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**Reference No:**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Title: | Supporting Breast Feeding Employees | | | | | | |
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| Responsible Director: | Jacqui KennedyDirector of Human Resources/Organisational Development | | | | | | |
| Policy Type: (tick as appropriate) | \*Directorate Specific | | Clinical Trust Wide  **√** | | | If policy type is confirmed as \***Directorate Specific** please list the name and date of the local Committee/Group that policy was **approved** | |
| Approval process: | Standards and Guidelines Committee  Executive Team Meeting  Staff | | | | Approval date: | | Insert date each Committee approved/ noted |
| Operational Date: | To be completed  by S&G  Department | | | | Review Date: | | To be completed by S&G Department |
| **Version No.** | V2 | Supercedes | | V(1) – October 2017 | | | |
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| Links to other policies | [Infant Feeding policy for the Maternity and Neonatal Services](https://bhsct.sharepoint.com/sites/Policies/_layouts/15/viewer.aspx?sourcedoc=%7bC1DD9656-14E4-462D-AFE6-430A6DD31325%7d) [Policies & Guidelines - Infant Feeding Policy (Health Visiting) - All Policies (sharepoint.com)](https://bhsct.sharepoint.com/sites/Policies/PolicyLibrary/Forms/AllItems.aspx?id=%2Fsites%2FPolicies%2FPolicyLibrary%2FInfant%20Feeding%20Policy%20%28Health%20Visiting%29%2Epdf&parent=%2Fsites%2FPolicies%2FPolicyLibrary) | | | | | | |

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| Version control for drafts: (box to be removed prior to issue).  Identifies where changes have been made to a document and ensure Policy Authors are using the most recent version.   * The first draft must be versioned as 0.1 with subsequent versions 0.2, 0.3 etc. When formally approved it will be issued as 1. * Reviews will then be versioned 1.2, 1.3. * If major changes are made to the document then it will be reissued through the committee process and renamed as version 2.0. | | | |
| **Date** | **Version** | **Policy Author** | **Comments** |
| 11/10/2017 | 1.0 | B Spratt/U Martin | Initial draft |
| 11/10/& 25/10/2022 | 1.2 | B Spratt/U Martin | Review of policy incorporating any relevant amendments. |
|  |  |  |  |
|  |  |  | Final version issued. |

**1.0 INTRODUCTION / SUMMARY OF POLICY**

The Belfast Health and Social Care Trust (BHSCT) acknowledges that breastfeeding is the healthiest way for a mother to feed her baby and recognises the important health benefits now known to exist for both mother and infant. All mothers have the right to make a fully informed choice as to how they feed and care for their babies; therefore, the provision of accurate, up-to-date and impartial information to all parents at an appropriate time is essential.

WHO and UNICEF recommend exclusive breastfeeding for the first 6 months of life; and introduction of nutritionally - adequate and safe complementary (solid) foods at 6 months together with continued breastfeeding up to 2 years of age or beyond.

The BHSCT has developed the following policy to provide a workplace environment that supports breastfeeding employees in continuing to breastfeed their infants following return to work after maternity leave.

The Trust recognises that supporting breastfeeding has benefits to the organisation such as a reduction in absenteeism and staff turnover and important health benefits to mother and baby.

This policy has been developed in light of good practice guidelines from the Health and Safety Executive for Northern Ireland (HSE).

**2.0 SCOPE OF THE POLICY**

The scope of this policy ensures women who work within the BHSCT are supported to continue to breastfeed on their return to work after maternity leave if they wish to do so. It also provides guidance for Trust management in supporting an employee who is breastfeeding on return to work.

* To provide a supportive workplace for breastfeeding employees.
* To give clarity to managers on issues around supporting employees who are breastfeeding.
* To educate, encourage and promote positive attitudes of colleagues towards employees who are continuing to breastfeed on return to work.

**3.0** **ROLES AND RESPONSIBILITIES**

The policy applies to BHSCT managers and employees alike. It provides broad guidance for all Trust areas for those employees planning to return to work whilst continuing to breastfeed.

Employees should approach their managers before returning to work if they are continuing to breastfeed on return. Discussion should include breaks required and potential areas where the employee could use for expressing.

**4.0 CONSULTATION**

This policy in the first draft was widely circulated during the consultation process to Trust management. Other groups included in the circulation were Trade Unions, Health Improvement, bwell group, occupational health and Health and Safety at work.

This subsequent draft will be similarly circulated and will include a number of staff who returned from maternity leave who continued to breastfeed.

**5.0 POLICY STATEMENT/IMPLEMENTATION**

**5.1 Unconditional support for Breastfeeding employees**

The Trust encourages employees and management to have a positive, accepting attitude toward working women who are breastfeeding. Discrimination and harassment of breastfeeding mothers in any form is unacceptable and will not be tolerated. The Trust subscribes to providing a workplace environment that supports breastfeeding employees in continuing to breastfeed their infants following their return to work.

5.2 Organisation’s responsibilities

The Trust acknowledges that supporting breastfeeding has benefits to the organisation such as a reduction in absenteeism and staff turnover in addition to the important health benefits to mother and baby. Employees who wish to continue to breastfeed following return to work shall receive:

* **Breaks for breastfeeding or expressing milk**

A temporary change to working arrangements may need to be considered to enable employees who wish to breastfeed following a return to work. Breastfeeding employees are entitled to breastfeed\* or express milk during work hours using their normal breaks and/or as part of additional lactation breaks (usually 20 minutes once or twice a shift/day) as agreed with their line manager.

If additional time is needed beyond the agreed set breaks and lactation breaks employees may use personal leave or may make up the time by coming into work earlier or leaving work later as appropriate to the needs of both the workplace and the employee.

(**\***Breastfeeding during work hours would only be if a family member/carer could bring the baby for feeding. The Trust recognises that this would be a rare occurrence and the parent will assume responsibility for the baby whilst on work premises. Depending on workplace environment, this option may not be available for all employees.)

* **A private place to express milk and/or breastfeed**

A private room (not a toilet) will be made available if required for employees to breastfeed or express milk. The room will be private and clean and have an electrical outlet. Hygiene around pumping is the responsibility of the employee (Hand washing or hand gel in the absence of a sink in the room). The cleaning of breast pump parts is also the responsibility of the employee. Where it is not possible to wash a kit at work or rinse it under a tap, then the mother can bring it home for decontamination. If employees prefer, they may also breastfeed or express milk in their own private offices, or in other comfortable locations agreed upon in consultation with the employee’s supervisor. Expressed milk should be stored in a personal cool bag or if available the cool bag can be placed in a designated refrigerator.

* **Education**

The Human Resources department will signpost pregnant employees and returning employees to available information and support on breastfeeding and returning to work. Information is available at [www.breastfedbabies.org](http://www.breastfedbabies.org) and leaflets can be viewed at [www.publichealth.hscni.net/publications](http://www.publichealth.hscni.net/publications)

* **Staff support**

Line managers and Human Resources departments are responsible for alerting pregnant and breastfeeding employees to the Policy on Supporting Breast Feeding Employees and for negotiating breaks and practices that will help facilitate each employee’s infant feeding goals. It is expected that line managers and work colleagues will assist in providing a supportive and understanding approach to facilitating breastfeeding employees.

Employee’s responsibilities

* **Breastfeeding equipment**

Employees are responsible for leaving the designated milk expression area clean and tidy for the next user. Each breastfeeding employee is responsible for purchasing and maintaining all her own breast pump equipment. Cleaning of breast equipment should be undertaken as recommended in the Public Health Agency booklet “Promoting Breastfeeding for Mothers Returning to Work and in accordance with manufacturer’s instructions. [Accommodating breastfeeding employees in the workplace](https://www.acas.org.uk/accommodating-breastfeeding-employees-in-the-workplace)

* **Communication with supervisors**

Employees who wish to breastfeed or express milk after their return to work shall keep supervisors informed of their needs so that appropriate accommodations can be made to satisfy the needs of both the employee and the workplace.

* **Milk storage**

Employees should label all milk expressed with her name and the date collected so that it is not inadvertently confused with another employee’s milk. Each employee is responsible for proper storage and transportation of her own milk. It is recommended that personal cool bags are used including within a designated refrigerator if this is available. If a refrigerator is not available breastmilk can be stored at room temperature or in a cool bag for 6 hours. Storage of milk should be undertaken as recommended in the Public Health Agency booklet “Promoting Breastfeeding for Mothers Returning to Work.”

[Promoting breastfeeding for mothers returning to work: a guide for employers](http://www.publichealth.hscni.net/publications/promoting-breastfeeding-mothers-returning-work-guide-employers-1)

* **Use of break times to express milk**

If more than one breastfeeding employee needs to use the designated expressing area, employees can use a sign-in log provided in the room to negotiate milk expression times that are most convenient or best meet their needs.

**6.0** **Dissemination**

This policy will be available on the LOOP to all current employees. It will be included as part of the new employee induction training and on application for maternity leave.

The policy, once ratified will be cascaded down from Chief Executive through the directorates so all staff will be notified.

**7.0 Resources**

Training on the policy will be provided via information and awareness sessions and mandatory equality training.

This policy will be included in the Employee Support Pack supplied through HR for all Trust employee expectant mothers prior to Maternity Leave.

**8.0 Exceptions**

Not applicable

**9.0** **MONITORING AND REVIEW**

The policy has been developed in light of good practice guidelines from the Health and Safety Executive for Northern Ireland (HSE) and recognises the value of breastfeeding for mothers and babies.

Monitoring will be managed within each directorate in accordance with present reporting mechanisms.

**10.0 EVIDENCE BASE/REFERENCES**

A brief summary of the evidence base and list of the references used, including relevant external guidance. Procedures and protocols must be put in Appendices at the end of the document. Check all web links used are still operational at time of policy finalisation.

* ‘Breastfeeding - A Great Start: A Strategy for Northern Ireland (2013-23)'.

[Breastfeeding - A Great Start - A Strategy for Northern Ireland 2013-2023](https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/breastfeeding-strategy-2014.pdf).

* Health and Safety Executive NI (2014) A Guide for new and expectant mothers who work. [Protecting pregnant workers and new mothers - Guidance for employers](http://www.hse.gov.uk/mothers/)
* Public Health Agency Promoting breastfeeding for mothers returning to work: a guide for employers. (March 2019) [Promoting breastfeeding for mothers returning to work: a guide for employers](http://www.publichealth.hscni.net/publications/promoting-breastfeeding-mothers-returning-work-guide-employers-1)
* [ACAS (2014) Accommodating breastfeeding employees in the workplace.](https://www.acas.org.uk/sites/default/files/2021-03/acas-guide-on-accommodating-breastfeeding-in-the-workplace.pdf)
* [World Health Organisation – Infant and Young Child Feeding](http://www.who.int/mediacentre/factsheets/fs342/en/)

Accessed on 25/10/22.

**11.0 NURSING AND MIDWIFERY STUDENTS**

Nursing and/or Midwifery students on pre-registration education programmes, approved under relevant 2018/2019 NMC education standards, must be given the opportunity to have experience of and become proficient in understanding the importance of workplace support of breastfeeding employees, where required by the student’s programme. This experience must be under the appropriate supervision of a registered nurse, registered midwife or registered health and social care professional who is adequately experienced in this skill and who will be accountable for determining the required level of direct or indirect supervision and responsible for signing/countersigning documentation.

Direct and indirect supervision

* Direct supervision means that the supervising registered nurse, registered midwife or registered health and social care professional is actually present and works alongside the student when they are undertaking a delegated role or activity.
* Indirect supervision occurs when the registered nurse, registered midwife or registered health and social care professional does not directly observe the student undertaking a delegated role or activity. (NIPEC, 2020)

This policy has been developed in accordance with the above statement.

**10.0 EQUALITY IMPACT ASSESSMENT**

The Trust has legal responsibilities in terms of equality (Section 75 of the Northern Ireland Act 1998), disability discrimination and human rights to undertake a screening exercise to ascertain if the policy has potential impact and if it must be subject to a full impact assessment. The process is the responsibility of the Policy Author. The template to be complete by the Policy Author and guidance are available on the Trust Intranet or via this [**link**](http://intranet.belfasttrust.local/policies/Pages/Equality-Screening.aspx).

All policies (apart from those regionally adopted) must complete the template and submit with a copy of the policy to the Equality & Planning Team via the generic email address [equalityscreenings@belfasttrust.hscni.net](mailto:equalityscreenings@belfasttrust.hscni.net)

**The outcome of the equality screening for the policy is:**

**Major impact**

**Minor impact**

**No impact**

Wording within this section must not be removed

**11.0** **DATA PROTECTION IMPACT ASSESSMENT**

New activities involving collecting and using personal data can result in privacy risks. In line with requirements of the General Data Protection Regulation and the Data Protection Act 2018 the Trust considers the impact on the privacy of individuals and ways to militate against any risks. A screening exercise must be carried out by the Policy Author to ascertain if the policy must be subject to a full assessment. Guidance is available on the Trust Intranet or via this [**link**](http://intranet.belfasttrust.local/policies/Documents/Data%20Protection%20Impact%20Assessments%20-%20guidance%20and%20screening%20questions.docx).

If a full impact assessment is required, the Policy Author must carry out the process. They can contact colleagues in the Information Governance Department for advice on Tel: 028 950 46576

Completed Data Protection Impact Assessment forms must be returned to the Equality & Planning Team via the generic email address [equalityscreenings@belfasttrust.hscni.net](mailto:equalityscreenings@belfasttrust.hscni.net)

**The outcome of the Data Protection Impact Assessment screening for the policy is:**

**Not necessary – no personal data involved**

**A full data protection impact assessment is required**

**A full data protection impact assessment is not required**

Wording within this section must not be removed.

**12.0 RURAL NEEDS IMPACT ASSESSMENT**

The Trust has a legal responsibility to have due regard to rural needs when developing, adopting, implementing or revising policies, and when designing and delivering public services. A screening exercise should be carried out by the Policy Author to ascertain if the policy must be subject to a full assessment. Guidance is available on the Trust Intranet or via this [link](http://intranet.belfasttrust.local/policies/Documents/Rural%20Needs%20Act%202018%20-%20Guide%20to%20the.docx).

If a full assessment is required the Policy Author must complete the shortened rural needs assessment template on the Trust Intranet. Each Directorate has a Rural Needs Champion who can provide support/assistance.

Completed Rural Impact Assessment forms must be returned to the Equality & Planning Team via the generic email address

[equalityscreenings@belfasttrust.hscni.net](mailto:equalityscreenings@belfasttrust.hscni.net)

Wording within this section must not be removed.

**13.0 REASONABLE ADJUSTMENT ASSESSMENT**

Under the Disability Discrimination Act 1995 (as amended) (DDA), all staff/ service providers have a duty to make Reasonable Adjustments to any barrier a person with a disability faces when accessing or using goods, facilities and services, in order to remove or reduce such barriers. E.g. physical access, communicating with people who have a disability, producing information such as leaflets or letters in accessible alternative formats. E.g., easy read, braille, or audio or being flexible regarding appointments. This is a non-delegable duty.

The policy has been developed in accordance with the Trust’s legal duty to consider the need to make reasonable adjustments under the DDA.

Wording within this section must not be removed.

**SIGNATORIES**

(Policy – Guidance should be signed off by the author of the policy and the identified responsible director).

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_**

**Policy Author**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Director**