



**Division of Public Health  
North Carolina Maternity Center Breastfeeding-Friendly Designation**

**Application Instructions**

**Purpose of the North Carolina Maternity Center Breastfeeding-Friendly Designation:** To recognize those maternity centers that have taken steps to promote, protect and support breastfeeding in their organization. A five star system has been developed. A star is awarded for every two steps achieved in the Ten Steps to Successful Breastfeeding as defined by Baby-Friendly USA.

**Project teams are strongly encouraged to work together to complete this application.**

- 1) Use the NC Maternity Center Breastfeeding-Friendly Designation Application form to apply for your star designation. The application is available for download from [www.nutritionnc.com](http://www.nutritionnc.com).
- 2) Maternity Centers who have earned the Baby-Friendly Designation from Baby-Friendly USA may submit a copy of their award and automatically earn a five star NC Maternity Center Breastfeeding-Friendly Designation. Please refer to the expedited application.
- 3) Application Review:
  - Applications will be reviewed by a Division of Public Health appointed team on a biannual basis in May/June and November/December. The deadline for submission will be October 31, 2019 and April 30, 2020.
  - All required application questions must be completed to be considered for review.
  - Facilities will be notified by email of receipt of the application within ten days of submission.
  - Resubmission for additional star recognition will be accepted and is strongly encouraged.
- 4) Designation and Recognition:
  - Facilities will be notified by mail of the results of the review.
  - Facilities awarded stars will receive a certificate suitable for framing.
  - In addition, facilities earning NC Maternity Center Breastfeeding-Friendly Designation of one or more stars will be recognized on the Division of Public Health and the Nutrition Services Branch websites.
- 5) Application submission:

**Eight hard copies of the completed application form, one original hard copy of the application and signed cover sheet and one copy of the supporting documentation should be sent to:**

US Mail:  
**North Carolina Division of Public Health  
Maternity Center Breastfeeding-Friendly  
Designation**  
Nutrition Services Branch  
5601 Six Forks Rd  
1914 Mail Service Center  
Raleigh, NC 27699-1914

Federal Express/UPS:  
**North Carolina Division of Public Health  
Maternity Center Breastfeeding-Friendly  
Designation**  
Nutrition Services Branch  
5601 Six Forks Road, 1st Floor  
Raleigh, NC 27609

- 6) Questions:

Contact: Chiara Phillips MS, RD, LDN, IBCLC  
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