



Breast Feeding Policy

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Equality Analysis	Completed
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Dissemination requirements	All Trust Employees via internet
Part of Trust's publication scheme	Yes

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The East of England Ambulance Service NHS Trust (the Trust) has made every effort to ensure this policy does not have the effect of unlawful discrimination on the grounds of the protected characteristics of: age, disability, gender reassignment, race, religion/belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity. The Trust will not tolerate unlawful discrimination on the basis of, spent criminal convictions, trade union membership or non-membership. In addition, the Trust will have due regard to advancing equality of opportunity for and fostering good relations between people from different groups and people with protected characteristics.

All Trust policies can be provided in alternative formats if required.

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1. Policy Statement

This policy outlines the Breastfeeding Policy for The East of England Ambulance Service NHS Trust (the Trust). The Trust recognises the well documented health advantages of breastfeeding for infants and nursing parents and is committed to providing a supportive environment for breastfeeding employees to work.

This policy has been written in partnership by management and staff side.

2. Scope

This policy applies to all staff employed by the Trust who are breastfeeding, and due consideration will be given to issues raised in relation to variations in cultures within the work environment. The Trust is a family friendly organisation and acknowledges its responsibility concerning the wellbeing of its employees and all other persons liable to be affected by its activities. EEAST acknowledges its responsibility to encourage and support nursing parents in their choice to feed their babies' breast milk, unless there are circumstances when breastfeeding is thought to be contraindicated (WHO 2003). EEAST undertakes to provide a safe and healthy working environment for employees.

3. Introduction

3.1 East of England Ambulance Service (EEAST) needs to ensure that all employees work in a safe and respectful environment. EEAST is an inclusive and supportive employer to all staff and recognises and values the differences of all individuals in the workplace.

3.2 Staff returning to work following the arrival of a new baby may face a particular set of challenges. This includes specific needs relating to those staff who are still breastfeeding on their return to work. This policy is aimed at supporting these staff, and the managers who are there to support

them, at making that transition back into the workplace as smooth and successful as possible.

- 3.3 Supporting employees who are breastfeeding contributes to the wider picture of women in the workplace, bearing in mind the gender pay gap and other gender equality issues within the sector. This is further to the obvious benefits of individual staff feeling motivated, engaged and empowered in work.
- 3.4 EEASt taking this stance also reinforces the NHS view that nursing parents should be supported to breastfeed as the preferred option for the first six months of the life of the infant. Going past that 6-month mark, adopting an approach that supports the nursing parent to continue to feed as she wishes, brings benefits to the employer of having happier and potentially healthier staff. Also allows nursing parents to return to work earlier if they chose to. reduces maternal absenteeism for personal and infant ill-health, and improving retention, morale and organisational loyalty of nursing parents (Cohen et al, 1995)
- 3.5 Pregnancy and maternity is a protected characteristic under the Equality Act 2010.
- 3.6 This policy should be considered alongside the Trust's Maternity Policy.

4.0 Information about breastfeeding

- 4.1 Exclusive breastfeeding (i.e. nursing parent's milk only) is recommended by the World Health Organisation (WHO) for babies up to the age of 6 months. Breastfeeding alongside food is recommended up to two years and beyond. The Trust is committed to ensuring that employees are supported in achieving this recommendation. The Trust recognises that the circumstances required to enable an employee to continue breastfeeding upon their return to work will be relative to each individual. Therefore, an

informal meeting between the returning employee and their line manager is recommended to discuss what supportive actions could be put in place. This may be in the form of a Keeping in Touch (KIT) meeting.

- 4.2 There are numerous reported benefits of breastfeeding for nursing parent and baby. They include benefits relating to optimal growth, immunity, development and health. Indeed, the NHS promotes breastfeeding, advising 'Breastfeeding confers significant short and long-term health benefits for both the nursing parent and her infant, which go beyond the period of breastfeeding itself'.
- 4.3 For the purposes of this policy, the term 'breastfeeding' is used to cover both feeding a baby directly and/ or using a breast pump to expressing milk.
- 4.4 Decisions about how best to feed infants should lie with the parents or guardians of the child. As an employer, it is important to support parent choice with regards to how an infant is fed. Failure to do so can damage the relationship with the employee irreparably, if the employer shows a lack of consideration of individual needs.
- 4.5 The frequency of feeding will depend on the age of the infant, whether they are on solid foods and throughout different stages of their development. So, the needs of the nursing parent on returning to work may be different to her needs six months later, depending on the infant. It is understood that a breastfeeding employee may not know how long she will breastfeed for, and that her requirements may change with time, therefore it is recommended that that she will have further meetings with her line manager to review how the arrangements are working for both employee and the Trust.
- 4.6 Frequency of Breaks
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

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is produced frequently by the nursing parent. If the milk is not released frequently, i.e. every few hours, by feeding the baby directly or expressing milk, the nursing parent is left uncomfortable at best and is at risk of obtaining an infection (mastitis). This uncomfortable situation will not improve until she is able to breastfeed or express milk. With engorged breasts, leaking milk and worries about developing an infection, it is reasonable to assume that an employee who can't comfortably breastfeed or express regularly in work may be distressed. This is in addition to the other factors mentioned above that may apply to any nursing parents returning to work after maternity, adoption or shared leave – changes in role, changes in childcare, changes in working pattern, changes to work-life balance outside of work too.

- 4.7 The length of time between feeding or expressing varies but as a general rule, managers would be wise to expect a nursing parent to feed or express every 3-4 hours and the duration will vary; no longer than an hour each time in most cases. Time will be needed to wash any equipment used if expressing too and time to set up equipment.
- 4.8 Following an in-depth assessment, a nursing parent who is feeding should have access to a clean, private room with a comfortable chair and a table/desk where she will not be disturbed. She will also need access to a fridge or a separate fridge, where possible and suitable facilities in which any equipment can be washed or sterilised. Consideration should also be made for reasonable adjustments, where required.
- 4.9 It is not appropriate for employees to use the toilet facilities or sick room (first aid room - unless specifically adapted for the purpose) to express milk. For the same hygiene reasons and other reasons, an ambulance would not be a suitable venue for expressing milk.
- 4.10 The Flexible Working Policy may be applicable to accommodate some of the supportive actions listed below,

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however it should be noted that most employees wanting to return to work wish to breastfeed temporarily and this will not require a permanent change to the employment contract.

4.11 Supportive actions may include but are not limited to:

- Flexible breaks so that the employee can express milk e.g. Additional 3 breaks per one 12hr shift or one additional break every 4 hours;
- The provision of a clean, warm and private space for expressing; bearing in mind that access to plug sockets may be required. Toilets or medical environments would be deemed inappropriate due to hygiene risks.
- Access to a fridge to store expressed milk and space for employees own cool bag and icepacks for transport.
- The option for the employee to return to their home/childcare facility to breastfeed
- For the employee's baby to be brought onto Trust premises by a named person in order to feed.
- Provision for a breastfeeding nursing parent to rest, including the ability to lie down
- Temporary change to working hours to accommodate breastfeeding. It would be helpful if this is less rigid than the process within the Flexible working.
- For the employee to be given the time to travel to the nearest appropriate facility for breast feeding.

4.12 Managers should consider any requests reasonably and objectively against the likely impact they might have on the Trust. If, after discussion, a manager has to turn down a request to breastfeed from an employee, the manager should explain the business reasons to the employee.

4.13 A refusal to allow a breastfeeding employee to express milk or to adjust her working conditions to enable her to continue to breastfeed may amount to unlawful sex discrimination. However, if you have considered the

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request objectively, discussed the issue with your employee and still cannot allow extra breaks without there being an unacceptable impact on your business (specifically the frontline service) then this would help explain your decision and would be much less likely to constitute indirect sex discrimination. Please see section 5.1 below.

- 4.14 It may be necessary for information regarding any arrangements to be shared with relevant people. For instance, any other line managers that the employee reports to or in the case of operational staff members, EOC may need to be made aware of any special arrangements in order to accommodate if affecting operational members of staff, however the reason for these arrangements will not be shared. Any information shared will be kept confidential in line with the Trust's Confidentiality Code of Conduct.
- 4.15 Employees have the right to be protected from harassment under the Equality Act 2010, specifically in this case under the protected characteristics of pregnancy/maternity and/or gender. Any inappropriate behaviours and/or language in relation to an employee's choice to breastfeed or their requirement for supportive actions will be dealt with under the Dignity at Work policy.
- 4.16 A risk assessment, as documented in the Maternity Policy, is required to be completed, looking at the Health and Safety for the employee and potential impact on the baby.
- 4.17 A Return-to-Work (RTW) toolkit is available to support managers when managing employees return to work after periods of leave from maternity. East of England Ambulance Service (EEAST) wants to ensure that all employees work in a safe and respectful environment. EEAST wants to be an inclusive and supporting employer to all staff and to recognise and value the differences of all individuals in the workplace.

- 4.18 Benefits of a supportive RTW meeting ensures that we support the employee's wellbeing during this process. A completion of a RTW plan ensures that the returning employee is up to date on training any changes in process/procedure/responsibilities and Team changes. If the employee is breastfeeding upon their return to work, then the manger can ensure that a risk assessment is completed.

5.0 Responsibilities

5.1 Agenda for Change Terms and Conditions state:

Health and safety of employees pre and post birth

15.34 Where an employee is pregnant, has recently given birth or is breastfeeding, the employer must carry out a risk assessment of her working conditions. If it is found, or a medical practitioner considers, that an employee or her child would be at risk were she to continue with her normal duties, the employer should provide suitable alternative work for which the employee will receive her normal rate of pay. Where it is not reasonably practicable to offer suitable alternative work, the employee should be suspended on full pay.

15.35 These provisions also apply to an employee who is breastfeeding if it is found that her normal duties would prevent her from successfully breastfeeding her child.

5.2 Role Responsibilities regarding the policy about supporting staff who are breastfeeding are as follows:

- The Board and Executive Leadership Team members have a responsibility to tackle discrimination within the workplace, whether among staff, patients or the public. NHS organisations are promoting breastfeeding and EEAST seeks to be an inclusive employer of choice.

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- Line Managers must ensure inappropriate language and behaviour of any kind is tackled, and seen to be tackled, in this case with a focus on the protection and support of those staff who are breastfeeding. Managers of all levels must promote a culture of tolerance, compassion and kindness. All decisions relating to employment, including selection, performance, discipline, grievance and training, should be made fairly, in accordance with legislation and Trust policies and procedures.
- The HR team are responsible for ensuring the policy relating to breastfeeding is accessible and promoted. They are responsible for ensuring bespoke support is available to managers as appropriate. They are also responsible for keeping the provisions within this policy in line with employment legislation, best practice people management principles and NHS guidelines. A HR Manager should be assigned to employees returning back to work to ensure a smooth transition and support, back into the workplace. They are to provide advice around options; Flexible working, home working, temporary redeployment to help support breast feeding/milk extraction.
- Every employee in the Trust is responsible for their own personal behaviour. Colleagues and patients are entitled to expect respect and fairness. Employees should act in accordance with the Trust Code of Practice and other relevant policies, including the Policy on Equality, Diversity and Inclusion. This policy also applies to activities undertaken on or off site or any activity associated with their employment with this Trust.

5.3 Supporting Employees

5.3.1 Line managers with support from HR should maintain contact with employees well before their return to the workplace. An employee should inform their manager prior to returning to work of their desire to continue

breastfeeding on their return to the workplace, ideally no later than 28 days before.

5.3.2 Managers should discuss the needs of the individual employee directly with the employee, before and during maternity leave. It is possible that a discussion will be taking place anyway, as part of supporting any employee returning to work after a period of absence. Managers should note the risk assessment detailed in the maternity policy. This covers facilities, frequency and role. There is further information below about how a manager can support an employee, depending on their requirements.

5.3.3 It is expected that the risk assessment can be reviewed after one month, to explore any changes in requirements and then at least every 3 months after that. There is flexibility on both sides as to how often these discussions might take place. Managers and employees are encouraged to discuss arrangements routinely, as requirements will change during employment. This includes planning ahead; please also see 5.3.8 below.

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

5.3.5 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 employee to rest and have a break herself to eat. Managers are required to consider requests and the impact reasonably and objectively on the service. 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. Managers should also be aware of the impact on service delivery which may occur through the absence of a staff member from the workplace if suitable adjustments aren't made.

5.3.6 The support required may include the following:

Facilities:

- Is there an office or room which can be made private?
- Is a roller blind, lock or other item required to make the room private?
- Is there easy, regular access to this room?
- Does it have a table and a suitable chair / sofa?
- Does the space have a plug socket?
- Is a fridge available?
- Are there suitable facilities to wash and dry equipment?

This list is not exhaustive

- If not, is there a suitable place nearby in the same area with suitable facilities? E.g. hospital building, fire service building, council building? Supermarkets, cafes and shops may also be suitable breastfeeding friendly sites if the employee feels comfortable. Consider safety and access of such facilities.
- If not, do we need to consider another base for a time? Another manager would need to be aware of requirements to facilitate support too during temporary redeployment. The line manager retains responsibility for supporting the return to work. Consider impact on individual re support, travel time/cost.
- What else would need to be put in place e.g. informing AOC each time to stand down?
- Job role – how much control does an employee 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? Nursing parents are best

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placed to understand how they can work around breastfeeding or expressing milk.– For example A call during the job advising of the need to stand down after a job for a few hours would help reduce anxieties.

- Other duties can be considered to help with autonomy, but this should be balanced against the impact of moving an employee who has potentially already been away from their role for some time away from their substantive role even longer, which can have a negative impact on their confidence in the role.
- Managers are also to consider the operational impact of being unavailable during a shift. If the impact is more than reasonable, can other duties be explored? This should be balanced with understanding that it is best for the employee and the Trust for breastfeeding nursing parents to return to their operational duties if they wish, even in a reduced capacity as this still increases operational resource.
- Any changes to an employees working routine should be mutually agreed between the manager and the employee so it has a minimum impact on service delivery and enables the employee to access appropriate breastfeeding facilities.
- Is a revised local induction required or other return to work support following the absence from work?
- Can KIT days be used?
- Are there any temporary changes to the role that should be considered at this time?
 - Informing colleagues – The manager is responsible for the team and tackling inappropriate language and behaviour. The manager should support the

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member of staff and the working agreements that have been made.

- If the employee works elsewhere on temporary redeployment, the manager retains responsibility for ensuring support is in place, so should maintain regular contact with the employee and the other manager, so a successful return to work is facilitated.
- Considering confidentiality, what do colleagues need to know if working alongside this employee, if anything? Agree with the employee who should inform who and of what.

5.3.7 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.

5.3.8 Once the child reaches 2 years of age, it will be pertinent for managers to discuss longer-term working arrangements with the employee at the next suitable review meeting. Staff members wishing to continue to breastfeed 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.

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.

5.3.9 Further advice is available to the manager from their local HR Advisor and also the Equality and Diversity Team.

5.3.10 Additional information can be sought from the following sites:

- <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.llli.org/>

6.0 Review

6.1 This policy will be subject to review after its first year of implementation and then every 3 years, or sooner if required in response to changes in legislation.

Appendix A – Equality Impact Assessment



EIA Analysis	
Name of process/policy	Breastfeeding Policy
Is the process new or existing? If existing, state policy reference number	Existing
Person responsible for process/policy	Human resources
Directorate and department/section	People Services
Name of assessment lead or EIA assessment team members	EQIA Panel members
Has consultation taken place? Was consultation internal or external? (please state below):	<p style="text-align: center;">INTERNAL CONSULTATION</p> <p>This policy has been written in partnership by management and staff side, and in accordance with current employment legislation.</p>

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The assessment is being made on:	Guidelines	
	Written policy involving staff and patients	x
	Strategy	
	Changes in practice	
	Department changes	
	Project plan	
	Action plan	
	Other (please state) Training programme.	

Equality Analysis					
What is the aim of the policy/procedure/practice/event?					
This policy outlines the Breastfeeding Policy for The East of England Ambulance Service NHS Trust (the Trust). The Trust recognises the well documented health advantages of breastfeeding for infants and nursing parents and is committed to providing a supportive environment for breastfeeding employees to work.					
Who does the policy/procedure/practice/event impact on?					
Race	x	Religion/belief	x	Marriage/Civil Partnership	x
Sex	x	Disability	x	Sexual orientation	x
Age	x	Gender re-assignment	x	Pregnancy/maternity	x
Who is responsible for monitoring the policy/procedure/practice/event?					
Human resources					

What information is currently available on the impact of this policy/procedure/practice/event?

Maternity Policy
 Paternity Policy
 Flexible working policy
 Return to work Toolkit
 Home working policy
 Bullying and harassment Policy
 Equality, Diversity and inclusion policy

Do you need more guidance before you can make an assessment about this policy/procedure/ practice/event? Yes/No

NO

Do you have any examples that show that this policy/procedure/practice/event is having a positive impact on any of the following protected characteristics? Yes/No, If yes please provide evidence/examples:

Race	×	Religion/belief	×	Marriage/Civil Partnership	×
Sex	×	Disability	×	Sexual orientation	×
Age	×	Gender re-assignment	×	Pregnancy/maternity	×

Please provide evidence:

The policy is designed to have a positive impact on all the protected characteristics and has been produced in consultation with the Union and staff representative groups.

Are there any concerns that this policy/procedure/practice/event could have a negative impact on any of the following characteristics? Yes/No, if so please provide evidence/examples:

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Race	<input type="checkbox"/>	Religion/belief	<input type="checkbox"/>	Marriage/Civil Partnership	<input type="checkbox"/>
Sex	<input type="checkbox"/>	Disability	<input type="checkbox"/>	Sexual orientation	<input type="checkbox"/>
Age	<input type="checkbox"/>	Gender re-assignment	<input type="checkbox"/>	Pregnancy/maternity	<input type="checkbox"/>

Please provide evidence:

At present no negative impact has been identified.

Action Plan/Plans - SMART

Specific

Measurable

Achievable

Relevant

Time Limited