

STEP 2: Train all health care staff in skills necessary to implement your facility's breastfeeding and infant feeding policies.

Recommendations
Educate all health care staff regarding the advantages of breastfeeding for the mother and infant.
Orient all health care staff who care for pregnant women, mothers, and/or infants to your facility's breastfeeding and infant feeding policies within 6 months of hire.
Orient all staff to local breastfeeding support services including those available in the hospital, clinic, and community.
Designate a staff position to be responsible for assuring that all staff caring for mothers and babies are: <ul style="list-style-type: none">• oriented to the facility's breastfeeding and infant feeding policies at time of hire• scheduled for training within 6 months of hire• trained properly in lactation and breastfeeding management and support• trained properly in parent teaching for formula preparation and feeding
Ensure that all staff members who directly care for pregnant women, mothers and infants receive <i>and</i> document 20 hours of training on lactation and breastfeeding management and support (including 5 hours of supervised clinical experience).* Ensure that this training occurs within 6 months of hire, includes clinical competency verification, and covers the: <ul style="list-style-type: none">• <i>Ten Steps to Successful Breastfeeding</i>• <i>International Code of Breastmilk Substitute</i>• Safe preparation of infant formula
Ensure that all Physicians, Midwives, Physician Assistants, and Advanced Practice Registered Nurses (APRNs) who have labor, delivery, maternity, and nursery / newborn care privileges receive <i>and</i> document 3 hours of breastfeeding education, pertinent to their roles in the care of mothers and infants, including the benefits, management, and support of breastfeeding.
Ensure that training for non-clinical staff and staff working outside of maternity is sufficient, given their roles in interacting and caring for breastfeeding couplets in their workplace setting, to provide them with the skills and knowledge necessary to support mothers in successfully breastfeeding their infants.

* See Suggested Content for Staff Breastfeeding Training and Competency Verification



Suggested Content for Staff Breastfeeding Training and Competency Verification

Objectives	Content
<i>Discuss the rationale for professional, government and international policies that promote, protect and support breastfeeding in the United States</i>	<p>Session 1: The BFHI - a part of the Global Strategy</p> <ul style="list-style-type: none"> • The Global Strategy for Infant and Young Child Feeding and how the Global Strategy fits with other activities • The Baby-Friendly Hospital Initiative • How this course can assist health facilities in making improvements in evidence based practice, quality care and continuity of care
<i>Demonstrate the ability to communicate effectively about breastfeeding</i>	<p>Session 2: Communication skills</p> <ul style="list-style-type: none"> • Listening and Learning • Skills to build confidence and give support • Arranging follow-up and support suitable to the mother's situation
<i>Describe the anatomy and physiology of lactation and the process of breastfeeding</i>	<p>Session 3: How milk gets from the breast to the baby</p> <ul style="list-style-type: none"> • Parts of the breast involved in lactation • Breastmilk production • The baby's role in milk transfer • Breast care
<i>Identify teaching points appropriate for prenatal classes and in interactions with pregnant women</i>	<p>Session 4: Promoting breastfeeding during pregnancy (Step 3)</p> <ul style="list-style-type: none"> • Discussing breastfeeding with pregnant women • Why breastfeeding is important • Antenatal breast and nipple preparation • Women who need extra attention
<i>Discuss hospital birth policies and procedures that support exclusive breastfeeding</i>	<p>Session 5: Birth practices & breastfeeding (Step 4)</p> <ul style="list-style-type: none"> • Labor and birth practices to support early breastfeeding • The importance of early contact • Helping to initiate breastfeeding • Ways to support breastfeeding after a Cesarean birth • BFHI practices and women who are not breastfeeding



Objectives	Content
<i>Demonstrate the ability to identify the hallmarks of milk transfer and optimal breastfeeding</i>	<p>Session 6: Helping with a breastfeed (Step 5a)</p> <ul style="list-style-type: none"> • Positioning for a pain free breastfeeding • How to assess a breastfeeding • Recognize signs of optimal positioning and attachment • Help a mother to learn to position and attach her baby
<i>Discuss hospital postpartum management policies and procedures that support exclusive breastfeeding</i>	<p>Session 7: Practices that assist breastfeeding (Steps 6-9)</p> <ul style="list-style-type: none"> • Rooming –in • Baby-led feeding • Dealing with sleepy babies and crying babies • Avoiding unnecessary supplements • Avoiding bottles and teats
<i>Discuss methods that may increase milk production in a variety of circumstances</i>	<p>Session 8: Milk Supply</p> <ul style="list-style-type: none"> • Concerns about “not enough milk” • Normal growth patterns of babies • Improving milk intake and milk production
<i>Identify teaching points to include when educating or counseling parents who are using bottles and/or formula</i>	<p>Session 9: Supporting the non-breastfeeding mother & baby (Step 5b)</p> <ul style="list-style-type: none"> • Counseling the formula choice: a pediatric responsibility • Teaching/assuring safe formula preparation in the postpartum • Safe bottle feeding; issues with overfeeding/underfeeding
<i>Discuss contraindications to breastfeeding in the United States as well as commonly encountered areas of concern for breastfeeding mothers and their babies</i>	<p>Session 10: Infants and Mothers with special needs</p> <ul style="list-style-type: none"> • Breastfeeding infants who are preterm, low birth weight or ill • Breastfeeding more than one baby • Prevention and management of common clinical concerns • Medical reasons for food other than breastmilk • Nutritional needs of breastfeeding women • How breastfeeding helps space pregnancies • Breastfeeding management when the mother is ill • Medications and breastfeeding
<i>Describe management techniques for breast and nipple problems</i>	<p>Session 11: Breast and nipple concerns</p> <ul style="list-style-type: none"> • Examination of mother’s breasts and nipples • Engorgement, blocked ducts and mastitis • Sore nipples

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<i>Identify acceptable medical reasons for supplementation of breast fed babies according to national and international authorities</i>	<p>Session 12: If the baby cannot feed at the breast (Step 5c)</p> <ul style="list-style-type: none"> • Learning to hand express • Use of milk from another mother • Feeding expressed breastmilk to the baby
<i>Describe essential components of support for mothers to continue breastfeeding beyond the early weeks</i>	<p>Session 13: On-going support for mothers (Step 10)</p> <ul style="list-style-type: none"> • Preparing a mother for discharge • Follow-up and support after discharge • Sustaining continued breastfeeding for 2 years or longer
<i>Describe strategies that protect breastfeeding as a public health goal</i>	<p>Session 14: Protecting breastfeeding</p> <ul style="list-style-type: none"> • The effect of marketing on infant feeding practices • The <i>International Code of Marketing of Breastmilk Substitutes</i> • How health workers can protect families from marketing • Donations in emergency situations • The role of breastfeeding in emergencies • How to respond to marketing practices
<i>Identify barriers and solutions to implementation of the Ten Steps to Successful Breastfeeding that compromise the Baby-Friendly Hospital Initiative</i>	<p>Session 15: Making your hospital or birth center Baby-Friendly</p> <ul style="list-style-type: none"> • The Ten Steps to Successful Breastfeeding • What “Baby Friendly” practices mean • The process of becoming a “Baby Friendly” hospital or birth center
<i>Develop competency in evidence-based breastfeeding management and instruction of safe formula preparation for parents of infants unable to breastfeed</i>	<p>Skills Competencies:</p> <ul style="list-style-type: none"> • Communicating with pregnant and postpartum women about infant feeding, including counseling around the feeding decision • Providing skin-to-skin contact in the immediate postpartum period • Assisting and assessing the mother and baby in achieving comfortable and effective positioning and attachment at the breast • Counseling mothers regarding: <ul style="list-style-type: none"> – importance of and how to maintain exclusive breastfeeding – identification and response to feeding cues – importance of rooming-in with their infants • Teaching and assisting mothers with hand expression and safe storage of milk • Teaching formula preparation and feeding to parents, when necessary • Assisting mothers in finding support upon discharge