

Breastfeeding Peer Supporter Hospital Support Policy

Aim of Treasure Chest Group

To promote, support and encourage breastfeeding in the York area. All our information is in line with UNICEF BFI standards.

We are aware that some people may wish to use the term chestfeeding instead of breastfeeding and may not identify as a mother and we will use the terms the person wishes to use.

Hospital support Objectives

- To promote the normality of breastfeeding to parents on the maternity unit who are initiating breastfeeding
- To support the initiation of breastfeeding within the maternity unit
- To encourage and reassure mothers/parents through parent to parent peer support
- To complement the level of professional service offered by midwives
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In order to be eligible to offer this support, Treasure Chest Peer Supporters;

- Will have breastfed for a minimum of six months
- Will have undergone 20 hours of peer supporter training (see appendix i)
- Will be undergoing supervised peer support within the community
- Will attend at least two peer supporter training updates per year
- Will have attended a dedicated two hour introductory session for hospital visiting (see appendix ii)
- Will have completed their full hospital visiting induction including shadowing and shadowed visits

Hospital Support Peer Supporter Induction Programme:

Before commencing hospital peer support, each peer supporter will have completed all necessary administrative hospital paperwork via the Volunteering Office.

The peer supporter will shadow an experienced hospital peer supporter (their mentor) on a minimum of two separate visits. The peer supporter will then be shadowed by their mentor for at least one more visit. Each visit will be de-briefed and reflected upon.

Once both parties (new peer supporter and mentor) have agreed, the new peer supporter may carry out their visits alone. At this point the peer supporter will remain in close contact with their mentor through written reflective records, which are non-identifiable, and through supervisions when necessary. These formal written reflections will continue as long as needed.

Mentors are either IBCLC's, ABM BFC/Advanced practitioners or experienced Peer Supporters.

Model Visit Procedure

The peer supporter will introduce herself at the midwives' station and ask a midwife if there are any breastfeeding parents who would benefit from contact with a peer supporter.

The length of a total visit will usually be of around two hours, to fit with the circumstances of the individual peer supporter. Mealtimes are to be avoided if possible.

The peer supporter will contact as many parents identified as her time allows, in order to encourage and support breastfeeding and provide information about support in the community.

Peer supporters will offer up to date breastfeeding information compatible with BFI, specifically encouraging parent/infant contact, preferably skin to skin. They will discuss normal newborn baby behaviours in order to reassure parents and develop their confidence in breastfeeding. They will offer information, as appropriate, on positioning and attachment as well as other suggestions on basic breastfeeding techniques, as necessary.

Clothing should be smart/casual with sleeves above the wrist, closed-toed shoes and no watches etc. below the wrist.

Any questions or concerns beyond the remit of a peer supporter will be passed onto a relevant health professional. The boundaries of a peer supporter are covered in supervision/training sessions.

If a peer supporter feels that she is being asked to do something that is beyond her remit and/or experience, they should say they are not comfortable with this. This will differ from peer supporter to peer supporter as each individual will have a different amount of experience and training.

The peer supporter will discuss support provision in the local community, explaining about Treasure Chest and our groups and what they can offer, in addition to National Breastfeeding Helpline information with the parent.

An important part of the peer support visit is that the peer supporter will have time to listen to the parent utilising the listening and communication skills acquired in training.

Prior to leaving the ward, the peer supporter will provide feedback of any pertinent information regarding their interactions with the parents, to a midwife.

All current hospital policies must be adhered to e.g. hygiene, dress code etc

Confidentiality will be maintained at all times

Appendix i

Outline of Treasure Chest 20 hour breastfeeding peer supporter training

The training is designed as a basic introduction to offering support for parents who have personal experience of successful breastfeeding – with or without difficulties. It aims to equip trainees to offer good up-to-date information to parents to help them continue breastfeeding if they wish to do so. It also provides a foundation for sustaining study at a higher level. The course includes basic communication skills for individual work. It aims to equip supporters to support families to raise their own confidence in their ability to sustain breastfeeding for as long as they and their babies wish in a culture which may make this difficult and to discriminate between wise and unhelpful interventions. The course covers inclusivity. The course aims to give trainees a research based and realistic view of the effect of trained supporters on breastfeeding initiation and maintenance.

Learning outcomes:

Upon completion of the training trainees should be able to:

- apply the theory and practice of basic listening skills, including the use of questioning, and communication skills such as reflecting and summarising in a non-judgemental framework and avoid giving advice and the use of minimal self-disclosure
- demonstrate a secure understanding of the advantages of offering breastmilk and of breastfeeding and the hazards of formula feeding and mixed feeding
- recognise some of the common difficulties women experience in sustaining breastfeeding and pass on research-based knowledge about self-help in relation to common problems in the context of unproblematic breastfeeding e.g. perceived insufficient milk, sore nipples, colic etc.
- be clear about the need where appropriate to refer to medical or other professional and the importance of saying 'I don't know'.

Main topics covered in the training

- theory and practice in listening skills, the use of questions, and communication skills such as reflecting and summarising in a non-judgemental framework and reasons for avoiding giving 'advice' and the use of more than minimal self-disclosure
- basic physiological understanding of breastfeeding in the light of research and the basic contents of breastmilk, the normal course of breastfeeding and the BFI standards
- advantages of offering breastmilk and of breastfeeding and the hazards of formula feeding and mixed feeding whilst respecting individual choice and medical need
- some of the common difficulties parents experience in sustaining breastfeeding and an awareness of research knowledge and gaps in knowledge about self-help in relation to common problems (perceived insufficient milk, sore nipples, colic etc)
- an understanding of some common interventions in breastfeeding difficulties and their benefits and risks together with alternatives
- a research-based and realistic view of the effect of trained supporters on breastfeeding initiation and maintenance
- practicalities, such as personal safety and record keeping
- the need where appropriate to refer to medical professionals – the importance of saying 'I don't know'. Boundaries – the differences in role between health professionals and voluntary supporters including awareness of child protection
- awareness of supporters' needs for support in this work and boundaries to be set in work undertaken e.g. home visiting, telephone access

Appendix ii

Outline of content of two hour introductory session for hospital visiting

- Ensure all hospital administrative paperwork is underway
- Discuss the Treasure Chest breastfeeding peer support hospital visiting policy specifically the number of the shadowing visits and the model visit procedure
- Treasure Chest and hospital expectations of commitment from the peer supporter
- Revision of key points regarding breastfeeding newborn babes
- Confidentiality
- Formal written reflections
- Practicalities of visiting: dress code, parking, ward access, refreshment breaks, lockers etc
- Hand washing policy at the hospital
- Book first shadowing visit

Date of last review: September 2022

Reviewed by: Helen Wyrill

Date of next review: September 2023