

Michigan WIC
CPA Training: Breastfeeding

What will we cover today?

- Breastfeeding Benefits
- Data and Statistics
- Policies
- Management Evaluations (ME)
- Documentation in MI-WIC
- Role of the CPA in promotion of exclusive breastfeeding
- Food Packages resources
- Website

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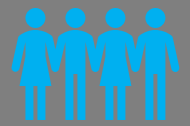
Why is it important to support breastfeeding?



Healthier baby

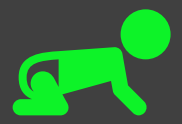


Healthier parent



Healthier community

Healthier baby



50% decrease in ear infections	64% decrease in gastroenteritis	58% decrease in necrotizing enterocolitis
72% decrease in lower respiratory tract infections	32% decrease in atopic dermatitis	73% decrease in sleep-related deaths (SIDS)
27% decrease in childhood asthma	20% decrease in ALL and 15% decrease in AML	25% decrease in Type I diabetes

ALL = acute lymphocytic leukemia
AML = acute myelogenous leukemia

44% decrease in myocardial infarction

4.3% decrease in breast cancer for every year of breastfeeding

44% decrease in premenopausal ovarian cancer

47% decrease in Type 2 diabetes

22% decrease in hypertension

Healthier parent



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Where can you find breastfeeding data?

WIC-Specific Data

- 2022 Breastfeeding Data Report
- Guidance for Michigan WIC Breastfeeding Data
- Breastfeeding Rate and Duration Ad-Hoc Reports
- Pregnancy Nutrition Surveillance System (PNSS) for breastfeeding initiation of WIC mothers.
- Pediatric Nutrition Surveillance System (PedNSS) for breastfeeding initiation, duration and exclusivity for WIC infants.
- Breastfeeding Addendum Report Initiation, duration and exclusivity by race- ethnicity and local agency."
- USDA WIC Breastfeeding Data Local Agency Reports

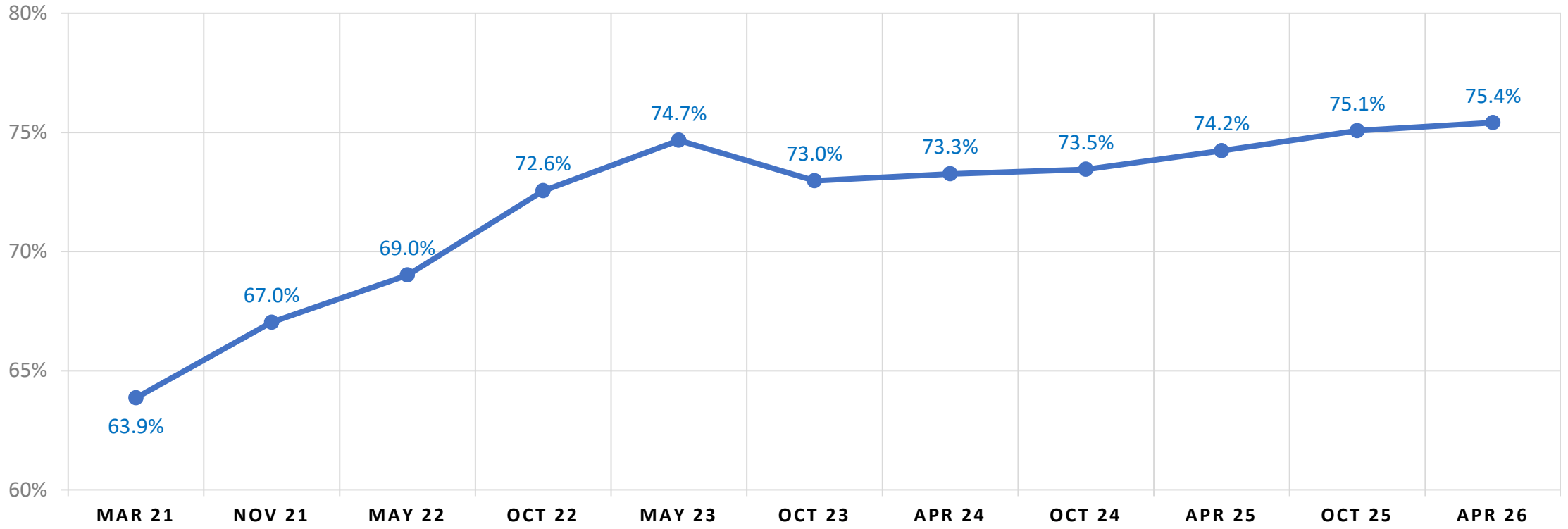
Non-WIC Breastfeeding Data

- Michigan Pregnancy Risk Assessment Monitoring System (PRAMS)
- Michigan Department of Health and Human Services (MDHHS) Maternal Child Health Epidemiology Reports
- Michigan Maternity Practices in Infant Nutrition and Care (mPINC) 2022 Report
- Centers for Disease Control (CDC) Breastfeeding Report Card
- Centers for Disease Control (CDC) Breastfeeding Rates (for children born in 2012-2019) from National Immunization Survey (NIS)
- USBC State & Territory Breastfeeding Reports

State

Breastfeeding Initiation

Data Source: Ad-Hoc Report

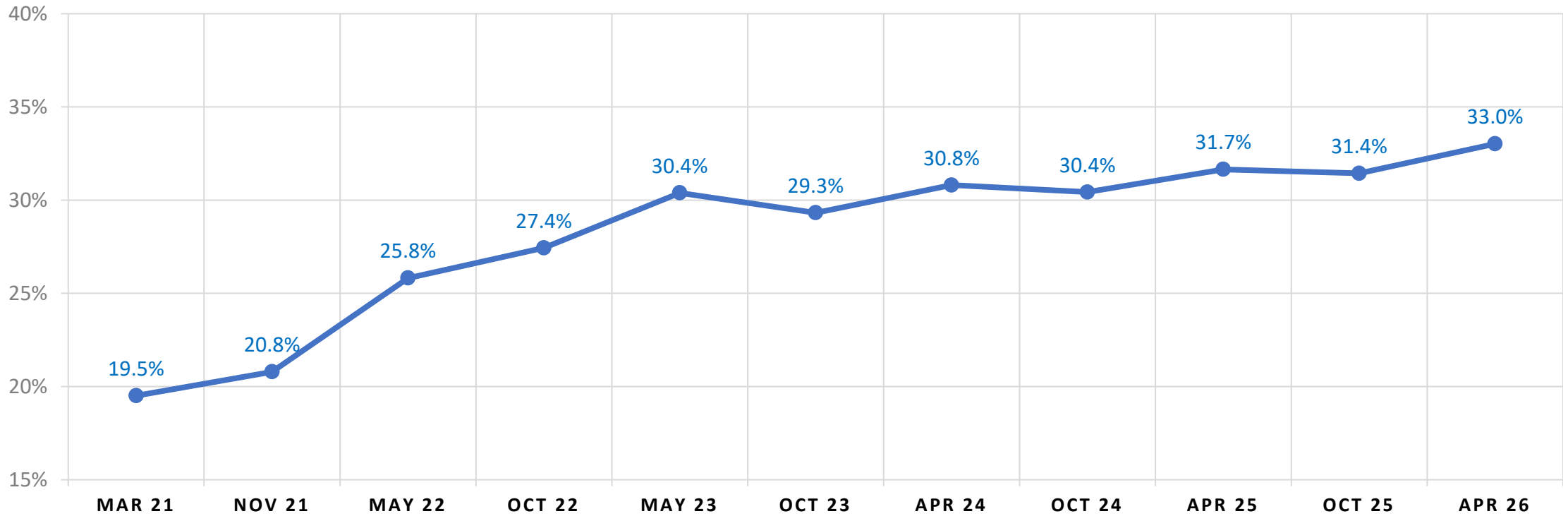


The Breastfeeding Initiation Ad-Hoc Reports provides a point-in-time look at current breastfeeding initiation number and percentage (%) for the local agency. Initiation data is pulled from the 1st page, the Rate report. This report provides the number and percentages based on the total number of infants enrolled. The denominator is the total number of infants.

State

6 Month Duration

Data Source: Ad-Hoc Report



The Breastfeeding Duration Ad-Hoc Reports provides a point-in-time look at current breastfeeding duration number and percentage (%) for the LA at 1 week, 2 weeks, 4 weeks, 6 weeks, 2 months, 6 months and 11+ months. Duration data is pulled from the 2nd page, the Duration report This report provides the number and % based on infants who initiated breastfeeding, *not* the total number of infants in WIC. The denominator is the # of infants that initiated breastfeeding.

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Breastfeeding Policies

- **4.01** Local Agency Breastfeeding Responsibilities and Staff Roles
- **4.02** Client Breastfeeding Education
- **4.03** Contraindications or Modifications to Breastfeeding
- **4.04** Breastfeeding Equipment Ordering, Inventory, Retrieval, and Maintenance
- **4.05** Breastfeeding Equipment Issuance and Documentation
- **4.06** Specialty Feeding Equipment

Key Take-Aways from Breastfeeding Policies

4.01: Local Agency Breastfeeding Responsibilities and Staff Roles

- All staff need to encourage, educate, and support clients in their infant feeding decisions.
- All staff needs to be trained = policies & program goals, training requirements, breast pump issuance.
- Clinic environment = materials, posters, welcome to breast/chestfeed anywhere.



Key Take-Aways from Breastfeeding Policies cont'd

4.02: Client Breastfeeding Education

- Respect a client's informed decision for feeding their infant.
- Make referrals, minimize supplementation, refer to the PC, offer classes and support groups.
- Pay attention to timing of required contacts.
- Guidance to help with compliance with this policy.

Key Take-Aways from Breastfeeding Policies cont'd

4.03: Contraindications or Modifications to Breastfeeding

- Not advisable with infant galactosemia or lactating client infected with human T-cell lymphotropic virus.
- Families must be counseled to TEMPORARILY CEASE breast/chestfeeding or providing expressed human milk with 9 different conditions and not feed directly at the breast/chest with 3 different conditions.
- New standards on infant feeding for clients living with HIV.
- Guidance on maternal substance misuse and blood lead levels.

Key Take-Aways from Breastfeeding Policies cont'd

4.04: Breastfeeding Equipment Ordering, Inventory, Retrieval, and Maintenance

- Requirement to perform a quarterly physical inventory of all breast pumps and attachment kits.

4.05: Breastfeeding Equipment Issuance and Documentation

- All clients issued a breast pump must be followed up in 2 business days.

4.06: Specialty Feeding Equipment



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Management Evaluations: Breastfeeding Focus

Top Issues in 2025

1. Clients not receiving follow-up within 48 hours after receiving a pump. (12/22)
2. Not contacting client within 1-2 business days after notification of a baby's birth and the family's intention to breastfeed. (9/22)
3. Monthly multi-user pump follow-up (2/22)

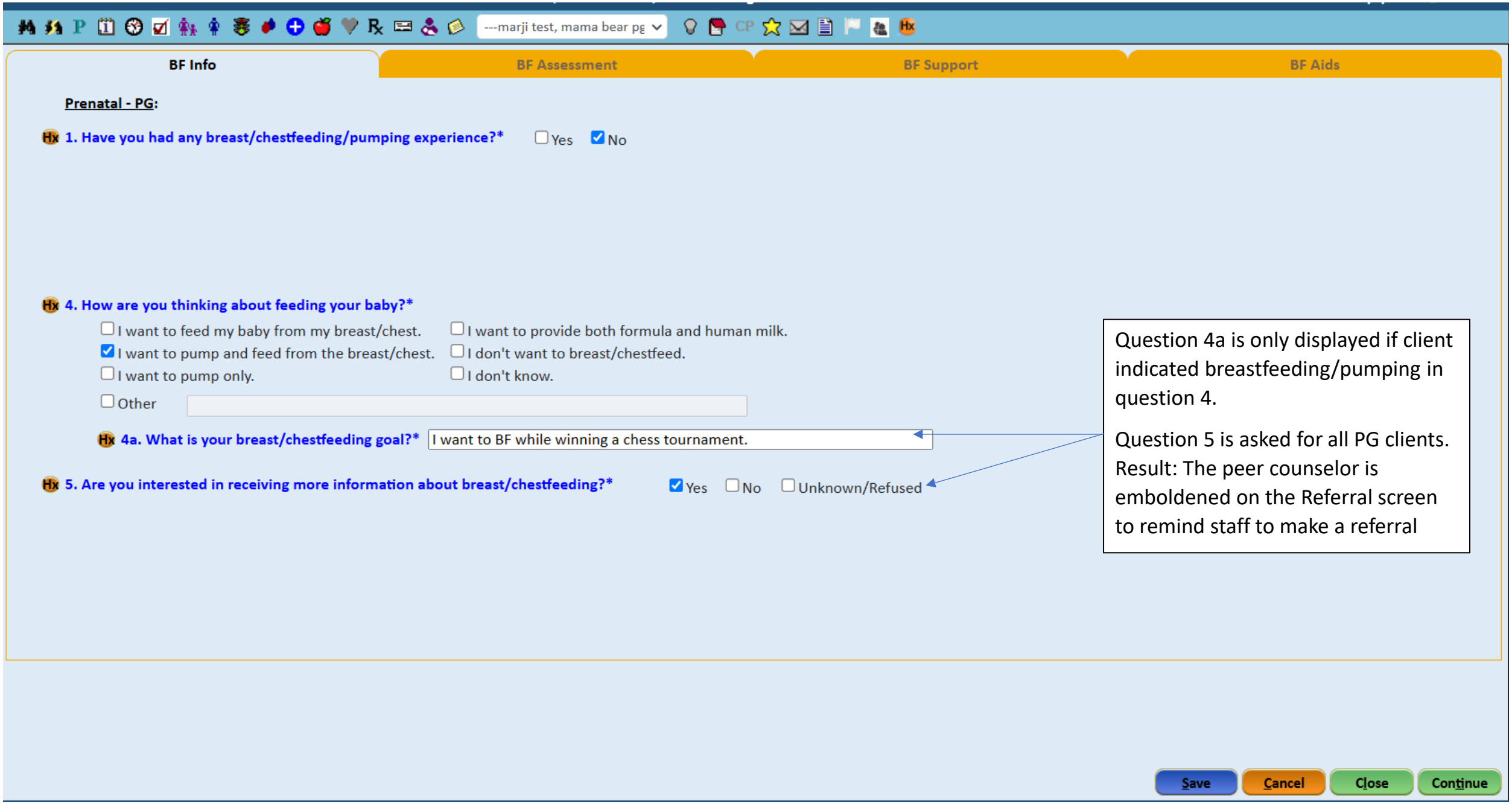
Preparation for ME: Breastfeeding Specific help document

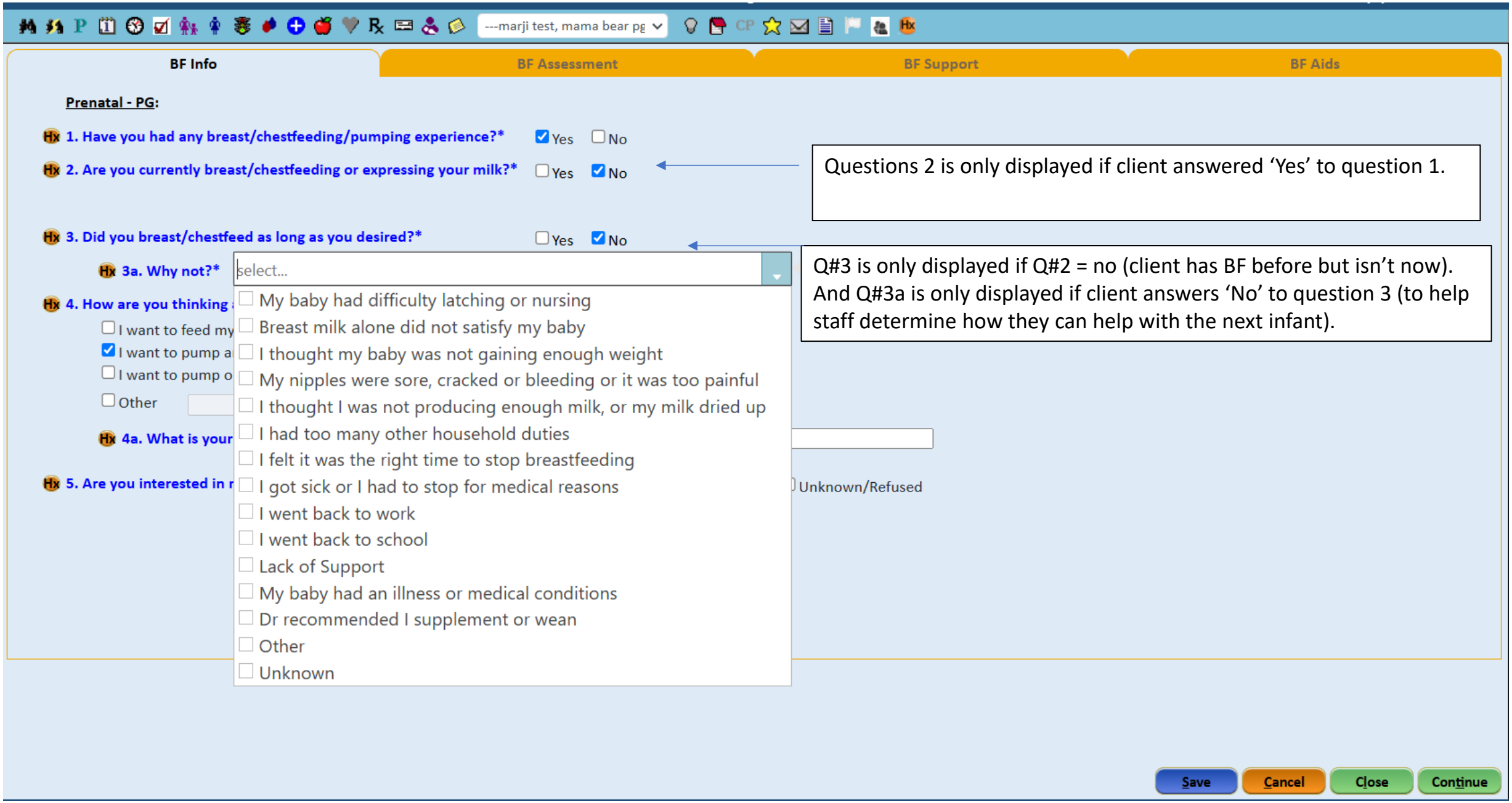
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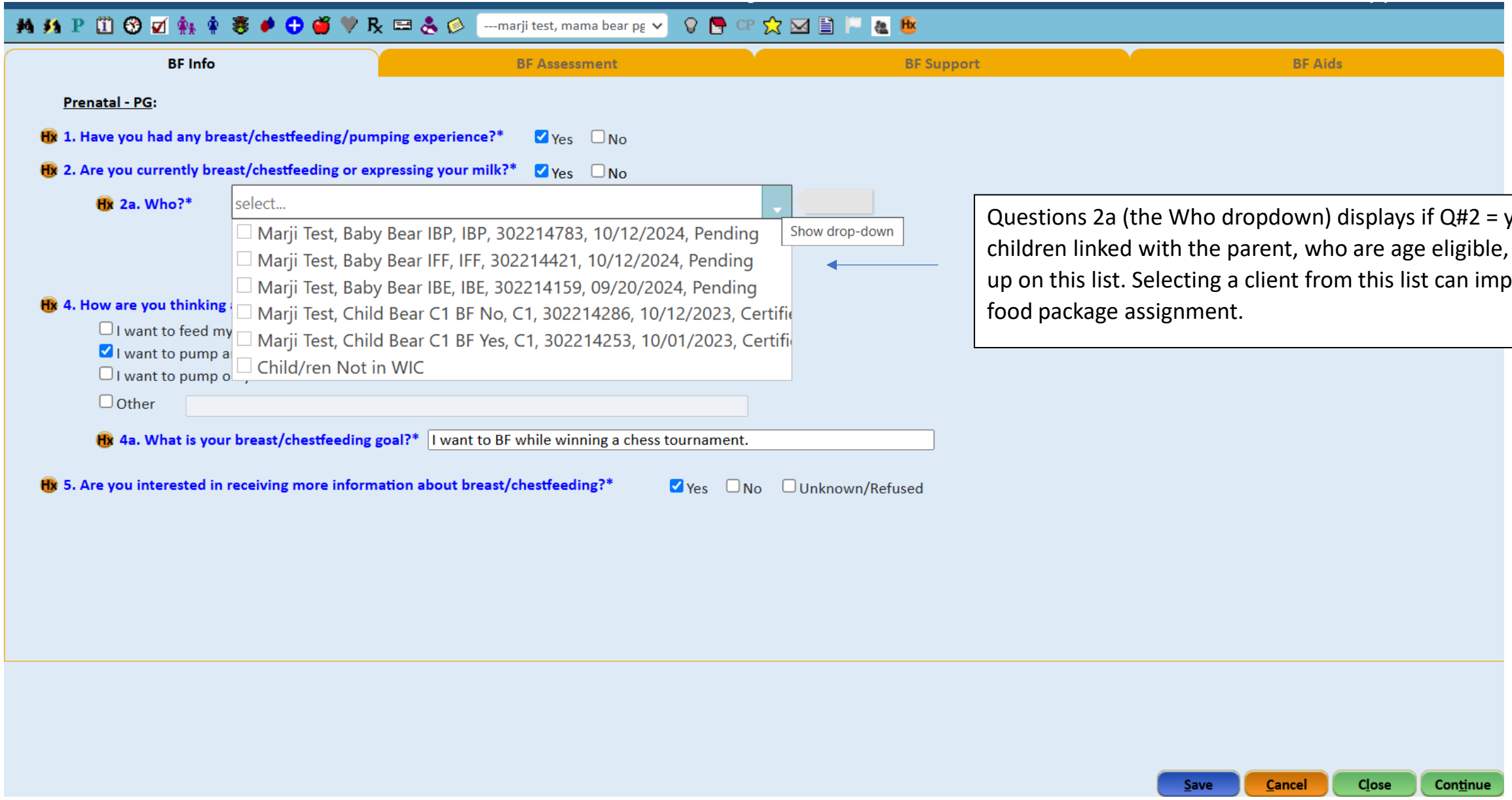
Screens for Pregnant Clients


---marji test, mama bear pg
BF Info
BF Assessment
BF Support
BF Aids
Prenatal - PG:
1. Have you had any breast/chestfeeding/pumping experience?* Yes No
4. How are you thinking about feeding your baby?*
I want to feed my baby from my breast/chest.
I want to provide both formula and human milk.
I want to pump and feed from the breast/chest.
I don't want to breast/chestfeed.
I want to pump only.
I don't know.
Other
4a. What is your breast/chestfeeding goal?* I want to BF while winning a chess tournament.
5. Are you interested in receiving more information about breast/chestfeeding?* Yes No Unknown/Refused
Question 4a is only displayed if client indicated breastfeeding/pumping in question 4.
Question 5 is asked for all PG clients. Result: The peer counselor is emboldened on the Referral screen to remind staff to make a referral
Save
Cancel
Close
Continue

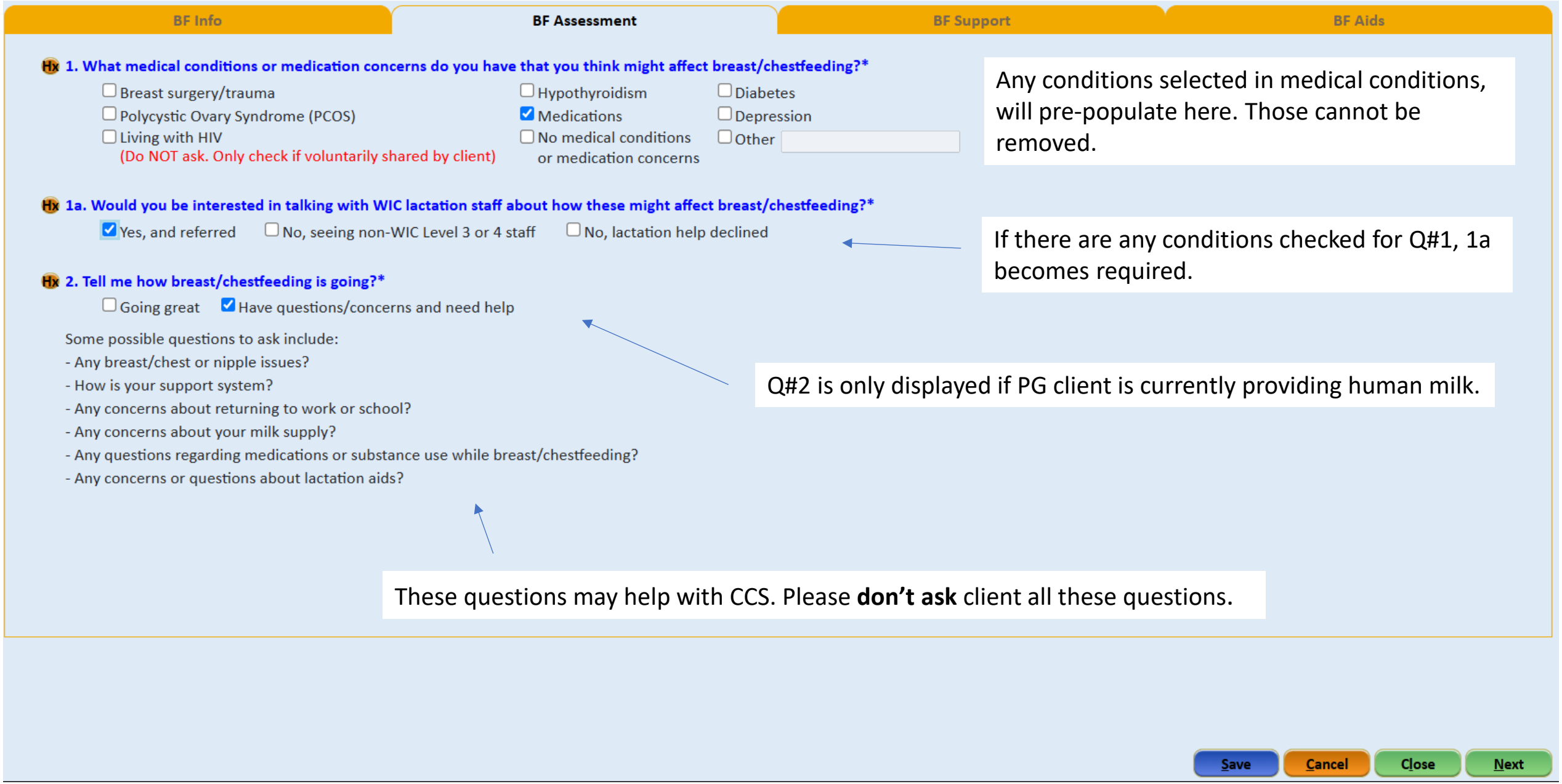


Questions 2 is only displayed if client answered ‘Yes’ to question 1.

Q#3 is only displayed if Q#2 = no (client has BF before but isn’t now). And Q#3a is only displayed if client answers ‘No’ to question 3 (to help staff determine how they can help with the next infant).



Questions 2a (the Who dropdown) displays if Q#2 = yes. All children linked with the parent, who are age eligible, will show up on this list. Selecting a client from this list can impact risk and food package assignment.



Any conditions selected in medical conditions, will pre-populate here. Those cannot be removed.

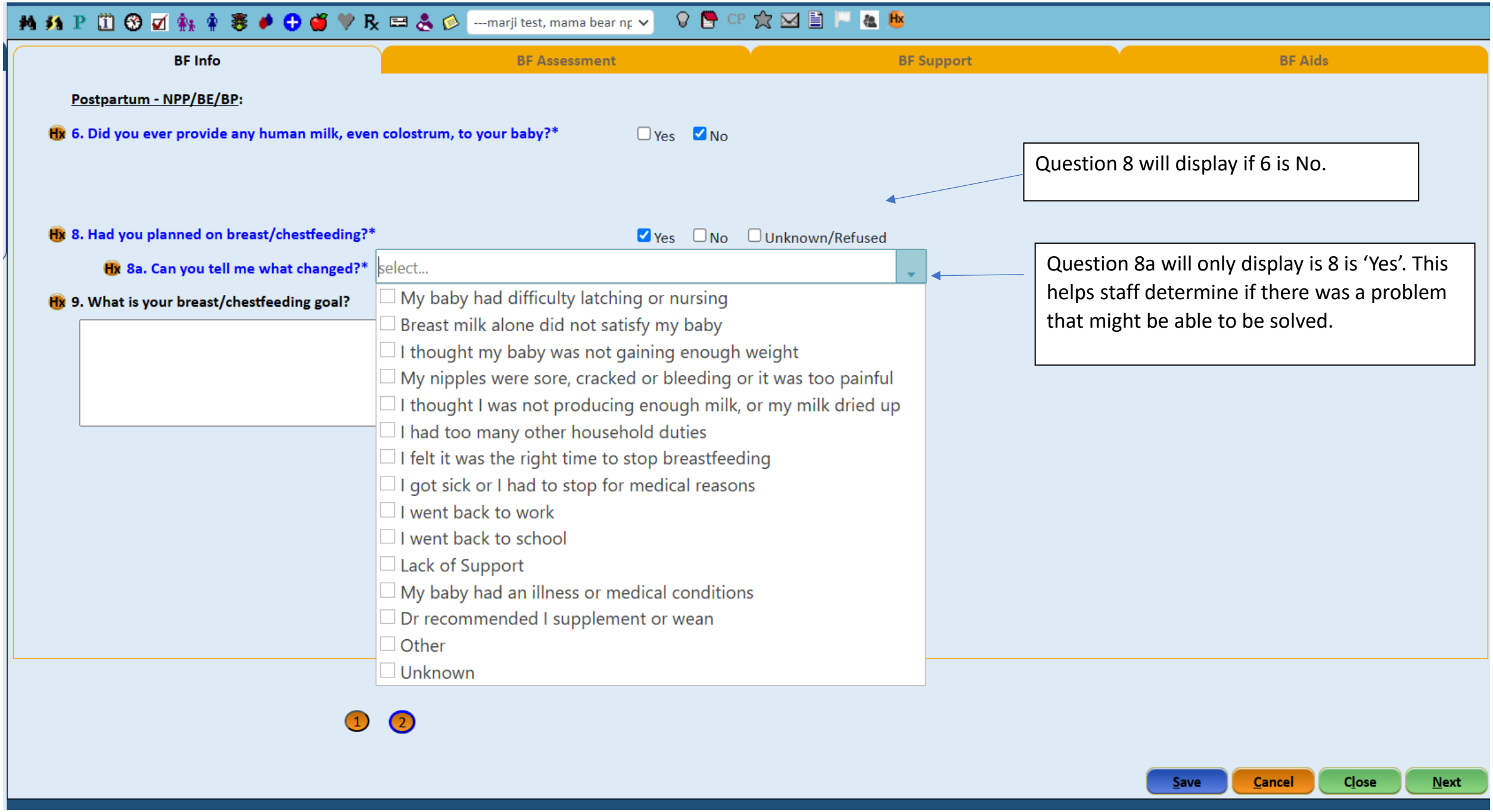
If there are any conditions checked for Q#1, 1a becomes required.

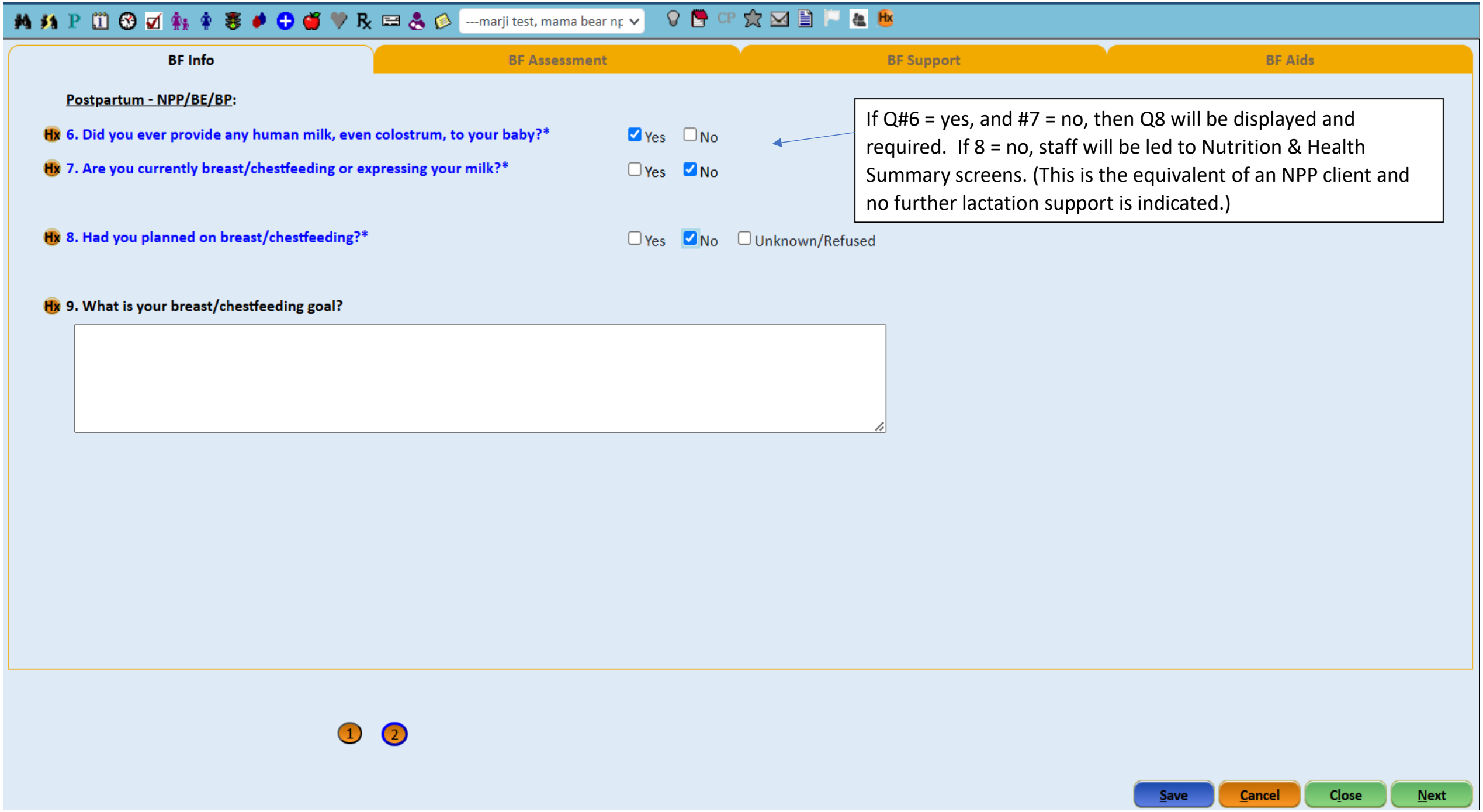
Q#2 is only displayed if PG client is currently providing human milk.

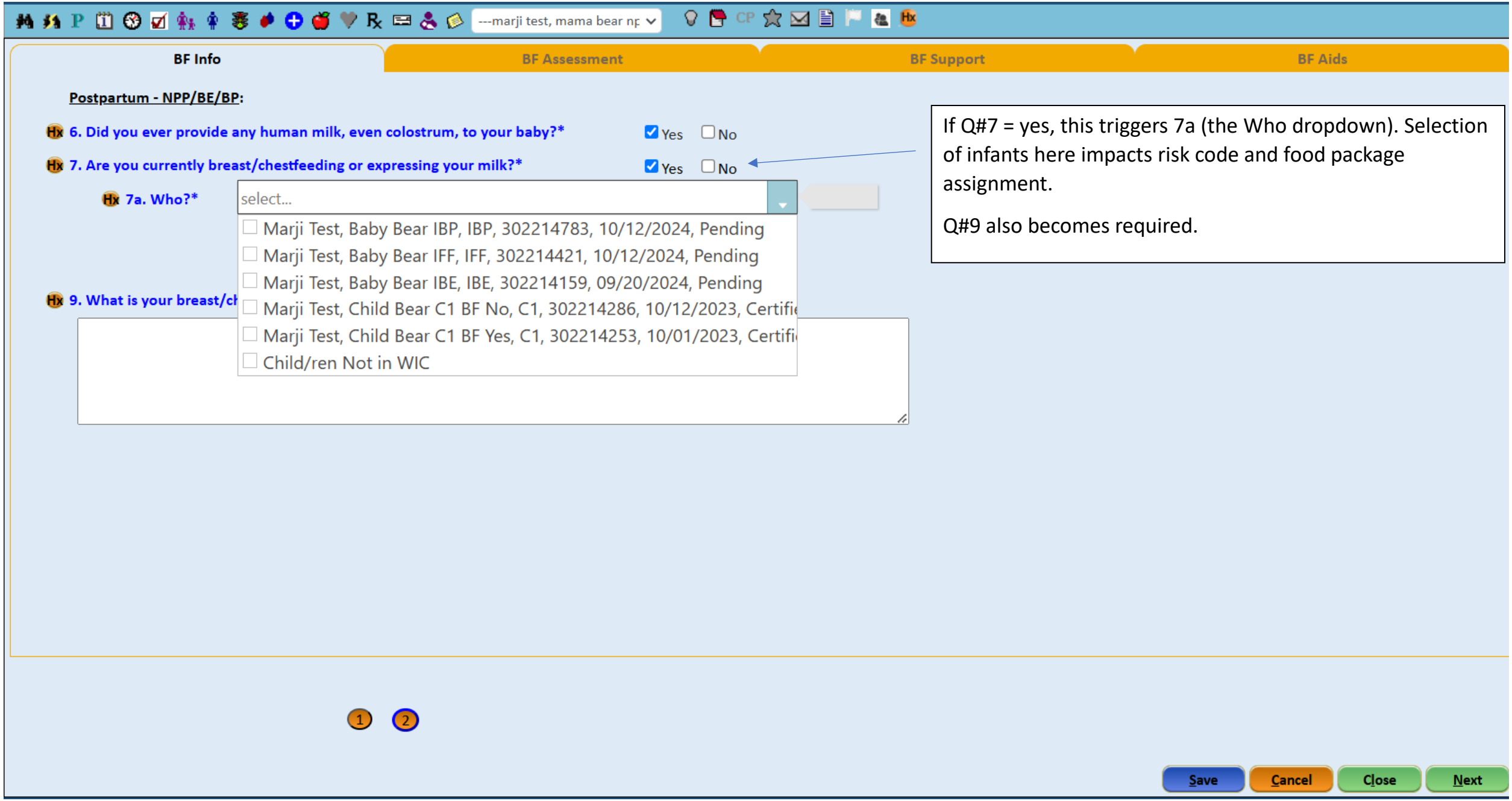
These questions may help with CCS. Please **don't ask** client all these questions.

Screens for Postpartum Clients



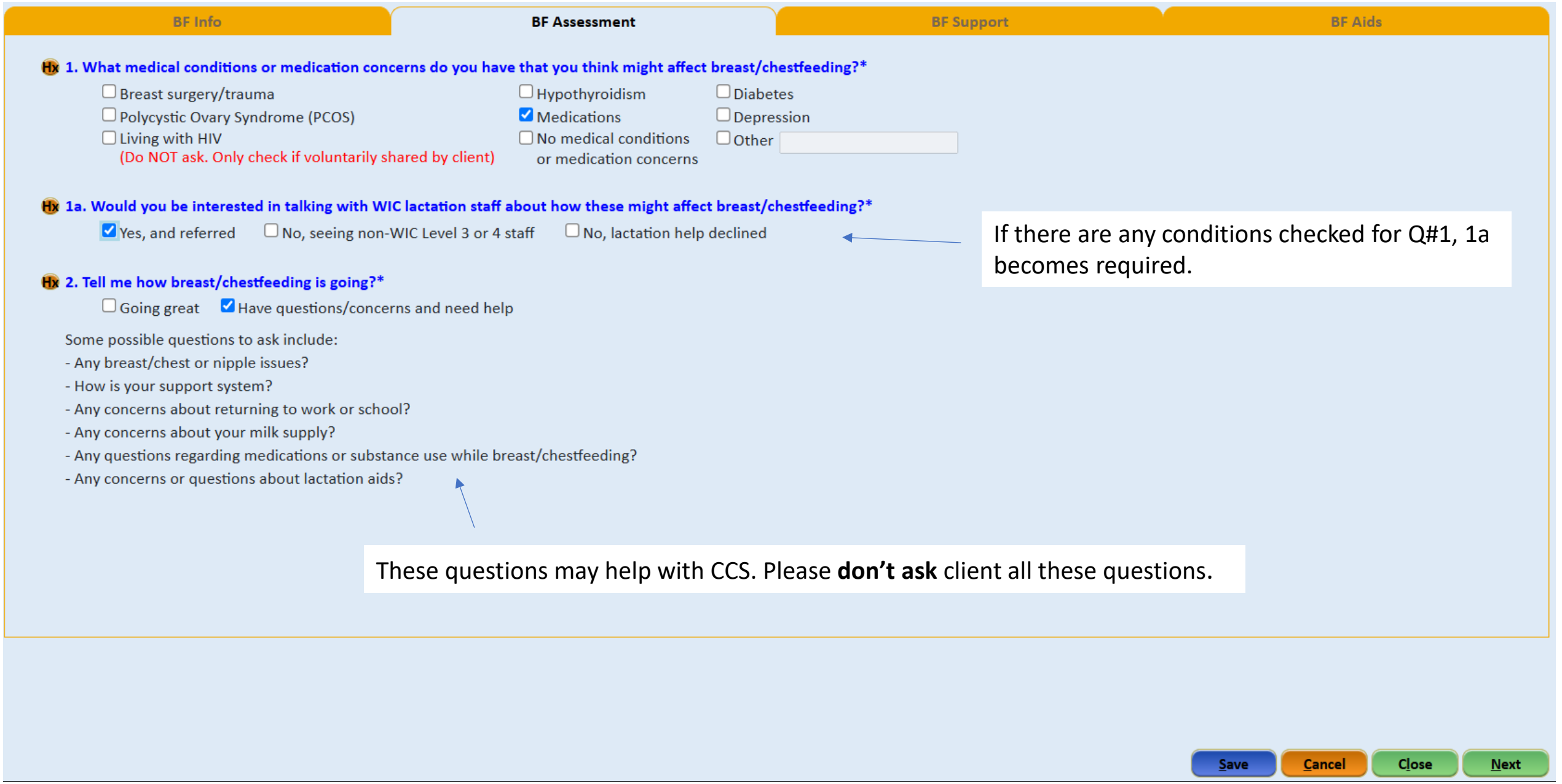

---marji test, mama bear np
BF Info
BF Assessment
BF Support
BF Aids
Postpartum - NPP/BE/BP:
6. Did you ever provide any human milk, even colostrum, to your baby?*
Yes
No
Question 8 will display if 6 is No.
8. Had you planned on breast/chestfeeding?*
Yes
No
Unknown/Refused
8a. Can you tell me what changed?*
select...
My baby had difficulty latching or nursing
Breast milk alone did not satisfy my baby
I thought my baby was not gaining enough weight
My nipples were sore, cracked or bleeding or it was too painful
I thought I was not producing enough milk, or my milk dried up
I had too many other household duties
I felt it was the right time to stop breastfeeding
I got sick or I had to stop for medical reasons
I went back to work
I went back to school
Lack of Support
My baby had an illness or medical conditions
Dr recommended I supplement or wean
Other
Unknown
Question 8a will only display is 8 is 'Yes'. This helps staff determine if there was a problem that might be able to be solved.
9. What is your breast/chestfeeding goal?
1
2
Save
Cancel
Close
Next

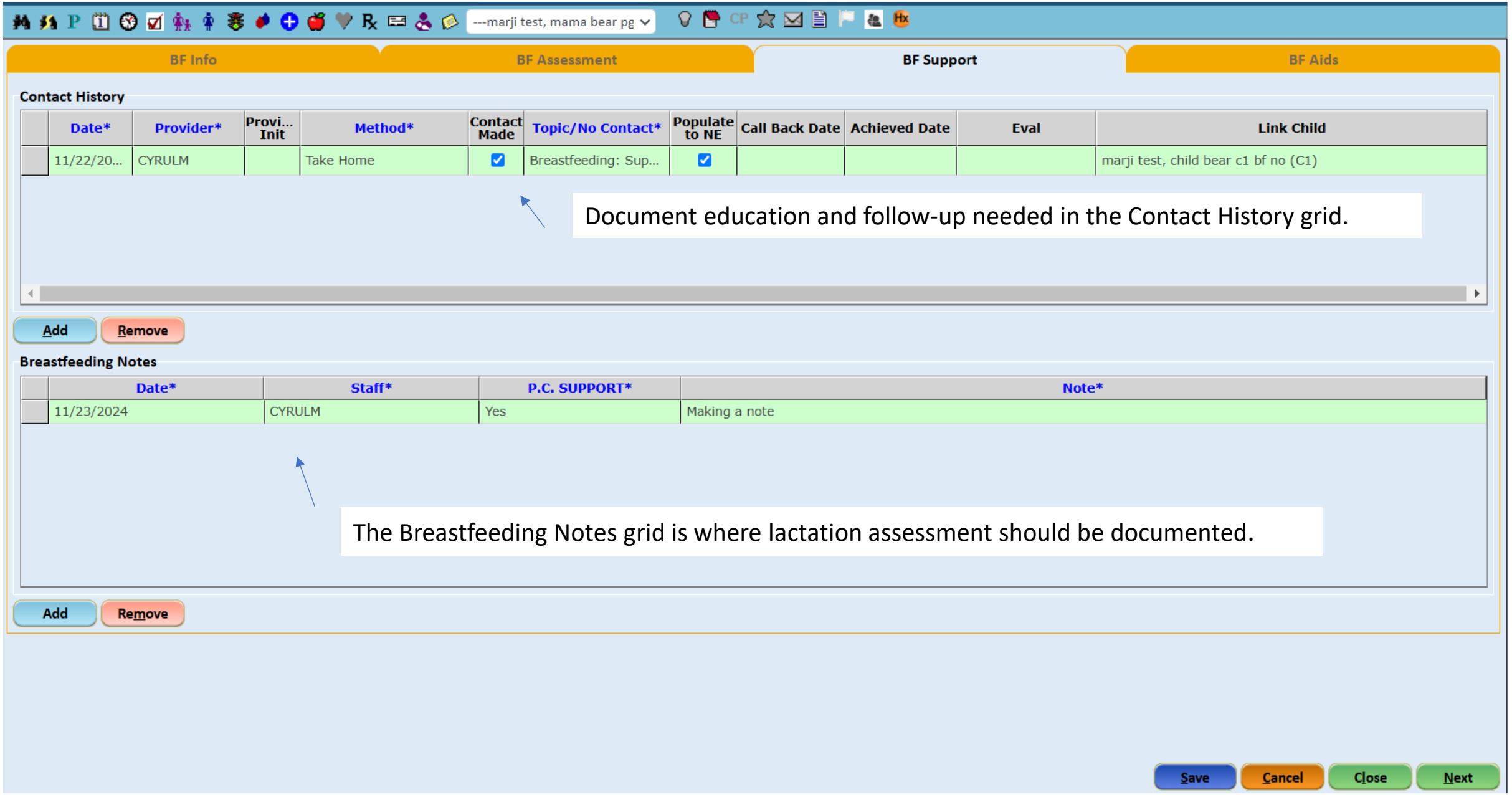

---marji test, mama bear np
BF Info
BF Assessment
BF Support
BF Aids
Postpartum - NPP/BE/BP:
Hx 6. Did you ever provide any human milk, even colostrum, to your baby?* Yes No
Hx 7. Are you currently breast/chestfeeding or expressing your milk?* Yes No
Hx 8. Had you planned on breast/chestfeeding?* Yes No Unknown/Refused
Hx 9. What is your breast/chestfeeding goal?
If Q#6 = yes, and #7 = no, then Q8 will be displayed and required. If 8 = no, staff will be led to Nutrition & Health Summary screens. (This is the equivalent of an NPP client and no further lactation support is indicated.)
1
2
Save
Cancel
Close
Next



If Q#7 = yes, this triggers 7a (the Who dropdown). Selection of infants here impacts risk code and food package assignment.

Q#9 also becomes required.


BF Info
BF Assessment
BF Support
BF Aids
Hx 1. What medical conditions or medication concerns do you have that you think might affect breast/chestfeeding?*
Breast surgery/trauma
Polycystic Ovary Syndrome (PCOS)
Living with HIV
(Do NOT ask. Only check if voluntarily shared by client)
Hypothyroidism
Medications
No medical conditions or medication concerns
Diabetes
Depression
Other
Hx 1a. Would you be interested in talking with WIC lactation staff about how these might affect breast/chestfeeding?*
Yes, and referred
No, seeing non-WIC Level 3 or 4 staff
No, lactation help declined
If there are any conditions checked for Q#1, 1a becomes required.
Hx 2. Tell me how breast/chestfeeding is going?*
Going great
Have questions/concerns and need help
Some possible questions to ask include:
- Any breast/chest or nipple issues?
- How is your support system?
- Any concerns about returning to work or school?
- Any concerns about your milk supply?
- Any questions regarding medications or substance use while breast/chestfeeding?
- Any concerns or questions about lactation aids?
These questions may help with CCS. Please don't ask client all these questions.
Save
Cancel
Close
Next


---marji test, mama bear pg
BF Info
BF Assessment
BF Support
BF Aids
Contact History
Date*
Provider*
Provi... Init
Method*
Contact Made
Topic/No Contact*
Populate to NE
Call Back Date
Achieved Date
Eval
Link Child
11/22/20...
CYRULM
Take Home
Breastfeeding: Sup...
marji test, child bear c1 bf no (C1)
Document education and follow-up needed in the Contact History grid.
Add
Remove
Breastfeeding Notes
Date*
Staff*
P.C. SUPPORT*
Note*
11/23/2024
CYRULM
Yes
Making a note
The Breastfeeding Notes grid is where lactation assessment should be documented.
Add
Remove
Save
Cancel
Close
Next



Screens for Infants

BF Info | BF Assessment | BF Support | BF Aids

Hx **1. Was this child ever fed human milk, even colostrum?*** ☐ Yes ☐ No ☐ Unknown/Refused

Hx 2. Is this child currently being fed any human milk? ☐ Yes ☐ No

Hx 3. Has this child been fed anything other than human milk? (i.e., formula, water, infant cereal, etc.): ☑ Yes ☐ No

Hx 4. How old was this child when they were first fed something other than human milk? (i.e., formula, water, infant cereal, etc.):

	Months:	Weeks:	Days:	
Age:				☐ Unknown/Refused

Hx **5. How much and how often is this child being fed in a 24-hour period of time?***

Number of feeds at breast/chest: ☐ # Times/24 hours

Bottles of human milk: ☐ # Times/24 hours ☐ # Ounces per feed

Bottles of formula: ☐ # Times/24 hours ☐ # Ounces per feed ☐ Total Ounces Formula/24 Hours

Hx 6. How old was this child when they completely stopped breast/chestfeeding or being fed human milk?

	Months	Weeks	Days	
Age				☐ Unknown/Refused

Reason breast/chestfeeding ended: select...

Initiation

Duration

Exclusivity

Active Record

brooke release test, ibe twin 2

Cat: IBE (male)

ID: 302 214 104

DOB: 9/10/2024

Age: 4 mos, 2 wks

Cert: 11/22/24 - 09/09/25

Status: Certified

Scheduling Tasks

Guided Script

- Family Information
- Client Information
- Cert Action
- Lab
- Health
- Nutrition History
- Breastfeeding
- Mid-Certification
- Nutr & Hlth Summary
- Nutrition Education
- Referrals
- Food Prescription
- Issue Benefits
- Schedule Appt
- Print Documents

BF Info | BF Assessment | BF Support | BF Aids

Hx 1. Was this child ever fed human milk, even colostrum? ☑ Yes ☐ No ☐ Unknown/Refused

Hx 2. Is this child currently being fed any human milk? ☑ Yes ☐ No

Hx **3. Has this child been fed anything other than human milk? (i.e., formula, water, infant cereal, etc.)*** ☐ Yes ☑ No

Hx 4. How old was this child when they were first fed something other than human milk? (i.e., formula, water, infant cereal, etc.):

	Months:	Weeks:	Days:	
Age:				☐ Unknown/Refused

Hx **5. How much and how often is this child being fed in a 24-hour period of time?***

Number of feeds at breast/chest: 14 # Times/24 hours

Bottles of human milk: # Times/24 hours # Ounces per feed

Bottles of formula: # Times/24 hours # Ounces per feed Total Ounces Formula/24 Hours

Hx 6. How old was this child when they completely stopped breast/chestfeeding or being fed human milk?

	Months:	Weeks:	Days:	
Age:				☐ Unknown/Refused

Reason breast/chestfeeding ended: select...

HOW TO CUSTOMIZE INFANT FORMULA

1 Determine Total Ounces of Formula

2 Determine Total Ounces of Formula

3 Determine number of formula cans

Michigan WIC
Formula Maximums - IBP
Effective November 8, 2024

CONTRACT/STANDARD INFANT FORMULAS
(Require Medical Documentation only for a child ≥ 12 months)

	Formula	Size	Form	Man. Recon. Volume (ounces)	Maximum Quantity per Month													WIC Eligible Category
					0 mo IBP	1 mo IBP	2 mo IBP	3 mo IBP	4 mo IBP	5 mo IBP	6 mo IBP	7 mo IBP	8 mo IBP	9 mo IBP	10 mo IBP	11 mo IBP	≥ 1 yr	
Class I Formulas	Similac Advance	12.4 oz can	Powd	90	5	4	4	4	5	5	4	4	4	4	4	4	10	I ,C1-C4
		32 fl oz bottle	RTF	32	12	12	12	12	14	14	10	10	10	10	10	10	28	I, C1-C4
		13 fl oz can	Conc	26	14	14	14	14	17	17	12	12	12	12	12	12	35	I, C1-C4
	Similac Sensitive	12.5 oz can	Powd	90	5	4	4	4	5	5	4	4	4	4	4	4	10	I, C1-C4
		32 fl oz bottle	RTF	32	12	12	12	12	14	14	10	10	10	10	10	10	28	I, C1-C4
	Similac Soy Isomil	12.4 oz can	Powd	90	5	4	4	4	5	5	4	4	4	4	4	4	26	I, C1-C4
		32 fl oz bottle	RTF	32	12	12	12	12	14	14	10	10	10	10	10	10	28	I, C1-C4
		13 fl oz can	Conc	26	14	14	14	14	17	17	12	12	12	12	12	12	35	I, C1-C4
	Similac Total Comfort	12.6 oz can	Powd	90	5	4	4	4	5	5	4	4	4	4	4	4	10	I, C1-C4

*Reconstituted Fluid Ounces is found on Formula Maximums sheet.

BF Info | **BF Assessment** | BF Support | BF Aids

1. Tell me about the breast/chestfeeding sessions with your baby:

Hx **1a. How do you know when to feed your baby?**

☐ Looks for early hunger cues (sucking hand, turning head) ☐ Notices late hunger cues (crying) ☐ Follows a schedule

Hx **1b.Are you offering both breasts/sides?** ☐ Yes ☐ No ☐ Sometimes

Hx **1c. How long does baby usually feed?** ☐ Less than 15 minutes ☐ 15-30 minutes ☐ More than 30 minutes

Hx **1d. Is it comfortable?** ☐ Yes ☐ No ☐ Sometimes

Hx **1e. If feeding at the breast/chest, who usually ends the feeding session?** ☐ Parent ☐ Baby

Hx **1f. If you give your baby a bottle, have you heard of paced bottle feeding?**

☐ Yes, and doing ☐ Yes, and not doing ☐ Never heard of it

2. Tell me about the number of wet and poopy diapers per day:

Hx **2a. Number of wet diapers in 24 hours:** ☐ Less than 6 ☐ 6 or more

Hx **2b. Number of poopy diapers in 24 hours:** ☐ Less than 4 ☐ 4 or more

Hx **2c. What do stools look like?**

☐ Thick, tarry, black ☐ Looser: greenish to yellow ☐ Loose seedy, yellow (fed human milk)

☐ Pasty, yellow to brown (fed formula) ☐ Other

BF Info | BF Assessment | BF Support | BF Aids

Contact History

	Date*	Provider*	Provi... Init	Method*	Contact Made	Topic/No Contact*	Populate to NE	Call Back Date	Achieved Date	Eval	Link Child
	04/13/20...	CYRULM	mlc	Individual	☑	Breastfeeding: Basics	☑				



Add Remove

Breastfeeding Notes

	Date*	Staff*	P.C. SUPPORT*	Note*
	02/23/2022	CYRULM	No	Lactation EducationWe tried different options for virtual trainings. Which do you think worked best?Answer ChoicesResponses...

Add Remove

Save Cancel Close Next

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Time for a self-assessment:

What is your comfort level in discussing breastfeeding?


How can you increase your breastfeeding knowledge and skills?

Attend **Breastfeeding Basics** within one year of hire





Watch **Great Lakes Breastfeeding Webinars** Access at MiBreastfeeding.org. Provides contact hours for nurses, social workers, dietitians and IBCLC/CLC.

Take advantage of our advanced breastfeeding training options:

- OA grant trainings
- Advanced Lactation Clinical Skills



How can you support breastfeeding in your clinic?



Create a clinic environment that supports breastfeeding families







L.O.V.E.

- **L**isten
- **O**bserve
- **V**alidate
- **E**ducate

Know which breastfeeding education materials are available.

[Breastfeeding for Staff (michigan.gov)]



WIC Breastfeeding Support Services



CPAs

- Assess, provide support and refer

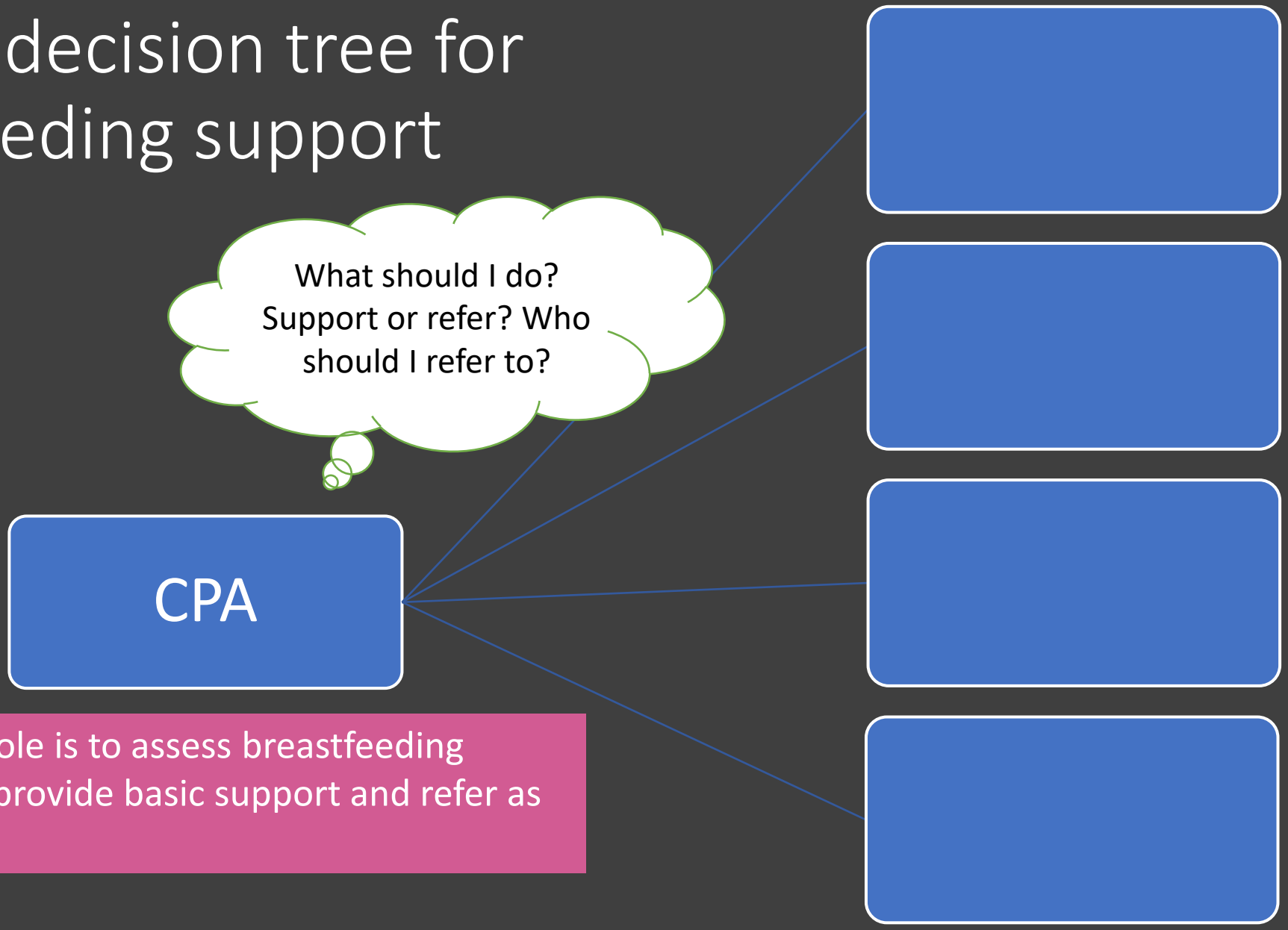
PEER COUNSELORS

- Role model for breastfeeding
- Gives parent-to-parent support
- Provide BF support within their scope of practice

BF CREDENTIALED STAFF (CLS, CLC, IBC, LCE, IBCLC)

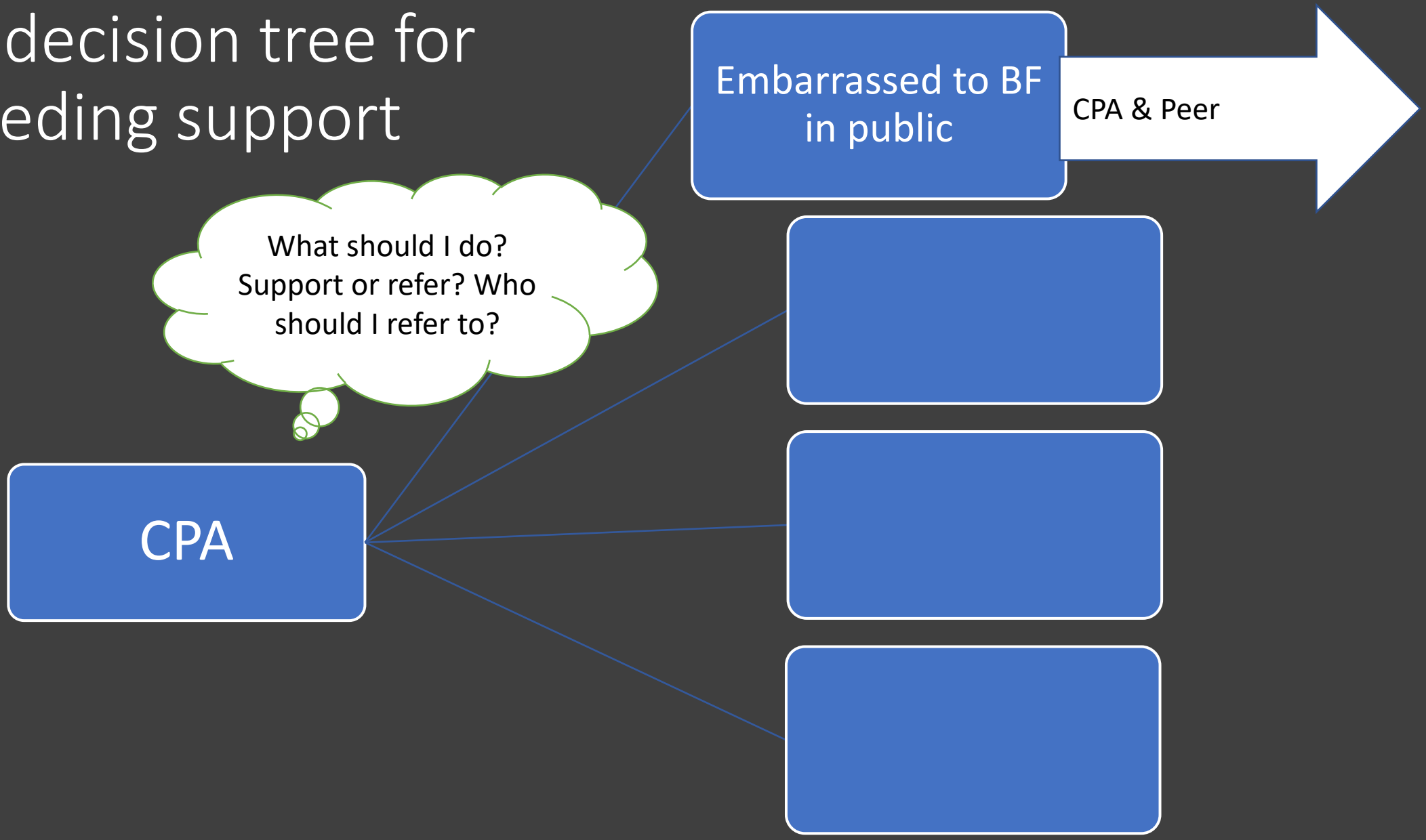
- Provide further assistance for WIC families

Referral decision tree for breastfeeding support

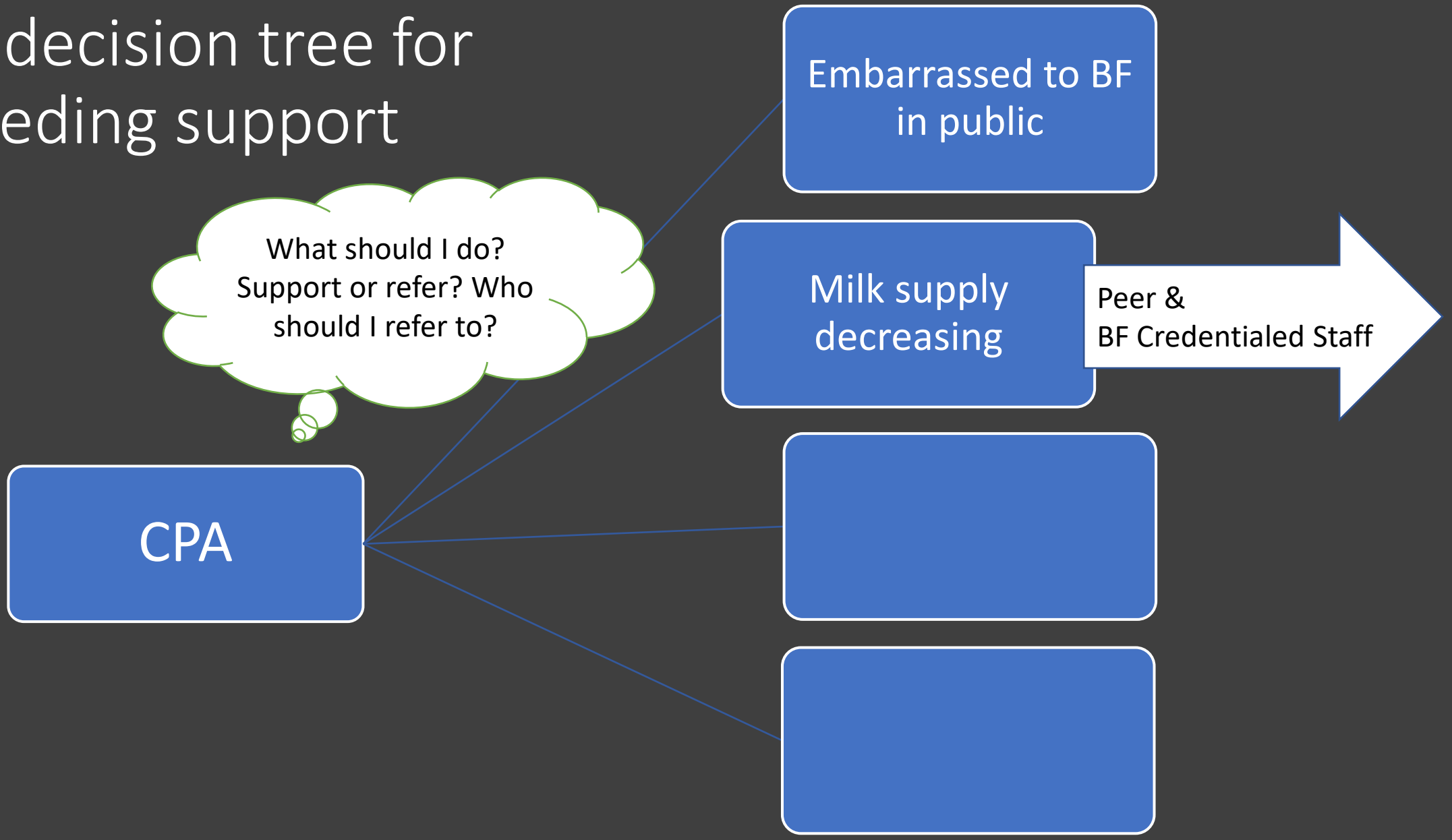


The CPA's role is to assess breastfeeding problems, provide basic support and refer as necessary.

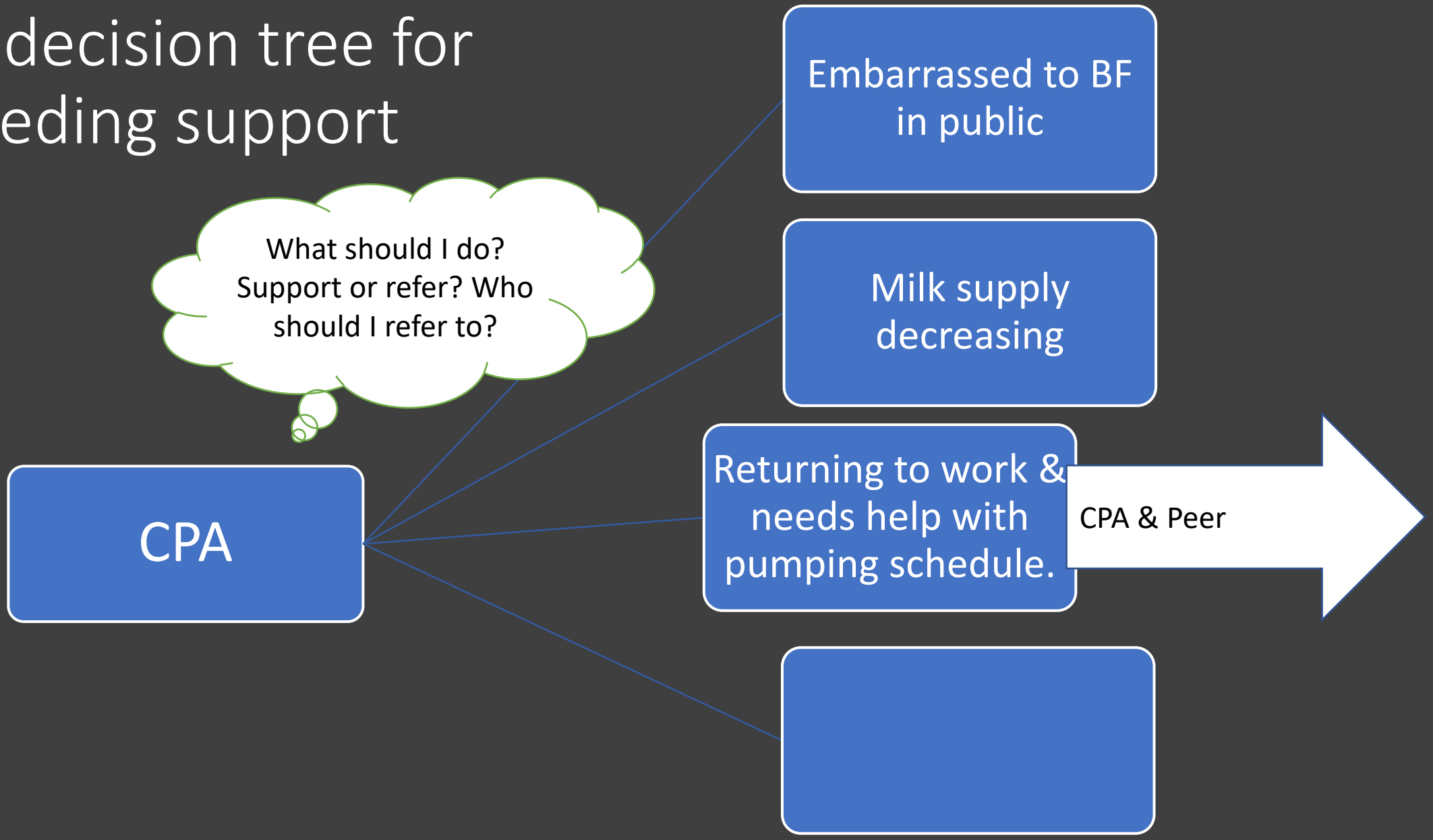
Referral decision tree for breastfeeding support



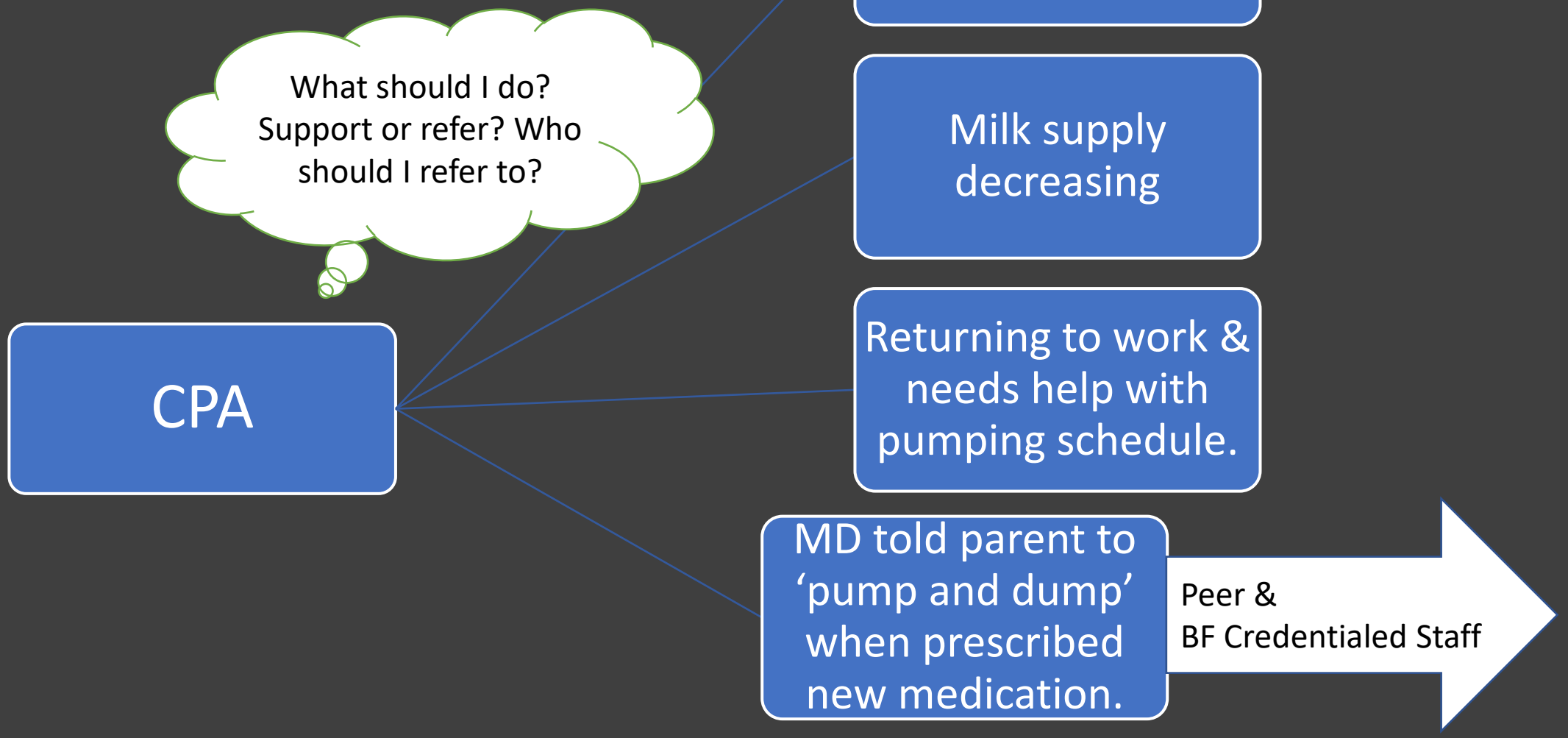
Referral decision tree for breastfeeding support



Referral decision tree for breastfeeding support



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What will we cover today?

- Breastfeeding benefits
- Data and Statistics
- Breastfeeding Policies
- Management Evaluations (ME)
- Documentation in MI-WIC
- Role of the CPA in promotion of exclusive breastfeeding
- **Breastfeeding Food Packages resources**
- Website

Breastfeeding Food Package Guidance

- Breastfeeding Food Package Guide Cheat Sheet
- Breastfeeding Food Package PPT
- BP/IBP Dyad Needs More Formula Handout


How to assign more formula to a partially breastfeeding (BP/IBP) dyad.

BP/IBP Needs More Formula

BP/IBP Needs More Formula

	Infant 0-5 Months	Infant 6-11 Months
BP Parent	Food Package VI	IBE/IBP/IFF/NPP/BP (No Food Benefits) "Ghost Package"
Process	Use "Show Food Package VI"	Filter default list for 'Benefits'.

Assign Food Package VI to the BP parent. Ensure the BP parent is linked to the IBP baby in the IBP client's Client Information screen.

- **BP client whose infant is UNDER 6 months**:
  - Check the "Show Food Package VI" checkbox and press search.
- **BP client whose infant is OVER 6 months**:
  - Filter the food prescription pop-up for "Benefits".

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There are 3 places on the WIC website to find breastfeeding information:

Breast/Chestfeeding for Families

Breastfeeding for Managers and Coordinators

Breastfeeding for Staff



State WIC Breastfeeding Team



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