

North Carolina

Breastfeeding-Friendly Child Care Designation

North Carolina Breastfeeding-Friendly Child Care Designation Background

Welcome to the North Carolina Breastfeeding-Friendly Child Care Designation online application! We appreciate you taking the time to complete this application. Please read all instructions on this page prior to completing the application.

The North Carolina Breastfeeding-Friendly Child Care Designation (NC BFCCD) is administered by the NC Division of Public Health (DPH). The NC BFCCD recognizes licensed child care programs statewide that promote, protect, and support breastfeeding. The five standards of the NC BFCCD include:

- 1) Written Policy
- 2) Community Connections

- 3) Professional Development
- 4) Environment
- 5) Curriculum

The NC BFCCD integrates the <u>Ten Steps to Breastfeeding-Friendly Child Care</u> from the <u>Carolina Global Breastfeeding Institute</u> (CGBI) at UNC-Chapel Hill into the five standards.

Application Instructions

Applications are accepted on a rolling basis and are reviewed biannually. After submission of your application, an automated email will be sent to the email address provided in the application. The email contains a copy of your child care program's application and will serve as proof of receipt by the North Carolina Division of Public Health.

Child care programs must answer all required questions below, partial applications will not be accepted. Required questions are indicated by a red asterisk (*). A child care program MUST answer all questions and provide requested supporting documentation. All five standards must be met to achieve the designation. Websites linked in the application will open in new browser tabs.

Awarded child care programs will receive a certificate to display and their designation will be promoted on the North Carolina Breastfeeding-Friendly Child Care Designation Program web page. The certificate expires after 3 years and a new application will need to be completed at that time.

The application deadline is September 30, 2021 and all applicants designated as a North Carolina Breastfeeding-Friendly Child Care Facility will be notified by December 31, 2021.

Save & Return

Use an account to return to saved work.

Log in

If you would like to save your progress on your application, click the "Save Progress" button at the bottom of the page. This will allow you to create an account so you may resume your application at a later time without submitting your progress. You are not required to create an account to submit your application.

If you have an account and would like to resume your saved application, click the "Log in" button above.

When you are ready to submit your application, you must click "Submit" at the bottom of the last page for your application to be submitted. Saving your progress does NOT submit your application for review.

Save Progress

Next >>

33% Complete

Program Information

Child Care Program's Contact Information

Child Care Program Nam	e*	
NC DCDEE License Numl	per*	
Child and Adult Care Foo	d Program (CACFP) Agreement N	lumber (if applicable):
		dinser (ii applicasie).
Child Care Program's Phy	rsical Address *	
Address Line 2		
Address Line 2		
Address Line 2 City *	State *	Zip Code *
	State *	Zip Code *
City*	State *	
City * County *	State *	
City*	State *	

On-Site Administrator Contact Information

Please include information for your child care program's on-site	administrator.	
On-Site Administrator's Name (First and Last Name) *	On-Site Administrator's Title *	
On-Site Administrator's Phone Number * xxx-xxx-xxxx		
On-Site Administrator's Email Address *		
Confirm On-Site Administrator's Email Address *		
Application Contact Information Please include information for the contact who the NC Breastfe Committee may contact with questions or information about the	eeding-Friendly Child Care Designation Review	
Is the application contact information the same as the or Yes	n-site administrator contact information?	*
No No		
Application Contact's Name (First and Last Name) *	Application Contact's Title *	
Application Contact's Phone Number *		
Application Contact's Email Address * (2)		

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Confirm Application Co	ntact's Ema	il Address * (?			
Child Care Pr	ogram [°]	Туре				
s your child care progra	am a Child C	are Center o	r Family Child	Care Hom	ie? *	
Family Child Care H	lome					
C ,						
Child Caro Dr	ogram	Enrollm	ont Info	rmatic	\n	
Child Care Pr	ogram	Enrollm	entimo	rmatic)[]	
Complete the table belo					ormation 1	or all age groups.
	lotal Enrol	led Receivii	ng Any Breast	IMIIK		
Infants < 6 months old						
Infants ≥ 6 months old						
1-year olds						
0						
2-year olds						
2-year olds 3-5-year olds						
3-5-year olds	enrolled in y	our child care	program.			
·				le at your cl	hild care pi	rogram.
3-5-year olds tal Enrolled: total number				le at your cl	hild care pi	rogram.

Complete the table below with your child care program's staffing information. *

Number of Staff

Infant Teachers		
Toddler Teachers		_
3-year-old to 5-year-old Teachers		
Administrators		
Infant/Toddler Substitute Teachers		
Other Staff		
Total Staff		_
Technical assistance is defined as assistant friendly child care standards. Did a technical assistance (TA) provi		and/or implementation of breastfeeding-
Which of the following TA providers Babies First NC Project Breastfeeding Family-Friendly C Child and Adult Care Food Progr Children's Environmental Health DCDEE Child Care Consultant Child Care Health Consultant NC Infant Toddler Quality Enhar Smart Start at the local level: TA WIC Regional Breastfeeding Cod Other (enter below)	Communities (Orange, Durham ram (CACFP) Consultants in Specialists (Sanitation) incement Project Specialist Specialists	n, Chatham, Pasquotank counties)

Optional Feedback	
Please share why your child care program is appl	ying for this designation.

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67% Complete

Standard #1: Written Policy



Does your child care program have a written breastfeeding policy that addresses all required breastfeeding topics?*
○ Yes
○ No
<u>List of Required Breastfeeding Topics for the Written Breastfeeding Policy</u>
Does your child care program share the written breastfeeding policy with employees as part of orientation/training and families as part of enrollment? *
○ Yes
○ No
Upload a copy of your child care program's most current written policy on breastfeeding. The policy must include your child care program's name and the date the policy was adopted, revised, and/or reviewed. * Choose Files No file chosen
Is your child care program utilizing this infant feeding plan OR does your infant feeding plan ask the same questions? * Yes No
Note: As described in the North Carolina Child Caro Pulos 104 NCAC 09 0902(a), a detailed feeding plan should be

developed, and updated as needs change, for all children up to 15 months of age.

Upload a copy of your infant feeding plan here.*

Choose Files No file chosen

See resources below for assistance with written breastfeeding policy & infant feeding plan List of Required Breastfeeding Topics for the Written Breastfeeding Policy Feeding Infants in the Child and Adult Care Food Program

Standard #2: Community Connections



Are up-to-date printed and/or electronic breastfeeding resources available to families and staff and are all staff aware of these resources?* O Yes
○ No
Does your child care program have a list of community breastfeeding services available and refer breastfeeding families to these community breastfeeding services as appropriate?*
○ Yes
○ No
Enter the date that the lists of breastfeeding resources and community breastfeeding services were last reviewed by your child care program staff.
It is recommended that child care programs update their lists of breastfeeding resources and community breastfeeding services annually. *
services annually. *
services annually.* MM/DD/YYYY Identify all community breastfeeding services on your breastfeeding community services list (Check all that
services annually.* MM/DD/YYYY Identify all community breastfeeding services on your breastfeeding community services list (Check all that apply).*

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021	North Carolina Breastfeeding-Friendly Child Care Designation Application
	d Certified Lactation Consultants (IBCLCs)
☐ Certified Lactation	
☐ Local WIC agency(i	
	eding Peer Counselor Program
☐ Other (enter below	
For information on breastfe <u>by County Map</u> .	eeding services available in your community, visit the North Carolina Breastfeeding Resources
Stand	ard #3: Professional Development
Within the past 12 mor following breastfeeding	oths have <u>early educators</u> * received at least 2 hours of cumulative training on the g topics:*
-Exclusive breastfeeding	oractices and benefits for child, mother, and family;
 -Recognizing and respond -Using and updating the i 	ling appropriately to feeding cues;
-Storage, labeling, and pre -Appropriate introduction	eparation of human milk for feeding; n of solid foods with continued breastfeeding for one year or longer, as desired by families; and nilies to support breastfeeding and lactation goals.
○ Yes	
○ No	
	and long-term infant/toddler substitute teachers (e.g. 3 months or more) each 3-year-old to 5-year-old classroom
Enter the <u>date(s)</u> and <u>na</u>	me of the trainer(s)/training institution(s) for each training event: *

O O

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Upload the agenda(s) or training description(s) for	r each training event(s). *
Choose Files No file chosen	
	./.\ *
Upload the sign-in sheet(s) for each training event	r(s).
Choose Files No file chosen	
Standard #4	4: Environment
Does your child care program communicate and e program at any time during the day to nurse/feed	encourage breastfeeding parents to visit the child care expressed milk to their child(ren)? *
○ Yes	
○ No	
Breastfeeding parents including staff are permitte	ed to breastfeed anywhere they feel most comfortable. If
	sted, is a space made available at your child care program
○ Yes	
○ No	
North Carolina Child Care Rules-Chapter 9	

Does your child care program feed infants on cue and coordinate feeding time(s) with the parent's normal schedule?

Breastfed infants do not receive food or drink (other than breast milk) unless indicated. Parents and staff work together to establish and make revisions to a feeding plan that supports the family's infant feeding goals.*

○ Yes
○ No
Where does your child care program display culturally appropriate picture(s)/poster(s) that promote breastfeeding? (Check all that apply)*
Pictures/posters cannot be supplied by formula manufacturers. *
☐ Waiting Area
☐ Front Desk
☐ Breastfeeding Room
☐ Infant Classroom(s)
☐ Toddler Classroom(s)
☐ Preschool Classroom(s)
☐ Kitchen
☐ Staff Lounge
Other (enter below)
Standard #5: Curriculum
\mathcal{I}



Do lo	learning activities at your child care program incorporate the concept that both humans	s and a	animals
prov	vide their own milk to their infants? *		

\circ	Yes

O No

Does your child care program offer children's books that contain pictures of breastfeeding, play dolls that are nursing, and other learning experiences that normalize breastfeeding? *

O Yes

○ No	, , , , , , , , , , , , , , , , , , , ,
O 140	
List the learning/play ma	terials that your child care program utilizes to normalize breastfeeding for children.
(Include the names or descr	iption of toys used, the title and author of books used, etc.) *
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
How is your surrisulum b	oing used to support and permalize breastfeeding? Include an example in your
response. *	eing used to support and normalize breastfeeding? Include an example in your
	Cignoturo
	Signature
I have reviewed the comm	pleted North Carolina Breastfeeding-Friendly Child Care Designation application
and certify that the infor	mation provided is accurate. Additionally, I hereby consent to the submission of the
	d if awarded, I agree to have my program's information (name and website) posted eastfeeding-Friendly Child Care Designation Program web page.*
on the North Carolina bi	castreeding Friendry Clind Care Designation Frogram web page.
	clear

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