

Workshop 3: Infant feeding and caring for your baby

Important

This workshop supports the advice you'll be given directly by the maternity team.

If you have any questions about the information included, or any concerns, please contact your named midwife or email the parenthood education team: rf.bhinfantfeeding@nhs.net



- Feeding and caring for baby are wonderful opportunities for bonding between parents and baby.
- Around 28 weeks in pregnancy, your midwife or caregivers will have a conversation with you to discuss your thoughts and feelings around feeding and caring for your baby.
- Pregnancy is the perfect time to inform yourself of the many proven health benefits of breastfeeding for you and your baby and learn how to get feeding off to a good start, so that you can make an informed choice when your baby is here.



Breastfeeding reduces the risk of the following for your baby:



Breastfeeding reduces the risk of the following for you:



Comparison of artificial formula with milk?

Artificial formula

Water (70%)

Protein

Minerals (iron)

Fats (support

brain growth)

Vitamins

Carbohydrates (sugars)

Amino Acids

Probiotics (friendly bacteria promote healthy gut)

Breast milk

Everything that is in artificial formula **plus**:

- ✓ Growth factors
- ✓ Antibodies
- ✓ Enzymes
- ✓ Viral fragments
- ✓ White cells
- ✓ Nucleotides
- ✓ Sugars







Breastfeeding is more than food

Breastmilk is a 'live milk', full of protective factors, catered to your baby.

Feeding releases good hormones. Remember...

- ...oxytocin increases
- ...cortisol decreases
- ...perfect for brain development and bonding

Breastfeeding support links

Breastfeeding network https://www.breastfeedingnetwork.org.uk/

National Breastfeeding Helpline http://www.nationalbreastfeedinghelpline.org.uk/

Remember, there is lots of support within the community. Speak to your midwife for more information.



We will take you through the following topics in this workshop:

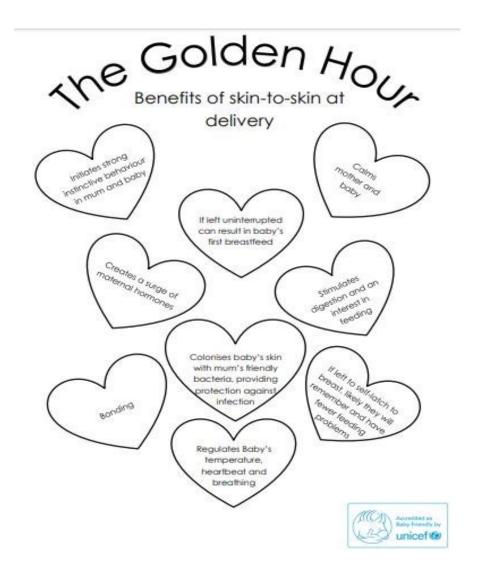
- Skin to skin
- Positioning and attachment
- Recognising feeding cues and signs of effective feeding
- Responsive feeding (min 8 feed in 24 hours including at least once between midnight to 6am)
- Diet/Rest/Fluids/Vit D
- Keeping baby near
- Support
- If breastfeeding: avoid dummies/teats/artificial formula unless clinically indicated
- Early hand expressing if any delay initiating feeding/latching difficulties





It is recommended all babies have skin to skin however you choose to feed your baby

If you can't start skin to skin, your partner can



Make sure baby's airway stays clear

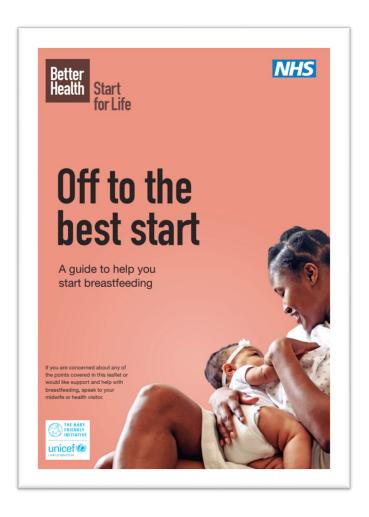
Where possible first feed should be in skin contact with mother

Royal Free London **NHS Foundation Trust**

Skin to skin should last at least an hour, until after 1st feed or as long as you wish...the more skin to skin you do, the more the feeding happens

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You will find lots of information on to support you to with feeding your baby in the following:

https://www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2022/10/Breastfeeding-leaflet.pdf

Signs of good attachment

Nose is free

Chin touching/ indenting the breast

More areola seen above top lip than by chin if visible



No pain for mother

Rounded cheeks No clicking noises!

Rhythmic sucks with pauses; 1-2 sucks to a swallow





Positioning and attachment videos

Unicef baby friendly – positioning and attachment: https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeeding-resources/positioning-and-attachment-video/

Unicef baby friendly – ineffective attachment: https://www.unicef.org.uk/babyfriendly/baby-friendly- resources/breastfeeding-resources/ineffective-attachment/

Global health media:

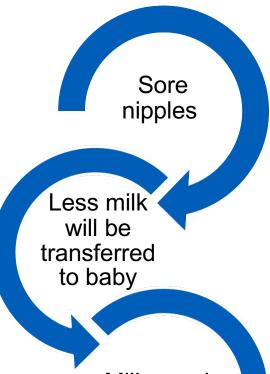
https://globalhealthmedia.org/portfolio-items/attaching-your-baby-at-the-breast/





Positioning and attachment is key!

When baby is not attached at the breast properly this leads to...



Baby less satisfied, passing less nappies, weight loss

When breasts are not emptied properly the brain receives less signals ...

Milk supply drops

Express to maintain supply





Hand expressing

- More effective for expressing colostrum in early days than by pump
- Can help with attachment and ease engorgement when breasts are full



Watch this video:

https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeeding-resources/hand-expression-video/



Responsive breastfeeding is...

A two way relationship between mother and baby

Feed baby when he/she shows feeding cues
(min 8 times in 24 hours including night)



Offer breast when breasts feel full

Offer breast to comfort baby if baby unsettled

Offer breast if mother wishes to relax – good hormones released







Remember: you cannot overfeed a breastfed baby

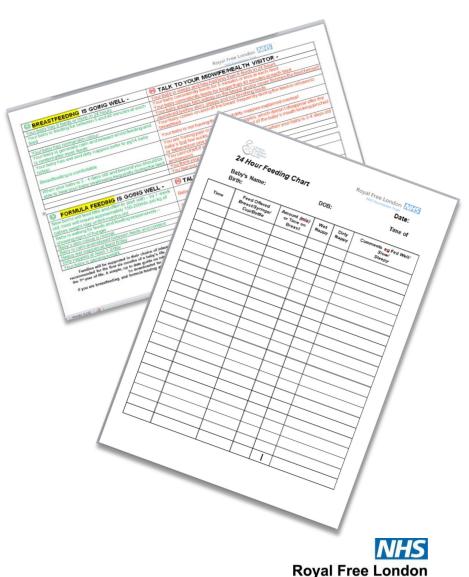
It is always appropriate to offer the breast for food, comfort, protection, or your needs

Feeding in first 24 hours...

All babies have a feed chart to monitor feeding. It also has information for you to recognise if feeding is going well.

Healthy term babies may only feed a few times in first 24 hours. After this, they should feed a minimum of 8-12 times, including at least once between midnight to 6am.

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Feeding in the early days

First 24 hours	Following days
 Skin to skin at delivery until after first feed 	 Continue responsive feeding to meet baby's needs and maintain lactation
Aim for 1st feed within one hour after delivery	 Aim minimum 8-12 feeds in 24 hours including at night remember night feeds are normal and important to
 If baby feeds well, continue responsive feeding and aim for 2nd feed by six hours if no cues sooner 	maintain your supply
 If baby does not feed within 1st hour, continue skin to skin in laid back position, speak to your midwife about reoffering breast and commencing hand expressing 	



If your baby has an orange hat...

- Some babies may require further observations after delivery and may need more frequent feeding.
- If your baby is given an orange hat, speak to your midwife about plan of care and feeding plan for baby.
- Please scan this QR code for more information:







Remember...

B: Breast feeding is a journey that has many benefits for your baby and you

A: Allow yourself and your baby to find your own rhythm, always respond to baby cues for food and comfort

B: Be kind to yourself. Be patient, you're both learning a new skill... Make sure you're eating, drinking and resting

Y: You've got this... and if you need support, just ask.



If you choose to bottle feed...

- You only need first stage milk for the first year
- Feed baby when baby shows feeding cues
- Pace the feeds to avoid overfeeding
- Hold baby close, limit feeding to main carers for baby attachment and bonding
- Speak to your midwife- to discuss sterilising, how to make feeds safely, responsive bottle feeding

Helpful resources:

- https://www.unicef.org.uk/babyfriendly/baby-friendlyresources/bottle-feeding-resources/
- https://www.firststepsnutrition.org/parents-carers







How do I know my baby is getting enough milk?

- · Lots of mums wonder if their baby's feeding well and getting enough - especially in the first few days, but it's very rare that mums don't make enough breastmilk for their babies. It may just take a bit of time before you feel confident that you are providing enough milk.
- . Generally, your baby will let you know if they are not getting what they want; wet and dirty nappies are also a good indication, as is hearing your baby swallow.
- Your baby should be back to birth weight by two weeks and then continue to gain weight.
- · Let your baby guide you as to how often to feed. Responsive breastfeeding recognises that feeds are not just for nutrition, but also for love, comfort and reassurance between baby and mother. It is not possible to overfeed a breastfed baby.

Your baby's nappies



- . In the first 48 hours, your baby is likely to have only 2 or 3 wet nappies. Wet nappies should then start to become more frequent, with at least 6 every 24 hours from day 5 onwards.
- · At the beginning, your baby will pass a black tar-like poo (called meconium).
- . By day 3, this should be changing to a lighter, loose, greenish poo.
- . From day 4 and for the first 4 6 weeks, your baby should pass at least 2 yellow poos a day.
- . If your baby has not pooed in the last 24-48 hours, speak to your midwife or health visitor as this may mean they aren't getting enough milk.



More information can be found at:

https://www.unicef.org.uk/babyfriendly/wpcontent/uploads/sites/2/2022/10/Breastfeedin g-leaflet.pdf

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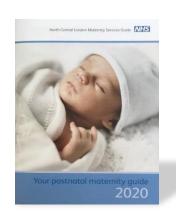
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Nappy changing, bathing, skin and cord care

Click on the links below for more information and videos:

- https://www.nhs.uk/conditions/pregnancy-andbaby/nappies/
- https://www.nhs.uk/conditions/pregnancy-and baby/washing-your-baby/

Your postnatal maternity guide





Coping with crying



*Version 5 updated 19/02/2018



nfant crying is normal and it will stop!

Babies start to cry more frequently from around 2 weeks of age.

The crying may get more frequent and last longer.

After about 8 weeks of age babies start to cry less each week.



Comfort methods can sometimes soothe the baby and the crying will stop.

Think about are they:

- hungry
- tired
- in need of a nappy change

 The simple coloring

Try simple calming techniques such as singing to the baby or going for a walk.



It's ©k to walk away if you have checked the baby is safe and the crying is getting to you.

After a few minutes when you are feeling calm, go back and check on the baby.



Never, ever shake or hurt a baby.

It can cause lasting brain damage or death.

If you are worried that your baby is unwell contact your GP or call NHS 111.

Speak to someone if you need support such as your family, friends, Midwife, Health Visitor or GP.

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There is lots of information on what you can do on the ICON website at https://iconcope.org/





Signs of an unwell baby

- Uninterested in feeding or less feeds and fewer wet/dirty nappies
 than expected for age of baby
- Very lethargic, sleepy or poor tone/floppy
- Persistent jittery movements
- Chest dipping inwards or making noises with breathing
- High pitched or weak cry, persistent crying, unable to be soothed
- Jaundice in first 24 hours of age
- Any rash should be checked



If you are worried about your baby's health, speak with your doctor or your midwife

Further information can be found at: https://www.lullabytrust.org.uk/safer-sleep-advice/baby-check-app/







Always seek medical advice if you have any concerns about baby

Call 999 immediately if:

- Baby turns blue
- Baby stops breathing
- You think baby is having a fit



Safer sleeping for babies



Watch videos and find information on safe sleep here:

https://www.lullabytrust.org.uk/safer-sleep-advice/

Have a go at this activity: https://www.lullabytrust.org.uk/wp-content/uploads/Spot-the-risks.pdf







Safe sleeping – if you chose to cosleep with your baby (source)

Watch videos and find more information on co-sleeping here:

- https://www.lullabytrust.org.uk/safer-sleepadvice/co-sleeping/
- https://www.basisonline.org.uk/basisinformation-sheets/





More information about caring for your baby and safe sleeping can be found at websites and resources below:

Infant Sleep Info App

The Infant Sleep Info website is full of helpful sleep info for parents and health practitioners, but it can be hard to read on a mobile device, especially a smart phone.

The *NEW 2017* Infant Sleep Info App provides key information from the Basis website in a handy format for mobile devices. Covering normal sleep development, sleep location and sleep safety the familiar info from the website is delivered in smaller chunks. Two features are exclusive to the app

- A bed-sharing decision tool guides parents through the key considerations for safe bed-sharing, and explains when bed-sharing may be inadvisable and why.
- A sleep log tool helps parents track their baby's sleep, displaying this info on a chart depicting the range of normal sleep for infants of different ages to provide reassurance!

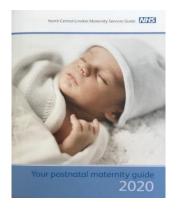




















We hope you found this workshop helpful. If you have any feedback, please contact

<u>rf.bhinfantfeeding@nhs.net</u>

Thank you for your feedback

The information in this workshop is based on the following websites

Basis online website

https://www.basisonline.org.uk/basis-information-sheets/

Breastfeeding Network website

https://www.breastfeedingnetwork.org.uk/

First Steps Nutrition website

https://www.firststepsnutrition.org/parents-carers

Global Health media

https://globalhealthmedia.org/portfolio-items/attaching-your-baby-at-the-breast/

ICON website

https://iconcope.org/

National Breastfeeding network

http://www.nationalbreastfeedinghelpline.org.uk





The information in this workshop is based on the following websites (cont.)

NHS Choices website

- https://www.nhs.uk/conditions/pregnancy-and-baby/nappies/
- https://www.nhs.uk/conditions/pregnancy-and baby/washing-your-baby/

The Lullaby Trust website

- https://www.lullabytrust.org.uk/safer-sleep-advice/baby-check-app
- https://www.lullabytrust.org.uk/safer-sleep-advice/
- https://www.lullabytrust.org.uk/wp-content/uploads/Spot-the-risks.pdf
- https://www.lullabytrust.org.uk/safer-sleep-advice/co-sleeping/

Unicef Baby Friendly website

- https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeedingresources/positioning-and-attachment-video/
- https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeeding-resources/ineffectiveattachment/
- https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeeding-resources/handexpression-video/
- https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/bottle-feeding-resources/
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