

Milk Kitchen Standards

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Key Documents Owner:	Dr Vivianna Weckemann Consultant Paediatrician
Approved by:	Neonatal Guidelines Review Meeting
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This is the most current version and should be used until a revised document is in place	

Key Amendments

Date	Amendments	Approved by
November 2022	Document approved for 3 years with no amendments	Dr Gregory/ Neonatal Guidelines Review Meeting
10 th November 2025	Document extended for 6 months to allow time for review and update	Susan Smith

Allocated staff member to Milk Kitchen – checks to be completed by HCA on the night shift during the early hours of the morning of each day. If not completed the day HCA to be informed and complete task.

Daily:

- Record fridge temperature, action recordings appropriately and document. Inform nurse in charge of action taken / required if outside normal temperature recordings.
- Clean fridge:
 1. *Check each bottle of infant feed: Discard if older than 24 hours*
 2. *Expressed breast milk should be labelled with babies name and hospital number, the date and time of expression*
 3. *Infant formula feed should be labelled with babies name and hospital number, the date and time the formula was mixed and type of formula and the name of who made the formula printed*
- Empty kettle
- Clean microwave – microwave to be used for steriliser use **only**
- Worktops, sinks and taps to be wiped down with Clinell wipes
- Clean Breast Pump Equipment
- Ensure bottle warmers and sterilisers are clean

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- Ensure floor and cupboard tops are clear

Weekly:

- Check stock expiry dates
- Rotate stock and order stock for the following week (Trust stock and patients own formulas to be stored on separate shelves)
- Clean shelves
- Descale sterilisers, bottle warmers and kettle and record

Patients Own Formula:

- Patients own formula milk can be accepted **only** if it is a **new unopened** tin
- Open date to be clearly labelled and attention paid to manufacturers expiry date.
- Parents are **not** to make up their own feeds in the milk kitchen.
- Formula powder should not be removed from the room until patient is **discharged**.
- Discard any ex-patient formula feed powder if not taken home on discharge.
- Ensure Trust stock formula and patient's own milk is kept on different shelves.

Making up feeds

- Only boiled water cooled should be used to make up feeds, unless otherwise specified by the manufacturers instructions.
- Distilled, deionised or other bottled waters are not suitable alternatives.
- Commercially sterilised water can be used but must be heated to within 70°C - 80°C.

Holding and feeding times

- Discard any feed that has not been consumed within two hours from preparation (unless refrigerated).
- Prepared feeds can be held in the refrigerator ($\leq 5^{\circ}\text{C}$) for up to 24 hours.
- Discard all leftover feed.
- Preferably, the hang-time for continuous or bolus feeds should be no more than two hours at room temperature.
- Continuous or bolus feeds should not be warmed during feeding.

Breast Milk:

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Two members of staff must check all expressed breast milk prior to feeds to ensure the correct milk is given to the correct baby.

Breast milk storage in hospital:

Types of Milk	Room Temperature	Fridge 2-4 degrees	Freezer <-18 degrees
Fresh Breast milk	4 hours	48 hours (may be frozen after this time)	3 months
Defrosted Breast milk	As soon as possible	12 hours	N/A

Breast milk storage at home:

- Fridge – 5 days
- Freezer compartment of fridge – 2 weeks
- Freezer <18 degrees – 6 months