

Cup Feeding Guide and Competency for Parents

We encourage all new mums to breastfeed their babies. If your baby is finding it difficult to breastfeed:

1. Express your breast milk by hand to give to your baby (to learn how to hand express ask your midwife and ask for a Milk as Medicine expressing pack or refer to the NHS Best Beginnings videos available online <https://www.bestbeginnings.org.uk/from-bump-to-breastfeeding>). If your baby has not breastfed effectively, we advise you start combining hand expressing to collect your colostrum and using a breast pump to stimulate your breasts to bring in your milk within 2 hours of giving birth. Ask your midwife for a breast pump and refer to the Milk as Medicine booklet for further information.
2. Initiate and maintain your milk supply until your baby is ready to breastfeed directly. Start expressing within 2 hours of birth and express 8-10 times in 24 hours. It may take a couple of days before you start producing milk but keep stimulating with a breast pump and your milk will come.
3. Give your baby skin to skin cuddles and offer your breast every 2-3 hours. Our Infant Feeding team will be able to give you more advice and support until breastfeeding is established.

We suggest that you avoid giving your baby a teat until breastfeeding has been established, as sucking on a teat uses a different sucking action. This may cause confusion for your baby, who may then find it difficult to feed from the breast.

You should always offer the breast and continue skin-to-skin contact to help encourage feeding at the breast.



Giving your breastmilk to your baby:

You can give your expressed colostrum using a small, one-millilitre sterilised syringe. Once your colostrum transitions to milk, it becomes less viscous and increases in volume so it is safer to use a sterilised feeding cup. This allows babies to take the milk at their own pace.

Syringe feeding



Syringe feeding should be used during the first few days when you need to give your baby small amounts of colostrum.

How to give your colostrum by syringe:

Please wash and dry your hands thoroughly before you start.

You need to hold your baby in an upright position and gently syringe no more than 0.2 millilitres into your baby's mouth at a time. Feed the colostrum in between their gum and cheek or onto their tongue. Allow your baby to swallow before giving them another 0.2 millilitres and continue to do this until the feed has ended.

Please ensure you are well informed and feel competent before syringe feeding your baby.

Competency: (staff and parents please sign)

Syringe feeding demonstration observed:

Staff _____

Parents _____

Parent's technique has been observed as correct:

Staff _____

Parents _____

Cup feeding



In order to protect breastfeeding, it is beneficial to use a cup rather than a bottle with a teat but cup feeding must not replace breastfeeding without a very good reason

Cup feeding encourages your baby to use their tongue and lower jaw in a similar way as they would when breastfeeding. They are also able to smell and enjoy the milk when using a cup.

A baby can take as much or little from a cup as they would like according to their skills and appetite. It is important to respond to your baby's cues.

Babies who may require cup feeding include:

- Babies whose medical condition is stable and whose suck/swallow reflex has been established. SALT should be consulted when appropriate. The baby should be alert and looking for a feed but breastfeeding not a viable option for example overnight on NICU if the mother has been discharged home.
- Babies who require supplementary feeds if medically indicated of either expressed breast milk (MEBM) or artificial milk (if there is not enough expressed breast milk available).
- Babies who are stressed/ reluctant to latch can be encouraged to breastfeed with a small cup feed of expressed breastmilk first.
- Babies whose mothers are unable to breast feed their baby directly due to temporary illness.
- Babies whose sucking ability may be compromised for any reason, such as Down's Syndrome or cleft lip/palate. **This should only happen after prior discussion with the Neonatal Team.**

How to give your baby a cup feed

Please wash and dry your hands thoroughly before you start, and use a sterilised cup at each feed.

Fill the cup about a third full (20ml)

Wrap your baby securely in a blanket to keep their hands out of the way so that they don't knock the cup out of your hands.

Sit your baby in an upright position on your lap to prevent choking and place a bib around your baby's neck. Place the cup so that it is gently resting on your baby's lower lip. Do not press it down. The cup should be tipped so that the milk touches your baby's lip. Wait and your baby will sniff the milk, push their tongue forward and start to lap or drink the milk.

Do not tip the milk into their mouth as this may cause them to choke. Keep your baby sat upright and the cup still. Do not move the cup away when they stop drinking.

Your baby will drink at their own pace with breaks when they will have a breather. Respond to your baby's cues. If they finish the milk in the cup and remain calm, alert and rooting, refill it and offer more milk. Your baby may turn their head, close their mouth or fall asleep to show that they have finished. A preterm baby may need to take the remainder of their feed by NGT if there is undrunk milk remaining.

Please ensure you are well informed and feel competent before cup feeding your baby.

Competency: (staff and parents please sign)

Cup feeding demonstration observed: Staff _____

Parents _____

Parent's technique has been observed as correct: Staff _____

Parents _____

Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty. If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email asp-tr.patient.advice@nhs.net. If you remain concerned, the team can also advise upon how to make a formal complaint.

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We can provide interpreters for a variety of languages, information in larger print or other formats (e.g. audio) - please call us on 01932 723553.



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