

| | | | |
|--------------------|------------------------------|-----------------|-----------------|
| Division: | Fellowship Engagement | Ref. No. | POL-3158 |
| Department: | Fellowship Services | | |
| Title: | Breastfeeding | | |

1. PURPOSE AND SCOPE

The Royal Australasian College of Surgeons (RACS) supports the Wellbeing Charter for Doctors and wellbeing culture enabling Trainees, Fellows and SIMGs to integrate work and life commitments. The World Health Organization (WHO) recommend infants are exclusively breastfed for their first six months of life with breastfeeding be continued for at least two years, and further as mutually desired, to derive the maximum health benefits for mother, child and society¹. Breastfed infants have a reduced risk of ear and respiratory infections, allergies, asthma, obesity and sudden infant death syndrome (SIDS). Women who breastfeed have a lower risk of breast and ovarian cancer, type 2 diabetes, and hypertension. Breastfeeding results in lower medical costs, absenteeism, turnover rates, and higher productivity and employee satisfaction. Research suggests surgical Trainees, Fellows and SIMGs wean their babies earlier than recommended by international guidelines due to workplace demands and a lack of organisational support². This may create a barrier for women considering a career in surgery and lead to trainee attrition³.

RACS fully supports Trainees, Fellows and SIMGs who wish to breastfeed. RACS supports the creation of a culture and resources within the surgical profession to encourage successful breastfeeding for the better health of surgeons, their families and society. RACS recognises the requirement for breastfeeding parents to structure their work to meet the needs of the baby, mother and workplace and advocates for measures to enable Trainees, Fellows and SIMGs to balance their competing demands. Support from colleagues is crucial to providing a breastfeeding supportive workplace environment and is considered part of Operating with Respect.

This policy is applicable to all RACS Trainees, Fellows and SIMGs — whether working full-time, part-time or flexibly. It covers Trainees, Fellows and SIMGs: returning from parental leave; already breastfeeding; who may be re-lactating and pre-adoptive wishing to establish a milk supply prior to their child's placement.

For this policy, breastfeeding is defined as breastfeeding an infant or expressing breastmilk.

2. KEYWORDS

Breastfeeding, expressing, lactating, breastmilk, infant, mother, child.

3. BODY OF POLICY

3.1. Objectives

- a) Provide a supportive environment and a culture that does not discriminate against breastfeeding Trainees, Fellows and SIMGs.
- b) Encourage behaviour and care that is in the best interests of the infant and breastfeeding parent.
- c) Improve career satisfaction and training experience.
- d) Assist Trainees, Fellows and SIMGs to integrate their work and family commitments.
- e) Promote diversity and inclusion in surgery by removing barriers to breastfeeding and promoting health and wellbeing

3.2. Roles and Responsibilities

3.2.1. RACS Responsibility

- RACS will provide parental facilities including a dedicated breastfeeding

| | | | |
|-----------------|--|-----------------|--------------|
| Approved By: | Professional Standards and Fellowship Services Committee | Original Issue: | October 2023 |
| | | Version: | 1 |
| Document Owner: | Fellowship Services Committee | Approval Date: | October 2023 |
| Page 1 of 6 | | Review Date: | October 2026 |

| | | | |
|--------------------|------------------------------|-----------------|-----------------|
| Division: | Fellowship Engagement | Ref. No. | POL-3158 |
| Department: | Fellowship Services | | |
| Title: | Breastfeeding | | |

room at all RACS events as per the RACS Provision of Facilities and Support for Parents of Infants attending RACS Activities policy

- As a minimum, the provision of lactation facilities, protected lactation breaks and separate storage facilities for breast milk will be required for SET training position accreditation.

3.2.2. Employer Responsibility

RACS suggests to support breastfeeding Trainees, Fellows and SIMGs, employers should consider the following:

- All employers of RACS Trainees, Fellows and SIMGs are required to have a local breastfeeding policy and provide provisions protecting breastfeeding as outlined in this policy.
- Identification of a key breastfeeding policy administrator. This person will be responsible for ensuring regular education and promotion of the policy. Additionally, this person is responsible for conducting or delegating training of managers/supervisors
- Development of a clear process for receiving complaints with action plans documented to address those complaints
- Provision of breastfeeding information when parental leave is requested. Early discussion of available breastfeeding supports and accommodations before parental leave is taken increases breastfeeding rates upon return to work.

3.2.3. Trainees, Fellows and SIMGs

- Will supply their own expressing equipment and appropriate storage containers for expressed breastmilk
- If applicable, ensure that their child is delivered directly to the space designated for the purpose of lactation breaks and that the child leaves the workplace at the completion of each lactation break
- Consider reviewing breastfeeding plans with training supervisor and/or manager to establish what accommodations may be required. Ideally, this will occur during pregnancy, prior to parental leave. Parties will recognise that these plans may change as the needs of breastfeeding parent change. The trainee and their supervisor should work together to determine a schedule that meets the trainee's lactation needs while maintaining training and patient care responsibilities. Evaluations should not be impacted negatively by any accommodations made to support breastfeeding as this would be discriminatory.
- Communicate schedule needs with colleagues and supervisors who may be impacted.

3.2.4. Supervisors of Training

- Be aware of the RACS and local lactation policy.
- Create a culture of support for breastfeeding to promote trainee

| | | | |
|-----------------|--|-----------------|--------------|
| Approved By: | Professional Standards and Fellowship Services Committee | Original Issue: | October 2023 |
| | | Version: | 1 |
| Document Owner: | Fellowship Services Committee | Approval Date: | October 2023 |
| Page 2 of 6 | | Review Date: | October 2026 |

| | | | |
|--------------------|------------------------------|-----------------|-----------------|
| Division: | Fellowship Engagement | Ref. No. | POL-3158 |
| Department: | Fellowship Services | | |
| Title: | Breastfeeding | | |

wellness. A culture of support for breastfeeding within the training program is imperative.

- Must inform pregnant and lactating trainees about their options for expressing breast milk, including the lactation policy, location of lactation rooms, and who to contact to report concerns.
- Work with the trainee to determine an appropriate lactation schedule. The supervisor should communicate with others, especially faculty, who will be affected by this schedule. The supervisor should communicate clear support for the trainee and ensure that there is a plan for patient care coverage.

3.3. Logistical considerations

Regular expression of breastmilk is necessary for the breastfeeding mother to maintain their milk supply, avoid pain, discomfort, engorgement and mastitis, and meet the nutritional requirements of the infant for the time they are separated. As a general guide, breast milk will need to be expressed every two to three hours for approximately 20-30 minutes. This varies between individual mothers and depends on the proximity of the lactation space, the quality of breast pump, access to pump and storage.

RACS suggests employers and supervisors discuss the following considerations to facilitate breastfeeding at work:

3.3.1. Lactation Breaks

- Lactation breaks are to be made available to Trainees, Fellows and SIMGs to breastfeed (go to the baby or have the baby brought to the mother) or express breastmilk during work hours.
- These may be a legislated requirement for the employer and are additional to other breaks.
- The number of times women need to feed or express milk will be determined by the individual needs and age of the baby. The younger the baby, the more frequently a mother is likely to need to breastfeed.
- Break times may need to be scheduled in advance to ensure appropriate coverage of patient care responsibilities.

3.3.2. Facilities

Toilets, disabled toilets, cleaning rooms, shower recesses, corridors and communal areas are not considered suitable for expressing breastmilk or breastfeeding. Suitable facilities will include:

- A private, hygienic, clean, lockable space which is always available to breastfeeding staff
- Located in close proximity to work or study area
- Electrical power point
- Comfortable seating close to power point
- A table for breast pump equipment and supplies
- Access to a sink for washing hands and breast pump equipment (not a restroom)

| | | | |
|-----------------|--|-----------------|--------------|
| Approved By: | Professional Standards and Fellowship Services Committee | Original Issue: | October 2023 |
| | | Version: | 1 |
| Document Owner: | Fellowship Services Committee | Approval Date: | October 2023 |
| Page 3 of 6 | | Review Date: | October 2026 |

| | | | |
|--------------------|------------------------------|-----------------|-----------------|
| Division: | Fellowship Engagement | Ref. No. | POL-3158 |
| Department: | Fellowship Services | | |
| Title: | Breastfeeding | | |

- Access to a refrigerator for storing expressed breastmilk
- Access to facilities suitable to warm bottles (eg. Microwave, etc)
- Secure facilities for storage of breast pump and other equipment
- Computer work station in the lactation room. Surgeons have demanding work and study responsibilities. Access to a computer would allow the continuation of work or study while pumping.
- Phone connected to the hospital or clinic system allowing response to messages in a timely fashion or to alert a colleague or supervisor of any urgent patient care issue without interruption of breastfeeding.
- Ideally provision of a hospital grade pump in the lactation room. Providing a modern, double electric breast pump increases convenience as it minimises the time needed for breast milk expression and the amount of equipment needed to be carried and stored by individuals. Any breast pump provided should be exclusively for use in the designated lactation space and not shared by patients.
- Lactation consultants and support – providing access to professional breastfeeding support, increases breastfeeding success.
- Provision of car parking spaces for carers bringing a baby to the workplace to breastfeed should be encouraged.
- The use of a private office or other private space is sufficient if it is comfortable, sanitary, private, convenient and in agreement with the Trainee, Fellow or SIMG.

3.3.3. Breastfeeding and operating

Lactating Trainees, Fellows and SIMGs performing procedures in the operating room or the sterile procedure room may require lactation accommodations intraoperatively. This may include scrubbing out to directly breastfeed/express breast milk or the use of an in-bra wearable breast pump (a closed system medical device). Human breast milk is not recognized as a bodily fluid requiring universal precautions⁵.

The decision to scrub out versus utilising a wearable breast pump is at the discretion of the trainee. This is a personal decision that depends on multiple factors such as individual maternal lactation physiology, affordability of a wearable pump, the logistics of the specific procedure, and the educational experience of the procedure. The practice of utilising wearable pump while scrubbed in the operating room is supported organisations such as the American Society of Anesthesiologists and the Association of Women Surgeons (USA)⁶. The wearable in-bra breast pump can also be used in other clinical areas, such as clinic or hospital wards etc. The lactating trainee should inform their team of their specific needs for lactation accommodations. When determining a suitable time to breastfeed or express breast milk, the trainee should make a good faith effort to ensure patient safety and minimize impacts on their education and on their colleagues.

| | | | |
|-----------------|--|-----------------|--------------|
| Approved By: | Professional Standards and Fellowship Services Committee | Original Issue: | October 2023 |
| | | Version: | 1 |
| Document Owner: | Fellowship Services Committee | Approval Date: | October 2023 |
| Page 4 of 6 | | Review Date: | October 2026 |

| | | | |
|--------------------|------------------------------|-----------------|-----------------|
| Division: | Fellowship Engagement | Ref. No. | POL-3158 |
| Department: | Fellowship Services | | |
| Title: | Breastfeeding | | |

3.3.4. Flexible Work Options

Breastfeeding Trainees, Fellows and SIMGs returning to work should be offered flexible work options. This has a positive effect on the breastfeeding relationship among other benefits. Surgical trainees and supervisors should also discuss adjustments to return to training after parental leave that address reduced work hours, potential part-time or adjustment in schedules to enable a smooth return to work.

3.3.5. Culture of Support

Support from faculty, colleagues, staff, and administration is essential to encourage continued breastfeeding by surgical trainees, Fellows and SIMGs. To create a culture supportive of the needs of breastfeeding women, all employees must be regularly educated about the benefits of breastfeeding for both the mother and baby, the details of the lactation policy, and their responsibilities as outlined by the policy. Ways to disseminate this information may include training and materials provided during new staff orientation, yearly training programs for managers/supervisors, promoting it on the institution's website, and including it under the benefits program. The policy should be included in any information packs provided to all trainees, or newly employed Fellows and SIMGS and revisited when a trainee is discussing parental leave.

In addition to training and dissemination of policies to employees, the availability and location of lactation rooms should be publicized, along with whom to contact for more information.

3.3.6. Other Support

RACS encourages its Trainees, Fellows and SIMGs to make use of sources of support available to help with issues relating to return to work or managing issues relating to parenting and other life situations. These include, but are not limited to:

- External counselling services through Converge International
- Converge International Online Portal
- HR advisors
- RACS website

4. ASSOCIATED DOCUMENTS AND LEGISLATION

Legislation

Under the Sex Discrimination Act, 1984 (Commonwealth) it is against the law to discriminate, directly or indirectly, against an employee who is breastfeeding. The definition of breastfeeding includes expressing milk. It is generally against the law to tell an employee not to breastfeed or express in the workplace. Failure to accommodate Trainees, Fellows and SIMGs who are breastfeeding through flexible work arrangements or the provision of appropriate breastfeeding facilities at work may constitute a breach of state legislation and/or the Sex Discrimination Act, 1984 (Commonwealth) and may give rise to complaints to the relevant state body.

| | | | |
|-----------------|--|-----------------|--------------|
| Approved By: | Professional Standards and Fellowship Services Committee | Original Issue: | October 2023 |
| | | Version: | 1 |
| Document Owner: | Fellowship Services Committee | Approval Date: | October 2023 |
| Page 5 of 6 | | Review Date: | October 2026 |

| | | | |
|--------------------|------------------------------|-----------------|-----------------|
| Division: | Fellowship Engagement | Ref. No. | POL-3158 |
| Department: | Fellowship Services | | |
| Title: | Breastfeeding | | |

Australian State/Territory Legislation:

- Discrimination Act 1991 (ACT)
- Industrial Relations Act 1996 — Section 70 (NSW)
- NSW Anti-Discrimination Act 1977 (NSW)
- NSW Health Policy PD2006_012 Breastfeeding in NSW: Promotion, protection and support 2006 (NSW)
- Occupational Health and Safety Act 2000 (NSW)
- Equal Opportunity Act 2010 (VIC)
- Anti-Discrimination Act 1991 (QLD, NT)
- Anti-Discrimination Act 1998 (Tas)
- Equal Opportunity Act 1984 (SA, WA)

Commonwealth:

- Sex Discrimination Act 1984
- Fair Work Act 2009
- Workplace Gender Equality Act 2012
- Occupational Health and Safety Act 2000
- NHMRC Australian Dietary Guidelines. Commonwealth of Australia 2013:87-96.

Note: State and Commonwealth legislation prohibits direct or indirect discrimination on the basis of sex, breastfeeding status, pregnancy and carer's responsibility.

Aotearoa New Zealand:

- New Zealand Human Rights Commission

References

1. WHO international guidelines
https://www.who.int/health-topics/breastfeeding#tab=tab_2
2. Kevric, J. A survey of Australian and New Zealand medical parents' experiences of infertility, pregnancy, and parenthood. *Front Med (Lausanne)* 2022
3. Liang R. Why do women leave surgical training? A qualitative and feminist study. *Lancet*. 2019; 393: 541-549
4. AAFP Policy on Breastfeeding and Lactation for Medical trainees
https://www.aafp.org/about/policies/all/breastfeeding-lactation-medical-trainees.html?fbclid=IwAR1NugTjADvbOsZlp2oe_g5rj2Yd5Mv4XBf7TheTj9adnx_c2-wP5Z_fvMs
5. CDC Breastmilk not a body fluid reference
<https://www.cdc.gov/breastfeeding/faq/index.htm?fbclid=IwAR3MaLtWcflgL2gFauZRXYMhrqyEhtzoB9ldQ61u8R5MRKemHp0pT2et6y0.#precautions>
6. Statement on Lactation Among Anesthesia Clinicians.
<https://www.asahq.org/standards-and-practice-parameters/statement-on-lactation-among-anesthesia-clinicians>

| | | | |
|-----------------|--|-----------------|--------------|
| Approved By: | Professional Standards and Fellowship Services Committee | Original Issue: | October 2023 |
| Document Owner: | Fellowship Services Committee | Version: | 1 |
| Page 6 of 6 | | Approval Date: | October 2023 |
| | | Review Date: | October 2026 |

POLICY

ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

| | | | |
|--------------------|------------------------------|-----------------|-----------------|
| Division: | Fellowship Engagement | Ref. No. | POL-3158 |
| Department: | Fellowship Services | | |
| Title: | Breastfeeding | | |

Associated documents

RACS Wellbeing Charter for doctors

RACS Provision of Facilities and Support for Parents of Infants attending RACS Activities

Approver Fellowship Services Committee**Authoriser** Professional Standards and Fellowship Services Committee

Approved By: Professional Standards and Fellowship Services Committee

Original Issue: October 2023

Version: 1

Document Owner: Fellowship Services Committee

Approval Date: October 2023

Page 7 of 6

Review Date: October 2026
