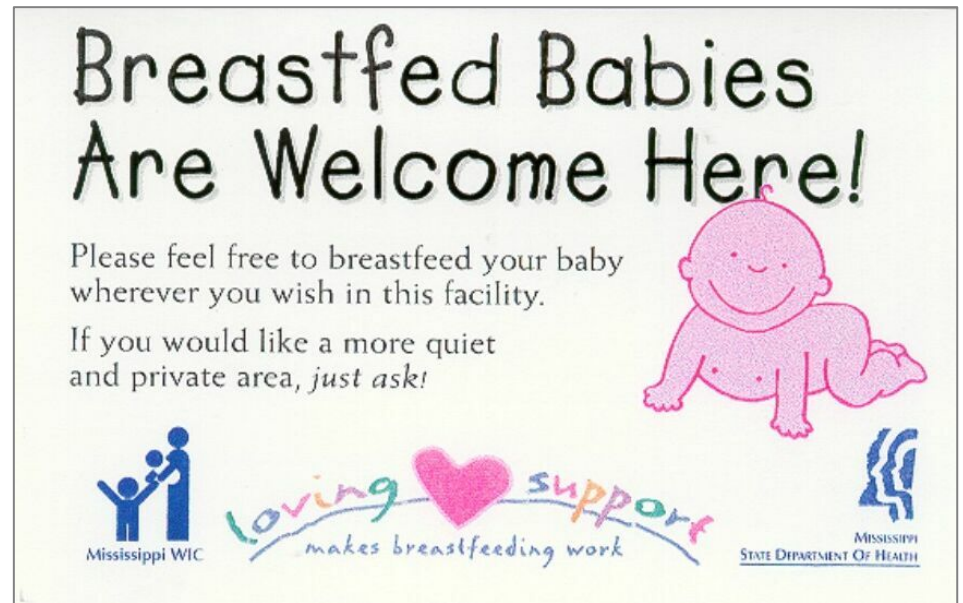




# Step 6: Provide a Breastfeeding-friendly Environment



Photo courtesy of  
Trinity Infant & Child Care Center



# From Mom

“My provider allows me time and space to nurse my daughter at drop-off and pick-up.

She’s wonderful about trying to time feedings, so my little one is ready to eat when I pick her up.”

- Cassy Rockwell



# Activity:

## Design A Place for Mothers to Breastfeed

- Discuss what could be done at your facility to make it more comfortable or easier to nurse and express milk?







Photo courtesy of  
Educare of Lincoln

# Step 7: Support Breastfeeding Employees



## EMPLOYEE RIGHTS

UNDER THE FAIR LABOR STANDARDS ACT

### Breastfeeding Support Is The Law

Title 29 United States Code Section 201 Requires:

#### SPACE

- A space other than a bathroom that is shielded from view and free from intrusion from coworkers and the public, which may be used by an employee to express milk.

#### TIME

- Reasonable break time for an employee to express breast milk for her nursing child for one year after the child's birth, each time such employee has need to express milk.

#### Breastfeeding Support is Simple

- Provide a clean, private space
- Allow flexible breaks and work times
- Promote breastfeeding education
- Support your employees

#### Need More Information on the Law?

[www.dol.gov/whd/nursingmothers](http://www.dol.gov/whd/nursingmothers)

U.S. Department of Labor Regional Office (Omaha): (402) 221-4682

#### Resources:

- Nebraska Department of Labor: [www.dol.nebraska.gov](http://www.dol.nebraska.gov)
- The Business Case for Breastfeeding: [www.womenshealth.gov/breastfeeding](http://www.womenshealth.gov/breastfeeding)
- Nebraska Breastfeeding Coalition: [www.nebreastfeeding.org](http://www.nebreastfeeding.org)
- MilkWorks, Breastfeeding Center Serving Southeast Nebraska: [www.milkworks.org](http://www.milkworks.org)

# Step 7: Support Breastfeeding Employees

## 1. Space to Express Milk:

- Private, secure room (not a bathroom)
- Comfortable chair
- Electrical Outlet

## 2. Reasonable Time:

- Nurse/express milk every 2-3 hours
- Communicate schedule



Photo courtesy of  
Jessica Davies



# Legal Protection for Breastfeeding



# Nebraska Public Breastfeeding Law

**Nebraska State Statute:** Notwithstanding any other provision of law, a mother may breastfeed her child in any public or private location where the mother is otherwise authorized to be. *Passed in 2011*

**Breastfeeding. Anytime. Anywhere.**



Nebraska State Statute:  
Notwithstanding any other provision of law, a mother may breast-feed her child in any public or private location where the mother is otherwise authorized to be (2011).

Breastfeeding is protected by Nebraska State Law – anytime and anywhere.



Nebraska  
Breastfeeding  
Coalition  
[www.nebreastfeeding.org](http://www.nebreastfeeding.org)

*If someone asks a mother to leave a public place when breastfeeding, politely explain that the law protects the right of the mother to stay where she is to breastfeed.*





# Nebraska Breastfeeding-Friendly Business

- Launched Fall 2012
- On-line application:
  - [www.Nebreastfeeding.org/BFF](http://www.Nebreastfeeding.org/BFF)
  - Award Criteria
  - Supporting Documentation
  - Reviewed by BFC Leadership Team
- Recognized Businesses Receive:
  - Cling, Certificate, and recognition on BFC website
- To Date: 16 businesses have been recognized



# Step 8: Infant Feeding Plan

- Should be written and include:
  - ✓ Develop a written plan w/ each new family.
  - ✓ Include breastfeeding as part of the standard form.
  - ✓ Instructions for feeding infants who are breastfed or fed expressed breast milk
  - ✓ Infants' food intolerances, allergies, & preferences
  - ✓ Instructions for introducing solid foods and new foods at developmentally appropriate time (6 months)
  - ✓ Plan based on hunger cues not a schedule.
    - ✓ Permission to feed infants when they show they're hungry and end feeding when they show they're full





**Example of an  
"Infant Feeding Plan"**

# Infant Feeding Plan

As your child's caregivers, an important part of our job is feeding your baby. The information you provide below will help us to do our very best to help your baby grow and thrive. **This form must be filled out for all children under 15 months old.**

Child's name: \_\_\_\_\_ Birthday: \_\_\_\_\_  
mm / dd / yyyy

Parent/Guardian's name(s): \_\_\_\_\_

Did you receive a copy of our "Infant Feeding Guide?" Yes No

If you are breastfeeding, did you receive a copy of:

"Breastfeeding: Making It Work?" Yes No

"Breastfeeding and Child Care: What Moms Can Do?" Yes No

## TO BE COMPLETED BY PARENT

At home, my baby drinks (check all that apply):

- ☐ Mother's milk from (circle)  
Mother bottle cup other
- ☐ Formula from (circle)  
bottle cup other
- ☐ Cow's milk from (circle)  
bottle cup other
- ☐ Other: \_\_\_\_\_ from (circle)  
bottle cup other

How does your child show you that s/he is hungry?

How often does your child usually feed?

How much milk/formula does your child usually drink in one feeding?

Has your child started eating solid foods?

If so, what foods is s/he eating?

How often does s/he eat solid food, and how much?

## TO BE COMPLETED BY TEACHER

Clarifications/Additional Details:

At home, is baby fed in response to the baby's cues that s/he is hungry, rather than on a schedule?

Yes No

### If NO,

- ☐ I made sure that parents have a copy of the "Infant Feeding Guide" or "Breastfeeding: Making it Work"
- ☐ I showed parents the section on reading baby's cues

Is baby receiving solid food? Yes No

Is baby under 6 months of age? Yes No

### If YES to both,

- ☐ I have asked: Did the child's health care provider recommend starting solids before six months?

Yes No

### If NO,

- ☐ I have shared the recommendation that solids are started at about six months.

Handouts shared with parents:

**Source:** Carolina  
Global Breastfeeding  
Feeding  
\*copy in training binder



Child's name: \_\_\_\_\_

Birthday: \_\_\_\_\_  
mm / dd / yyyy

Tell us about your baby's feedings at our center.

I want my child to be fed the following foods while in your care:

	Frequency of feedings	Approximate amount per feeding	Will you bring from home? (must be labeled and dated)	Details about feeding
Mother's Milk				
Formula				
Cow's milk				
Cereal				
Baby Food				
Table Food				
Other (describe)				

I plan to come to the center to nurse my baby at the following time(s): \_\_\_\_\_

My usual pick-up time will be: \_\_\_\_\_

If your baby is crying or seems hungry shortly before you arrive, which of the following should we do? You may choose more than one.

☐ hold your baby      ☐ use the teething toy you provide      ☐ use the pacifier you provide  
☐ rock your baby      ☐ give a bottle of your expressed milk      ☐ other Specify: \_\_\_\_\_

I would like you to take this action \_\_\_\_\_ minutes before my arrival time.

**We have discussed the above plan, and made any needed changes or clarifications.**

Today's date: \_\_\_\_\_

Teacher Signature: \_\_\_\_\_ Parent Signature \_\_\_\_\_

***Any changes must be noted below and initialed by both the teacher and the parent.***

Date	Change to Feeding Plan (must be recorded as feeding habits change)	Parent Initials	Teacher Initials
	Source: Carolina Global Breastfeeding Feeding *copy in training binder		

# Step 9: Coordinate Breastfeeding Support



1. Actively refer to skilled, local support
2. Keep a list of community breastfeeding resources
3. Track referrals/follow-up as needed



# How to Help your Mothers



- **MilkWorks:** [www.milkworks.org](http://www.milkworks.org)
  - Community Breastfeeding Center
- **La Leche League of Nebraska:** [www.lllofne.org](http://www.lllofne.org)
  - Mom-to-mom Support
- **NE WIC Program:** [www.dhhs.ne.gov/wic](http://www.dhhs.ne.gov/wic)
  - WIC Peer Counseling
- **Nebraska Breastfeeding Coalition:** [www.nebreastfeeding.org](http://www.nebreastfeeding.org)



# Step 10: Continue Updating/Learning

1. Keep up-to-date
2. Become a member of the Nebraska Breastfeeding Coalition





# Infant Foods

- Infant cereal or formula should be iron-rich.
- Mashed or pureed vegetables or meats should not contain added salt.
- Sweet mashed or pureed baby foods should not contain added sugar.
- Skip dessert.





# Infant Beverages

- Breastmilk or formula is the primary nutrition source for the first year of life.
- Limit water and 100% juice
- Bottles or sippy cup should be used at meal or snack time
- Discourage the “Walking Cup.”



# Summary

- Incorporate Breastfeeding Support Across All Levels
  - Policy
  - Communication
  - Training
  - Environment
  - Support
- GOAL: Help mothers breastfeed their baby through the first year of life as recommended.
- Communicate often with the parents
  - Let them know there is additional support for them





# Questions?

