

# ***Breastfeeding Family Friendly Health Service Designation Application***

Clinic/Center Name: \_\_\_\_\_

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

Provider(s) Names and Credentials: Please include physicians, nurse practitioners, midwives, physician assistants, etc. (If more than 3, please list the practice's leadership here, and continue on page two of the application\*)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

Contact 10-Digit Phone Number: \_\_\_\_\_

Health Service Unit Mailing Address: \_\_\_\_\_

\_\_\_\_\_

## **Required Practices for all Health Service Providers**

- Breastfeeding mothers are always welcome and respected.** They will never be treated poorly, asked to stop breastfeeding, or asked to cover up or move.
- We do not promote or provide infant formula, coupons, or related products** unless medically indicated. We do not accept gifts of infant feeding products from manufacturers nor display infant feeding products.
- All lactating employees are allowed breaks to express milk or nurse their children,** and access to a private space for expressing milk or nursing that is not a bathroom. The space is lockable and shielded from view, includes an electrical outlet, and has hand hygiene available.
- We adhere to the breastfeeding practice advice of the breastfeeding expert opinions** of our respective professional associations/colleges and/or the Academy of Breastfeeding Medicine.
- We have received and will post the [Breastfeeding Welcome Here window cling](#).**

## **Required Practices for Obstetrics, Pediatrics, Family Medicine, and Med-Peds.**

- The majority of our staff providing clinical services for prenatal and/or postpartum mothers and infants have had at least 3 hours of clinical breastfeeding support training.**
- We have an IBCLC in our practice and/or we actively refer all prenatal and postpartum women to skilled providers.**
- (If your practice provides prenatal services) **We actively ensure that all prenatal patients receive interactive education on breastfeeding, as well as local support groups/healthcare information.**

**Were you able to confirm the practices related to your health care services? Congratulations!!**

**Thank you for supporting breastfeeding families in our community.**

**Please check this box if you would like your Health Care Service/Practice to be placed on the Breastfeeding Family Friendly Community Facebook page and website for patients' consideration.**

**If you are interested in further recognition,** please consider applying for the North Carolina Breastfeeding Coalition's [Mother-Baby Award for outpatient healthcare clinics](#) at [ncbfc.org/mother-baby-friendly-clinic-award/](http://ncbfc.org/mother-baby-friendly-clinic-award/)

