

Referral pathway for supporting breastfeeding mothers

Mother /Health Visitor express concern about breastfeeding

Information and support should be given by member of staff who has completed 2 day breastfeeding and relationship building training

Member of staff asks to complete a breastfeeding assessment and observe a full breastfeed

Staff member to explore:

- How it feels for mum e.g. discomfort, nipple damage, breast tenderness or engorgement
- Do Mums breasts feel softer after the feed- are her nipples misshapen/ sore?
- Is the baby transferring milk? (observe for changes in sucking pattern and listen for sounds of rhythmic swallowing)
- Baby's appearance eg behaviour, tone, unsettled, distressed, lethargic, jaundiced
- Does the baby come off the breast himself and appear satisfied after the feed?
- Baby's urine and stooling pattern eg there should be a minimum of 6 heavy wet nappies and 2 soft yellow stools per day (up to age four to six weeks)
- Number of feeds in 24 hours eg no fewer than 8 feeds in 24 hours

If any concerns about feeding effectiveness Staff member can suggest:

- Revisiting basic breastfeeding positioning and attachment to help achieve an effective latch (Remember CHIN – see below)
- Increasing frequency of feeding(if fewer than 8 feeds)

Agree a plan of care and follow up support: If problem persists or Mum has ongoing concerns then refer baby to RMC for further information and support from: Specialist breastfeeding team

For feeding queries or to help put a plan in place Telephone specialist breastfeeding support service on 07795 110109

Remember **CHIN** (copyright BFI)

Close- Mum holds baby close to her body

Head free- babies head free to tilt back

In Line- babies head and body in alignment

Nose To nipple- baby starts nose to mother's nipple –as he tilts his head back nipple will slip under top lip upwards and backwards to rest at junction of the hard and soft palate