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## 1. Overview

Waitematā DHB maternity facilities are accredited Baby Friendly Hospitals. Compliance with the World Health Organisation (WHO) International Code of Marketing of Breastmilk Substitutes (The WHO Code) and relevant, subsequent World Health Assembly resolutions is mandatory.

Waitematā DHB is committed to protecting, promoting and supporting breastfeeding. All parents have the right to make a fully informed decision about how they feed their babies. The provision of clear and impartial information to all parents at an appropriate time is therefore essential. Feeding options should be discussed antenatally by the woman or pregnant person's LMC. Staff will provide information regarding methods of feeding and will fully support mothers in their chosen method of infant feeding.

### Purpose

To provide an evidence based approach to supporting parents who have chosen to feed their baby infant formula or in situations where this is medically indicated.

### Scope

This guideline is applicable to all Waitematā DHB staff, maternity access holders and students.

# 2. WHO Code Compliance

- Employees of manufacturers/distributors of breastmilk substitutes, bottles, teats or dummies are not permitted to have contact with pregnant or postnatal women in Waitematā DHB facilities. This includes direct or indirect contact.
- Employees of manufacturers and distributors of breastmilk substitutes (formula company reps) will only meet with relevant dietitian team lead who will in turn inform maternity managers, paediatricians and lactation consultants, about changes to infant feeding products
- Waitematā DHB employees will not accept free gifts, non-scientific literature, materials, equipment, money or support for education or events from manufacturers/distributors of breastmilk substitutes, bottles, teats or pacifiers
- No advertising or promotion of breastmilk substitutes, feeding bottles, teats or dummies is permissible in any part of Waitematā DHB. Items such as calendars, posters, pens, etc. are prohibited if they display the manufacturers' logos.

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- Infant formula, fortifier, other breastmilk substitutes, bottles, and teats will not be stored in areas that are accessible or visible to pregnant women, mothers and visitors
- Women, pregnant people and their family/whānau will not be given samples of products within the scope of the WHO Code
- Waitematā DHB does not accept free infant formula or purchase at less than wholesale cost and adheres to the process of rotation of formula brands
- No routine group instruction on the preparation or use of formula will be given in the antenatal or postnatal period

# 3. Antenatal education

Women and pregnant people should be counseled by their health care providers antenatally about their choice of feeding, and breastfeeding recommended.

Women and pregnant people who make a clearly informed choice to mix feed (formula/breastfeeding) or formula feed should be supported in this decision. Women choosing to formula feed should be advised individually:

- To select a dairy-based (cow's milk) and age suitable whey-dominant formula. No brand should be specifically recommended. However staff may tell parents the brand of the Ready to feed (RTF) in current rotation if requested.
- To bring to hospital their own formula and feeding equipment to enable individual education instruction on the safe preparation and feeding of their baby. Cleaning equipment will be available.

## 4. Informed Consent

If parents make the decision to change to formula feeding or if formula is recommended for medical reasons, ensure that the parents have the appropriate information sheet to read before making a decision.

- 1. Infant formula for Medical Reasons or
- 2. Infant formula Request

Once a decision is made to give formula, in the Maternity Ward, a sticker will be placed in the baby's clinical notes explaining the indication. RTF will be available until parents/whānau brings their own powdered infant formula (PIF) to enable individual education on the safe preparation and feeding of their baby.

## 5. Parental education and advice

Parents should receive the following individual information and education:

- 1. The importance of skin-to-skin care
- 2. The importance of rooming in
- 3. Recognising feeding cues and cue based feeding
- 4. Recognising when baby is feeding effectively
- 5. Safe feeding techniques including paced bottle feeding
- 6. Instruction on preparing powdered infant formula (PIF)
- 7. Instruction on cleaning equipment
- 8. Parents should also receive "<u>Feeding your baby infant formula</u>", sourced from Health Ed website, Resource HE 1306 https://www.healthed.govt.nz/resource/feeding-your-baby-infant-formula

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## 6. Allergy concerns

Infants are defined as high risk of developing an allergy if at least one first-degree relative has a documented allergic disease. This includes atopic dermatitis, asthma, allergic rhinitis and food allergies.

Breastfeeding is most likely to reduce the risk of allergic disease. There is some evidence that hydrolysed formulas may reduce the risk of allergic disease in high risk infants; however the routine use of hydrolysed formula is not recommended. Hydrolysed formula (usually known as 'HA' or 'Hypoallergenic') is a cow's milk based formula that has been processed to break down most of the proteins which cause symptoms in cow's milk allergic infants. The use of hydrolysed formula is only recommended if the infant is symptomatic or diagnosed with an allergy.

If a parent is requesting a non-dairy based formula, please refer to a dietitian or if not available a paediatrician.

## 7. Ready to feed products (RTF)

#### Supplying of RTF

Waitematā DHB supplies RTF for use in all babies until parents have selected and provided their own formula.

#### **Rotation of RTF products**

In accordance with the BFHI documents RTF products are rotated. A rotation period of 4 months applies in maternity (does not apply to SCBU). Products will be reviewed regularly, or following manufacturers changes, in association with child health dietitians.

## 8. Bottles and teats

Individually wrapped sterile teats, and bulk purchased plastic bottles are recommended for single use only.

In SCBU, bottle fed babies will have their own bottle and teat for the length of stay. These will be cleaned as per SCBU instructions.

Teats are latex free; bottles are Bisphenol A (BPA) free.

#### Specialised products

Specialised feeding systems are only prescribed after assessment by a speech language therapist with lactation consultant input. They are individually issued and are not disposable.

## 9. Paced bottle feeding technique

Paced bottle feeding is a method of feeding that allows the infant to be more in control of the feeding pace. This method slows down the flow of milk into the nipple and the mouth, allowing the baby to feed slowly and take breaks. Paced feeding reduces the risk of overfeeding that may result in discomfort to the baby. It is recommended for any baby receiving bottle feeds.

Assist with positioning the baby in a well-supported slightly more upright position:

- Watch for feeding cues, touch top lip with teat to elicit gap then place teat in mouth
- Hold baby during feeds, do not leave baby unattended or prop bottle in baby's mouth
- Hold the bottle at such an angle to only half fill the teat, and allow rests from sucking approximately every 10 seconds by dropping the angle of the bottle, overtime baby will start to pace themselves
- Switch baby from side to side during the feed
- Wind frequently
- Baby does not need to take all the feed at every feed, variance is normal

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# 10. Preparing Hospital supplied Ready to Feed (RTF) formula

Store at room temperature in the appropriate locked cupboard.

- Aseptic technique should be applied including thoroughly washed hands and avoiding any contact with the liquid
- It is essential for the decanting to take place in a thoroughly clean environment, and any equipment cleaned thoroughly
- Ensure that the appropriate RTF is being used
- Check the expiry date and check the cap and check contents appear not to have foreign bodies in it
- Shake well before use
- Use an appropriate alternative feeding method for a breastfed baby e.g. cup or spoon
- Decant the required amount of RTF into a clean feeding bottle. The original bottle can be stored in the fridge and continue to be used for 24hrs.
- Once baby has finished feeding any remaining IF is discarded

# 11. Preparing Powdered Infant Formula (PIF)

PIF is not sterile and may contain bacteria. Illness from contaminated PIF is rare, however attention to the correct procedure for making, using and storing PIF is essential to minimise risk.

#### Storage and expiry dates on tins

- There is an expiry date on the bottom of the PIF tin which applies until the seal is broken
- Once the seal is broken write the expiry date on the lid. The PIF must be used within 4 weeks
- Store in a clean, dry place with the lid kept on tight

#### Method

- Read and follow instructions on the tin of PIF
- The concentration is always as per directions on the tin; never alter this as it can be harmful
- Prepare each feed as close as possible to feeding time
- Wash and dry hands thoroughly before preparing bottle feeds. The working environment and equipment must be clean
- Boil fresh water (see section on 'Water' below)
- Pour the correct amount of cooled boiled water into the clean bottle before adding the powder to ensure correct nutritional value. Not all bottles have correct volume lines on them Look for the standard mark EN14350
- Use the scoop and instructions provided with each tin to measure the formula powder. Level the scoop, most tins have a lip inside the tin for this, or use the back of a clean knife, do not pack powder into the scoop
- Add the correct number of full, level scoops of power to the measured water
- Attach lid and swirl the bottle gently until the formula is mixed thoroughly
- Feed as soon as possible to prevent the growth of harmful bacteria

#### Water

- Parents should be advised to use boiled water (including purchased water) for at least the first 6 months to make up PIF. If there are concerns about water quality, continue to boil and cool water until 18 months of age
- Water from tanks or bore holes should still be boiled until the baby is 18 months old

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- Boil water for 3 minutes on the stove top or until an automatic kettle switches itself off
- Keep boiled water covered while it cools, it can be stored in baby bottles in the fridge. Keep for only 24 hours then discard

#### **Storing feeds**

Ideally store the cooled boiled water and then mix with the PIF when needed.

- If formula must be prepared in advance, store in the back of the fridge (2-4°C check fridge temperature) for no more than 4 hours
- Keep the feed cold in a chilly bin or insulated carrier and discarded when it has been out of the fridge for more than 2 hours

#### Warming the prepared feed

- Place the prepared bottle in a container of hot tap water. Take care not to use boiled water due to risk of scalding if spilled water from a hot tap is adequate
- Once warmed, finish feeding baby within 2 hours. Throw away any unused formula. Never reheat warmed or partly used feeds
- Always check the temperature of the formula by shaking the bottle and dripping some of the formula on the inside of your wrists. If it feels warm on the wrist is a safe temperature for your baby. Formula that is too hot or unevenly heated can cause serious burns to the baby's mouth and throat
- Microwaves can overheat or heat unevenly and are not recommended. However, if parents choose this method at home they should shake the prepared bottle thoroughly and leave to stand to 2-3mins, shake it again and then test on wrist. Use the warmed feed within 20 minutes
- Discard any remaining feed
- Some babies are quite happy being fed prepared PIF at room or fridge temperature
- Refer parents to information in "Feeding Your Baby Infant Formula" hand out from Ministry of Health

## 12. Safe cleaning of equipment

Refer whanau to the Ministry of Health leaflet "Feeding Your Baby Infant Formula" for further information.

### **Cleaning equipment**

The following information should be provided to parents and support people:

- 1. Wash your hands well with soap and water
- 2. Wash all the equipment well with HOT soapy water
- 3. Rinse all the equipment thoroughly with cold water
- 4. Place into a container of cold antibacterial solution/, made up as per instructions (Sterinova 1 tablet to 2.3lt of warm water)
- 5. Wash container thoroughly and replace solution every 24 hours

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Document	Implementing and Monitoring the International Code of Marketing of Breast-milk substitutes in New Zealand: The Code In New Zealand MOH 2007
Document	Inquiry into Actions of Sector Agencies in Relation to Contamination of Infant Formula with Enterobacter Sakazakii Dr P G Tuohy Chief Advisor Child and Youth Health and Dr M Jacobs Director of Public Health, Ministry of Health , March 2005 Accessed August 2016 enterobactersakazak ii-report.pdf
Document	Food and Nutrition Guidelines for Healthy Infants and Toddlers (Aged 0-2) A background paper Ministry of Health 2008. Partially revised December 2012. <u>https://www.health.govt.nz/system/files/documents/publications/food-and-nutrition-guidelines-healthy-infants-and-toddlers-revised-dec12.pdf</u>
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and guidelines	Infection control hand hygiene http://staffnet/QualityDocs/Quality%20Documentation/05%20Infection%20Control/%5BP%5D% 20Hand%20Hygiene%20Nov18.pdf#search="infection control hand hygiene" <u>Cleaning and disinfection</u> http://staffnet/QualityDocs/Quality%20Documentation/05%20Infection%20Control/%5BP%5D% 20Cleaning%20and%20Disinfection%20Oct19.pdf#search="cleaning and disinfection"
	Breastfeeding Policy https://www.babyfriendly.org.nz/resource/whounicef-ten-steps-to-successful-breastfeeding/
NZBA	Baby Friendly Documents for Aotearoa New Zealand 2020 <u>https://www.babyfriendly.org.nz/fileadmin/Documents/1_BFI_Resource_Document_Part_One_n</u> <u>ew.pdf</u>
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