Enhancing Lactation Support for Hospital **Employees**

A CHAMPS Webinar Presented by: Cathy Carothers, IBCLC, FILCA









Disclosures



HHS Maternal and Child Health Bureau

Business Case for Breastfeeding



HHS Office on Women's Health
Supporting Nursing Moms at Work



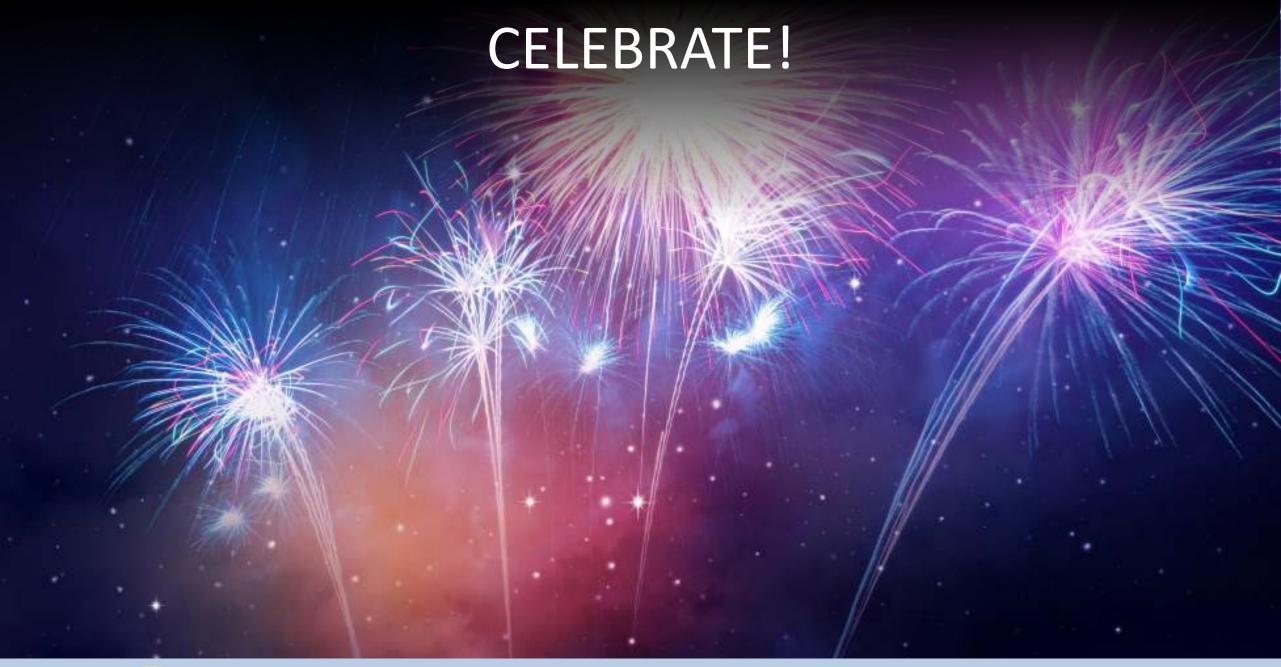


POLL #1

Tell Us About Yourself!











Mississippi CHAMPS: Decreasing Racial Inequities in Breastfeeding

Takes Removin, Unit," indexted theory, Unit, 93, 90.00, "Greater tagg, 160; 50%, 90.00, Co.;" heater factor, mill, siths," following stat." Los reconstructes. US, 160; 1600; "Gate College" Areas decreased, Price signific

Rise is an important predictor of hexardeeding prevalence in the United States, with rates being lowest among State populations. The Communities and Bospitals Advancing Maternity Practices (CHANPS) program works with inequitals and communities to implement the Baby-Priendly Respital Intestive, increase broadwesting rates, and decrease radial disportize in broadwesting. The atms of Miscothyl (DIAMPS were in (1) increase-broadwesting initiation and exclusivity and (2) decrease radial disportizes in broadwesting by increasing the number of Baby-Priendly hospitals in the state from 2014 to 2020.

serious. Mixdxdppl hospitals entailed into the CHANPS Initiative from 2014 to 2019 and received unintensive quality improvement and technical assistance intervention to implement the Baby-Encody Hospital Initiative. Community purtners and attained enganizations provided parallel support. Enquals submitted monthly aggregate data stratified by race on breadfeeding joutcome measure), dein-to-stin care, and monthly in partices (process measures).

Note that 2014 and 2020, the number of Rahy-Priendly hospitals in Missisciapi note from 0 to 22. Becambering initiation in the hospitals, increased from 58% to 68% (P < .05), and the dispatity between Bladt and White dyade data used by 17 percentage pourts, an average of 0.176 percentage pourts each month (95%, confidence interval: -0.060 to -0.292). Estimately increased from 26% to 37% (P < .05) Sidn-to-dein and counting-in rates increased against a few 1.0% (1.0%) in 1.0% (1.0%) in 1.0% (1.0%) in sidn-to-dein after counting-in rates increased both, 1.0% (1.0%) (1.0%) in 1.0% (1.0%) in sidn-to-dein after counting-in the counting-in 1.0% in 1.0%, 1.0% (1.0%) in 1.0% in 1.0% (1.0%) in 1.0% in 1.0% and 1.0% in 1.0% (1.0%) in 1.0% in 1.0% and 1.0% in 1.0% (1.0%) in reconstruction.

Over the course of the CHAMPS program, them were significant increases in broadfeeding initiation and exclusivity, and decreases in radial inequation or broadfeeding initiation.

half article say to found order at everyonist year organization to the Great 2020-00000

detroit.

"Deliver influence (Indiano, Joseph Heider Breite, Adder Anderstein 18. "Heider Breite (Indiano, Adderstein 18. "Heider Breite (Indiano, Adderstein 18. "Heider Breite (Indiano, 180 Auf) Deliver of translation (Indiano), 180 Auf) Deliver of translation (Indiano), 180 Auf) Deliver of translation (Indiano), 180 Auf (In

HE SAME WAS READ WITH CASE WEIGHT CONTRIBUTE. and supervised data in Freditor, advised to such as Jane feminated and feminative month and the many presided recording according participation for state contents, parties regulate and remains and remain the manuscript for Aug downer the numerously. component of the popular but necessary that necessaries the reported. Dr. Bloke I warrier I am the schalabilities on the shirtly services and a solder's with the more I remige. memphatists sin band, netted, and potential all time and been per included and received feet on contract the first one more than this substillacompany the paint by any late, which as consumb so related on the project, and revision and resident for management for facilities in affirmer probability of projection land president angling accepted ending below and usually intermediated, contributed to the indial stuff of the the traceroot and towness and revised the manageroot Or Microscot correspondent and imagest the project circles the self-dimensional, and reviews and revision the managered, and all authors accesses for that the imported are a greatlest und better to the assemble to for all aspects of the most

Military Award in the last X Scholer.

Acognostic publishes, and 9001

Condition of the Condition of the Condition of Condition (Condition) (Condi

CONTRACT TIME Numbers, Front, 960x 4605 Seales, 909-4275.

CONTROL OF SECURITION AND ADDRESS OF SECURITION ASSESSMENT ASSESSMENT OF SECURITION ASSESSMENT OF SECURITION ASSESSMENT ASSESSMENT

extends, columbe to prome from the lest national from the flower reduced in 2000/15 and the flower recommendation agrees retrieved in 164 years better success as participated in the design or provided of the design.

COMPANY THAT IS NOT THE WAY THAT IS NOT THE THAT THE PARTY OF THE PART

As the Burniers Charge F, Registrant Messages of Messages ORAFA Secretary Social Installing in Productions, Projects Secretary, Projects Secretary, Projects Secretary, Projects Secretary, Projects Secretary, Projects Sec

Burnham et al. Decreasing Racial Inequity in Breastfeeding. *Pediatrics*. 2022 Feb;149(2).

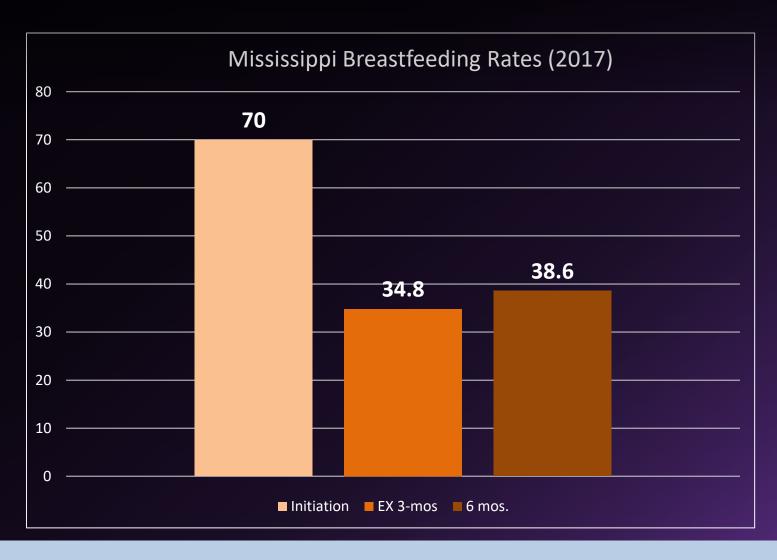
AVISE RICK Values 149, number 7, fellowing 1000-8008080808

DUMBER STRONG



CDC Breastfeeding Report Card









WHY???

















The PUMP Act

SUPPORT BREASTFEEDING EMPLOYEES WITH THE PUMP ACT

MESSAGE YOUR
MEMBERS OF CONGRESS

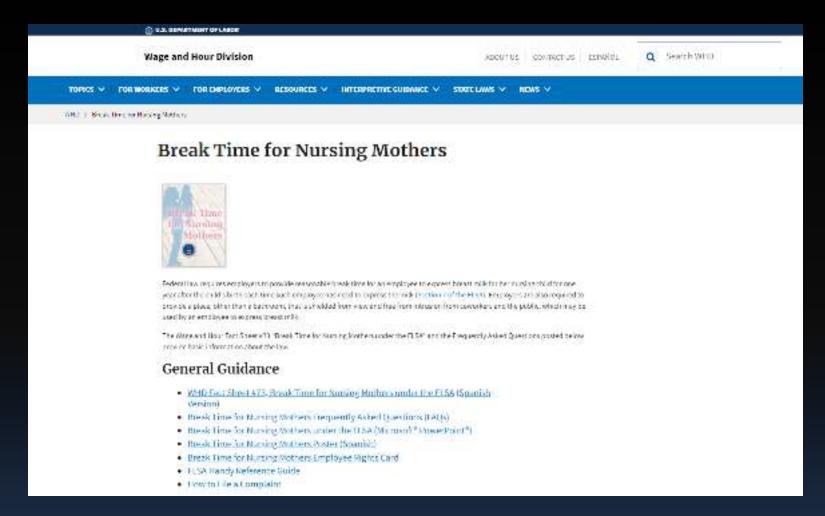








Federal Law



dol.gov/agencies/whd/nursing-mothers





POLL #2

Federal Requirements for Supporting Lactating Employees





























Lower Absenteeism

One-day absences occur twice as often for employees whose babies are not breastfed.





Lower Turnover Rates

U.S. retention rate: 59%

Companies with lactation programs: 94%











Other Benefits for Hospitals







Lactation room opens



Ruthle Robison

At Greenwood Leffore Hospital's new lactation room are, front row, from left, Christine Powell, Mississippi State Department of Health peer counselor; Melanie Williams, director of Home Visiting Initiatives for Delta Health Alliance; Dr. Melynda Noble, pediatric hospitalist; Kerri Grossman, child life coordinator; LaKendrea Bush, one of the hospital's breastfeeding employees; and Cristina Latade, a breastfeeding mom holding daughter Adrielle Latade; back row, Dr. Edward Ehlinger, public health metaphysician with National Leadership Academy for Public Health; Tawanda Logan-Hurt, breastfeeding coordinator for Mississispi State Department of Health Northem Region; Dr. Kimberly N. Sanford of Greenwood OB/GYN Associates; and Chris Latade, father of a breastfed child.













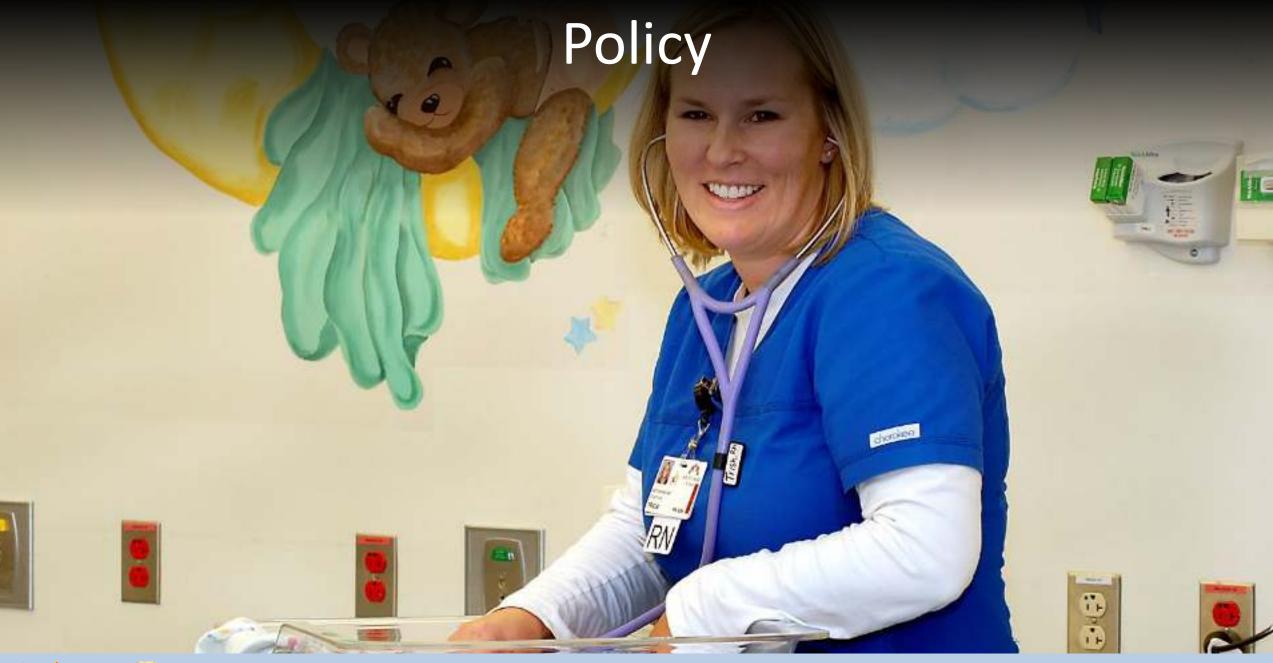


















Good News!





Impact of Baby-Friendly









POLL #3

Barriers to Lactation Support



















Practical Steps





























Sample Policy: Employee Lactation Support in HOSPITALS

Policy Purpose and Scope

Recognizing the well-documented health advantages of breastfeeding for both infants and mothers, this hospital provides a supportive environment for breastfeeding employees to express their milk during work hours. No employee will be discriminated against for expressing milk² during the work period, and reasonable efforts will be made to assist employees in meeting their infant feeding goals while at work, while also assuring that we take good care of our patients and other customers each day.

This policy applies to all employees of the hospital and its wholly owned affiliates, regardless of their classification as exempt or nonexempt, and is included as part of new employee orientation training and family leave planning. This policy supports federal law requiring employers to provide reasonable time and space for breastfeeding employees to express milk during the work period.²

Reasonable Time

Hospital employees are provided reasonable time to breastfeed or express their milk during their work period, preferably during their normal breaks and mealtimes. Employees working 12-hour shifts may need to express milk more often than those working 8-hour shifts and should be accommodated accordingly. If additional break time is needed, employees should negotiate the extra time with their supervisor. Options might include using available PTO time, personal leave, unpaid time, or making up the time as negotiated with their supervisor or unit manager.

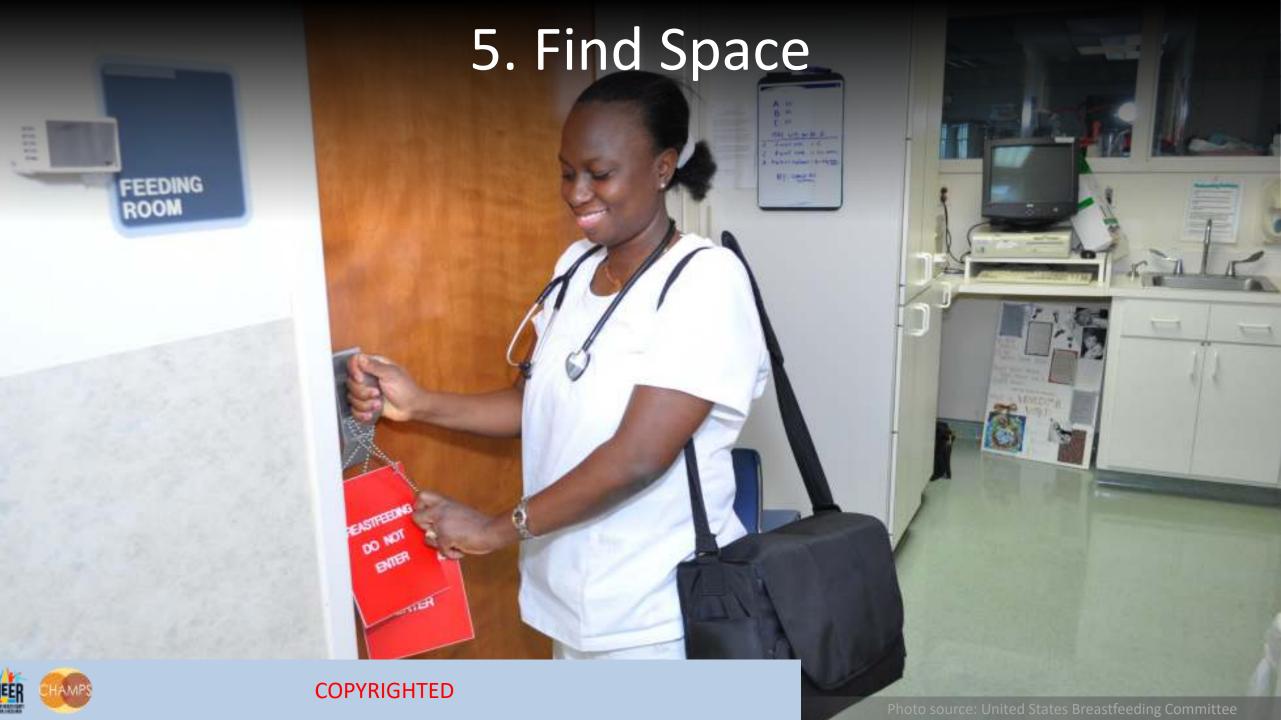
Space to Express Milk

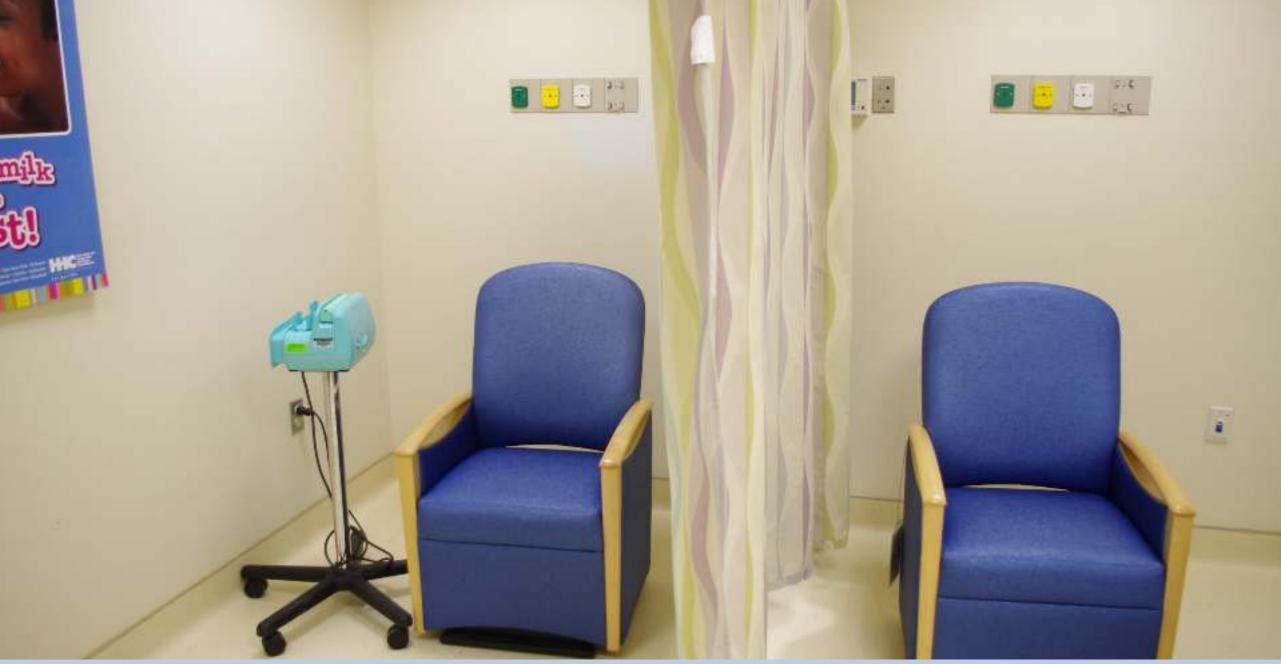
Hospital employees <u>are provided</u> a private place(s), other than a bathroom, that is shielded from view and free from intrusion from co-workers and the public, to express milk. Multiple spaces may be available depending on the size of the campus. The space(s) should be comfortable and sanitary. Space options can include dedicated lactation rooms or flexible options such as vacant patient rooms, vacant exam rooms, <u>conference</u> or consult rooms, or other comfortable locations determined to be private and sanitary. Employees may also use

4. Develop a Policy















Southwest MS Regional Medical Center



















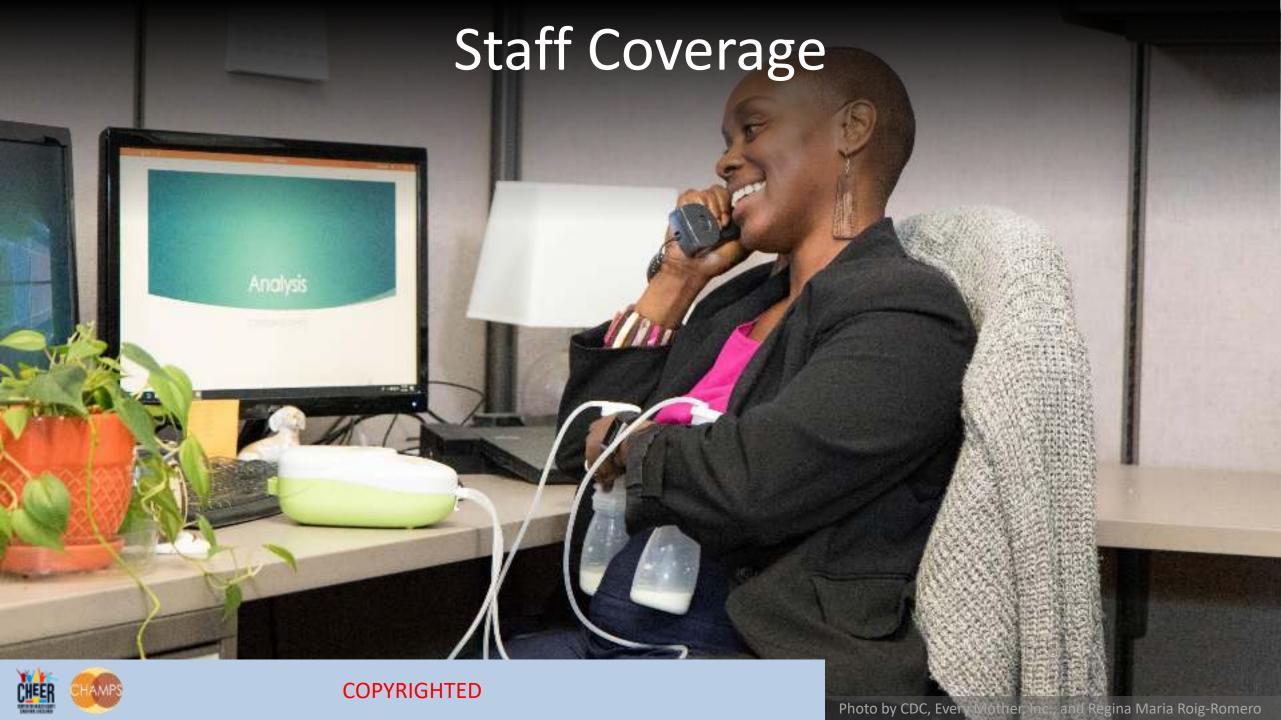
























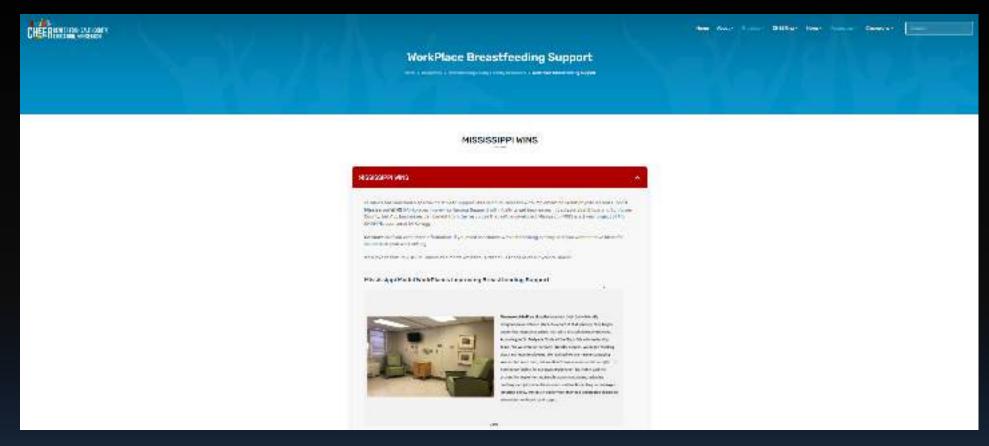
7. Ongoing Feedback







CHAMPS Support



https://cheerequity.org/resources/breastfeeding-baby-friendly-resources/workplace-resources/





HHS Office on Women's Health



womenshealth.gov/supporting-nursing-moms-work









Pumping at Work: How Medical Professionals Can Support Breastfeeding Patients

You can support your patients in continuing to breastfeed after returning to the workplace by helping them get what they need to express or "pump" breast milk during the workday. Many workers in the U.S. return to work relatively soon after childbirth, often due to economic necessity. Your patients may face obstacles that make it difficult to continue breastfeeding. Here's what you need to know to help.

1. Breastfeeding Employees Typically Need Accommodations at Work

Breaks: Breastfeeding workers who are away from their bables during the workday typically need to express milk using a breast pump 2-3 times during an 8-hour work period and 3-4 times during a 12-hour shift to maintain their milk production and avoid health complications, in addition to the 15-20 minutes it takes to express milk, most need additional time to walk to and from the pumping location, set up their pump, clean up, and store their milk. Many work under circumstances where they do not have the flexibility to take breaks without permission, and therefore must request an accommodation to take regular pumping breaks.

Space: Employees who are breastfeeding require private space that is free from intrusion where they can relax and pump. Most do not have an office with a door and require special permission to use a private pumping space, like a lactation room, a vacant office, a conference room, or a supply room. Managers may not understand that breast milk is food that should not be prepared in a bathroom.

Other Accommodations: Pumping at work may also be made easier by employers providing a chair, a flat space like a table, electrical outlets, running water, and access to a refrigerator or permission to store a small cooler. There may be circumstances where other accommodations are needed because workplace conditions pose a risk, such as exposure to harmful substances or the need to wear restrictive safety equipment that may be incompatible with breastfeeding. In these unique circumstances, more substantial accommodations like job restructuring or temporary reassignment may be needed.

2. Employers May Be Legally Required to Provide Lactation Accommodations

Three sources of law may entitle breastfeeding employees to lactation accommodations at work:

<u>Serak Time for Nursing Mothers Law</u>: Provision of the Affordable Care Act that requires employers to provide reasonable break time for employees to express breast milk as needed throughout the worlday, as well as a pumping space that is shielded from view, free from intrasion, and not a bathroom. This law protects only employees who are entitled to receive overtime compensation under federal law and only during the first year after the baby's birth.

Pregnancy Discrimination Act: Federal law requires employers to treat employees who are breastfeeding as well as they treat non-nursing employees, including in the provision of workplace accommodations. Employers are also prohibited from using workplace policies that harm women as a group unless there is no feasible alternative. This means that employers generally should not be permitted to force workers onto suppid leave because they are breastfeeding, but should instead provide them with on-the-job accommodations. Breastfeeding employees must have the same freedom to address lactation-related





Guide for Healthcare Professionals

https://www.pregnantatwork.org/wpcontent/uploads/Breastfeeding-Workplace-Guide-for-Healthcare-providers.pdf

A Better Balance



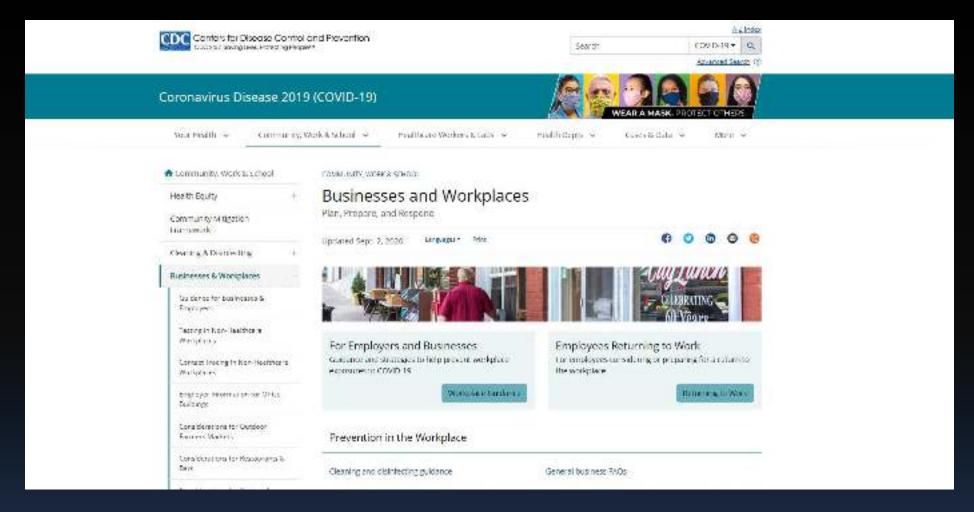
abetterbalance.org/our-campaigns/breastfeeding-while-working/

Open Website





CDC Guidance during COVID-19



https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html







Considerations for Safe Worksite Lactation Spaces During the COVID-19 Pandemic

Breastfeeding Matters!

- Breastfeeding remains important for infants during the COVID-19 pandemic. It is the best source of nutrition for most infants and provides anti-infective properties to protect against many illnesses and diseases.⁴
- threastfeeding can help mitigate some of the health disparities among vulnerable infants and children. Suboptimal breastfeeding poses a greater burden of disease among African American and Hispanic populations.⁷
- It is currently believed that mothers do not transmit the SARS-COVI-2 virus to their infants
 through breastleeding. However, mothers should take precautions to avoid spreading the virus
 to her infant (e.g., handwashing and wearing a face covering).
- Current studies show that breastmilk does not appear to contain the active SARS-COVI-2 virus.¹⁴

General Workplace Safety Considerations¹

- Inspect facility ventilation systems and update or improve as needed.
 - If a designated milk expression area is located in a closet or storage area, ensure that
 the space is well-ventilatest especially if used by more than one employee.
- . Employees should wear masks and maintain social distancing in the workplace.
 - If multi-user milk expression areas are available, ensure appropriate distancing between users with appropriate barriers as needed.
 - · Consider cleaning milk expression areas used by more than one employee more often.
- Employees should wash hands frequently or use hand sanitizer that is at least 60% alcohol.
 Consider touchless hand sanitizing stations.
 - When constructing a new milk expression area, consider a location that is along the plumbing line in the facility to install a sink. Breastfeeding employees can use this to wash their hands before and after expressing milk.
 - Include hand sanitizer and anti-bacterial wipes in all milk expression areas.
 - Encourage employees to wash hands before and after pumping or handling their milk.
 - Allow sufficient break time for employees to wash their hands and clean pump parts.
- Limit using office spaces of others where possible.
 - Consider other locations for expressing milk if the company's factation accommodations
 call for asking employees to express in the office(s) of other workers. Consider a safer
 alternative, such as an unused office, a well-ventilated storage room, or a space
 sectioned off with appropriate barriers.
- Avoid group events and opt for virtual meetings.
 - Consider virtual "back to work" classes or support group meetings for new parents and their childcare providers.

Ohio Department of Health

https://odh.ohio.gov/breastfeeding







Cathy Carothers, IBCLC Every Mother, Inc.

cathy@everymother.org



