



IDAHO DEPARTMENT OF  
**HEALTH & WELFARE**

JAMES E. RISCH - GOVERNOR  
RICHARD M. ARMSTRONG - DIRECTOR

OFFICE OF THE DIRECTOR  
450 W. State Street, 10th Floor  
P.O. Box 83720  
Boise, ID 83720-0036  
PHONE 208-334-5500  
FAX 208-334-6558

November 2006

Dear Idaho Employer:

The mission of the Idaho Department of Health and Welfare is to promote and protect the health and safety of Idahoans. The medical community has long recognized the health benefits of breastfeeding. Breastfed babies are at decreased risk for ear infections, allergies, asthma, and childhood obesity.

Women with infants and children below the age of three are the fastest-growing segment of today's labor force. Current breastfeeding initiation rates in the state of Idaho are among the highest in the nation at 87.8%. Studies have shown that worksites where breastfeeding support strategies are implemented see cost savings in health care, decreased absenteeism and turnover rates, and a more supportive environment that promotes higher productivity and loyalty.

Please join the Idaho Department of Health and Welfare in this healthier worksite initiative, *Healthy Perks for Moms Who Work*. Making your workplace breastfeeding friendly can be fairly simple. By using the materials provided in this toolkit and working with breastfeeding coalition members in your area, you can succeed in helping families give their babies the healthiest start in life.

Sincerely,



RICHARD M. ARMSTRONG  
Director

# Healthy Perks for Moms Who Work

## Breastfeeding Support Program Toolkit for Employers



*Worksite support improves your bottom line.*

Packet available through the Idaho Department of Health and Welfare  
Please write or call to request a packet:  
Cristi Litzsinger RD, LD, IBCLC  
Bureau of Clinical and Preventative Services  
P.O. Box 83720  
Boise, ID 83720-0036  
Phone: 208-334-5948  
Fax: 208-332-7362  
E-mail: [litzsinc@idhw.state.id.us](mailto:litzsinc@idhw.state.id.us)



## Table of Contents

Why Workplace Breastfeeding Support.....	3
Benefits of Becoming a Breastfeeding Friendly Employer.....	4
Minimum Support Needed.....	5
Best Practice Ideas for Employers.....	6
Ideas for Breastfeeding Rooms.....	7
Sample Workplace Policies.....	8
Promotion/Maintenance of Program.....	11
Evaluation.....	12
Application for Breastfeeding Friendly Employer Designation.....	13
Resources and References.....	14



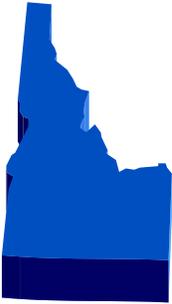
## Why Workplace Breastfeeding Support?

### Increases:

Staff productivity and loyalty  
 Public image of employers  
 Breastfeeding duration

### Decreases:

Absenteeism  
 Employer health care costs  
 Employee turnover



- 87% of Idaho mothers initiate breastfeeding
- 70% of employed mothers with children <3 years old work full time
- Women with infants and toddlers are the fastest growing segment of today's workforce

### Maternal Absenteeism with Baby's Risk of Illness

Baby Illness	Typical time away from work	Impact of Breastfeeding
Ear Infection	1-2 days	Cuts risk by >60%
Respiratory Infection	2-7 days	Cuts risk by 75%
Diarrhea	1-2 days	Cuts risk by >30%

## Benefits of Becoming a Breastfeeding Friendly Employer

- Gives you the opportunity to serve as a model employer in your community
- Shows that your business is a leader in promoting healthy choices
- Exhibits your organization's interest in cost savings
- Highlights your company as family friendly



## Minimum Support Needed



### TIME

- Allow creative use of accrued vacation days, personal time, sick days, and holiday pay after childbirth.
- Allow 2 breaks and a lunch break during an 8-hour work day for nursing or expressing.



### SPACE

- A clean and private space (that is not a bathroom) with an electrical outlet, chair, and a sink within close proximity is necessary.
- A space does not have to be designated on a permanent basis depending on the needs and facilities of a company.



### SUPPORT

- Implement a breastfeeding support policy that is well communicated to all pregnant employees.
- Provide a list of community resources for breastfeeding support (to be provided by your area Breastfeeding Coalition).

## Best Practice Ideas for Employers



### TIME

- Provide 12 weeks or more unpaid maternity leave (Family Medical Leave Act).
- Allow part-time work, job sharing, other flexible schedule options, and on-site daycare or allow young babies in workplace.



### SPACE

- A designated breastfeeding room close to women's worksites with a sink, refrigeration, and a hospital-grade pump that employees can connect their personal pumping kits to.

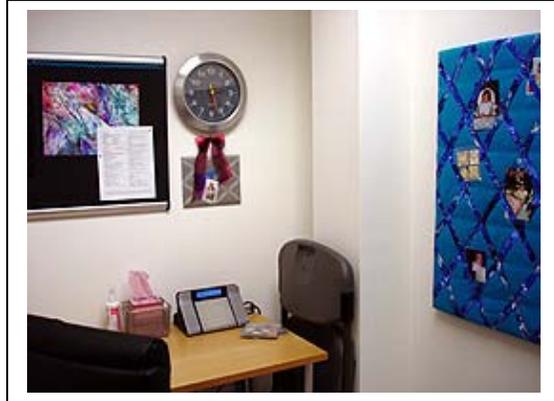


### SUPPORT

- Implement a policy that allows mothers to bring their babies to work for a specified period of time or to have their babies brought to them at work during breaks in order to feed them.
- All employees receive training on breastfeeding support policy.
- Employer contracts with a lactation consultant to provide care on an "as needed" basis.

## Ideas for Breastfeeding Rooms

Small meeting room space



A lounge area in a restroom



Private offices also work well for breastfeeding rooms

## Sample Workplace Policies



**Name of Company:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Policy:**

- **Rationale** – State why providing a breastfeeding support program is important to the organization and its employees.
- **Program Scope** – Describe program features such as break time to express milk, space available, maternity leave available (may refer to FMLA section of current policy manual), and support systems available.
- **Participation Criteria** – Define who is eligible to participate in the program, what is required of them to participate, and if they may participate on flex time or paid time.
- **Responsibilities** – Outline what department is responsible for managing the program, the type of support expected from supervisors, and the responsibilities of participating employees.

**Approved By:** \_\_\_\_\_

## **Idaho Department of Health and Welfare Breastfeeding Support Policy**

### **Policy Text:**

Every effort should be made to allow breast pumping on a reasonable schedule during work. The Department allows a maximum of fifteen (15) minutes away from the work environment (Section 29G Employee Benefits) during the first half of a shift and another during the last half of any one shift. Those mothers returning to work and planning to pump breast milk for their baby should be allowed to do so on such work breaks and lunch time. Administrators and supervisors are encouraged to support employees who plan to continue breastfeeding upon returning to work by making every effort to provide adequate space for expressing breast milk. However, providing adequate space is not intended to create a financial or operational burden. In worksite areas there does not need to be a dedicated space for expressing breast milk but space as needed within existing infrastructure such as a private office, staff lounge, or meeting room. For sanitation reasons, a restroom is not recommended. Administrators and supervisors should also support mothers in working with fellow staff members to coordinate scheduled breaks. Employees are responsible for proper milk storage and pump sanitation.

### **Central District Health Department Employee Breastfeeding Program Employee Guidelines**

Central District Health Department recognizes the importance of breastfeeding for you and your baby and encourages you to participate in the breastfeeding support services program available to employees.

1. Read through this packet to learn more about the CDHD Breastfeeding Support Services Program. Call the CDHD Employee Breastfeeding support staff (Joanne Graff @ 327-8543) to access the services described below.
2. CDHD provides a locked room designated as a nursing mother's room. This room may be used for feeding your infant or for expressing breast milk. The room is C5, located in an immunization clinic room at the Health Department's main office at 707 N. Armstrong Pl. in Boise. Check with Don Osborne to borrow a #10 key you will keep as long as you continue using this room to pump while at work.
3. CDHD makes available a Medela Lactina medical grade pump for use by employees. The Medela Lactina pump is stored in Room C5. The pump is to remain in this location at all times unless special permission is secured from the CDHD Employee Breastfeeding support staff.

4. CDHD provides a personal pumping kit to employees who desire to express milk upon returning to work. Your personal pumping kit may be stored in the nursing mother's room, provided it is stored in a sealed container or zip lock bag labeled with your name.
5. Your CDHD Employee Breastfeeding Support Staff is available to provide education, information, and support throughout your breastfeeding experience.
6. Your pumping equipment should be rinsed well after each use. It is recommended that you wash your pumping equipment with hot soapy water and rinse well on a daily basis to avoid contamination.
7. Good hand washing before and after pumping is essential to prevent contamination of your milk, your pumping equipment, and the environment.
8. Your milk should be stored in a refrigerator or a cooler with "blue ice" packs. Be sure to take your milk home each day. It is best to transport your milk from work to home in a cooler as well.
9. Each woman using the room is responsible for cleaning up after her use of the room. Please ensure that you clean up any spills on the counter, table, refrigerator, or pump. Spills should be wiped up and then sprayed with a disinfectant.
10. We encourage you to document room use by signing a usage log each time you use the room. This log is called the "Record of Nursing Mothers' Room Use". This allows company officials to see the importance of providing this room for its nursing employees. If you have any comments or suggestions, please feel free to write them in the notebook.
11. Notify the CDHD Employee Breastfeeding support staff if you have any problems or if cleaning supplies are not available.
12. A list of resources for breastfeeding information is provided in this packet if you have questions or concerns.

## Promotion/Maintenance of Program



- Have someone in senior management announce the new policy.
- Have a ribbon-cutting for your new breastfeeding room.
- Meet with employees whose work areas are in close proximity to the breastfeeding room prior to the launch and answer questions they may have.
- Consider making an informational flyer about the policy/program to be given to employees who request maternity leave.
- Encourage employees who are using the program to help promote it to others.
- Promote the program through newsletters, pay stub inserts, and during World Breastfeeding Week (first week of August every year).
- Make monitoring and maintaining the program a designated element of someone's job description.

## Evaluation



- Develop clear communication channels for program participants to use to provide feedback on the program.
- Make monitoring and maintaining the program a designated element of someone's job description.
- After a few months, begin a more formal evaluation of the program. You may choose to collect data on the length of time new mothers breastfeed in your workplace (by health risk appraisals or organizational health surveys).
- Larger companies may want to collect data on turnover, absenteeism, and access to health care of female employees prior to and after becoming a Breastfeeding Friendly Employer.
- Track the distribution of the policy, how it was communicated, or the number of hits on an Intranet page, if that applies.
- Have a suggestion/feedback method on the Intranet or a box in your breastfeeding room.
- Monitor the use of the breastfeeding room with a schedule/sign-in sheet.

## Application Form Breastfeeding Friendly Employer Designation

Name of Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_

Contact Person: \_\_\_\_\_

1. Our company currently provides at least 6 weeks of unpaid maternity leave.

Yes                  No

2. If requested by an employee, our company can/does provide a clean and private space (not a restroom) with an electrical outlet, chair, and sink in close proximity in order to express her milk.

Yes                  No

3. Our company has or will implement a breastfeeding support policy that is available to all employees upon request. The policy will include the right of the employee to use break times in order to express milk.

Yes                  No

4. Our company would like to be included on a list of Breastfeeding Friendly Employers in Idaho for promotional purposes.

Yes                  No

Comments: \_\_\_\_\_

---

Please submit completed application to:

Cristi Litzsinger RD, LD, IBCLC  
Bureau of Clinical and Preventative Services  
P.O. Box 83720  
Boise, ID 83720-0036  
Phone: 208-334-5948  
Fax: 208-332-7362  
E-mail: [litzsinc@idhw.state.id.us](mailto:litzsinc@idhw.state.id.us)

## Resources and References

### Resources:

Local Breastfeeding Coalition: \_\_\_\_\_

Center for Disease Control and Prevention (CDC), Healthier Worksite Initiative *Lactation Support Program*, September 4, 2006, <http://www.cdc.gov/hwi>

American Academy of Pediatrics (AAP), *Position Statement on Breastfeeding February 2005*, <http://www.aap.org/advocacy/releases/feb05breastfeeding.htm>

United States Breastfeeding Committee (USBC), *Workplace Breastfeeding Support*, <http://www.usbreastfeeding.org/breastfeeding/support-workplace.htm>

National Healthy Mothers, Healthy Babies Coalition: Worksite Models of Excellence 2000, <http://www.usbreastfeeding.org/breastfeeding/coalition-hmhb.htm>

### References:

1. Centers for Disease Control and Prevention (CDC), Healthier Worksite Initiative: Toolkits: Healthy Choices: Lactation Support Program, September 2006, <http://www.cdc.gov/nccdphp/dnpa/hwi/toolkits/lactation/index.htm>
2. Cohen R, Mrtek MB, Mrtek RG. Comparison of maternal absenteeism and infant illness rates among breast-feeding and formula-feeding women in two corporations. *Am J Health Promot.* 1995; 10:148-153.
3. Blaymore Bier J, Oliver T, Ferguson A, Vohr BR. Human milk reduces outpatient upper respiratory symptoms in premature infants during their first year of life. *J Perinatal.* 2002;22: 354-359.
4. Bhandari N, Bahl R, Mazumdar S, Martines J, Black RE, Bhan MK. Effect of community-based promotion of exclusive breastfeeding on diarrhoeal illness and growth: a cluster randomized controlled trial. Infant Feeding Study Group. *Lancet.* 2003;361:1418-1423.
5. Weimer J. *The Economic Benefits of Breast Feeding: A Review and Analysis*. Food Assistance and Nutrition Research Report No. 13. Washington, DC: Food and Rural Economics Division, Economic Research Service, US Department of Agriculture; 2001.
6. Ball TM, Wright AL. Health care cost of formula-feeding in the first year of life. *Pediatrics.* 1999;103:870-876.
7. Gielen AC, Faden RR, O'Campo P, Brown CH, Paige DM. Maternal employment during the early postpartum period: effects on initiation and continuation of breast-feeding. *Pediatrics.* 1991;87: 298-305.
8. Bailey, D. *The Potential Health Care Cost of Not Breastfeeding*. Pamphlet. Lexington – Fayette County (KY, USA) Health Department, 1993.
9. Bureau of Health Policy and Vital Statistics – Idaho Department of Health and Welfare (2004).