Supporting Breastfeeding Mothers and Infants in Child Care Centers

Breastfeeding in the CACFP

Oct. 12, 2017
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• Encourages and Supports Breastfeeding
  – Meals are reimbursable when a breastfeeding mother breastfeeds on site
  – Only breastmilk and infant formula are served to infants 0 through 5 month olds
  – Better align the CACFP with WIC and other USDA Child Nutrition Programs
Breastfeeding Supplies

- Centers can use reimbursement to help purchase equipment related to food
  - Example: Breastfeeding supplies
<table>
<thead>
<tr>
<th></th>
<th>0-5 Months</th>
<th>6-11 Months</th>
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<tbody>
<tr>
<td><strong>Breakfast</strong></td>
<td>4-6 fl. oz. breastmilk or formula</td>
<td>6-8 fl. oz. breastmilk or formula</td>
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<td></td>
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<td>0-4 tbsp. infant cereal, meat, fish, poultry, whole eggs, cooked dry beans or peas; or 0-2 oz. cheese; or 0-4 oz. (volume) cottage cheese; or 0-8 oz. yogurt; or a combination</td>
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<td>0-2 tbsp. vegetable, fruit or both</td>
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<tr>
<td><strong>Lunch or Supper</strong></td>
<td>4-6 fl. oz. breastmilk or formula</td>
<td>6-8 fl. oz. breastmilk or formula</td>
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<td></td>
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<td>0-2 tbsp. vegetable, fruit or both</td>
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<tr>
<td><strong>Snack</strong></td>
<td>4-6 fl. oz. breastmilk or formula</td>
<td>2-4 fl. oz. breastmilk or formula</td>
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<td>0- ½ bread slice; or 0-2 crackers; or 0-4 tbsp. infant cereal or ready-to-eat cereal</td>
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<td></td>
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<td>0-2 tbsp. vegetable, fruit or both</td>
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• Promote breastfeeding by allowing reimbursement when a parent/guardian supplies expressed milk or breastfeeds on-site

• Documenting On-Site Breastfeeding
  – Recording the total amount a mother breastfeeds her infants is not required

• Acceptable ways to document
  – Breastfed on-site by meal
  – Mother on-site by meal
Breastfeeding Infants

• Breastfeeding is allowed on the premises of the center/home or in the car if the mother wishes

• If breastfeeding infants receive a combination of breastmilk and infant formula, the meal is still reimbursable

• For Parents/Guardians who provide breastmilk for infants 6-11 months, the center or daycare home must provide the rest of the meal components for the meal to be creditable

• If the mother is an employee, then the meal is still reimbursable whether on the clock or not
• Feed Infants on Demand
  – Avoid strict schedules and force feeding
• As long as the infant is offered the minimum required serving size of expressed breastmilk the meal is reimbursable
  – If infant exhibits signs of hunger after initial feeding, additional breastmilk should be offered
  – Any leftovers should be properly stored
Benefits of Breastfeeding for Baby

- Changes with baby’s needs
- Builds immunity
- Antimicrobial properties
- Easy to digest
- Less constipation and diarrhea
- Spit up less
- Increases physical contact
- Reduces risk of:
  - Respiratory & GI infections
  - SIDS
  - Allergies
  - Celiac disease
  - Inflammatory bowel disease
  - Obesity
  - Diabetes
Benefits of Breastfeeding for Mom

- Bonding with baby
- Decreased post-partum depression
- Prevents excessive bleeding after birth
- Uterus returns to normal size faster
- Miss fewer days from work because infant is sick less often
- Decreased risk of type 2 diabetes & some cancers
- Burns calories
- Less expensive
Breastfeeding Challenges

• Not recommended for:
  – Mothers taking certain medications
  – Mothers with history of substance abuse
  – Mothers with HIV
  – Babies with certain metabolic disorders

• Challenges:
  – Inadequate training and support to start
  – Cost of pumping supplies
  – No time, space, or storage for pumping
Breastfeeding Area

• Private area:
  – Small room or office (4’ by 5’)
  – Part of larger room partitioned with curtains or screens
  – Not a restroom!

• Near electrical outlet and sink
• Comfortable chair
• Table for pumping equipment
• Disinfectant wipes
Preparing and Storing Breast Milk in Child Care

• Breast milk does not look like cow’s milk or formula
  – Naturally separate, fat layer on top
  – In spite of appearance, breastmilk is rich and nutritious

• Gently swirl bottles of breast milk that have been refrigerated, frozen or thawed
  – Breastfed babies need to eat frequently
  – Look for hunger cues, such as rooting, sucking of hands, opening of mouth
  – Occasionally, breastfed babies may have trouble accepting the bottle
  – Watch for six to eight wet diapers during the day
  – Frequent, loose daily stools are normal for breastfed babies in the first two months

• Bottles of expressed breastmilk must be stored in a refrigerator kept at 40 Fahrenheit (4.4 Celsius) or below

• Use bottles of breastmilk only for the baby for whom they are intended

• To prevent spoiling, do not allow bottles of breastmilk to stand at room temperature.

• Rotate frozen breastmilk, using the oldest milk first.

• Protect breastmilk in an air-tight container (hard plastic bottles are recommended) while in the freezer

• Wash skin on which breastmilk has spilled with soap and water immediately
Preparing and Storing Breastmilk

- Thaw a bottle of frozen breastmilk in the refrigerator or hold it under running cold water. Thaw only as much frozen breastmilk as you think a baby will need for a feeding.

- If breastmilk has a bad odor after thawing, it may have spoiled and should be thrown out.

- Once thawed, do not refreeze breastmilk.

- For those babies who prefer a warm bottle, hold the bottle under running warm (not hot) water immediately before feeding the baby.

- Warm only as much breastmilk as you think a baby will need for a feeding, feed breastmilk immediately after warming.
• After each feeding, discard any unused breast milk, if less than one ounce, otherwise return remaining breast milk to the mother
• Each bottle or container of breast milk provided by the parent or guardian shall be:
  – Labeled with the child’s first and last name and the date of receipt
  – Refrigerated immediately upon arrival to the facility
• Fluid breast milk may be held for feeding for no more than 24 hours
• Frozen breast milk may be held in a frozen state for no more than two months
• Microwaving of breast milk is not allowed
• A Licensee shall provide a comfortable and secluded location where mothers may breast-feed their children on-site
Breastmilk from a Cup

• Discuss with the parents when they would like you to feed breastmilk or infant formula from a cup
  – Babies are usually ready around 8 months of age

• Babies usually consume less breastmilk or formula from the bottle as their eating of solid foods and drinking from a cup increases.
Tips for Promoting Breastfeeding

• Have a written breastfeeding policy that promotes a breast-feeding friendly environment and is routinely communicated to all staff

• Ensure that all staff are trained in the skills necessary to implement breastfeeding policy and do not tolerate discrimination against breastfeeding mothers

• Ensure that all staff are trained in the proper handling and feeding of each milk product, including human milk or infant formula

• Infant formula should not be used for a breastfed infant without the mother’s written permission
Tips for Promoting Breastfeeding

• Show mothers how to breastfeed and how to maintain lactation, even if they are separated from their infants.

• Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or birth center.

• Provide culturally appropriate breastfeeding materials including community resources for parents/guardians that include appropriate language and pictures of multicultural families to assist families to identify with them.
The Special Supplemental Food Program
For Women, Infants and Children (WIC)
What is WIC?

• A supplemental food and nutrition education program.

• Safeguard the healthy of low income women, infants and children up to age five who are at nutritional risk.
Who does WIC serve?

- Women who are pregnant, breastfeeding or have recently had a baby.
- Infants under 12 months old
- Children under 5 years of age
What are the eligibility requirements?

- Category
- Residency
- Income
- Nutritional Risk
What does WIC provide?

• Checks to buy healthy foods
• Nutrition education and counseling
• Breastfeeding education and support
• Referrals
Breastfeeding education and support

WIC provides:

- Anticipatory guidance, counseling and education materials
- Expanded food package
- Longer certification than non-breastfeeding moms (one year)
- Breastfeeding aids such as breast pumps, nursing pads, etc.
- Breastfeeding peer counselors
- Access to a Lactation Consultant (IBCLC)
Referring to WIC

- Call local WIC site to make an appointment:
- List of WIC sites: [https://doh.dc.gov/service/wic-sites-dc](https://doh.dc.gov/service/wic-sites-dc)

OR

- Call: 1-800-345-1WIC
Breastfeeding Resources:

• La Leche League of DC (http://www.lllofmd-de-dc.org/)
• Mocha Moms (http://www.mochamoms.org/chapters.html?state=Washington%20D.C)
• East of the River Lactation Support Center (http://dcbfc.org/EastRiverLactation/)
• Breastfeeding, Lactation, Education and Support Services (B.L.E.S.S. @ Howard University Hospital) (http://huhealthcare.com/healthcare/hospital/departments/pediatrics/support-groups)
• Breastfeeding Center for Greater Washington (http://breastfeedingcenter.org/)
• DC Breastfeeding Coalition (http://dcbfc.org/)
Women in the Workforce

• Mothers are the fastest-growing segment of the workforce.

• 70% of employed mothers with children younger than 3 years work full time.
  – One-third of these mothers return to work within 3 months.
  – Two-thirds return within 6 months.
  – Lower rates of breastfeeding initiation and shorter duration.
Child Care Settings: How to Support Breastfeeding

Breastfeeding Coalition of Oregon: How to Support Breastfeeding Mothers & Families

Youtube Link:
https://www.youtube.com/watch?v=IpDDxnbin7c&feature=youtu.be