

Breastfeeding at Work Guidance

There are numerous benefits of breastfeeding for the parent and baby. They include benefits relating to optimal growth, immunity, development, and health. The NHS promotes breastfeeding, advising 'Breastfeeding confers significant short and long-term health benefits for both the parent and the infant, which go beyond the period of breastfeeding itself'.

The frequency of feeding will depend on the age of the child, whether they are on solid foods and will change throughout different stages of their development. Therefore, the needs of the individual colleague on returning to work may be different to their needs six months later, depending on the child.

It is most likely that employees returning to work will already have established breastfeeding with their baby by the time they have returned to work. This means that milk is produced frequently by the mother. If the milk is not released frequently, i.e., every few hours, by feeding the baby directly or expressing milk, the breastfeeding parent is left uncomfortable, more susceptible to leaking and is at risk of a serious infection from clogged milk ducts (Mastitis). This situation will not improve until they are able to breastfeed or express milk. Breastfeeding works as a supply/demand, and missing feeds causes a feedback inhibitor of lactation, therefore reducing milk supply. It is reasonable to assume that an employee who can't comfortably breastfeed or express regularly in work may be distressed.

Additionally, colleagues supporting the parent should be aware that for some, delaying expressing or needing to repeatedly request and remind could result in stress that reduces prolactin, which stunts the ability to express, or results in the process taking longer than it otherwise would.

Frontline colleagues who wish not to share information on the radio with their dispatcher/whilst with their crewmate can simply send a message to their dispatcher at sign on, informing them they need to return to base for reasonable adjustments at the necessary interval, by providing a message: Reasonable Adjustments Pass (RAP) followed by 'every 3 hours' or as agreed by the line manager. EOC will then be able to liaise with the line manager to understand the need for undisturbed time to express, store and sanitise. EOC should make a note that you have a RAP, and the intervals next to your callsign so you should not need to remind them throughout the shift.

Where issues with expressed milk storage arise, such as High lipase, additional time will need to be factored in should the blanching/rapid cooling method be used.

The length of time between feeding varies and managers should expect a breastfeeding parent to feed or express roughly every three to four hours. The duration will vary, no longer than an hour each time in most cases. Time will also be needed to set up, safely store, and wash any equipment used for expressing.

Supporting Employees

Managers should discuss the needs of the individual directly with the colleague. This should be part of discussions taking place as part of supporting any employee returning to work after Maternity Leave.

A checklist is available (Appendix C) as an example starting point for discussions. This covers facilities, frequency, and role. There is further information below about how a manager can support an employee, depending on their requirements.

It is expected that the checklist can be reviewed after one month, to explore any changes in requirements and then at least every three months after that. There is flexibility on both sides as to how often these discussions might take place. Managers and colleagues are encouraged to discuss arrangements routinely, as requirements will change during employment.

Colleagues are encouraged to inform their manager as soon as possible if the agreed working arrangements are not successful.

Although the law allows employees to ask for flexible working for any reason (Children and Families Act, 2014), such requests from employees who want to breastfeed are likely to be temporary and so a permanent change to an employment contract would not be appropriate. However, a temporary change to working arrangements as part of reasonable adjustments may enable the employer and employee to both meet business and breastfeeding needs.

Managers should be conscious that a pattern or set of arrangements that have worked for one breastfeeding employee, may not work for another for several reasons. As such, there should be a clear emphasis on individual needs and requirements; managers are expected to respond reasonably to those requirements.

In most cases, the request is for additional and/or longer breaks to breastfeed. It is important that there is also time factored in for the colleague to rest and have a break themselves to eat. Therefore, breastfeeding breaks and meal breaks are separate entities.

Managers are required to consider requests and the impact on the service reasonably and objectively. While considering service delivery needs, they should be conscious of the impact of their decision-making for individual employees; decisions should be made on a case-by-case basis and specialist advice sought where agreement cannot be reached.

The support required may include the following:

1. Facilities

A colleague who is breastfeeding should have access to a clean, private, lockable room, with a comfortable chair where they will not be disturbed. Consideration may be given to whether there is access to an alternative suitable facility nearby or at an alternative location. For hygiene reasons, it is not appropriate for colleagues to use the toilet facilities or an ambulance to breastfeed.

Colleagues expressing milk will also need access to a suitable portable fridge. Expressed milk containers must be sealed and clearly labelled. Where access to a suitable fridge is not already available line managers should arrange for the relocation or the purchase of a portable fridge. Station fridges are not suitable for the storage of breastmilk.

It is never appropriate for employees to use the toilet facilities to express milk. For the same hygiene reasons as well as other reasons relating to privacy etc., an ambulance or sick room/occupational health room would not be a suitable venue for expressing milk.

A small fridge on a vehicle (not the preinstalled vehicle fridge for staff lunches) may facilitate greater flexibility, increasing options of where colleagues can express, for example at an out of area make ready centre, by allowing them to safely transport milk throughout the day.

Managers should consider the following:

- Where there is not a Wellbeing room available, is there an office or room which can be made private?
- Is a blind, lock, comfortable chair, table next to plug socket, cleaning wipes, and are other items required to make the room suitable?
- Is there easy, regular access to this room?
- Is there a fridge available for use which is safe? (i.e., not a main fridge used by all staff in shared area, which can affect temperature if opened frequently)
- Are there suitable facilities to wash and dry equipment nearby?

- If not, is there a suitable place nearby in the same area with suitable facilities? E.g., hospital building, fire service building, council building?
- If not, do we need to consider another base for a period of time? Another manager would need to be aware of requirements to provide support whilst undertaking alternative duties. The line manager retains responsibility for supporting the return to work and considering the impact on the individual e.g., travel time/cost etc.
- What else would need to be put in place e.g., informing Control of RAP?

Contracted third party agencies are welcome to use our facilities for breastfeeding.

2. Job role

Consider the following in relation to job role:

- How much control does a colleague have over their job, to be able to go to a private room when required? Can they go straight away, or have to wait an hour, or two hours potentially?
- Other duties can be considered to help with autonomy, but this should be balanced against the impact of moving a colleague who has potentially already been away from their role for some time, which can have a negative impact on their confidence in the role.
- The operational impact of being unavailable during a shift. If the impact is more than reasonable, can other duties be explored?
- Are there any temporary changes to the role that should be considered at this time? This may include offering shorter shifts as good practice, therefore providing the colleague and the Trust more flexibility and decreased operational disruption (potentially one stand down and a time to express/feed at the beginning and /or end of shift) where a 12-hour shift may incur several.

3. Informing colleagues

- The manager should support the employee and the working agreements that have been made.
- If the employee works elsewhere on alternative duties, the line manager retains responsibility for ensuring support is in place, so should maintain regular contact with the employee and the alternative duty's role manager, so a successful return to work is facilitated.

- Keeping In Touch (KIT) days are available to staff and may be beneficial for all concerned for them to be used to trial the facilities and requirements of individuals who are breastfeeding.
- If a colleague does not wish to share their breastfeeding status with their crewmate, they can message EOC stating they have a RAP, identifying the frequency.

4. Planning ahead

The Trust recognises that it is a parents' choice to continue breastfeeding beyond two years. Once the child reaches 2 years of age, it will be pertinent for managers to discuss longer-term working arrangements with the colleague at the next suitable review meeting.

Colleagues breastfeeding beyond two years where it impacts on the working day will be able to submit a flexible working form for permanent or temporary changes to the substantive contractual working pattern. This request will be managed in the same way as all other flexible working applications. Where there is opportunity to utilise other mechanisms to support colleagues in continuing their breastfeeding journey such as agile working, then these should be explored in line with policy.

It is advised that staff should be made aware at the last review before the child's 2nd birthday that discussions will be held about working arrangements at the next review meeting, to be held after the child's 2nd birthday. Sensitivity and support for the requirements of individuals should continue throughout these flexible working discussions, as well as operational considerations.

Further advice is available to the manager from their local HR team and the Inclusion team.

Additional information can be sought from the following sites:

- <https://www.nhs.uk/conditions/pregnancy-and-baby/breastfeeding-back-to-work/#organising-breastfeeding-and-work>.
- <http://www.hse.gov.uk/mothers/law.htm>
- <https://www.maternityaction.org.uk/wp-content/uploads/2014/11/BORTW-employer-leaflet-FINAL.pdf>
- <http://www.acas.org.uk/media/pdf/b/s/Acas-guide-on-accommodating-breastfeeding-in-the-workplace.pdf>
- <http://www.who.int/topics/breastfeeding/en/>
- <https://www.equalityhumanrights.com/en/pregnancy-and-maternity-workplace/working-forward>
- <https://www.lli.org/>

Checklist for managers to discuss breastfeeding and expressing with employees.

Is the plan to express or to feed the baby directly during working hours? Y/N

If expressing:	Yes	No	Comments/Actions agreed
<p>Are there suitable facilities at the usual place of work? i.e. – fridge (separate one not main one in common room). Where inclusion and wellbeing rooms are available these could be sited within this space.</p> <ul style="list-style-type: none"> - facilities to wash and dry equipment, and hands. - routine access through the working day to a quiet, private room with a comfortable chair and a table/desk with a working lock on the door. - Can the glass in the door be covered? Is there a plug socket available? - Please be aware that in some cases a breastfeeding colleague may wish to use a communal area to express rather than a private room. This should be supported if desired. 			
During standard shift, estimated number of times required to feed/express and estimated duration (consider guidance).			
Is the breastfeeding parent enrolled in a program of education? If so, please link with relevant education lead to provide support on relation to facilities at non Trust sites where appropriate and ensure minimal impact on learning. E.g., remote live link to watch lecture whilst expressing privately.			
<p>Would anything need to be put in place before the member of staff were to use the facilities?</p> <ul style="list-style-type: none"> - Before returning to work (e.g., buying a blind to cover the window in an office door, lock, room engaged signage) - When back in work (e.g., informing Control each time to stand down/Reasonable Adjustments Pass (RAP)?) 			
Is there anywhere nearby with suitable facilities that employee can access? Examples can include hospitals, public buildings with breastfeeding friendly facilities. Consider safety and access of these facilities – should that site be informed?			
Can the role be done from another site which does have these facilities? Consider impact on individual re support, travel time/cost. For some colleagues it may be feasible for them to return home during the break to breastfeed but impact on overall downtime will need to be considered. Where colleagues are able to work more agilely, this should be considered.			
Is a revised local induction required or other return to work support following the absence from work?			

Can KIT days be used to support a Return to Work and trial facilities and arrangements?			
Are there any temporary changes to the role that should be considered at this time? Also consider impact of issues highlighted in the Risk Assessment			
How much control does the employee have over their job to access breastfeeding facilities straightaway? Would they have to wait or delay?			
If required, consider working in another role at a suitable venue. Line manager retains responsibility for supporting the return to work. The other manager would need to be aware of requirements.			
Colleagues – considering confidentiality, what do colleagues need to know if working alongside employee, if anything? Agreement of who should inform and of what. Manager responsible to tackle any negativity, harassment and abuse due from other colleagues. Discuss benefit of RAP.			