



LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICES
HARBOR-UCLA MEDICAL CENTER

SUBJECT: BREAST(CHEST)FEEDING

POLICY NO. 340

CATEGORY: Provision of Care	EFFECTIVE DATE: 10/11
POLICY CONTACT: Trecilla Samson	UPDATE/REVISION DATE: 9/21
REVIEWED BY COMMITTEE(S):	

PURPOSE:

To inform staff that Harbor-UCLA Medical Center is an officially designated Baby Friendly hospital. See Breastfeeding, Baby Friendly Policy 072 (Nursing Policy Manual).

POLICY:

As a Baby Friendly designated hospital, the staff at Harbor-UCLA has a clear and unique opportunity to affect the initiation of breast(chest)feeding, as well as to provide education and support of breast(chest)feeding parent/infant pairs, which will increase the duration of breast(chest)feeding. It is our goal as advocates to ensure that all nursing parents are empowered to succeed, and also to respect and support their informed choice of feeding method.

Harbor-UCLA Medical Center supports the Baby-Friendly Hospital Initiative and the Ten Steps to Successful Breast(chest)feeding as well as the International Code of Marketing Breast Milk Substitutes, and will not participate in any activity that endorses the non-medically indicated use of artificial infant milk while on duty. All educational and promotional materials provided to pregnant individuals will be free of overt and/or subtle messages including logos. Hospital staff will not be permitted to accept educational grants, teaching materials, gratuities or gifts from formula companies. Hospital employees will refuse free or low-cost samples of breast milk substitutes, nipples and bottles.

The Ten Steps to Successful Breast(chest)feeding will be properly displayed in all areas of the healthcare facility which serve parents, infants and/or children to include: Labor and Delivery, Postpartum, Nursery, all infant care areas, affiliated prenatal and postpartum care areas such as the OB/Pediatrics outpatient clinics and the Emergency Department.

A multidisciplinary, culturally appropriate team comprising of hospital administrators, physician and nursing staff, other appropriate staff, and parents shall be established and maintained to identify and eliminate institutional barriers to breast(chest)feeding. Annually this group will compile and evaluate data relevant to breast(chest)feeding support services and formulate a plan of action to implement needed changes.

REVISED: 9/17, 9/21

REVIEWED: 8/14, 9/17, 9/21

APPROVED BY:


Anish Mahajan, MD
Chief Executive Officer


Anish Mahajan, MD
Chief Medical Officer


Joy LaGrone, RN, MSN
Interim Chief Nursing Officer



LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICES
HARBOR-UCLA MEDICAL CENTER

SUBJECT: BREAST(CHEST)FEEDING

POLICY NO. 340

PROCEDURE:

Ten Steps to Successful Breast(chest)feeding:

1. Have a written breast(chest)feeding policy that is routinely communicated to all health care staff.
2. Train all health care staff in skills necessary to implement this policy.
3. Inform all pregnant individuals about the benefits and management of breast(chest)feeding.
4. Help parents initiate breast(chest)feeding within an hour of birth by teaching parent to recognize signs of when the infant is ready to feed.
5. Show parents how to breast(chest)feed and how to maintain lactation, even if they should be separated from their infants. Breast(chest)feeding education will continue upon admission to Labor and Delivery and Postpartum by the parent's bedside nurse.
6. Give newborns no food or drink other than breast milk unless medically indicated.
7. Practice "Rooming – In" by allowing parents and infants to remain together 24 hours a day.
8. Encourage breast(chest)feeding on demand.
9. No artificial nipples, infant feeding bottles, pacifiers, or other soothers will be given to breast(chest)feeding infants.
10. Foster the establishment of breast(chest)feeding support groups and refer parent to them on discharge.

REFERENCES:

American Academy of Breastfeeding Medicine Protocol #7: Model Breastfeeding Policy (Revision 2010).
American Academy of Pediatrics Red Book (Report on Infectious Diseases).
Biancuzzo, M. *Breastfeeding the Newborn: Clinical Strategies for Nurses*. (1999). St. Louis, MO: Mosby, Inc.
The Breastfeeding Coalition of the Inland Empire & Inland Counties Regional Perinatal Program. *Providing Breastfeeding Support: Model Hospital Policy Recommendations*. 1999.
Department of Health and Human Services, Office on Women's Health.
HHS Blueprint for Action on Breastfeeding. 2000.
Department of Health and Human Services 2020 Breastfeeding Objectives
Hale, T. (2010). *Medications and Mother's Milk* (14th ed.) Amarillo, TX: Pharmasoft Publishing.
International Lactation Consultant Association. (2005). Evidence-Based Guidelines for Breastfeeding Management during the First Fourteen Days.
Lawrence, R.A. (2010). *Breastfeeding: A Guide for the Medical Profession* (7th ed.). St. Louis: C.V. Mosby.
Mohrbacher, N., Stock, J., La Leche League International, & Newton, E. *The Breastfeeding Answer Book* (3rd ed.). 2003.
Riordan, J. & Auerbach, K.G. *Breastfeeding and Human Lactation* (4th ed.). Sudbury, MA: Jones and Bartlett. 2010.
U.S. Committee for UNICEF/Wellstart International. The Guidelines and Evaluation Criteria for Hospital/Birthing Center Level Implementation of the United States Baby-Friendly Hospital Initiative, 1996.
World Health Organization. International Code of Marketing of Breast-milk Substitutes. Document WHA34/1981/REC/1, Annex 3, Geneva, 1981.