

Nutrition Services Department of State Health Services

Effective October 1, 2015

Policy No. BF:01.0

Breastfeeding Promotion and Support Standards

Purpose

To establish breastfeeding (BF) as the natural and optimal way to feed infants. To encourage WIC participants to breastfeed their infants. To provide optimal support to breastfeeding participants to help each participant reach their personal breastfeeding goal.

Authority

7 CFR Part 246.11

Policy

The WIC staff and the clinic environment shall promote and support breastfeeding.

Definition

Breastfeeding – the practice of feeding a mother’s breastmilk to her infant(s) on the average of at least once a day.

DBE – Designated Breastfeeding Expert (See Policy GA:14.0)

TBE – DSHS Trained Breastfeeding Educator (See Policy BF:2.0)

Procedures

- I. The local agency (LA) shall provide a supportive clinic environment.
 - A. All staff shall promote breastfeeding as the normal way to feed all infants.
 1. Breastfeeding shall be visibly represented as the normal way to feed all infants through use of posters and/or other visuals in the clinic.

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2. Formula, bottles and pacifiers shall be stored where applicants and participants cannot see it except while being used as a teaching aid.
 3. Breastfeeding shall be referred to positively by all WIC staff and promoted as the norm for infants up to age one year and beyond.
 4. All materials distributed or visible to participants shall:
 - a) Be free of formula product names and/or logos with the exception of the WIC Approved Foods materials. This also includes office supplies such as cups, pens, and notepads.
 - b) Be free of language that undermines the mother's confidence in her ability to breastfeed.
 - c) Show breastfeeding in a positive light.
 - d) Be at an appropriate reading level for WIC participants.
 - e) Be culturally appropriate.
 - f) Be accurate and up-to-date.
 - g) Be state agency developed or pre-approved according to **Policy NE: 03.0**.
 5. The clinic should be set up to help participants feel comfortable breastfeeding their infants anywhere in the clinic and discussing breastfeeding with any staff.—Private areas should be offered to participants who request privacy while breastfeeding.
- II. The local agency shall provide breastfeeding education to all pregnant participants
- A. Every pregnant participant shall receive breastfeeding education and be encouraged to consider breastfeeding, unless breastfeeding is contraindicated for medical reasons.
 1. If the opportunity to provide breastfeeding education does not present itself during the VENA counseling session, (e.g. if the participant chooses to talk about something other than infant-feeding) breastfeeding education should occur in addition to VENA counseling.
 2. Breastfeeding counseling shall incorporate issuance of:
 - a. Prenatal Breastfeeding Education Bag. Prenatal bags shall be issued to every participant at their first prenatal visit,

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regardless of the mother's infant-feeding intent. Counseling should focus on addressing barriers to breastfeeding, encouraging moms to learn all they can about BF, and encouraging moms to share education resources with family or friends who will be helping her when she gets home. Each item in the bag should be briefly addressed in the counseling session. Suggested talking points are included on *the Time to Feed the Baby* tip sheet provided in each prenatal bag shipping box. When preassembled bags are not available, each pregnant participant should be given a breastfeeding DVD (stock no. DV0057), a Dad/Partner brochure, and a Grandparent brochure at minimum, in the appropriate language in lieu of a preassembled bag.

- b. WIC Food Packages for Moms and Infants brochure (stock no. 13-06-13124 and 13-06-13124a), with counseling focusing on the importance of exclusive breastfeeding for establishing milk supply and for optimal health. Participants who express the desire to combine breastfeeding with formula feeding should be told that WIC can accommodate their need to combination feed after the first month postpartum.
- c. Client referral handout described in Procedure III. B., 2..
- d. Other materials as needed or requested by participant.

- B. Breastfeeding education and recommendations shall be in alignment with current medical recommendations, which are
 - 1. Exclusive breastfeeding for about the first six months with continued breastfeeding for at least a year.
 - 2. Gradual introduction of complementary foods should begin around 6 months of age.
 - 3. Breastfeeding beyond a year should be encouraged and supported for as long as the mother and baby desire.

III. The local agency shall provide breastfeeding support.

- A. Every breastfeeding WIC participant shall be offered breastfeeding support.

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1. Peer Counselors (PCs) should be utilized first, when possible, for BF counseling that falls within their scope of practice (See BF:03.0).
 2. International Board Certified Lactation Consultants (IBCLCs), DBEs, TBEs, and CAs should be utilized when PC's are not available and for situations that fall outside the scope of practice of other staff.
 3. Other staff can be used as a last resort.
- B. Every WIC clinic shall maintain and have available the following breastfeeding referral documents.
1. Staff Referral Protocol -a list of contacts for staff to use when they have a breastfeeding situation or question that is beyond their own scope of practice or level of expertise. All staff shall have a copy of the document or the document shall be posted in at least one place, easily visible, and all staff shall be made aware of the location. This document can be in flow chart form or a list that may include IBCLCs, WIC lactation support centers, DBEs, PCs, LA BF Coordinator, and LA TBEs. (See **Policy BF: 02.0**)
 2. Client Referral Handout –provides a list of qualified individuals able to answer their breastfeeding questions. The handout can contain local WIC staff such as PCs, TBEs, and IBCLCs, local La Leche League leaders, local hospital lactation support program/personnel, online resources (i.e. websites, forums, local agency run social media sites), and local and national help lines and must also include the non-discrimination statement. The referral handout should be kept up to date and offered to every pregnant and breastfeeding participant. Breastfeeding participants who were enrolled during pregnancy shall be offered the referral list again at their breastfeeding certification appointment.
- C. Hands-off/hands-on breastfeeding assistance
1. Hands-off approach - WIC staff shall first try to assist a breastfeeding mother/baby dyads in a hands-off type approach

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- by either showing the mother how to latch her baby through demonstration on a breast model or the WIC staff's own clothed breast or by placing their hand(s) over the mother's hand(s) to assist.
2. Hands-on approach - When there is a need to assist a mother through touch, WIC staff shall always wash their hands or use hand sanitizer prior to assisting.
 - a. WIC staff shall ask permission to touch prior to touching.
 - b. When a mother expresses a dislike of being touched, WIC staff should offer to wear gloves to put a barrier between them and the mom/baby in order to make the mom feel more comfortable. If the mother still does not want to be touched, WIC staff should return to using a hands-off approach.
 - c. Gloves shall be worn with hands-on approach when WIC staff have any lesions or wounds on their hands and when a mother has any lesions or wounds on her breasts.
- D. If a breastfeeding participant asks for formula or an increase in amount of formula, she shall receive individual counseling to identify concerns or barriers and to provide assistance with breastfeeding.
1. Participants shall be made aware that use of formula will decrease their breastmilk supply and be provided counseling for any breastfeeding concerns.
 2. PCs, IBCLCs, DBEs, and TBEs can help determine appropriate food packages and formula quantities for breastfeeding participants; however, only a CA or a WCS can authorize the change of a food package.
 3. Food package and formula quantities shall not be changed until after the individual counseling.
 4. If formula is issued, the amount issued should reflect the minimum amount of formula needed while supporting maximum breastfeeding, or the amount that supports the mother's breastfeeding needs.

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- IV. All local WIC staff shall receive BF training according to **Policy BF: 04.0**.
- V. For allowable BF expenditures, see **Policy AC: 34.0**.