"Heart of the Rockies Breastfeeding Project"

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Category: Breastfeeding

Chaffee County received the Colorado Women, Infants and Children (WIC) Breastfeeding Supportive Communities Grant. The goal of the project was to increase the duration and exclusivity of mothers and babies breastfeeding in Chaffee County.

The Heart of the Rockies Breastfeeding Project is a multifaceted approach emphasizing the following strategies:

- Create and implement a system for establishing a breastfeeding plan.
- Embed a notification system at Heart of the Rockies Regional Medical Center (HRRMC) to increase access to professional support to new moms 3-5 days postpartum.
- Work with local employers to remove barriers to breastfeeding for moms returning to work (in keeping with current Colorado law).
- Stabilize and formalize the Chaffee County Breastfeeding Coalition that will be the vehicle for implementing these systems.

Heart of the Rockies Breastfeeding Project

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Community Need

Getting moms through the first few days of exclusive breastfeeding was the project's first hurdle.

Heart of the Rockies Regional Medical Center (HRRMC), our local hospital, has a breastfeeding initiation rate of 94%. Chaffee County data from the Colorado Women, Infants and Children (WIC) Program shows only 15% of WIC mothers are exclusively breastfeeding at one week postpartum. It is clear that continuity of lactation care needs improvement.

Returning to work and facing barriers in the workplace is a leading reason working moms stop breastfeeding early or do not initiate breastfeeding at all. Some Mothers report being hesitant to ask for the space, time and support to breastfeed or pump for fear of losing their job.

Due to the geographical location of Chaffee County, health professionals have limited access to continuing education, that is dedicated to lactation.

National Initiatives, like the CDC Guide to Strategies to Support Breastfeeding Mothers and Babies and the 2011 Surgeon General's Call To Action to Support Breastfeeding , provided focal points and evidence based strategies used by the project to support mothers and make breastfeeding easier in Chaffee County.

Project Goals

- Working with expectant moms, served by organizations such as WIC, Nurse-Family Partnership, Early Head Start (EHS), HRRMC, Public Health's Healthy Start Program and La Leche League to establish a breastfeeding plan, which includes a plan for returning to work or school.
- Offering continuity of lactation care (by the above mentioned agencies) to new moms 3-5 days postpartum by embedding a release form and notification system at HRRMC.
- Working with local employers to remove the barriers of breastfeeding moms returning to work (in keeping with current Colorado Law).

The Chaffee County Breastfeeding Coalition was revitalized and stabilized in a collaborative effort by Chaffee County Public Health, the Chaffee County Early Childhood Council (CCECC), HRRMC and WIC, and were the vehicle for implementing the project.

Target Audience

- Mothers & Their Families
- Health Care Professionals
- Employers
- Community of Chaffee County

Mother to Mother Support World Breastfeeding Week, Big Latch On Event that took place at the Salida Farmer's Market.

Community Partners

- Breastfeeding Mothers
- Chaffee County ECC
- Chaffee County EHS
- Chaffee County Public Health
- Chaffee County Social Services
- Childbirth Educator
- HRRMC
- International Board Certified Lactation Consultant (IBCLC)
- Midwife
- Nurse-Family Partnership
- Perinatal Specialist, retired
- Salida Family & Pregnancy Center
- Salida La Leche League
- West Central Mental Health

Ready, Set, Latch. World Breastfeeding Week, Big Latch On Event

Salida WIC Office - Mother's Room

Project Activities

1. Stabilized and formalized the Chaffee County Breastfeeding Coalition.
2. Embedded release form and notification system that is used at the HRRMC for continuity of lactation care with 7 organizations that serve mothers prenatally through child's toddler years.
3. Developed and distributed Chaffee County Breastfeeding Resource Guide.
4. Developed breastfeeding plan (including working/school plan) with evidence based accompanying teaching guide that was embedded into 7 agencies that serve 99% of mothers delivering in Chaffee.
5. Stabilized La Leche League Salida that had 68 contacts with mothers in the last year.
6. Offered Lactation Journal Club, via web, for professional development.
7. Worked with 15 worksites to identify opportunities that encourage and protect breastfeeding.

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Breastfeeding Coalition works with employers to benefit mothers.
Mountain Mail Newspaper Article
July 29th, 2014

Project Evaluation

The collaborative effort of community partners met or exceeded all of the project goals.

- ✓ Mothers are prepared during pregnancy with information they need to get off to a good start with breastfeeding. Then mothers have access to a system of support once they're discharged from the hospital to help them with problems or barrier that may keep them from reaching their breastfeeding goals.
- ✓ Continuity of lactation care begins with the breastfeeding plan embedded in 7 Chaffee organizations that have long-term relationships with Chaffee mothers and continues with the birth notification (via the embedded HRRMC release form) to the agency that mother is currently working with or the offer of mother-to-mother support from La Leche League or Bosom Buddies.
- ✓ Barriers to returning to work have been decreased as mothers complete the "working plan" portion of the breastfeeding plan with her support agency. Fifteen worksites have been assessed for current policies and practices. Seven, of those 15 sites, have formalized their support to breastfeeding employees with a policy and 3 have Mother's Rooms.

Future of Project & Sustainability

Continuity of lactation care, breastfeeding plan, teaching guide and Breastfeeding Resource Guide have been embedded in agencies' and the local hospital's current work and will continue without WIC funding. The work with employers will continue, but on a limited bases as funding is secured to expand the program.

The Coalition will continue with the existing officers being funded by their agencies. Coordinator funding will end September 30th , but individual has agreed to continue on a volunteer basis for 10 months while funding is secured.

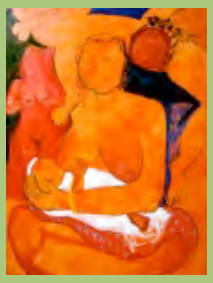
A letter of intention has been submitted. The grant, with a breastfeeding friendly environment strategy, will be submitted by September 30, 2014.

Project coordinator will explore Business Case for Breastfeeding funding from the Colorado Breastfeeding Coalition.

Acknowledgements

The project coordinator gratefully acknowledges support from the UAACOG and funding from the Colorado WIC Program.

Breastfeeding Resource Guide



Chaffee County

Breast Pumps

Salida Medical Supply 1535 G Street, Salida (719) 539-2704
Hospital grade Medela Lactina for $60/month or personal kit (with instructional video) for $40.

Ameda Breastfeeding Products, Hollister Incorporated (866) 99-AMEDA or (800) 624-5369 www.ameda.com
Medela Incorporated (800) 435-8316 www.medela.us
Whittlestone (877) 608-MILK or (707) 748-4188 www.whittlestone.com
Check with your insurance provider! Some insurance companies are paying for the purchase of a breast pump.

Certified Lactation Counselor (CLC)

Elaine Kuepper (913) 980-4778 Elaine_cjl@yahoo.com

Chaffee County Breastfeeding Coalition

Coordinator: Lorraine Redmond, BS, IBCLC (719) 207-5008 Lorraine.ibclc@gmail.com
Chair: Cassondra Franco (719) 530-2562 cfranco@chaffeecounty.org
Chair Elect: Alli Gober (719) 221-3937 salidamidwife@gmail.com
Secretary: Brittany Kemp (719) 239-7099 brittjkemp@gmail.com
The Chaffee County Breastfeeding Coalition's mission is to protect, promote and support breastfeeding through education, providing tools and resources, outreach and advocacy in our community.

Colorado Breastfeeding Coalition

www.cobfc.org
Provides information and resources for providers, for mothers, in the workplace and for local coalitions. The Coalition completed a series of four YouTube videos designed to motivate, educate and inspire moms to keep breastfeeding after returning to work and how and why employers should support mothers.

¿Habla Español?

Maggie Falconi (719) 530-5271 home or (719) 487-5676 cell mfalconi@salidaschools.org
Alli Gober (719) 221-3937 salidamidwife@gmail.com
Las madres que hablan espanol que estan buscando a informacion y apoyo por la lactancia maternal.

Healthy Start – Nurse Home Visitor Program

Cassondra Franco (719) 530-2562 cfranco@chaffeecounty.org
Emily Anderson (719) 530-2566 eanderson@chaffeecounty.org
"A nurse in the home helping your family achieve a healthy start." Healthy Start is a service provided to all families in Chaffee County. Through this program we serve new families (birth through 12 months) regardless of income and number of children. We feel we have something to offer every family, regardless if it is their first or fifth child. The nurse home visitor meets with the family in their home on an average of 10 times throughout the families' first year, with additional visits scheduled as needed. The services in this program include: breastfeeding education and support, what to expect in the early days, safe sleep, depression screening and referral, Bright Beginnings, normal newborn behavior, developmental milestones, car seat inspections, Cavity Free at 3, community resources, nutrition, exercise, birth control, immunizations, infant safety, tobacco cessation education and assistance and solid food introduction.

Heart of the Rockies Regional Medical Center (HRRMC), Family Birth Center

www.hrrmc.com Call the Family Birth Center at (719) 530-2277 for class schedule.

The HRRMC Family Birth Center is now open seven days per week, 24 hours a day; call if you need support with your baby or breastfeeding. HRRMC offers varied formats of Childbirth Classes each year--full day weekend classes, three-week series and short version express classes. Classes include pregnancy topics such as pre-labor, labor, birth, comfort measures, nutrition, interventions, postpartum care, and breastfeeding. The breastfeeding section focuses on the benefits of breastfeeding for both child and mother, importance of first feedings, proper latch, positioning, possible problems that may occur and support available after going home from the hospital.

International Board Certified Lactation Consultant (IBCLC)

To find qualified IBCLCs: www.ilca.org

Local IBCLCs:

Lorraine Redmond, BS, IBCLC (719) 207-5008 Salida

Janet Krein, PA-C, M.S., IBCLC (928) 707-0335 Pediatric Associates of Canon City

Geraldine Davis, IBCLC (719) 584-4581 Parkview Medical Center, Pueblo

IBCLC's are health-care providers whose primary focus is providing breastfeeding assistance. They provide a variety of specialized services including individual consultations for unusual breastfeeding situations, care plans developed in collaboration with other health–care providers, breastfeeding class sessions, and instruction in the use of specific breastfeeding products.

La Leche League (LLL)

Local La Leche League Leaders:

Megan Juba (719) 539-9242 meganmjuba@yahoo.com

Lorraine Redmond (719) 207-5008 Lorraine.ibclc@gmail.com

www.llli.org or www.facebook.com/lalecheleaguesalida

La Leche League is an international non-profit organization that offers mother-to-mother support for breastfeeding mothers. The general purpose is to help mothers learn to breastfeed their babies, to encourage good mothering through breastfeeding to stimulate the optimal physical and emotional growth of the child and the development of close family relationships and to have discussion on related subjects. Local Group Leaders are volunteers who have nursed their own babies and have learned to help other mothers with breastfeeding questions and problems.

La Leche Leauge of Salida meets the second Monday of each month, from 10 to 11:30 am, upstairs in the Sunroom of the Presbyterian Church (across from Safeway, Salida). Expectant women and moms with babies welcome. All meetings are free and open to the public.

Mothers' Milk Bank, Denver Colorado

(303) 869-1888

The Mothers' Milk Bank Colorado safely screens, collects, processes and dispenses donated human milk as a community service, providing human milk to babies whose own mothers cannot supply the milk to meet their baby's needs.

Nurse-Family Partnership (NFP)

Judy Wagner, RN, MA, LPC (719) 530-2568 or (719) 221-9396 jwagner@chaffeecounty.org

A free maternal and early childhood program that provides the support and information moms need to have a healthy pregnancy, improve their child's health and development and become more economically self-sufficient. This program is for first time moms.

Women, Infants & Children (WIC)

(719) 539-7413 heidi.lovett@uaacog.com

WIC is a special supplemental nutrition program that serves pregnant women, postpartum women and children up to their fifth birthday. A major goal of the WIC program is to improve the nutritional status of infants; WIC mothers are encouraged to breastfeed their infants and those who do are provided information through counseling and breastfeeding educational materials. Breastfeeding mothers receive follow-up support and are eligible to participate in WIC longer than non-breastfeeding mothers. Mothers who exclusively breastfeed their infants also receive an enhanced food package. Breast pumps are available to help support the initiation and continuation of breastfeeding.

Other Helpful Online Breastfeeding Resources

www..bestforbabes.org

www.breastfeedingonline.com

www.kangaroomothercare.com

www.kellymom.com

www.workandpump.com

www.askdrsears.com

HEART OF THE ROCKIES REGIONAL MEDICAL CENTER
FAMILY BIRTHING CENTER
1000 Rush Drive P.O. BOX 429
SALIDA, CO 81201
PHONE #719-530-2277, FAX #719-530-2279

AUTHORIZATION TO RELEASE NAME, CONTACT INFORMATION AND DATE OF DELIVERY OF MY INFANT

PATIENT: _____ _____ _____ _____
(Name) (SSN) (Birth date) (Delivery date)

GENERAL AUTHORIZATION: I authorize the above named healthcare provider to release my name, contact information and date of delivery to the organization or agency marked on this request. I understand that the purpose of this release is that the organization or agency may contact me regarding breastfeeding education and support between 3 and 5 days after delivery.

PREFERRED MEANS OF CONTACT: I specifically authorize the release of the following means of communication:

☐ **Landline**_____ ☐ **Cell number**_____

☐ **Text** ☐ **Email address**_____

Please mark the agency or source of breastfeeding support that you are already working with or would like to be connected with. Please mark only one.
( ) PUBLIC HEALTH "HEALTHY START"
( ) NURSE-FAMILY PARTNERSHIP
( ) CHAFFEE COUNTY EARLY HEAD START
( ) SALIDA PREGNANCY CENTER
( ) WIC (WOMEN, INFANTS & CHILDREN)
( ) LA LECHE LEAGUE
( ) BOSOM BUDDY, A MOM-TO-MOM MENTOR

USE OF COPIES: A copy of this form which shows my signature ( ) may ( ) may not be used with the same effectiveness as an original.

_____
Signature of Patient or Designated Representative Date

WITH YOUR SIGNATURE ABOVE, YOU ARE AUTHORIZING HRRMC TO SEND YOUR INFORMATION TO AN UNSECURE FAX OR LEAVE A PHONE MESSAGE AND RELEASING HRRMC FROM ANY LIABILITY IF THIS INFORMATION IS SEEN OR HEARD BY ANYONE OTHER THAN THE INTENDED PARTY(IES).

My Breastfeeding Plan

My Breastfeeding Goals

I plan to **exclusively** breastfeed my baby for _____ months (exclusive means no formula, water, or solid foods, with the exception of oral rehydration solution, or drops/syrups of vitamins, minerals or medicines).

I plan to breastfeed my baby for _____ months/years.

My Prenatal Plan

	Am doing	Plan to do
Attend at least one La Leche League meeting. La Leche League meets monthly in Salida.	☐	☐
Watch a breastfeeding video to get comfortable with it. Videos are available at the Salida and Buena Vista Pregnancy Centers, libraries, or online.	☐	☐
Connect with a woman who has successfully breastfed to ask her about her experience.	☐	☐
Get a copy of the local Breastfeeding Resource Guide.	☐	☐
Talk to my family, husband/partner, and friends about my plans to breastfeed and how they can support me.	☐	☐
Talk to my employer about a return-to-work policy that supports breastfeeding employees.	☐	☐

Concerns I have:

_____
_____
_____
_____
_____

My Hospital Plan

- ☐ I would like my baby placed skin-to-skin immediately after delivery (including caesarean birth if possible).
- ☐ I would like my baby on my chest (skin-to-skin) until the end of the first feeding.
- ☐ I would like my baby to remain with me on my chest to encourage him/her to self-attach for his/her first breastfeeding (with assistance from me/nurse as I see appropriate). Please do not touch my breasts without my permission.
- ☐ If I am unable to hold my baby skin-to-skin after birth, I would like my partner to hold the baby skin-to-skin.
- ☐ I would like to learn how to hand express my milk.
- ☐ I would like my baby in the room at all times so I can learn his/her feeding and sucking cues.
- ☐ My goal is to exclusively breastfeed my baby. Please do not give my baby any supplements other than breast milk unless medically necessary. If it is considered necessary, please speak with me as we would like to discuss this first with our doctor.
- ☐ I do not want my baby to have any pacifiers or bottles. I would like all my baby's sucking to be done at my breast.

Concerns I have:

_____

_____

_____

My Trouble-shooting Plan

If I have questions/concerns, I will contact:

1. _____ @ _____
2. _____ @ _____
3. _____ @ _____

I will remind myself that breastfeeding, although natural, is a learned skill. I will not hesitate to ask for help!

DON'T WAIT!

Get help right away if:

⇒ You have any breast or nipple PAIN

⇒ Your baby does not have yellow poop by day 5

⇒ You feel like something just isn't right, trust your maternal instinct!

24 HOUR SUPPORT

Heart of the Rockies Regional Medical Center (HRRMC) 719-530–2277 and

Salida La Leche League Leaders: Megan 719-539-9242 or Lorraine 719-207-5008

My Working Plan

What is the maximum maternity leave I will be able to take? _____

Who will care for my baby while I am at work? _____

How will my child care provider support me through coordinating feedings before, during and after my workday? _____

_____

_____

How will I gradually return to work? _____

Where can I express my milk and where can I store my milk? _____

_____

Times when I can realistically express my milk at work:

1._____

2. _____

3. _____

4. _____

Milk storage guidelines

5 hours at room temperature

5 days in the refrigerator

5 months in the freezer

Type of breast pump I can use: _____

Things I will discuss with my supervisor:_____

_____

Potential Barriers

_____

_____

_____

Potential Solutions

_____

_____

_____

Your Rights

Colorado Workplace Accommodations for Nursing Mothers Act establishes a standard for an employer to:

- Provide reasonable unpaid break time, or allow an employee to use paid break and/or meal time, to express breast milk for her nursing child for up to 2 years after the child's birth
- Make reasonable efforts to provide a nursing mother with a private location in close proximity to her work area (other than a toilet stall) in which to express milk
- Not discriminate against women for expressing milk in the workplace

My Breastfeeding Plan

My Breastfeeding Goals

I plan to **exclusively** breastfeed my baby for _____ months (exclusive means no formula, water, or solid foods, with the exception of oral rehydration solution, or drops/syrups of vitamins, minerals or medicines).

Research shows that the longer a mother exclusively breastfeeds her baby, the more health benefits the baby and the mother receive. The American Academy of Pediatricians (AAP) recommends exclusive breastfeeding for about the first 6 months of a baby's life, followed by breastfeeding in combination with the introduction of complementary foods until at least 12 months of age and continuation of breastfeeding for a long as mutually desired by mother and baby.[1]

I plan to breastfeed my baby for _____ months/years.

My Prenatal Plan

Attend at least one La Leche League meeting. La Leche League meets monthly in Salida.

Breastfeeding, especially in the beginning, can be challenging. Mothers who find support from other breastfeeding mothers tend to have a more successful and enjoyable breastfeeding experience.[2] *Good* ***prenatal*** *education about breastfeeding increases the chances of breastfeeding successfully.*[3] *Waiting to become educated until after the baby is born is often too late.*

Watch a breastfeeding video to get comfortable with it. Videos are available at the Salida and Buena Vista Family and Pregnancy Centers, libraries, or online.

The more a mother understands about the process and mechanics of breastfeeding BEFORE having a baby, the easier it will be once the baby arrives. Women can earn "baby bucks" or "points" at the Salida and Buena Vista Family and Pregnancy Centers for watching these videos.

Connect with a woman who has successfully breastfed to ask her about her experience.

Direct moms to Beth ,at the Salida Family and Pregnancy Center 719-539-7436, to be connected to a Bosom Buddy (a mom-to-mom mentor)

Get a copy of the local Breastfeeding Resource Guide.

The local Breastfeeding Resource Guide is attached to this document. Please go over it with the woman, pointing out some resources that she might want to use.

Talk to my family, husband/partner, and friends about my plans to breastfeed and how they can support me.

Many women stop breastfeeding because their parents, partner, or friends discourage them or tell them that formula feeding is easier. A woman who wants to successfully breastfeed must talk to her partner and family about how they can support her.[4,5,6]

Talk to my employer about a return-to-work policy that supports breastfeeding employees

With the right planning, information, and support, combining breastfeeding with work is easily achievable. It is important to talk to the employer during the 1st or 2nd trimester. There are laws in place to protect breastfeeding women, and often employers have breastfeeding policies. If they don't have a policy, it is vital to start the conversation. See the last page of this document to help the women develop a more detailed work plan.

My Hospital Plan

I would like my baby placed skin-to-skin immediately after delivery (including caesarean birth if possible).

Skin-to-skin contact immediately after birth helps babies to stabilize their temperature, breathing, heart rate, and blood sugar levels. It also encourages successful breastfeeding, and the baby's hand and mouth contact with the woman's belly and breasts stimulates maternal oxytocin to enhance milk let-down, bonding and increases uterine contractions that reduce maternal bleeding.[7,8,9,10]

I would like my baby on my chest (skin-to-skin) until the end of the first feeding.

Unless the baby is in distress, there is generally no reason to remove the baby from the mother's chest to do standard newborn procedures. Weight and length measurements can wait until after the first feeding.[11]

I would like my baby to remain with me on my chest to encourage him/her to self-attach for his/her first breastfeeding (with assistance from me/nurse as I see appropriate). Please do not touch my breasts without my permission.

Research shows that, if left undisturbed, a healthy newborn baby will take up to 1-2 hours to orientate toward the breast, attach, and start to breastfeed. Babies affected by medications during labor may take a bit longer. Allowing the baby to self attach (with assistance from the mom or nurse as she feels appropriate) ensures that the baby learns to hold his/her tongue and mouth in the correct position to effectively breastfeed.[12, 13]

If I am unable to hold my baby skin-to-skin after birth, I would like my partner to hold the baby skin-to-skin.

Research shows that the baby can be soothed and calmed effectively by being skin-to-skin with someone other than the mother.[14]

I would like to learn how to hand express my milk.

Hand expression is one of the most effective ways of removing milk from the breast, especially in the beginning when a breast pump is not likely to effectively remove colostrum. Hand expressing milk could be useful if the baby is having trouble latching on, if the baby cannot breastfeed within 6 hours of birth, or if the mother becomes engorged. Watch the Stanford School of Medicine, 7 minute, video on hand expression: http://newborns.stanford.edu/Breastfeeding/HandExpression.html

I would like the baby in the room at all times so I can learn his/her feeding and sucking cues.

Early, frequent breastfeeding is the single factor that has consistently been shown to support a good start to breastfeeding. Research shows that breastfeeding in response to early feeding cues (as opposed to a timed or scheduled feedings or waiting for the baby to start crying) helps prevent engorgement, decreases incidence of sore nipples, helps to ensure milk supply matches baby's appetite, decreases the incidence of jaundice, increases the rate of baby weight gain and increases the duration of breastfeeding.[15, 16]

My goal is to exclusively breastfeed my baby. Please do not give my baby any supplements other than breast milk unless medically necessary. If it is considered necessary, we would like to discuss this first with our doctor.

Human milk provides all of the fluid and nutrients necessary for optimal infant growth. Research shows that routine supplementation of healthy, term newborns with water, glucose water, or formula is unnecessary and may interfere with establishing normal breastfeeding and protective intestinal bacteria. Supplementation can affect your milk supply, affect your baby's bowel flora, sensitize your baby to allergens and interfere with your baby's weight gain.[17, 18]

I do not want my baby to have any pacifiers or bottles. I would like all my baby's sucking to be done at my breast.

Research has shown that the use of artificial nipples in the neonatal period is detrimental to exclusive and overall breastfeeding. Bottle-feeding requires very different tongue and jaw movements and has a very different milk flow to that of breastfeeding. When supplemental feedings are medically necessary, cup or spoon feeding has been shown to be safe for both term and preterm babies and may help preserve breastfeeding for babies requiring multiple supplemental feedings.[19]

My Trouble-shooting Plan

If I have questions or concerns, I will call:

Use the Local Breastfeeding Resource Guide to fill in this section.

I will remind myself that breastfeeding, although natural, is a learned skills. I will not hesitate to ask for help!

Whether the woman has 5 babies or this is her first, breastfeeding is a skill to be learned. Even if she has breastfed before, she has never breastfed this *baby. Let her know it is important not to give up when times are hard, especially in the beginning. There are many resources available to help them through any tough breastfeeding issues.*

24 HOUR SUPPORT

Heart of the Rockies Regional Medical Center (HRRMC) 719– 530–2277 and

Salida La Leche League Leaders: Megan 719-539-9242 or Lorraine 719-207-5008

Both the hospital and La Leche League offer 24 hour support to breastfeeding woman. Please let the woman know that it is absolutely ok to call at any hour if they are having breastfeeding troubles.

DON'T WAIT!

Get help right away if:

⇒ You have any breast or nipple PAIN

⇒ Your baby does not have yellow poop by day 5

⇒ You feel like something just isn't right, trust your maternal instinct!

There are a few "red flags" in regards to breastfeeding, and woman should not wait to get help with these issues:

1. *Pain—Breastfeeding should not be painful. Ineffective latch or positioning can lead to nipple pain and trauma and low weight gain.*[20] *When baby latches on correctly, mother's nipples don't get sore and baby is able to get plenty of milk.*
2. *No yellow poop* after *day 4—After day 4, stools should be yellow and baby should have at least 3-4 stools daily that are the size of a US quarter or larger. Some babies stool after every time they nurse, or even more often-this is normal too. The normal stool of a breastfed baby is loose (soft to runny) and may be seedy or curdy. If the poop is still dark black or green after day 4, it is possible the baby is not getting enough milk and the breastfeeding relationship needs to be analyzed right away.*[21]
3. *Mother's need to learn to trust their new maternal instinct. Sometimes a mother needs the reassurance that she is doing it right. Sometimes a mother can pick up on a problem, just by how she feels before anyone can detect a problem.*

My Working Plan

What is the maximum maternity leave I will be able to take? *Employers are required to give a women 6 weeks unpaid maternity leave for a vaginal birth and 8 weeks for a cesarean birth. Many women will also qualify for Family & Medical Leave Act (FMLA), which gives them 12 weeks of unpaid maternity leave.*

Who will care for my baby while I am at work? *Finding child care for infants is challenging. Women who know they will be returning to work need to start looking for a childcare provider well before the baby is born. Direct them to the Chaffee County Early Childhood Council website for a current list of providers.*

How will my child care provider support me through coordinating feedings before, during and after my workday? *The provider/program plays an important role in supporting breastfeeding mothers and their infants by welcoming breastfeeding mothers and making sure staff members are trained to handle breast milk and follow mothers' feeding plans. Facilities should have a designated place set aside for breastfeeding mothers who want t to come during work to breastfeed, as well as a private area with an outlet (not a bathroom) for mother to pump their breast milk.*[22]

How will I gradually return to work? *Many employers are open to the idea of a woman gradually returning to work, such as returning on a part time basis for a couple months, or working half days from home. Again, this is a conversation that needs to be started during pregnancy.*

Where can I express my milk and where can I store my milk? *Employers are required by law to provide a private place (not a bathroom) for a woman to express milk. If a refrigerator is not available, the woman needs to think of alternate ways to keep milk cool: bringing her own cooler with ice packs or dropping milk off at home during lunch.*

Times when I can realistically express my milk at work: *Breastfeeding works by supply/demand. Every time a baby eats from a bottle, a mother needs to express her milk. For example, if the baby eats 3 oz of breast milk at 10 am from the childcare provider, the mother needs to pump or hand express 3 oz of milk around that time of day while at work. If she does this, she will maintain her supply while being separated from the baby.*

Thinking about when it is feasible to pump or hand express, while at work, is important in the planning process.

Type of breast pump I can use: *Most health insurances plans will provide a breast pump to a mother at no cost. However, the type and quality of this breast pump is not standardized. She should call her health insurance company around the 2nd trimester to see what they offer. WIC provides pumps to mothers that are on the program. Women can rent or purchase breast pumps. Refer to the Breastfeeding Resource Guide. A good quality pump is essential to successfully breastfeeding and working.*

Things I will discuss with my supervisor: *Having a conversation about how an employer plans to support a breastfeeding mother is very important to do during the 2nd or early 3rd trimester. Women need to know their legal rights. They also need to be prepared to request additional support they feel is necessary to breastfeed successfully.*

Your rights

Colorado Workplace Accommodations for Nursing Mothers Act establishes a standard for an employer to:

- Provide reasonable unpaid break time, or allow an employee to use paid break and/or meal time, to express breast milk for her nursing child for up to 2 years after the child's birth
- Make reasonable efforts to provide a nursing mother with a private location in close proximity to her work area (other than a toilet stall) in which to express milk
- Not discriminate against women for expressing milk in the workplace

References

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