Supporting Breastfeeding in Child Care Programs

Funded by the Statewide Health Improvement Program
Objectives

- Participants will learn about strategies for recruiting child care providers to participate in the Breastfeeding Support in Child Care Settings.

- Participants will learn about typical questions and concerns raised by child care providers regarding breastfeeding support in child care settings.

- Participants will learn about strategies to effectively relay relevant information to providers that result in practice changes.
Breastfeeding Best Practices

• Caregivers are well-trained on the benefits of breastfeeding and the supports needed for families to be successful
• A private space is available for breastfeeding or pumping
• Materials and resources are available to families
• There is a written policy that includes current breastfeeding practices
• Breastfeeding policy is communicated to current and prospective families
Breastfeeding Friendly Designation

• Minnesota Department of Health is developing a voluntary “Breastfeeding Friendly” recognition program.

• One of the requirements is to complete training
Breastfeeding Support Strategy

- Pre-assessment
- Training
- Technical Assistance
- Post-Assessment
Recruitment

- Past relationships
- Engagement on process
- Personal invitation
- Email and telephone follow-up
- Letters
Issues to Consider

• Not all providers have internet access
• Free training alone is not enough
• Workshop times should fit needs of providers
• Personal relationship helps drive commitment
• The Breastfeeding Friendly Child Care Recognition generated much interest
Maximizing Success

- Explaining the entire program prior to registration
- Online pre-assessment required for registration
- Assessment report at beginning of workshop
- Flexibility in time allotment given to concerns/questions expressed at beginning
- Dedicated more time to discussion and answering questions
## Assessment

<table>
<thead>
<tr>
<th>BREASTFEEDING PRACTICES</th>
<th>□ Rarely or never</th>
<th>□ Some infant caregivers have received training, but not in the last 3 years</th>
<th>□ All infant caregivers have received training, but it is not current (in the last 3 years)</th>
<th>□ All infant caregivers receive training (or a refresher) on a regular basis, at least every 3 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 Infant caregivers/teachers have received training on promoting and supporting breastfeeding, including the benefits of breastfeeding and proper labeling, storage and handling of breast milk:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 A quiet, comfortable and private place (other than a bathroom) is available for mothers to breastfeed or pump:</td>
<td>□ A space is not available</td>
<td>□ A space is available but is not private</td>
<td>□ Is available when requested, but not offered</td>
<td>□ Is available and its location is marked or otherwise made known to families</td>
</tr>
<tr>
<td>12 Educational materials and information about breastfeeding resources are available for families:</td>
<td>□ Materials do not exist</td>
<td>□ Materials exist, but are only made available when asked</td>
<td>□ All enrolled families with infants or who are expecting a baby are made aware of these resources</td>
<td>□ All enrolled and prospective families are made aware of these resources</td>
</tr>
<tr>
<td>13 There is a written policy that includes current breastfeeding practices:</td>
<td>□ No written policy exists</td>
<td>□ A breastfeeding policy is being drafted</td>
<td>□ Written policy exists, but does not reflect current practices</td>
<td>□ Written policy reflects current practices</td>
</tr>
<tr>
<td>14 Breastfeeding policy is communicated to current and prospective families:</td>
<td>□ No written policy; practices are not communicated to parents</td>
<td>□ No written policy; practices are generally communicated to parents verbally</td>
<td>□ Written policy exists; is provided to parents only in written form</td>
<td>□ Written policy exists; is generally communicated to parents both in writing and verbally</td>
</tr>
</tbody>
</table>
# Breastfeeding Support Report

<table>
<thead>
<tr>
<th>Key Area</th>
<th>Best Practices</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Education</strong></td>
<td>Infant caregivers/teachers have received training on promoting and supporting breastfeeding including the benefits of breastfeeding and proper labeling, storage and handling of breast milk.</td>
</tr>
<tr>
<td></td>
<td>③ All infant caregivers have received training, but it is not current (in the last 3 years)</td>
</tr>
<tr>
<td><strong>Environment</strong></td>
<td>A quiet, comfortable and private place, (other than a bathroom) is available for mothers to breastfeed or pump breast milk</td>
</tr>
<tr>
<td></td>
<td>③ Is available when requested, but not offered</td>
</tr>
<tr>
<td><strong>Support</strong></td>
<td>Educational materials and information about breastfeeding resources are available for families.</td>
</tr>
<tr>
<td></td>
<td>① Materials do not exist</td>
</tr>
<tr>
<td><strong>Policy</strong></td>
<td>There is a written policy that includes current breastfeeding practices.</td>
</tr>
<tr>
<td></td>
<td>① No written policy exists</td>
</tr>
<tr>
<td><strong>Policy Communication</strong></td>
<td>Breastfeeding policy is communicated to current and prospective families</td>
</tr>
<tr>
<td></td>
<td>② No written policy; practices are generally communicated to parents verbally</td>
</tr>
</tbody>
</table>

This information sheet uses information from the NAP SACC program, the University of North Carolina Chapel Hill, NC, May 2014. It was made possible by Bloomington Public Health through funding from the Statewide Health Improvement Program (SHIP) of the Minnesota Department of Health.
Concerns and Questions from Providers

- Bottle-feeding
- Feeding practices
- Formula
- Encouraging Breastfeeding
- Safe handling
- Allergies
- Transition to child care
- Other concerns
Concerns

• CDC Recommendations vs. Hennepin County
  Infectious Disease in Child Care Settings and
  Schools Manual (2008)
  – CDC does not list Breast Milk as a body fluid
    requiring special handling precautions
  – Hennepin County does list Breast Milk as a body
    fluid and recommends:
      • wearing gloves if any cracked skin,
      • washing immediately if BM is spilled on skin, and
      • using gloves to clean up spilled breast milk.
Workshop Evaluation

How important do you feel it is to support families choosing to breastfeed?  
All respondents answered “Extremely important” or “Very Important”

After attending the training, on a scale of 1-5, circle the number best representing how prepared you feel to:  
(1 being not at all prepared and 5 being very prepared)

Identify the benefits of breastfeeding and the importance of exclusive breastfeeding 4.6

Describe the guidelines for safe handling and storage of expressed breast milk 4.2

Recognize child hunger and satiety cues 4.7

Follow recommended bottle feeding practices for breastfed babies 4.2

Determine strategies for supporting breastfeeding families 4.2

Provide breastfeeding resources for child care staff and breastfeeding families 3.9
Follow-up

• Range of progress as follow-up calls begin
  – Completed action plan to director was unaware
• Education materials are being used
• Lactation rooms are being set up
• Two directors commented on the discrepancy between licensing and the information in the workshop:
  – will not do anything until the information from her consultant changes
  – will write a policy but will follow licensing guidelines