Illinois WIC Program Nutrition Practice Standards (NPS) Breastfeeding

November 2023

Nutrition Practice Standards are provided to assist WIC staff in translating policy into practice. This guidance is intended to be used in conjunction with the Illinois WIC Policy Manual and the *IWIC Nutrition Risk Criteria*, to assist staff (CPA or CPA Assistant) with breastfeeding promotion, education, support, and referrals.

Breastfeeding Assessment

Using a positive participant-centered approach, assume breastfeeding is the planned method of infant feeding. By understanding that breastfeeding is the normal, expected, and healthiest way to feed babies, staff can provide education on how to be confident and successful.

Pregnant Participant

During a certification visit, the WIC MIS Breastfeeding screen allows staff to assess the pregnant participant's thoughts, knowledge, and experience with breastfeeding.

- 'How are you thinking about feeding your baby?' (select a response from list)
- 'Have you ever breastfed/pumped?' (yes/no)
- 'Tell me about your breastfeeding experience or what you have heard about breastfeeding?'
 (text box to type her response)
 - You may also ask a scaling question (1-5) about her breastfeeding intentions and support and document in the Breastfeeding Note.
- 'Are you experiencing any of the following?' (If <u>currently</u> breastfeeding, assess for the listed potential/current breastfeeding complications, per USDA risk 602. if not breastfeeding currently select 'None')

Based on these responses and after the complete nutritional assessment, staff is expected to individualize education to promote and support breastfeeding. Additional breastfeeding education and support can be provided at secondary education visit. Referrals, including the Breastfeeding Peer Counselor or hospital lactation resources, should be provided and documented, if applicable. During secondary education, preferably in the third trimester, an explanation of the breastfeeding food packages should be provided to encourage exclusive breastfeeding, highlighting:

- the length of time exclusive breastfeeding participants are eligible to receive WIC benefits
- amounts and types of foods in the breastfeeding food package
- amounts and types of foods in baby's food package
- reasons to delay any supplementation until breastfeeding / milk supply is established
- WIC does not routinely provide infant formula to breastfed infants less than one month of age

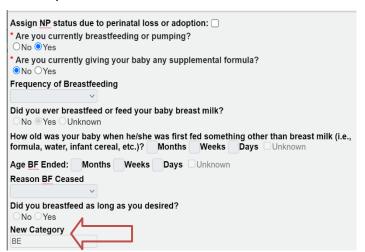
As noted in the recommended contact schedule, Addendum 1, staff should contact pregnant participants in their ninth month of pregnancy, via a phone contact, to support success in breastfeeding.

Breastfeeding (Lactating) Participant

Breastfeeding or lactating participants are defined as "all participants exclusively, or partially breastfeeding to any degree, up to one year postpartum." This definition includes participants who are pumping breast milk for an infant. Breastfeeding is generally defined as "the practice of feeding breastmilk to infant(s) on the average of at least once a day." The Breastfeeding screens in WIC MIS assist staff in assessing the amount of breastfeeding for the breastfeeding dyad (i.e., exclusive, mostly, or some breastfeeding). The participants' category is based on how staff answer the Breastfeeding Status pop-up questions on the Cert Action screen in WIC MIS, for both the parent and baby. It is very important that staff take time to thoroughly discuss breastfeeding frequency at this time. Once the system sets the participant category it cannot be changed until the next day.

- Frequency refers to the amount of breastfeeding.
 - By selecting "no" to supplemental formula, the participant is considered Exclusively Breastfeeding (example 1 below).
 - Note: dyads' that are providing minimal formula to the infant and <u>do not</u> want formula from WIC should be marked as "no supplemental formula". Staff should document the frequency of formula offered in case notes.
 - By selecting "yes" to supplemental formula, staff must assess the frequency of breastfeeding; choosing either "some" breastfeeding or "mostly" breastfeeding (example 2 below).
 - "Some": will be assigned full formula package.
 - "Mostly": will be assigned a partial formula package.
- Prior to saving the Breastfeeding Status pop-up, the staff should ensure the "New Category" is correct and adjust answers to the questions if necessary. Staff will repeat this process for the infant and should ensure both parent and baby have the same dyad category (example: BE/IBE or BP/IBP).

Example 1:



Example 2:

Assign NP status due to perinatal loss o	r adoption:
* Are you currently breastfeeding or pun ○ No	nping?
* Are you currently giving your baby any ○No Yes	supplemental formula?
* Frequency of Breastfeeding	
Mostly	
	oy breast milk? as first fed something other than breast milk (i.e. onths Weeks Days □ Unknown
Age BF Ended: Months Weeks [
Reason BF Ceased	
Did you breastfeed as long as you desire	ed?
○No ○Yes	
New Category BP	

NOTE: Category Changes cannot be performed on the same day the certification was completed. Be sure the "New Category" is correct before saving.

As noted in the recommended contact schedule, Addendum 1, staff should make two (2) contacts in the first week postpartum.

Breastfeeding Risk Factors

Risk factors for the Breastfeeding participants (USDA risk 601) and Breastfed Infants (USDA risk 702) are auto generated by the WIC MIS.

Additional Breastfeeding Risks¹

Pregnant category:

A Pregnant participant, at the time of Certification, who is currently Breastfeeding an Infant will be assigned the 338 risk based upon answering "currently breastfeeding" for the question on the WIC MIS Health screen regarding 'any concerns by medical provider?'

Breastfeeding and Pregnant Category:

Breastfeeding Complications or Potential Complications (Women) - 602 system generated risk, if applicable, for a Breastfeeding or Pregnant participant that is currently Breastfeeding.

Infant category:

Breastfeeding Complications or Potential Complications (Infants) – 603 risk system generated.

Breastfeeding Dyad Counseling & Education

When assessing the breastfeeding dyad, the amount of milk a breastfeeding participant produces depends directly on how often and how long they nurse. Providing supplemental formula to a new breastfeeding participant may interfere with milk production and success of continued breastfeeding. The breastfeeding assessment and understanding of a participant's plans for breastfeeding are two critical components necessary for correct food package assignment for the breastfeeding dyad.

Refer to Addendum 2 – WIC Breastfeeding Dyad Education (Staff desktop reference). This reference addresses talking points for staff based upon breastfeeding category/supplement use. Educate and counsel to support participant breastfeeding goals.

Documentation

Staff should document all prenatal and breastfeeding education and counseling in the WIC MIS on the Breastfeeding screens. Based upon individualized needs, this may be documented in the following sections as applicable: Contacts, Referrals, and Notes. For the breastfeeding dyad (BE/IBE and BP/IBP), staff should link the infant (for single births only) via the Link Baby button under the Contacts and/or Notes sections. In doing so, the Contact or Note will be copied to the Infant's Breastfeeding screen. However, all Contacts must be entered on the P, BE, BP, or NP participant's *BF Contact History*.

The breastfeeding dyad may have met their goal or weaned after a successful period of breastfeeding. Upon updating the Breastfeeding status of the breastfeeding dyad, when adding a Reason BF Ceased (Addendum 3), staff may also add a Breastfeeding Note to document the explanation of why breastfeeding stopped, should the reason need further clarification.

Refer to the *NPS: Documenting in WIC MIS* for further guidance on Breastfeeding Notes and Referrals for a Pregnant and Breastfeeding dyad.

¹Refer to the WIC PM CS and the USDA WIC Nutrition Risks for risk factor priorities and complete risk criteria definitions.

Food Packages to Support the Breastfeeding Dyad

Breastfeeding is the expected and normal feeding method for all infants. The infant feeding options available are designed to support breastfeeding by providing as little formula as possible to those participants who choose to breastfeed. The infant's breastfeeding status is used to determine the parent's food package. Dyads are encouraged to exclusively breastfeed as long as mutually desired and receive the largest quantity and variety of foods in their package with no formula until 12 months of age. If a breastfeeding participant requests formula during the infant's first month of life, discuss their concerns and support them in their decision. The goal is to provide the minimal amount of supplemental formula, by offering counseling and support to help establish and maintain a successful milk supply. If a breastfed infant receives any formula from WIC, the dyad would be considered partial breastfeeding.

Participants who breastfeed and request the maximum supplemental formula in the Partial Breastfeeding food packages are still certified as breastfeeding; however, they will only receive supplemental WIC foods until the infant is 6 months old. Although the infant receives a full formula food package, staff are expected to continue to support breastfeeding when counseling and providing education.

Participants who are breastfeeding and become pregnant are allowed the nutritional benefit from the increased quantity and variety of foods offered to exclusively breastfeeding women, at the time of the Pregnant recertification.

Summary of Breastfeeding Food Packages			
Category	Parent	Baby	
Breastfeeding Exclusively Dyad (BE/IBE) FP VII "no supplemental formula"	 BE food package may be issued as long as Exclusively Breastfeeding Infant, up to 12 months. Largest quantity and variety of foods. Breastfeeding Multiples food package is 1.5 times the amount of food issued in a BE food package 	 IBE food package does not issue any infant formula from WIC At 6 months of age, food package provides double the amount of baby food fruits and vegetables, baby food meats, and cereal. 	
Breastfeeding "Mostly" Dyad (BP/IBP) FP V	 BP food packagemay be issued up to 12 months. More quantity and variety of foods are offered than a parent who receives the full formula package. Breastfeeding Multiples: Food package is the same amount of food as BE package. 	 IBP food package includes formula to supplement breastfeeding and follow the federal maximum allowed by age as noted in the food package tables. The WIC program always encourages the minimal amount of supplementation to support successful and continued breastfeeding. At 6 months of age, food package provides standard amount of baby food fruits, vegetables, and cereal. 	
Category	Parent	Baby	
Breastfeeding "Some" Dyad (BP/IBP) FP VI	 Active as BP up to 12 months. BP food package may be issued until the Infant turns 6 months of age. Provides the least amount of foods a BP participant can receive (standard postpartum (NP) food package) as her Infant receives the full formula package. Support for the breastfeeding dyad is offered after infant is 6 months of age as long as dyad is still breastfeeding any amount, Will be assigned a Limited BF Beyond 6 months (no food benefits) package. 	 Infant is breastfed at least once per day. Food package is the maximum amount of formula provided by WIC, considered full formula package. At 6 months of age, food package provides standard amount of baby food fruits, vegetables, and cereal. 	
Pregnant and Breastfeeding FP VII	 A Pregnant participant who is currently breastfeeding will be supported to continue breastfeeding (at the time of Pregnant certification). A Pregnant participant exclusively or mostly breastfeeding is eligible for the same amount of food as an exclusively breastfeeding participant. Food package must be changed to FP V when infant turns 1 and is certified as C1 	 Infant will continue to get exclusive food benefits while the dyad continues to exclusively breastfed. If dyad is partially breastfeeding the package is dependent on frequency of breastfeeding. 	

Food Package Changes

Only CPA's are to provide breastfeeding status changes and should follow guidance in the *IWIC Void and Reissue* document. The required fields on that screen will direct the CPA in selecting the appropriate food package assignment based upon the amount of breastfeeding. The infant's breastfeeding status is used to determine the breastfeeding participant's package.

If a package change results in a change in the intensity of breastfeeding, such as exclusive breastfeeding to partial breastfeeding or partial breastfeeding to full formula, the guidance below should be followed:

- Breastfeeding participant has not used any of the current month benefits:
 - Re-issue the correct adult food package to match their breastfeeding status for the current month and all future months.
 - Baby's current and future months are voided and reissued.
- If Breastfeeding participant <u>has</u> used any of the current month benefits:
 - Adult current month benefits <u>must not</u> be changed. Only future month food packages and benefits can be voided and re-issued.
 - o Baby's current and future months are voided and reissued.

Addendum 1 Breastfeeding Support/Follow Up -Recommended Breastfeeding Contact Schedule

<u>When</u>	<u>Why</u>	Contact Frequency
Pregnancy	 Participants who decide to BF early in pregnancy BF longer Participants who decide to BF later in pregnancy with consistent information and support throughout the pregnancy A phone contact in the 9th month of pregnancy provides follow up on initial BF intentions and support, addresses any questions or concerns, as well as informs of WIC support in the early weeks after delivery 	 Monthly At each prenatal follow up visit More frequently as due date nears Phone call during 9th month of pregnancy
Early Weeks	 Critical weaning period is 7-10 days; Next critical period is 2 weeks - 2 months ¼ of women supplement by day5 ½ of women supplement by day16 2/3 wean by end of 1st month Most common response for weaning Perceived insufficient milk supply breast problems/pain Make appropriate referrals 	 Every 2-3 days first week* Within 24 hours if problems occur Weekly the rest of the first month *Recommend: CPA (for non-BFPC agencies) makes 2 contacts in the first week postpartum
1-3 Months	 Assist parent with maintaining BF after returning to work Maintaining milk supply Answer questions as baby grows Make appropriate referrals 	 Monthly Before returning to work/school Regularly when breast pump issued
3-6 Months	 Assist parent with maintaining BF after returning to work Maintaining milk supply Answer questions as baby grows 	MonthlyRegularly when breast pump issued
6-12 Months	 Assist parent with maintaining BF after returning to work Maintaining milk supply Answer questions as baby grows 	MonthlyRegularly when breast pump issued

WIC Breastfeeding Dyad Education: IBE, BE

- Breastfeeding nurtures a bond between a parent and their baby, providing nutrition unique to baby's needs
- WIC staff promotes and supports breastfeeding by:
 - Assisting a parent in establishing breastfeeding
 - Promoting exclusive breastfeeding
 - Encouraging breastfeeding for at least one year or for as long as mutually desired by parent and baby



Breastfeeding a Newborn

- Stomach size, nursing & sleep schedule
- Positions & proper latch
- Feeding cues
- Supply & demand; avoid pacifiers & bottles
- Wet & dirty diapers
- Vitamin D



Breastfeeding- You Got This!

- Growth spurts, cluster feeding & feeding frequency
- Plan ahead for when you may be away from the baby
 - 1. Hand expression
 - 2. Pumping
 - 3. Storage/handling of breastmilk



Feeding the Older Infant

- Starting solids
- Nursing
- Introducing a cup
- **Teething**



WIC is here for you:

- WIC is just a phone call away
- We will reach out to see how we can support you with breastfeeding
- Contact us with questions



Additional Resources:

- Best for Baby
- Breastfeeding is a Special Time
- How Much Can My New Baby Eat Got Enough Milk? Yes You Do

WIC Breastfeeding Dyad Education: IBP/IFF, BP

- Breastfeeding nurtures a bond between a parent and their baby, providing nutrition unique to baby's needs
- WIC staff promotes and supports breastfeeding
- If a parent chooses to supplement breastfeeding with formula, we:
 - Encourage offering breastmilk in any amount
 - Ensure education on formula supplementation



Breastfeeding & Formula Supplementation

- Stomach size, nursing & sleep schedule
- Positions & proper latch
- Feeding cues
- Supply & demand; avoid pacifiers & bottles
- Wet & dirty diapers
- Vitamin D



Formula Feeding

- Following instructions on the formula container and/or your medical provider's instructions when preparing formula
- Paced feeding
- Feeding position (holding/not propping)
- Plan ahead: remember, WIC is supplemental



Feeding the Older Infant

- Starting solids
- Nursing
- Introducing a cup
- Teething
- Adjustment in amount of formula to foods



WIC Recommendations:

- Practice good sanitation when handling formula, bottles, and nipples to help protect your infant from any bacteria
- If you have any concerns about feeding your infant and/or formula tolerance, please contact your baby's doctor's office

Additional Resources:

- Feeding Your Baby Birth to 12 mos
- Formula Preparation

- Feeding Your Newborn
- Paced Feedings
- Advancing to Table Foods
- First Foods

Addendum 3 I-WIC Reason Breastfeeding Ceased

Use the following Reasons Breastfeeding Ceased and their definitions to best document should a breastfeeding dyad discontinue breastfeeding.

Doctor Advised	Physician advised parent to abstain from breastfeeding due to medical condition that involved either the parent or infant's health status; advised formula supplementation.
Baby Refused /Prefers Bottle	Baby rejected breast, breast preference or refusal, promoting feeding schedules rather than feeding on cue.
Birth Control Interfered	Parent's perception that the form of birth control she was using caused reduced milk supply.
Just didn't Like Breastfeeding	Practices that have been passed down through the parent's family/culture which affect feelings and actions regarding breastfeeding; parent's food choices or behaviors that affect breastfeeding.
Lack of Support (Not workplace)	Parent did not feel supported in her decision to breastfeed; family/friends/childcare providers did not value breastfeeding; lack of assistance in the home; parent did not have support in overcoming challenges.
Lack of Workplace Support	Parent feels returning to work (or school) limited their time and ability to breastfeed successfully; employer or institution did not support breastfeeding; breastmilk expression issues; embarrassed to breastfeed in public.
Met BF Goal	Parent reached previously determined breastfeeding goal. Natural weaning occurred when infant reached his/her developmental milestones; baby gave up breastfeeding naturally when she/he was ready.
Parent taking Medication	Due to an illness, surgery, or treatment plan for parent or baby; or due to medications taken by either parent or baby; can include prescription drugs, medicinal herbals, over-the- counter medications; illicit drugs (parent).
Not Enough Milk/Baby not Satisfied	Parent did not feel infant was satisfied at the breast; parent didn't recognize newborn feeding patterns as normal; parent was not confident in ability to produce enough breast milk. Early or over supplementation of infant formula to the extent that it impaired successful breastfeeding.
Other (See BF Note)	Might include: Infant born before 40 weeks gestation and primary reason a parent ceased breastfeeding is due to issues related to physical or developmental maturity or prematurity.
Pain or Latching Difficulty	Sore nipples, nipple confusion, poor latch, mastitis, engorgement, thrush, poor suck, poor positioning, breastmilk overproduction, delayed or inhibited let down, introduction of an artificial nipple/pacifier, etc.
No Reason Provided	Parent does not indicate a reason breastfeeding ceased.