



loving support.®

MAKES BREASTFEEDING WORK

## Connecticut WIC Program Breastfeeding Peer Counseling Implementation Plan- 2015 Update for FY 2016 State Plan

### Program Overview:

The Connecticut WIC Program established a hybrid-peer counseling model with support from the USDA WIC Breastfeeding Peer Counseling funding. The two hospital-based WIC peer counseling programs are located in the diverse, urban cities of Hartford and New Haven. The Program also operates WIC clinic-based peer counseling in three local agencies with International Board Certified Lactation Consultants (IBCLC) on staff or contracted to mentor the peer counselors. We successfully implemented a WIC clinic-based peer counseling program in the Bridgeport area FY 2015.

Both the WIC-hospital based and WIC-clinic based models operate using USDA's 10 components to *Loving Support*® *Through Peer Counseling: A Journey Together – For WIC Managers and Loving Support*® *Through Peer Counseling: A Journey Together – For Training WIC Peer Counselors* at their core. Each type of program uses or has adapted protocols originally created by the Hispanic Health Council (HHC) and Hartford Hospital for the program that was established in 1993 with an initial grant award from the Connecticut Department of Public Health (CT-DPH). The following is a brief history and evolution of Connecticut's peer counseling program as it responds to new research and fluctuations in available resources.

### **BREASTFEEDING HERITAGE AND PRIDE: HISPANIC HEALTH COUNCIL AND HARTFORD HOSPITAL PROGRAM**

The *Breastfeeding, Heritage and Pride* (BHP) breastfeeding peer counseling program was initially funded through a grant received by the CT-DPH Department of Public Health in 1993. It continues to be jointly operated by the Hispanic Health Council and Hartford Hospital. In 2005, using USDA WIC Breastfeeding Peer Counseling funds, CT-DPH entered into a contract with the HHC to expand the BHP program to include two additional full time peer counselors and administrative support. A 2004, CDC-funded, randomized, controlled trial of the BHP (*Arch Pediatr Adolesc Med* 2004; 158:897-902) concluded that peer counselors can significantly improve breastfeeding initiation rates and have an impact on breastfeeding rates at 1 and 3 months post partum.

## **2015 Update**

The 10-hour IBCLC position remained filled with Valerie Bozzi, IBCLC, who also manages the peer counseling program at the Yale New Haven Hospital, Breastfeeding Heritage and Pride (BHP) program. We are pleased with the consistency that Val has brought to the hospital based peer programs. In fact, she is facilitating our annual fall peer training/retreat so that all our peer counselors, BHP based and WIC-clinic based have a chance to meet, discuss and refresh and refocus for 2016.

Hartford Hospital (HH), which was the state's first Baby-Friendly hospital, continues to operate the program with one less peer position (this was a HH funded position). Currently, the HHC has all peer positions filled. The Hartford WIC Program, successfully relocated to the HHC location, which has afforded more opportunities for facilitate collaboration and communication. We've attached the most recent quarterly report for convenience.

### **BREASTFEEDING HERITAGE AND PRIDE: YALE NEW HAVEN HOSPITAL PROGRAM**

In 2009, the BHP model of peer counseling was expanded to Yale New Haven Hospital (YNHH). The program was originally established using WIC Nutrition Services and Administration (NSA) funding and was planned to staff one full-time Lactation Specialist, Peer Counseling Coordinator and 2 full-time peer counselors. The program is primarily funded with Connecticut's USDA WIC Breastfeeding Peer Counseling grant and some resources from YNHH. The program has been successfully integrated into the New Haven WIC Program, Yale site and YNHH structure.

## **2015 Update**

In 2015, the program hired and trained a new peer that began in late August 2014. Her training is completed and she is a welcome addition to the program. There have been additional changes in the lactation services at YNHH over 2015 and the IBCLC has been actively involved in educating the new IBCLC manager about WIC peer counseling services and its scope. The most recent quarterly report is attached.

## **WIC BREASTFEEDING PEER COUNSELING: PROVIDING LOVING SUPPORT FOR BREASTFEEDING SUCCESS**

In 2011, the Connecticut WIC Program established a pilot breastfeeding peer counseling program in three (3) WIC local agencies with existing IBCLC's on staff. Planning meetings occurred between October 2010 and January 2011 and the BHP protocol and documentation forms were modified to accommodate the more traditional WIC peer counseling model embedded in a WIC clinic. Connecticut's pilot program, *WIC Peer Counseling: Providing Loving Support for Breastfeeding Success* has been up and running since March 2011. A consultant was hired to provide technical assistance to both the State and local agencies and to provide training to WIC peer counselors.

### **2015 Update**

As indicated in last year's update, two WIC clinic based programs went through significant staffing changes. Fortunately, TVCCA's staffing has remained stable in 2015. The Access program was no longer able to serve participants and therefore the Bridgeport WIC Program (Optimus) agreed to implement the peer program. Optimus' management and breastfeeding coordinator recruited and offered the training to three interested applicants. One peer was hired, and the program's Breastfeeding Coordinator, consultant IBCLC and State Breastfeeding Coordinator, partnered to train the new peer plus an additional interested applicant during the months of September and October 2014. The Bridgeport Program also assisted the State in thinking through the transition to a paper documentation system to a paperless peer module. Fair Haven peer program continues to remain fully staffed. They also submitted an application for a Loving Support Gold Award; however, due to a slight technicality in the application, their application wasn't accepted. We are currently revising our protocols so this unfortunate situation doesn't happen in the future.

The LATCH study continues, therefore, the monthly peer counseling calls are used to discuss progress on the study and training related to the study.

A peer-focused training/retreat is scheduled for late September 2015.

### **Challenges and Opportunities:**

We continue to struggle with timely data collection, due to lack of automation. Happily, we are well on our way to an automated peer counseling module, set to be implemented with our new CT-WIC system in summer 2016! We are hoping to have an opportunity to test out the new screens during our peer retreat this September. Unfortunately, the Bridgeport Program saw some staffing fluctuations in their first year, including the IBCLC and peer. They are actively recruiting for both positions and anticipate training their new hires in October.

## LATCH Study:

The YNHH and HHC BHP programs and the two-current WIC clinic-based Breastfeeding Peer Counseling programs (Fair Haven and TVCCA) are participating in the expanded LATCH **(LATCH Lactation Advice thru Texting Can Help)** study. This study is funded through the USDA Center for Collaborative Research on WIC Nutrition Education Innovations at the USDA/ARS Children's Nutrition Research Center at Baylor College of Medicine (CNRC WIC Center). It will build on the LATCH pilot project and will examine the effectiveness of using texting to provide enhanced support through peer counselors. A description of the pilot LATCH intervention is included below.

**LATCH** was a pilot intervention study conducted by Yale investigators to assess the utility of using a one-way/two-way texting platform as an adjunct tool for breastfeeding peer counselors to provide prenatal and peri-partum support. The intervention included both a texting curriculum and an opportunity for mothers to text peer counselors' breastfeeding questions throughout their pregnancy and post-partum. The primary aim was to decrease the early supplementation of formula. Outcomes assessed included exclusive breastfeeding rates at two weeks post-partum, time to first contact with peer counselor post-delivery, and review of the type of breastfeeding issues raised via text messaging and the resolution. In addition, lessons learned from this pilot, including compliance with HIPPA, helped to determine the likelihood that this intervention may be implemented in WIC programs state-wide and nationally. The study was conducted at Yale New Haven Hospital and Fair Haven Clinic in New Haven, CT. This study was possible by CTSA Grant Number UL1 RR024139 from the National Center for Research Resources (NCRR), a component of the National Institutes of Health (NIH), and NIH roadmap for Medical Research. Its contents are solely the responsibility of the authors and do not necessarily represent the official view of NCRR or NIH. In addition, Nurit Harari, MD (Principal Investigator) is supported by the Robert Wood Johnson Foundation Clinical Scholar program.

## GENERAL PROGRAM DESCRIPTION

A description of the Connecticut WIC Program's model, which incorporates the *FNS Model for a Successful Peer Counseling Program*, follows.

### 1. Appropriate Definition of Peer Counselor

The Connecticut WIC Program's definition of a breastfeeding peer counselor is as follows:

- Paraprofessional (i.e., no academic training in breastfeeding)
- Recruited and hired from target population (ideally, a current or past WIC participant)
- Available to WIC clients outside usual clinic hours and outside the WIC clinic environment
- Breastfeeding experience (ideally, a minimum of 6 months)

## **2. Designated breastfeeding peer counseling program managers/coordinators at State and/or local level**

The State WIC Breastfeeding Coordinator will be responsible for ensuring that the USDA WIC Breastfeeding Peer Counseling funds are used to expand WIC breastfeeding support services through peer counseling.

Continue to work through administration at both HHC/Hartford Hospital and Yale New Haven Hospital. In FY 2013, the Yale New Haven Hospital program contract was added to the existing WIC Local agency contract to streamline reporting and improve communications. In FY 2014, staff turnover at Access (WIC clinic-based), State agency identified a new location for peer services in Bridgeport. The Bridgeport program began in 2015.

The State WIC Breastfeeding Coordinator maintains contact with subcontractors Leticia Marulanda (HHC) and now, Katie Donahue (YNHH) with the retirement of Patricia DeWitt (YNHH) in fall 2015, regarding the status of the program, and quarterly reports are required to document progress. We are piloting quarterly for the WIC clinic-based peer counseling programs. Reports will become mandatory in 2016.

## **3. Defined job parameters and job descriptions for peer counselors**

- The breastfeeding peer counselors are community women who have experience in successfully breastfeeding a child for a minimum of six months. They are committed to encouraging women to initiate and continue breastfeeding, and supporting those who decide to do so, so that they may have the best chance of success and a positive experience. They are responsible for positive role modeling, providing information, encouragement, and knowledgeable support and in person assistance to pregnant women and breastfeeding mothers.
- Peer counselors provide services through a combination of telephone contacts and home and hospital visits, according to program protocols (see item 6, below).
- Peer counselors also participate in promotional and advocacy activities.
- Peer counselors receive ongoing training and continuing education as described in item 10.

## **4. Adequate compensation and reimbursement of peer counselors**

The BHP peer counselors currently receive approximately \$17.00 per hour. Since its inception in 1993, the BHP Program has tried a number of different options for hiring and compensation. The hiring of full time peers who receive a benefit package and adequate compensation has resulted in the best retention rates and, ultimately, the operation of an efficient and effective program. The WIC-clinic based peers receive \$10.00-\$12.00 per hour and are required to work a minimum of 10 hours per week.

## 5. Training of appropriate WIC State/local peer counseling management and clinic staff

- The State agency facilitated payment to send WIC clinic-based peers to CT-LLL annual Healthcare Provider Seminar in March 2015.
- Additionally, all WIC-clinic based IBCLC/Breastfeeding Coordinators attended 2015 CT-LLL Healthcare Provider Seminar with NSA funds.
- The State agency met as needed with HHC and Yale sub-contractors in 2015.
- State Breastfeeding Coordinator assisted Bridgeport WIC staff with training of peer counselor during 2015.
- LATCH study discussed on monthly peer counseling calls.
- Peer counselors provided input on development of CT-WIC peer module including updates to content and context of documentation.
- Peer Retreat scheduled September 2015 (BHP and WIC clinic-based)

## 6. Establishment of standardized breastfeeding peer counseling program policies and procedures at the State and local level as part of Agency nutrition education plan.

- **Compensation and reimbursement of peer counselors:** Peer counselors will be compensated at a rate that will promote retention.
- **Training:** Peer counselors will be trained using the "*Loving Support* through Peer Counseling" curriculum as well as the BHP training curriculum.
- **Documentation of client contacts:** All participant contacts, including unsuccessful attempts, will be documented.
- **Referral protocols:** See specific protocols for referral procedures.
- **Confidentiality:** The Participant Consent form will be read by or to the participant before the initiation of services. Both hospital and WIC-clinic based programs follow WIC confidentiality regulations.

## 7. Adequate supervision and monitoring of peer counselors On-site Breastfeeding Coordinators or Lactation Consultants

- initial and continued training of peer counselors;
- assignment of referrals;
- regular guidance of patient/ participant care; provision of direct care for complex cases based on program protocols;
- consult as necessary to Program Directors and reporting regularly to Program Directors;
- providing first-line problem solving for peer counselors, and triaging when necessary to program directors and/or medical consultants;
- provision of public education sessions to promote and inform community members about breastfeeding and;
- shared review of program participant charts for accuracy and thoroughness.

**8. Establishment of community partnerships to enhance the effectiveness of a WIC peer counseling program.**

The BHP program model is designed to benefit the community served through a partnership between Hartford Hospital, Hispanic Health Council and the Hartford WIC Program combining the expertise and resources of each institution to provide an integrated breastfeeding peer counselor program. The BHP replication in New Haven also integrates this partnership approach. The YNHH BHP program has its offices co-located with the WIC Program site at Yale New Haven Hospital. In the WIC clinic-based programs, peer counselors have relationships with area birthing facilities and have also worked closely with hospitals involved in the Connecticut Ten Step Collaborative, the continuation of the successful, Connecticut Breastfeeding Initiative (CBI), a CPPW project funded by CDC to assist 10 maternity facilities in Connecticut in Baby-Friendly designation.

**9. Provision of the following to peer counselors:  
Timely access to breastfeeding coordinators and other lactation experts for assistance with problems outside of peer counselor scope of practice**

In Hartford and New Haven, both BHP Program Lactation Consultants, and the Hartford Hospital Program Director are IBCLC's. Both program's have access to medical consultants who are available whenever assistance is needed.

Peers are mentored by staff IBCLC's employed by WIC local agencies as Nutritionists in the two (soon to be three again) WIC clinic-based sites. WIC IBCLC's time are partially funded by the peer counseling grant. WIC IBCLC's have access to medical support as needed through their host agencies. CT-DPH contracts as needed with a consultant IBCLC to provide technical assistance and training to peers.

The following BHP Peer Counselor Performance Plan addresses:

- **Regular, systematic contact with supervisor.**
- **Participation in clinic staff meetings and breastfeeding in-services as part of the WIC team**
- **Opportunities to meet regularly with other peer counselors.**

<b>BHP Peer Counselor Performance Plan Goals:</b>
Successfully complete peer counselor training process; pass exam with minimum of 80%; Demonstrate competencies based on supervisor observation
Follow-up on all prenatal referrals within 1 week of assignment; post partum within one day
Home visits provided according to the following protocols: <u>Prenatal</u> : Provide all prenatal clients with minimum of one prenatal visits; <u>Hospital</u> : Provide all post partum clients with minimum of one in-hospital visit, additional visits

based on need of client <u>Post partum</u> : (minimum of) once within 24 hours of hospital discharge; once within 48 hours of hospital discharge; once within two weeks of hospital discharge; once within six weeks of hospital discharge; provide telephone calls between visits, and additional visits and telephone calls according to need
Content of all visits according to training and protocols provided - based on program forms
Thorough and accurate documentation of all contacts and attempted contacts (see attachments)
Participation in biweekly meetings with program lactation consultant and monthly meetings with program co-director; maintain regular communication with program lactation consultant according to protocol and as needed
Participation in monthly BHP staff meetings for training and coordination activities
Communication regarding clients with hospital clinicians as needed

<b>WIC clinic Peer Counselor Performance Plan Goals:</b>
Successfully complete peer counselor training process; Demonstrate competencies based on supervisor observation
Follow-up on all prenatal referrals within 1 week of assignment; post partum within one day
Content of all visits according to training and protocols is provided based on program forms
Thorough and accurate documentation of all contacts and attempted contacts
Participation in required (weekly) meetings with WIC IBCLC and supervisor as needed; maintain regular communication with IBCLC and other WIC staff according to protocol and as needed
Participation in monthly Peer Counseling training conference calls; prepare and facilitate one call for other peers, IBCLC's and state staff each year
Engage in community outreach per instructed by WIC IBCLC mentor or clinic supervisor to foster continuity of care for peer counseling participants.

The State agency modified the BHP performance plan goals for the WIC clinic-based peer counseling program 2013. They were finalized reviewed with the clinic-based programs in 2014. They will be implemented and evaluated in 2016, after CT-WIC implementation.

**10. Provision of training and continuing education of peer counselors.**

- Peer counselors receive standardized training using "*Loving Support through Peer Counseling*" training curriculum.
- Peer counselors receive ongoing training at regularly scheduled meetings.

- The BHP peer counselors participate in monthly BHP staff meetings for training and coordination activities. They are expected to participate in any training activities sponsored by the Hartford WIC Program. In New Haven, the Peer Counselor Coordinator/IBCLC continues to update her peers on the Loving Support platform modules. A variety of outside trainings occurred in 2015 including the annual CT La Leche League (LLL) Healthcare Providers' Seminar.
  
- 2014 Trainings included:
  - November Conference call to discuss LATCH study
  - LATCH training- May 29, 2014
  - May 2014- New Peer Training (4 days)
  - 6/13/14 Statewide meeting
  
- 2015 Trainings include:
  - September-December 2014: New Peer Training YNHH-BHP
  - September-October 2014: New Peer Training (4 days) Bridgeport
  - Monthly Conference calls to discuss LATCH study progress
  - WIC clinic-based and hospital based peers attended CT-LLL Healthcare Provider Seminar- March 2015
  - WIC clinic based peers attended- WIC Breastfeeding Coordinators' quarterly meetings
  - Opportunities to attend WIC Statewide Meetings
  - Peer Retreat- September 2015
  - October 2015 New Peer Training (4 days) Bridgeport