Making it Work: 
Supporting Hospital Employees with Breastfeeding 
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Learning Objectives:
1. Name the two primary provisions of federal legislation supporting nursing mothers at work.
2. Identify at least three solutions for supporting nursing moms working in hospital settings.
3. Name at least one government resource that can be shared with employers and mothers.

Profile of Working Women
- National legislation in the United States under the Affordable Care Act now requires employers to provide hourly workers with reasonable time and private space that is not a bathroom to express milk during the work period. (DOL, Bureau of Labor Statistics)
- Today nearly 60% of women are in the workforce in the United States, and similar figures are seen in many developed countries across the world.
- Women with children are the fastest growing segment of the work force. Today in the U.S., 71.4% of women with children are in the work force, and 56% of women with infants under the age of 1 are in the work force. (DOL, Bureau of Labor Statistics)

Barriers to Breastfeeding Among Employed Women
- Women face numerous barriers to continued breastfeeding after returning to employment.
- Around 80% of breastfeeding women discontinue breastfeeding within the first month back at work. (Cardenas)
- Challenges include lack of paid leave or a short maternity leave, issues maintaining milk production, lack of support, and on-the-job challenges.
- Emotional challenges are also great, including role conflicts, competing demands, fatigue, sadness, and guilt.

Helping Mothers Achieve Work Life Balance
- Support for mothers begins by helping her identify her goals and then providing information and support to help her reach her family’s goals.
- Mothers also need:
  - A supportive work environment
  - Adequate maternity leave
  - Flexible return to work options
• Direct access to the baby
• Private time and space to express milk
• Access to professional support
• Support from managers and coworkers
• Support from family (partner and female relatives are especially critical)

Legislation
The Patient Protection and Affordable Care Act has a pivotal component related to working mothers as part of Section 4207. It amends Section 7 of the Fair Labor Standards Act, which applies to hourly workers, or those who are non-exempt from overtime pay. The amendment requires employers to provide breastfeeding employees with:

- “Reasonable Time” to express milk during the work period
- “Private space that is not a bathroom and is free from intrusion from coworkers and the public.” The legislation provides minimum standards for supporting nursing moms at work.
- The law applies to non-exempt workers, so salaried workers are not included.
- Companies with fewer than 50 employees can seek exemption if they can prove “undue financial hardship.”
- The law does not preempt state legislation that provides greater protection for breastfeeding women. 24 U.S. states currently provide their own state legislation supporting working mothers. State legislation related to worksite lactation support is available at the National Council of State Legislatures at: http://www.ncsl.org/research/health/breastfeeding-state-laws.aspx.
- Language of the law and guidelines for businesses (Fact Sheet #73) are available at the U.S. Department of Labor website at: www.dol.gov/whd/nursingmothers.
- Women’s Preventive Services section of the ACA requires insurance companies to cover breastfeeding counseling and equipment for nursing moms without a copay.
  - USBC has developed the “Model Policy in cooperation with the National Breastfeeding Center, with guidance for insurance companies. Available at: http://www.usbreastfeeding.org/LegislationPolicy/ExistingLegislation/ModelPolicyPayerCoverage/tabid/344/Default.aspx
  - The Office on Women’s Health provides an infographic for moms to help guide them in their rights under the ACA at: www.womenshealth.gov/news/highlights/aca-infographic.html
  - The National Breastfeeding Center has issued a national SCORE CARD to rate insurance companies in how well they comply with the ACA in covering lactation benefits for new moms. www.nbfcenter.com/PayerScorecard.html
Return on Investment
The return on investment (ROI) for lactation support programs has been calculated by two companies (Aetna and Cigna) to be 2:1 or 3:1. This is because of numerous bottom-line benefits, such as:

- **Lower absenteeism**
  - One-day absences occur twice as often for employees whose babies are not breastfed. (Cohen 1994)
  - Absenteeism rates are lower for male employees when female partners breastfeed.
  - Presenteeism rates could also potentially be impacted.

- **Improved recruitment and retention**
  - U.S. national retention rate after maternity leave is 59%.
  - The retention rate among companies with lactation programs is >90%. (Ortiz 2004)
  - The cost of replacing employees is calculated by the DOL to be approximately 1.5 times that person’s annual salary (U.S. DOL)

- **Improved productivity and loyalty** (Galtry 1997)

- **Lower health care costs** (Mutual of Omaha)

- Support for nursing moms can be included as part of a company’s family friendly benefits package. Employers already know that family friendly benefits (such as flexible workweeks, telecommuting options, gradual phasing back to work options after maternity leave) produce bottom-line benefits in terms of improved loyalty and retention.

Additional Benefits to Hospitals

- **Recruitment and retention** – The number of women entering the medical profession is on the rise. Women currently comprise nearly half of the medical school enrollment in the U.S. (Baransky 2011)

- **Magnet® Status.** Employee benefits that improve nursing satisfaction and improve turnover rates are included.

- **Improved mPINC scores.** The survey includes questions related to 7 worksite support practices:
  - Designated room to express milk
  - Permission to use existing breaks to express milk
  - Provision of an electric pump
  - Lactation consultant available for consultations with staff
  - Breastfeeding support group
  - On-site child care
  - Paid maternity leave (other than accrued vacation or sick leave)

Recent analysis of mPINC scores found that only 2% of maternity hospitals provide all 7 (Allen 2014).

- **Community leader and role model**
Resources for Supporting Nursing Moms

The HHS Office on Women’s Health launched new resources for employers, mothers, and breastfeeding educators in June 2014 at the national Society for Human Resource Management (SHRM) conference in Orlando, Florida.

- “Supporting Nursing Moms at Work: Strategies for Employers” (U.S. Department of Health and Human Services, Office on Women’s Health) with searchable online resource featuring 200 business profiles and 29 videos. Available at: www.womenshealth.gov/breastfeeding-at-work
- “Solution Sheets” for six major industries (from HHS OWH).
- Presentation platform available for downloading at the website of the United States Breastfeeding Committee at: www.usbreastfeeding.org/SNMW-platform.
- Videos also available at HHS YouTube™ Channel at: www.youtube.com/user/WomensHealthgov

Space Solutions

- National Institutes of Health calculation for determining the number of lactation stations/spaces needed:
  
  - <100 female employees – 1 space
  - 250 female employees – 2 spaces
  - 500 female employees – 3 spaces
  - 750 female employees – 4 spaces
  - 1000 female employees – 6 spaces

Creative Space Solutions for expressing milk in hospital settings

- Permanent space solutions
  - Converted closets/storage areas
  - Exam/treatment rooms
  - Patient rooms
  - Converted restrooms/shower rooms
  - “Funny little space”
- Flexible space options
- Room amenities

Staff Coverage

- Leadership sets the tone!
- Options used by other hospitals:
  - Nurse managers provide coverage
• Managers ensure adequate staffing and flexible scheduling
• Floater nurses
• “Buddy” system
• Encouraging staff to help one another as needed

Lessons Learned from Other Businesses

▪ If it’s policy – it should be communicated to everyone!
▪ There’s always a space solution if you look beyond the obvious.
▪ Leadership sets the tone.
▪ Every voice matters.
▪ Hospitals have a crucial role as community leaders and partners for the greatest “win.”
▪ Use what you have. It doesn’t have to cost an arm and a leg.
▪ Use your time wisely.
▪ Everyone has a role!

The things that matter MOST should never be impacted by things that matter LEAST. Breastfeeding matters MOST and we’re investing in our employees, who are priceless.

Jon Romeo, Principal
Macdonough Elementary School
Middletown, CT
# PLANNING SHEET

**Supporting Employees in Hospital Settings**

<table>
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<tr>
<th>Work Settings for Employees</th>
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<th>Barriers to Expressing Milk in this Work Setting</th>
<th>Potential Solutions for Space and Time</th>
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Patient Protection and Affordable Care Act. Section 4201, “Reasonable Break Time for Nursing Mothers”, HR 3590. Text of Sec. 4207 only available online at: www.usbreastfeeding.org. Full Affordable Care Act available online at: http://docs.house.gov/rules/hr4872/111_hr3590_engrossed.pdf


U.S. Department of Labor, Wage and Hour Division. 2010. Fact Sheet #73: Break time for nursing mothers under the FLSA. Available online at: http://www.dol.gov/whd/regs/compliance/whdfs73.pdf


