# **Breastfeeding Accommodation Form**



Submission of this form formally states my plan to continue breastfeeding upon return from maternity leave.

Please note: The Breastfeeding Accommodation Form is ideally submitted with FMLA paperwork or, if practical, at least 30 days prior to when maternity leave is expected to begin.

Name		Title/Position	
		Status:Full TimePart <sup>*</sup>	Time Temporary
Department		Statusrun milerun	TimeTemporary
Reports to		Expected Return Date from Maternity Leave	
Anticipated Minimur	n Daily Needs and Accon	nmodations (check all that d	apply):
and the public. Must in Time for and access to Time to access a cooled Two or three 30 minutes Pumping; Time to breastfeed	I child directly at an on-site or child brought to worksite by	ble seating, access to elect nd hygiene and cleaning o lk storage (either commun pased on employee needs)	tricity, and privacy signage.  f materials and supplies.  al or personal).  daily in an 8 hour period for:  y; and/or
of development. Breastfe The frequency of breaks r	lations are subject to change a reding and pumping needs ma needed to express milk as wel ks can be used, but additional	y increase during growth s I as the duration of each b	spurts or decrease with age.
	I will contact the manager/huuss any changes related to the		
Employee Signature			Date
Breastfeeding Welcome Here	FOR HUMAN RESOURCES US Signature/Date  MANAGER/HUMAN RESOUR Name Phone Number Action steps necessary to provide approprise	CE CONTACT INFORMATION	N
Rev. 06/2018			

### **Worksite Space Accommodations**

[Insert worksite accommodation information about options such as lactation room locations, temporary spaces available, flexible use equipment, etc.]

### **Worksite Breastfeeding Support Policy**

[Insert information or link to worksite policy.]

#### **Federal Law**

Federal law Section 4207 of the Patient Protection and Affordable Care Act (ACA) revises the Fair Labor Standards Act (FLSA) requiring employers to provide hourly workers:

- 1. A reasonable break time to express breast milk for one year after her child's birth each time such employee has the need to express breast milk.
- 2. A private space, other than a bathroom, that is shielded from view and free from intrusion of others, to express breast milk.

Check out Fact Sheet #73 Break Time for Nursing Mothers under the FLSA for more detailed information about the federal law.

### Checklist of Best Practices to Consider for Optimal Breastfeeding Accommodations:

## Physical Environment

#### **ESSENTIAL ELEMENTS:**

#### Clean, private space with:

- Access to electricity (outlets)
- Comfortable seating
- Ability to secure entry to avoid intrusion

**Routine cleaning regimen** for private space, provided by the business.

**Privacy Signage** 

#### **PREFERRED ELEMENTS:**

#### Access to:

- Refrigerator or personal cooler (to store expressed milk)
- Multi-user breast pump (to pump more quickly and efficiently)
- Sink with hot and cold running water (to clean breast pump supplies)
- Microwave (to sterilize breast pump supplies)

#### Room décor:

- Natural or soft lighting
- Clock
- Full-length mirror to help mothers check/adjust clothing
- Calming décor, comfortable temperature, and pictures of babies (to encourage milk flow)
- Table for breast pump
- Wastebasket

### Communications

#### **ESSENTIAL ELEMENTS:**

**Schedule/Sign-up Sheet** for use of mother's room (online or posted)

Program manager or **contact person** at organization available to answer questions re: nursing mother's program

#### **PREFERRED ELEMENTS:**

#### Access to:

- Training/education for coworkers and supervisors on the necessity and benefits of expressing breast milk in the workplace
- Bulletin board with information about lactation consultants, guidance counselors, pumping schedule, local events, etc.
- Pamphlets or other educational materials on pregnancy, breastfeeding, parenting, etc.