

Feeding and caring for your baby

Congratulations on the birth of your baby!



This booklet is designed to support you in getting off to the best start with **feeding, caring for, and comforting** your baby. Every feeding journey looks different. It usually takes practice before you feel confident with how to hold and latch your baby. Remember, learning to feed is a new skill for your baby too!

Receiving only breast/chest milk is healthiest for babies, but we are here to support you on your personal feeding journey. Please ask staff if you have questions or need help at any time.

Further information on bottle feeding expressed milk, formula, and combination feeding can be found on page 3 or please speak to your midwife.



Throughout this booklet, we have used purple boxes to highlight information which may be helpful or important for all parents and babies, regardless of how you are feeding.

In the early days, it is helpful for you and your midwife to have a record of your baby's feeds, nappies, and care.

You will be given a **Parent/Carers' Baby Care Record** with space for you to record this information.

When you are home and feeding is established, there is no need to continue to keep a record.



Parent / Carers' Baby Care Record

United Lincolnshire Hospitals NHS Trust

PLEASE USE THIS CHART TO RECORD YOUR BABY'S CARE AND FEEDS WHILE YOU ARE IN HOSPITAL. THIS WILL HELP STAFF TO SUPPORT YOU WITH FEEDING YOUR BABY AND HELP YOU TO KNOW THAT YOUR BABY IS WELL. PLEASE LET STAFF KNOW ANY TIME IF YOU HAVE ANY QUESTIONS, NEED FEEDING SUPPORT, OR HAVE ANY CONCERNS ABOUT YOUR BABY.

Start a new chart at midnight for each new 24-hour period.

This form is part of our record of your care and when you are discharged it will be kept with the hospital notes.

Date: _____

Your Baby's Feeds		Time							
Minutes latched and sucking	Left								
If your baby has both sides at one feed (please use the same column)	Right								
Expressed milk (mL)									
Formula (mL)									
Syringe									
Cup									
Bottle									
Your Baby's Wellbeing									
Skin to skin									
Not nappy									
Dirty nappy									
Vomit									
I have no concerns about my baby's feeding or wellbeing									
I have some concerns about my baby's feeding or wellbeing - please alert staff									

United Lincolnshire Hospitals NHS Trust Baby Care Record - parents and carers

Skin to skin contact

Skin to skin has benefits for you and your baby

- ★ Promotes bonding
- ★ Keeps baby warm
- ★ Helps baby to feed better
- ★ Helps calm baby and mum
- ★ Helps stabilise baby's breathing and heart rate
- ★ Increases the hormones which make your milk



Comforting and caring for your baby

Did you know....

Every time you comfort and respond to your baby, a hormone is released which stimulates their brain development!



Some simple things you can do to comfort and care for your baby....

- Keep your baby close
- Cuddle and hold your baby
- Skin to skin contact
- Talk, read, or sing to baby
- Breast / chest feeding when baby shows feeding cues or is upset
- Picking up and responding to your baby when they cry

Can you “spoil” a baby?

We now know that you cannot “spoil” a baby by picking them up. Instead, responding to your baby will help them to become more secure and confident.

When to feed your baby

Your baby should feed 8-12 times in every 24 hour period. Offer your baby a feed whenever they show feeding cues. Feeding cues are shown in the pictures below.



If you are breast/chest feeding, you can also offer your baby a feed if...

- They are upset or need comfort
- You feel full or uncomfortable in your breasts / chest

If you are giving expressed milk or formula by bottle, please scan this QR code for more information.



Postnatal Toolkit - bottle |
Better Births Lincs
(betterbirthlincolnshire.co.uk)

Baby feeding cues (signs)

Early cues

"I'm hungry"



Stirring



Mouth opening



Turning head
Seeking/rooting

Mid cues

"I'm really hungry"



Stretching



Increasing
physical movement



Hand to mouth

Late cues

"Calm me, then feed me"



Crying



Agitated body
movements



Colour turning red

Time to calm crying baby

- Cuddling
- Skin-to-skin on chest
- Talking
- Stroking



It is important that your baby stays with you at all times while in hospital so you can notice these feeding cues

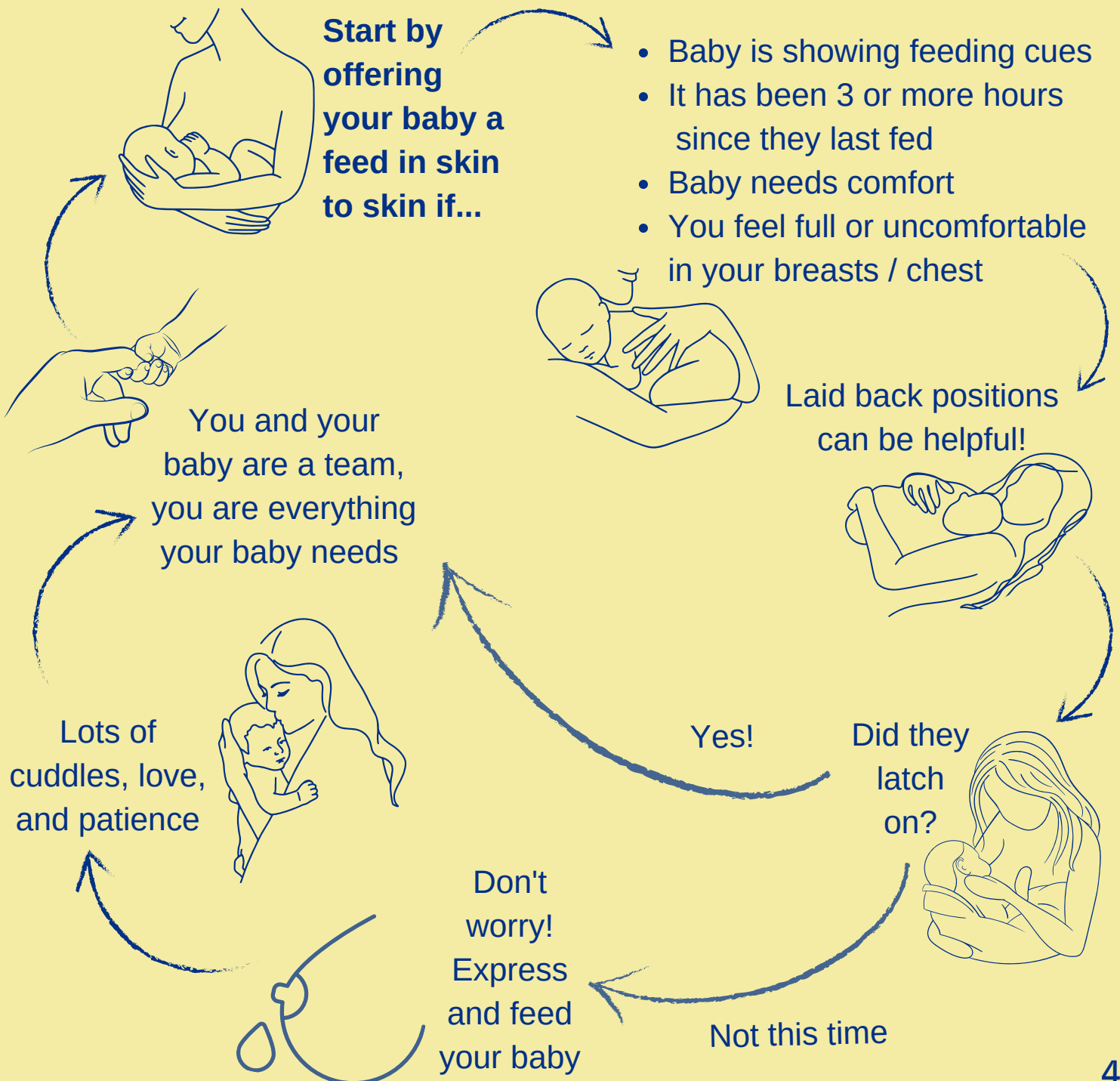
Top Tip

It is harder for babies to latch if they are upset - try not to wait until your baby is showing late cues

What to do at each feed

Offer feeds at least every 3 hours, until your baby is waking and latching on reliably. It is helpful to place your baby in skin to skin for each feed. If your baby does not latch, do not worry - this is common, especially in the early days. Some babies need a little extra time to learn.

If your baby does not latch, express to stimulate your milk supply. Give any milk that you express to your baby. There is no rush for them to learn to latch - give your baby lots of love and cuddles and try again at the next feed. Let a staff member know if you want extra support with holding or latching your baby or expressing your milk. Your milk supply should increase over the first days.



Holding your baby for a feed

There are lots of different ways to hold your baby for breast/chest feeding.

Whichever position you use, the following tips will make it easier for your baby to latch well. A deep latch will help your baby to get your milk easily and prevent your nipples getting pinched or sore.

It can take practice, but small adjustments can make a huge difference!



Top Tip

Not everyone is the same! Breasts, chests, and nipples have many shapes and sizes. Please ask for tips when feeding. Some may work better for you and your baby than others. This is normal.

The word **CHIN** can be helpful to remember the 4 key principles of how to hold your baby!

C hold your baby very **CLOSE** to your body

H your baby's **HEAD** is free to tip back

I your baby's head and body are **IN A LINE**

N your nipple is pointing to baby's **NOSE**



Top Tip

Babies who use a dummy, teat, or nipple shield sometimes find it harder to latch directly on your nipple. If you want to use a dummy, try to wait until breast/chest feeding is established.



Top Tip

How the baby needs to latch on is not what you might expect! Baby needs to get your nipple far to the back and top of their mouth, where it is comfortable for you and the milk flows easily. To do this, baby needs to take more of the tissue **below** the nipple into their mouth. This is called an “off-centre” or “asymmetric” latch.

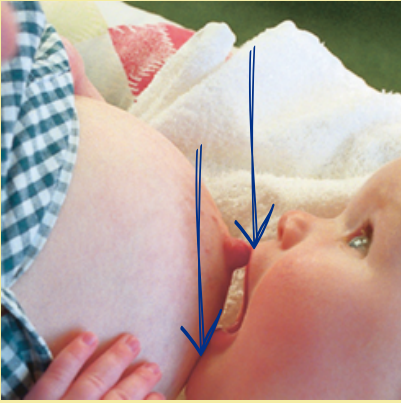
Keep reading for tips on latching...

You can find short practical videos on breast/chest feeding here



https://globalhealthmedia.org/to-pic/breastfeeding/?_sft_audience=mothers-and-caregivers&_sft_language=english

Latching your baby



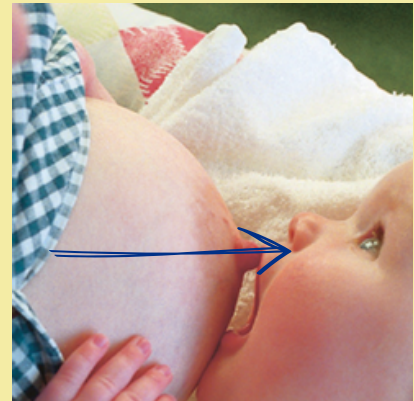
Baby's chin and bottom lip are touching the breast/chest **before** their top lip - baby has their **head tilted back**



Wait for your baby to do a very **wide mouth**, like a yawn. You might need to be patient!



Keep your baby's bottom lip **well down** from your nipple as they latch on so they can get a big mouthful of breast/chest tissue



Keep your nipple aimed up towards the back of your baby's mouth at the top



Bring baby on quickly, **chin leading first**. It's easier for baby to get the milk out if their chin is pressed deeply into your breast/chest.



Try **not** to lift your baby up and over onto your nipple, or to push your breast / chest down towards their mouth. **This will make it less likely they will latch deeply.**

Is your baby latched well?

What you should see...

- Baby's chin should be firmly pressed **into** your breast / chest
- Baby should be latched on with their mouth still open very wide
- Baby's cheeks should be full and round
- **If** you can see any of the darker skin around your nipple, more should be visible **above** baby's top lip than below their bottom lip. Not everyone will see this as everyone's body is different!



Baby should have a big mouthful from below your nipple - **this is a good sign!**

Your baby..

- Should suck quite fast at first and then take slower, rhythmic sucks with some pauses
- Should be calm and content during the feed and stay latched on
- Should swallow well once your milk comes in - you should be able to see or hear this

For you...

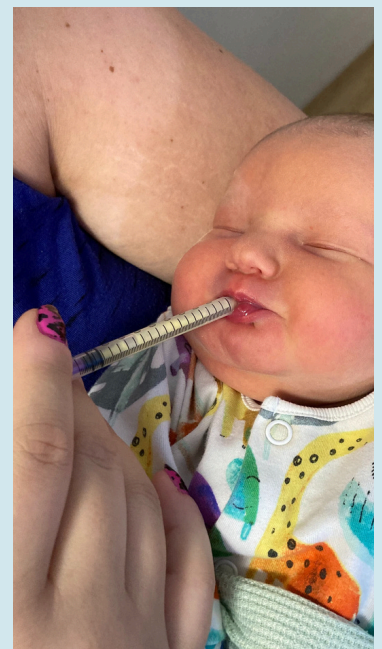
- Feeding baby should be **pain free** after the first few sucks
- Your nipple should not look pinched or lipstick-shaped after a feed, or become sore or damaged

What if my baby isn't latching yet?

It's not unusual for babies to be a little sleepy in the early days after birth or need a little extra time to learn to latch effectively. **This does not mean you will not be able to breast / chest feed.**

When your baby latches or you express, it signals to your body to keep making more and more milk. Lots of skin to skin contact and expressing frequently until your baby is latching reliably will ensure you make plenty of milk. You can give your baby your milk by syringe or cup.

Within a few days most babies become more alert, show more feeding cues, and start latching better.



Your baby's wellbeing

It is important to know the signs that your baby is well or when to seek advice.

Your baby should...

- ✓ Feel warm to touch on their back or neck
- ✓ Wake regularly for feeds
- ✓ Breathe easily
- ✓ Have strong muscle tone

Alert a member of staff if your baby...

- ✗ Looks pale, ashy, blue, blotchy, or mottled
- ✗ Is not waking or responding in their usual way or becomes floppy
- ✗ Makes noise or seems to be struggling when they breathe - you may see their nostrils widen, or chest, ribs, or stomach suck in
- ✗ Has a weak, high-pitched, or continuous cry

YOU know YOUR baby best - trust your instincts. Seek advice at any time if you have concerns or questions about your baby's wellbeing.



Baby Check App
available to
download

<https://www.lullabytrust.org.uk/safer-sleep-advice/infection-and-illness/baby-check-app/>



All breast / chest fed babies should receive a Vitamin D supplement from birth

Some babies may develop a yellow tinge on their skin or in their eyes. This is called **jaundice**. Jaundice is common in newborn babies but let a staff member know if you notice it. Some babies may need extra tests or treatment.

Is baby getting plenty of milk?

You can also check the Parent's breast / chest feeding checklist



<https://www.ulh.nhs.uk/services/maternity-services/postnatal-leaflets/>

If your baby is getting plenty of milk, **each day** they should have at LEAST...

Wet nappies

1-2 days old



3-4 days old



5+ days old



Dirty nappies



Common challenges

Do I need to stay in hospital for feeding support?

If you and your baby are well, you can go home when you feel ready, even if your baby is still learning to breast / chest feed. We offer lots of support both in hospital and at home. Some babies just need a little more time.

If you go home while you and your baby are still establishing feeding, you may be given an individualised feeding plan. Please ask a member of staff if you are unsure.

Did you know....

There is **NO** time-limit for your baby to learn to latch!



My baby wants to feed all the time

Babies don't just feed for hunger - it is **normal** for babies to feed for comfort, for thirst, to fall asleep, even for pain-relief! Every time your baby feeds (whatever the reason!) it stimulates your milk supply. Babies usually feed at least 8 to 12 times in every 24 hour period. Always feed your baby when they show feeding cues, but you can also breast / chest feed for other reasons too. It is a great parenting tool!

It is rare to be unable to produce enough milk for your baby, but extra support is sometimes needed in the early weeks until your milk supply is established. If you have any concerns, please discuss them with our staff, we are here to help.

Did you know....

Giving other milk will reduce your own milk supply, as your breast / chest has less stimulation.



My baby is crying! What's normal?

Crying is how babies communicate. Some babies cry less and some babies cry more. We know it is not always easy when your baby is crying. Skin to skin, cuddles, and breast / chest feeding can all help soothe your baby. Please let a member of staff know if you are worried about your baby's crying. There is lots of support available.

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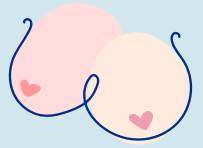
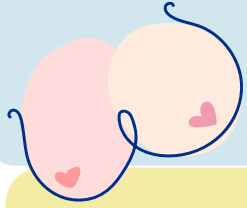
<https://iconcope.org/>

Expressing your milk



Top Tip

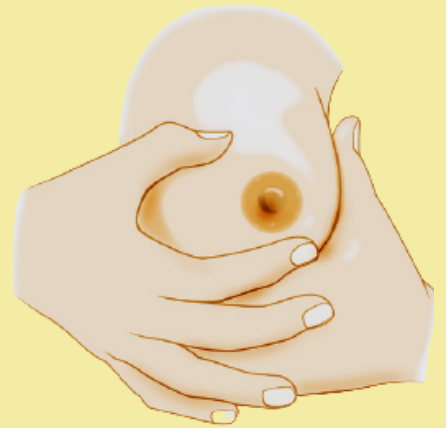
Before you express, take some time to do some gentle breast / chest massage, touch or roll your nipples, think relaxing thoughts, look at or hold your baby. All of these things help your milk to flow.



How to hand express

- Cup your breast / chest and place your thumb and finger about 2-3cm from your nipple
- Using your thumb and the rest of your fingers in a C shape, gently but firmly compress and release in a rhythm – this should not hurt
- If colostrum does not appear after a few minutes, try moving your fingers towards your nipple or further away - find where works best for you
- Be careful not to 'slide' your fingers along your skin as this can stop the milk flowing
- When the drips slow down, move your fingers around to express a different section of your breast/chest and compress and release again
- When the drips slow again, move to the other side and repeat

Remember to wash your hands before expressing!



If you do not see any colostrum, don't worry, just ask for help to check your hand expressing technique.

You can collect your colostrum in colostrum syringes



Storing your expressed milk

Your expressed milk can be kept at room temperature if you will be giving it to your baby within **5 hours**. Otherwise it can also be labelled and stored in our ward milk fridge or freezer. Don't forget to take any stored expressed milk home with you when you leave!

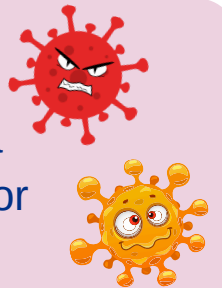
Preterm or ill babies



- Breast / chest milk is **very important** for babies on the Neonatal Unit. Providing your milk for your baby gives a very special protection that can only come from you. Think of it like your baby's first medicine!
- Among many other benefits, providing your milk reduces the chance of your baby developing serious illnesses and infections
- If you have a baby on the Neonatal Unit, staff will discuss hand expressing with you very soon after birth

Did you know....

Your milk changes from feed to feed. If you come into contact with a virus, your milk will quickly contain the right antibodies (protection) for your baby - sometimes even within as little as 20 minutes!



Top Tip

The more of your milk your baby receives, the better protection you are giving them. If you can, try and give some fresh milk every day to provide the most recent antibodies!

Twins and Multiples



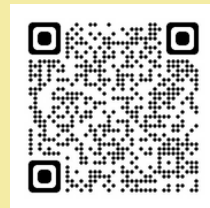
Did you know....

Parents often wonder if they can produce enough milk for twins and multiples so it can be reassuring to know this **is** possible.

Frequent feeding, or early and regular expressing if your babies are not yet directly feeding, will help establish your milk supply.



<https://breastfeedingtwinsandtriplets.co.uk/>



There is lots of helpful information on the *Breastfeeding Twins and Triplets website*

Twins and multiple births can be a little more complicated and your babies may have been born earlier or smaller. Extra monitoring of babies' feeding and well-being is often needed the early days.

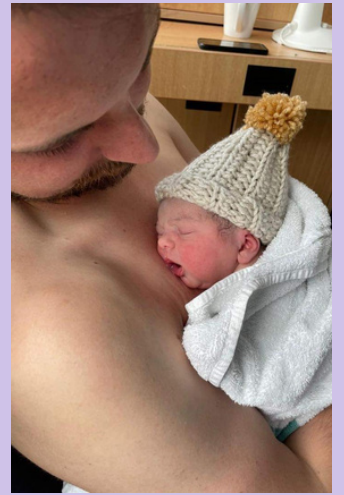
Support

Partners and other support persons

There are so many things you can do to bond with baby which do not involve feeding! Babies need lots of cuddles, which helps them feel secure and promotes brain growth.

Partners and support persons can help by soothing, comforting, and playing with babies between feeds.

Practical and emotional support for the birth parent is also so helpful and important - your support makes a huge difference!



Other sources of support



0300 100 0212

You are doing
GREAT!

Available every day of the year by telephone or visit www.facebook.com/nationalbreastfeedinghelpline

Helpful leaflets and details of local support including breastfeeding groups



<https://www.ulh.nhs.uk/services/maternity-services/postnatal-leaflets/>



At home

Community staff will visit you regularly at home but you can ring the postnatal wards for advice any time, day or night.



Lincoln County Hospital
01522 573 134
Boston Pilgrim Hospital
01205 445 427

Contacting your Health Visitor

Single Point of Access
01522 843 000



ULHT Specialist Infant Feeding Team

- ★ For complex challenges up to 28 days
- ★ Please ask staff for a referral

