

Breastfeeding Improvement Collaborative Charter

MINNESOTA DEPARTMENT OF HEALTH FAMILY HOME VISITING

Call to Action

Breastfeeding is one of the most highly effective preventive measures a mother can take to protect the well-being of her infant and herself. Data collected from calendar year 2016 indicates that only 28% of infants born to mothers who enrolled in home visiting while pregnant were still being breastfed at 6 months of age.ⁱ Additionally, breastfeeding initiation and duration rates are significantly lower for infants of color.ⁱⁱ Breastfeeding is important to home visiting because:

Infants who are breastfed have reduced risks of:ⁱⁱⁱ

- SIDS
- Gastrointestinal infections (diarrhea/vomiting)
- Ear and respiratory infections (pneumonia, RSV, bronchiolitis)
- Asthma
- Type 2 diabetes
- Obesity (during childhood)
- Leukemia (during childhood)

Breastfeeding can help lower a mother's risk of:^{iv}

- Breast cancer
- Ovarian cancer
- Type 2 diabetes
- High blood pressure
- Postpartum depression^v

Breastfeeding plays a critical role in an infant's health and well-being during a most critical and vulnerable developmental stage. Great strides have been made in training home visitors in lactation and infant feeding practices, yet there is more to be done to improve intention, initiation, duration, and exclusivity of breastfeeding among enrolled families.^{vi}

Mission

We will increase the intention, initiation, duration, and exclusivity of infants receiving breast milk by 1) testing and implementing reliable and effective policies and practices for breastfeeding, 2) increasing a competent and skilled workforce to support breastfeeding, 3) building strong community linkages to breastfeeding support systems, 4) promoting active family involvement in infant feeding practices, and 5) utilizing a comprehensive data-tracking system for breastfeeding.

Related Goals – Healthy People 2020

Increasing breastfeeding initiation, duration, and exclusivity are national goals as well. Healthy People provides science-based, ten-year national objectives for improving the health of all Americans, managed by the U.S. Department of Health and Human Services. For three decades, Healthy People has established benchmarks and monitored progress over time in order to:

- Encourage collaboration across sectors,
- Guide individuals toward making informed health decisions, and
- Measure the impact of prevention activities.

Healthy People 2020 objectives on breastfeeding are under the Maternal, Infant, and Child Health (MICH) Topic Area, under the section on "Infant Care." The 2020 targets are as follows:

Number	Objective	2020 Target %
MICH-21	Increase the proportion of infants who are breastfed:	
MICH-21.1	Ever	81.9
MICH-21.2	At 6 months	60.6
MICH-21.3	At 1 year	34.1
MICH-21.4	Exclusively through 3 months	46.2
MICH-21.5	Exclusively through 6 months	25.5

Home visiting programs have a unique opportunity to reach families and to incorporate evidence-based and best practice strategies to improve rates of breastfeeding.

Aim

Increase by 10% or more the percent of infants receiving any amount of human milk at 6 months of age by February 29, 2020.

Methods

The Breastfeeding Improvement Collaborative is derived from the Institute for Healthcare Improvement's (IHI) Breakthrough Series (BTS) Collaborative model. The BTS Collaborative is a systematic approach to quality improvement in which organizations test and measure practice innovations using the Model for Improvement. Participants share their experiences in an effort to accelerate learning and widespread implementation of best practices. This method is an excellent foundational tool to creating long-term success, and can help programs plan for meaningful progress over time.

Activities

Teams will embark on a twelve-month journey of vigorous Collaborative engagement. This will be focused on iterative cycles of training, testing and implementation of changes, and evaluation. Activities include learning sessions, action periods, all-team webinars, coaching calls, and monthly reporting. A variety of supports will be available.

Timeline

- Prework – January, February, 2019
- Action Period 1 – March, April, May, June
- Action Period 2 – July, August, September, October
- Action Period 3 – November, December, January, February
- Summation – March, April 2020

Schedule

Date	Activity	Time
January – February, 2019	Teams enroll and complete prework.	n/a
March 5-6, 2019	Learning Session 1 (in-person)	Day 1 is 12 pm – 5 pm. Day 2 is 8 am – 4 pm.
April 16, 2019	Webinar	12 – 1 pm
May 21, 2019	Webinar	12 – 1 pm
June 26-27, 2019	Learning Session 2 (in-person)	Day 1 is 12 pm – 5 pm. Day 2 is 8 am – 4 pm.
July 23, 2019	Webinar	12 – 1 pm
August 20, 2019	Webinar	12 – 1 pm
September 17, 2019	Webinar	12 – 1 pm
October 22, 2019	Mini Learning Session 3 (virtual)	12 – 2 pm
November 19, 2019	Webinar	12 – 1 pm
December 19, 2019	Webinar	12 – 1 pm
January 16, 2020	Webinar	12 – 1 pm
February 20, 2020	Webinar	12 – 1 pm
April 21, 2020	Summation Session (virtual)	10 – 11 am

Conclusion

The strategy for spreading and sustaining improvements within participating organizations is an integral part of the MDH FHV Breastfeeding Improvement Collaborative. Throughout this effort, MDH will work closely with participating agencies to document successes, engage leaders and staff, and enable local adaptation of changes to ensure teams are prepared to carry on their efforts when the Collaborative ends. In addition, MDH is committed to creating a report, poster, and toolkit to summarize and share the efforts and outcomes of the Collaborative publicly. Doing so will provide effective resources for spreading improvements beyond the participating teams and timeline of the Collaborative.

Contact

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References

ⁱ Minnesota Family Home Visiting Program Report to the Minnesota Legislature, 7/31/2018

ⁱⁱ Breastfeeding in Minnesota's WIC Program, Fact Sheet 2018

ⁱⁱⁱ Making the Decision to Breastfeed, Office on Women's Health, US Department of Health and Human Services.
Available from: <https://www.womenshealth.gov/breastfeeding/making-decision-breastfeed>

^{iv} About Breastfeeding Why It Matters, Center for Disease Control and Prevention.

Available from: <https://www.cdc.gov/breastfeeding/about-breastfeeding/why-it-matters.html>

^v Breastfeeding and the use of human milk. American Academy of Pediatrics. (2012). *Pediatrics*; 129(3): e827-e841.

^{vi} The Surgeon General's Call to Action to Support Breastfeeding Fact Sheet:

<http://www.surgeongeneral.gov/library/calls/breastfeeding/factsheet.html>