

Milton Keynes University Hospital

Women's and Children's Health

Newborn Feeding Policy Summary

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This is a summary of the Newborn Feeding Policy and outlines the standards of care you may expect from any member of staff.

Why do we have a Newborn Feeding Policy?

To promote breastfeeding and safe artificial feeding by:

- creating an environment that enables you to start your breastfeeding relationship with your baby.
- creating an environment where you are supported and given information to enable you to feed your baby safely.
- ensuring you receive consistent evidence based feeding advice.
- preventing the promotion of any artificial milks, bottle, teats and dummies in line with the International Code for the Marketing of Breastmilk Substitutes and other breast substitutes (UNICEF 1981).

What to Expect From Your Care

You shall have the opportunity to discuss feeding and caring for your baby, highlighting the value of:

- connecting with your growing baby while you are pregnant
- skin to skin contact with your baby.
- responding to your baby's needs for comfort, closeness and feeding after birth and the role that keeping your baby close has in supporting this.
- the information you have already have about infant feeding.
- breastfeeding as protection, comfort and food.
- getting breastfeeding off to a good start.

Support for Breastfeeding

Any member of staff will be able to:

- provide support to enable you to achieve effective breastfeeding as you require, including positioning, attachment, hand expressing and recognising signs of effective feeding.
- explain responsive feeding and feeding cues.
- assess your baby's feeding and develop a plan to improve feeding as necessary.

- show you how to express your milk effectively, at least 8-10 times in 24 hours, including once at night.
- before you are discharged provide you with details of who to call if you require additional support, or if you have any concerns regarding feeding.
- ensure you are not separated from your baby unnecessarily throughout the postnatal period.
- provide you with an information leaflet outlining all local support groups and national helplines , upon discharge.
- request a referral to an Infant Feeding Specialist Midwife if you have more complex breastfeeding challenges

Responsive Feeding

Previously described as 'demand' or 'baby-led' feeding, this term describes a feeding relationship that is sensitive, reciprocal and about more than merely feeding your baby.

- Breastfeeding is for comfort and calming your baby.
- Breastfeeds can last a long or short time.
- Breastfed babies cannot be overfed or 'spoiled' by feeding too much.
- Breastfeeding will not tire you anymore than other methods of feeding.

Exclusive Breastfeeding is Important

It is particularly important during establishment of breastfeeding to exclusively breastfeed. However if it is not possible to exclusively breastfeed you will be supported to maximise the amount of breastmilk your baby receives. Breast pump equipment is freely available and any member of staff can ensure you are shown how to use them and where to safely store your breastmilk. You will be supported to give other feeds as safely as possible with as little disruption to your breastfeeding.

Artificial Milk Feeding

If you choose to give your baby artificial milk you will be supported to do this safely, discussing how to prepare infant artificial milk and sterilise feeding equipment. You are encouraged to feed your baby 'responsively' by:

• responding to their hunger cues.

- inviting your baby to draw the teat in, rather than forcing the teat into their mouth.
- pace the feed so you are not encouraging them to feed more than they want to.
- recognise your baby's cues that they have had enough milk and avoid offering them to take more that they want.

Skin to Skin Contact

- You will be shown how to understand the needs of your newborn baby; encouraging frequent touch and sensitive verbal/visual communication, keeping your baby close, feeding responsively and safe sleeping practices.
- If you are bottle feeding your baby you will be encouraged to hold your baby close during feeds and offer most of the feeds yourself to enhance you and your baby's bonding relationship.

Safety of Your Baby Whilst in Skin Contact

- Your baby will be checked during the first few hours after birth, for warmth, breathing, colour and tone. The midwives will carry these out while you maintain skin to skin contact, where possible.
- It is important you are supported to hold your baby safely. Staff will assist you with safe handling of your baby whilst in skin contact until you feel confident. We can advise you of safe bed sharing practices and help you to ensure that your baby is able to breathe with good body positioning.
- If you require stitches after the birth it is possible to still hold your baby in skin contact. The midwife will ensure you have sufficient pain relief to ensure your hold is comfortable and safe. If you have pain relief that causes drowsiness or alters your state of awareness you should not hold your baby without close supervision. Your birth partner may wish to continue providing skin to skin with your baby during this time
- The safest place for your baby to sleep is in a cot by your bed.
- Some parents will choose to share a sleep surface with their baby. We can provide you with information on how to share a bed safely with your baby.

Further information, advice or support is available from your midwife. Specialist Infant Feeding Midwives are also available and can be contacted via your midwife or direct on 01908996402 (answerphone).

A full version of the Newborn Feeding Policy is available on request from the Midwifery Staff who care for you.

References

(2006) Routine postnatal care of women and their babies. National Library of Guidelines. NICE.

World Health Organistation (WHO) (1981) *International Code for the Marketing of Breastmilk Substitutes*. Geneva. WHO.

Vennemann et al. 2012. Bed Sharing and the Risk of Sudden Infant Death Syndrome: Can We Resolve the Debate? *The Journal of Pediatrics*. 160(1):44-48

Ball et al. 2012 Bed- and Sofa-Sharing Practices in a UK Biethnic Population *Pediatrics 2012; 129:3 e673-e681; published ahead of print February 20, 2012, doi:10.1542/peds.2011-1964*

UNICEF, Baby Friendly Initiative, http://www.unicef.org.uk/BabyFriendly/

We ask information about you so that you can receive proper care and treatment. This information remains confidential and is stored securely by the Trust in accordance with the provisions of the Data Protection Act 1998.

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