

Providing Breastfeeding Support: A Community Health Center & WIC Program Model

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Gaps in Breastfeeding Support: Low-Income Moms most Vulnerable

- Highest rates of Exclusive Breastfeeding are in hospitals with less ethnic diversity and moms with higher incomes.
- Lowest rates of Exclusive Breastfeeding are in hospitals serving large numbers of low-income women of color.

WIC Moms

Moms Using CHC's for Healthcare

California WIC Facts

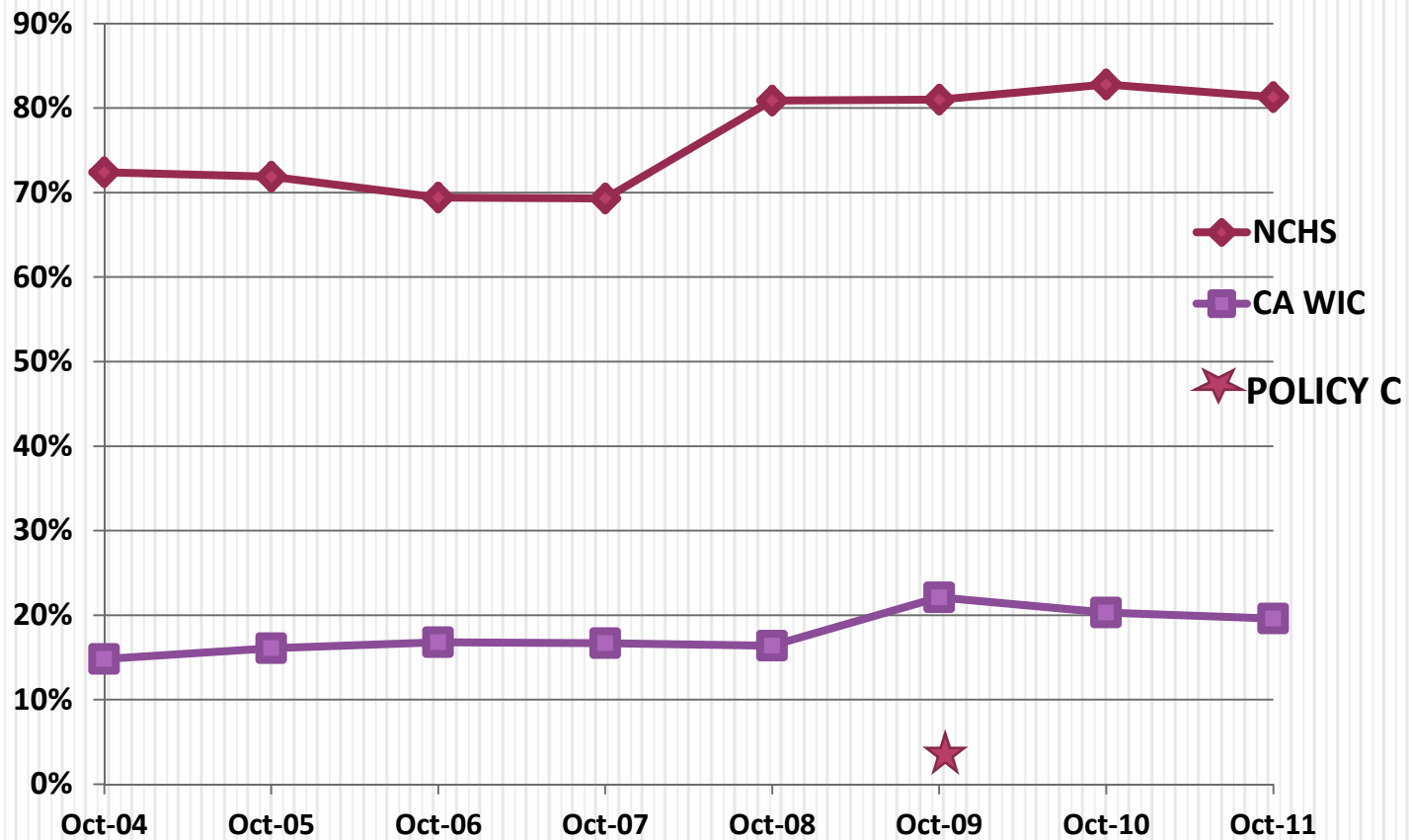
- 60% infants born in California will be on WIC
- 78% WIC participants are Medi-Cal users
- Ethnicity:
 - 78% Hispanic
 - 9% White
 - 8% Black
 - 7% Other
- WIC serves Working Families with Incomes at or below 185% of the poverty level.

North County Health Services (NCHS)

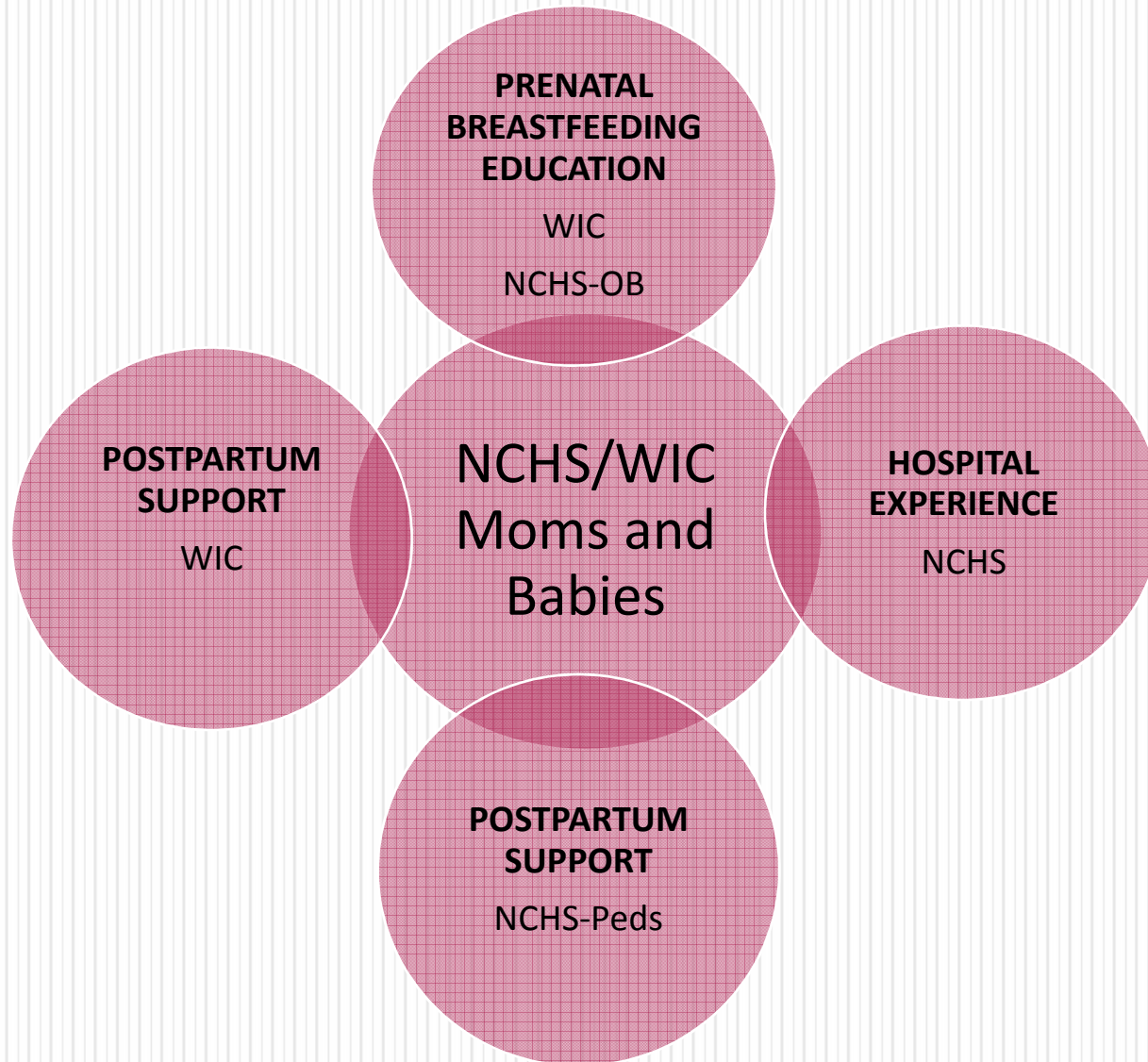
- The largest Community Health Center (CHC) in north San Diego county
 - Ethnicity: 70% Hispanic, 23% white, 7% other
- Provides comprehensive health services to low-income or uninsured patients.
 - OB/GYN and Pediatrics
 - CPSP Providers (Comprehensive Perinatal Services Program)
- NCHS is a FQHC (Federally Qualified Health Center)
 - Designation that effects reimbursement
- NCHS Administers their own WIC program
 - Share pt population and Opportunities for shared services

Are these “Ingredients” for Breastfeeding Success?

Exclusive Breastfeeding Rates Less than 1 month of age (by WIC Food Packet)



Our Breastfeeding Model



Prenatal Education: WIC Program & NCHS



**PRENATAL
BREASTFEEDING
EDUCATION**

WIC
NCHS-OB

**NCHS/WIC
Moms and
Babies**

During Pregnancy: WIC Mom's are Informed and Supported by WIC staff

WIC Prenatal Group Education

- Why to Breastfeed
- How to Breastfeed

Breastfeeding Discussed (monthly) at Every Individual or Group Contact.

- Benefits and risks of breast milk substitute.
- Encourage exclusive BF (norm) and review AAP BF recommendations.
- Review and discuss USDA Policy “No formula in the first month”.
- Provide anticipatory guidance regarding the first weeks of BF.
- Use mom's feeding intent (Excl BF, Combo, Formula) to direct counseling.
- Address any issues ppt. has regarding BF.
- First time moms offered enrollment in Breastfeeding Peer Counseling Program

NCHS Utilizes CPSP for “Prenatal Care”

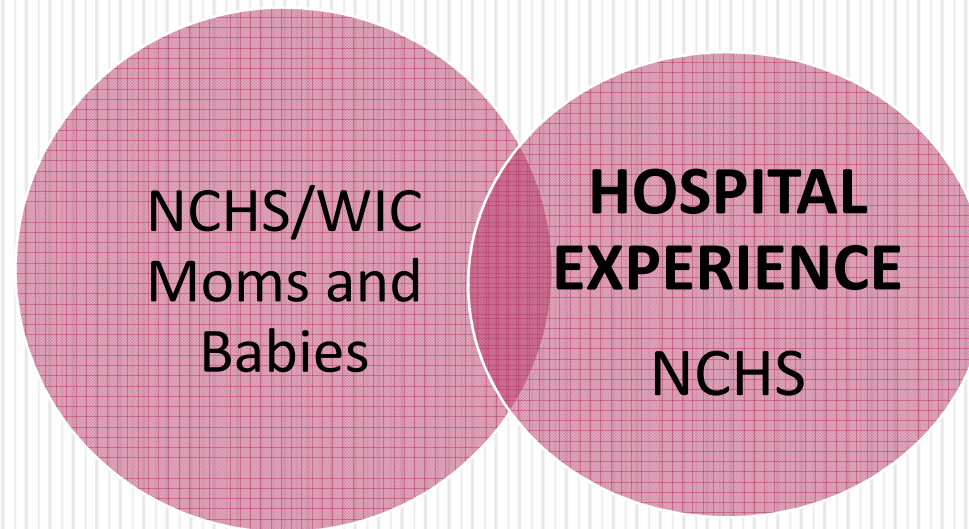
CPSP

- California’s Medi-Cal Pregnancy Program
- A “Model of Enhanced Care” for low-income moms
- Utilizes a multidisciplinary team to meet all needs
 - 4 Components- Obstetrics, Nutrition, Health Education and Psychosocial
- CPSP guidelines dictate services/frequency, providers
- Visits reimbursable (FQHC, Medi-Cal, fee-for-services)

NCHS

- OB Program is Midwifery Based
- Registered Dietitians for Nutrition component/ WIC trained
- BF Services -IBCLC’s (CPHW)

Hospital Support: NCHS



Hospital Climate

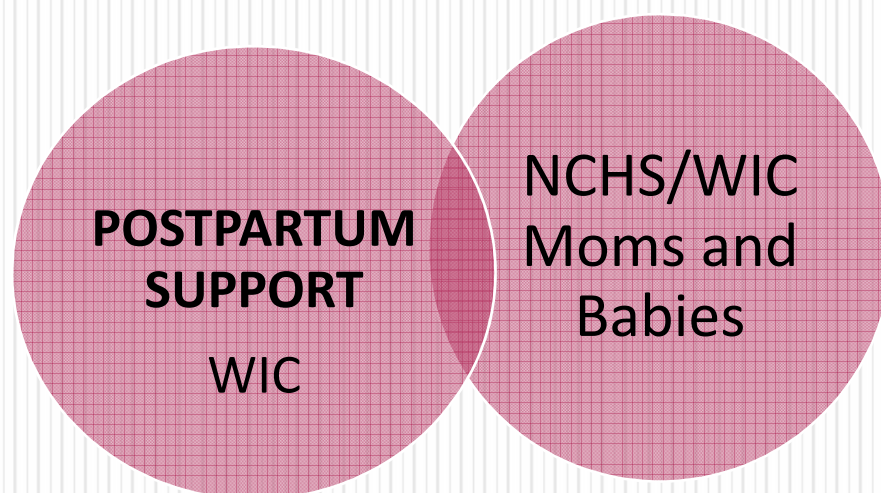
3 Birthing Hospitals in our Area

- ✓ 1 is Baby Friendly
(No NCHS deliveries)
 - ✓ 1 Recently announced commitment to pursue Baby-Friendly
(50% NCHS deliveries)
 - ✓ 1 Has letter of intent for BF, at the beginning stage
(50% NCHS Deliveries)
-
- NCHS & NCHS WIC participates on BF Task Force at our 2 primary delivery hospitals

NCHS Impact at Hospitals

- Pediatricians do own Newborn Rounding
 - Consistent breastfeeding messaging
 - Control of feeding environment (first 48-72 hrs)
- Provide BF Rounding by NCHS Health Educator (CPHW)
 - Mom **recognizes** educator from pg
 - Bicultural, Bilingual, Provides BF support (CLE)
 - Fills gap in BF services at hospital
 - Trust, Rapport, TLC
 - Warm transition from Hospital to NCHS - make first “Peds visit” at clinic

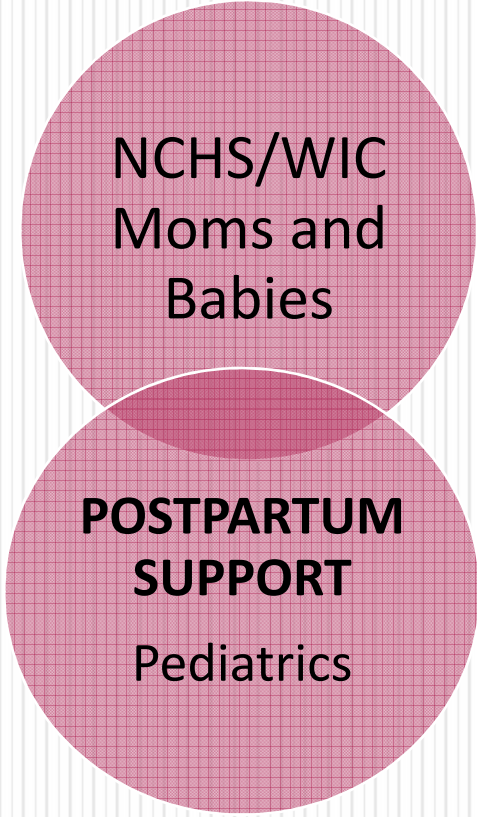
Postpartum Support : WIC Programs



Postpartum Breastfeeding Services: WIC

- **Postpartum Support Calls within first days of life**
 - BF Phone support and feeding assessment by a WIC IBCLC within the first 3-7 days of life.
 - Referral to NCHS or other MD if warranted
 - Study 2001
 - -Impact of these Early PP phone calls significantly increased BF exclusivity and duration in our WIC population.
- **Bring couplet in to WIC**
 - CLE/IBCLC staff available
 - Breastfeeding Peer Counseling Services
 - Breastfeeding supplies, including electric breastpumps
 - We are here to help them successfully breastfeed!

Postpartum Support: NCHS



NCHS/WIC
Moms and
Babies

**POSTPARTUM
SUPPORT**
Pediatrics

NCHS Postpartum Support: Pediatrics

- First 3 Day Couplet Visit

Infant

- Pediatrician, newborn physical

Mother:

- sees IBCLC, Maternal /Infant feeding assessment
- Billable visit under CPSP
 - 6-8 wks postpartum
- Data accessible Electronically (EHR)
 - Pediatrician has input from LC
 - Feeding assessment hand carried by mom to WIC
 - WIC can use information for counseling support

Shared Breastfeeding Model: Community Clinic + FQHC+CPSP

STEPS

1. Administrative support
 - Approach CEO and CMO
2. Identified a Physician Champion
 - Small commitment of Admin time for the champion
3. Provided MD & support Staff BF Education
4. Provided IBCLC support 6hrs/day (4 d/wk)
 - See all newborns at first provider visit
4. Identified a staff to become a CLE ->IBCLC
 - Hospital rounding
5. Technical Assistance for scheduling, billing, forms, etc.

Client Survey: Planned vs. Actual Feeding at NHC

Response	Baseline (n=100)		Follow-Up (n=50)	
	Planned Feeding Practice	Current Feeding Practice	Planned Feeding Practice	Current Feeding Practice
Breast Milk Only	75.0%	39.0%	73.8%	47.6%
Some Breast Milk and Some Formula	19.0%	42.0%	23.8%	31.0%
Formula Only	6.0%	19.0%	2.3%	21.4%

Exclusive breastfeeding increased by 22% after addition of Lactation Consultants and hospital rounder.

Patient Case Studies

Response	NCHS (Control)			NHC (Intervention)		
	Planned/ Prenatal	1 Month	3 Months	Planned/ Prenatal	1 Month	3 Months
Breast Milk Only	8	6	5	8	5	3
Some Breast Milk and Some Formula	0	2	3	0	1	2
Formula Only	0	0	0	0	1	2
Total	8	8	8	8	7	7

Fiscal Outcomes

- The Lactation Consultant's at NHC performed feeding assessments and follow-ups on **945 couplets** in 1 Year
- 84% of these visits were billable through CPSP = \$95,280.00 revenue

Opportunities for Collaboration

WIC

- Who are the CHC's/Independents serving your WIC Moms?
- What BF services do they provide in clinic (pg/pp) and at hospital?
 - Are they CPSP Providers?
- Offer a BF training for their providers and support staff.
- Educate CHC staff about your WIC Breastfeeding Services.
- Meet with your CPSP Program folks and learn about the program.

Community Health Center

- Which WIC Programs do you refer to?
- If you are a CPSP Provider
 - Who provides Nutrition and BF services?
 - Are all opportunities to promote BF being captured PG & PP?
- Explore opportunities
 - Job share a WIC RD or WIC RD/LC
- Determine how information can be shared (consent, EHR, hand carried by pt) to WIC

Thank You!

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