Breastfeeding Food Packages

Authority

7 CFR §246.7(e)(iii) and §246.10(e)
22 MRSA §255 and §1951

Policy

1. The prescription and issuance of food packages for breastfeeding women and infants shall encourage and support breastfeeding.

2. All breastfeeding women and their infants shall receive a thorough nutrition assessment to identify nutrition needs and tailor food benefits.

3. If supplemental formula is requested, the smallest amount needed shall be issued.

Procedures

1. Local Agency staff shall issue supplemental formula only after a thorough nutrition assessment has been completed, as there may be cases where a breastfeeding mother is unable to provide enough breast milk to meet her infant’s needs.

   1.1 A supplemental formula package shall consist of powdered formula only.

   1.2 The participant shall be provided with appropriate counseling and education on proper mixing and storage of formula.

   1.3 Staff shall issue powdered formula in amounts that meet but do not exceed amounts consistently used, based on nutrition assessment, in order to minimize the possibility of undermining the mother’s breastfeeding efforts.

   1.4 Staff shall assess the lowest amount of formula needed based on the ounces/day and days/month, to determine appropriate food package.

      1.4.1 Calculate the number of cans needed per month by using the reconstituted ounces per can of powdered formula. If a mother is unsure how many feedings need to be supplemented, the local agency staff member may:

      1.4.1.1 Issue up to two cans of powdered formula;
1.4.1.2 Inform the mother she may call to request more powdered formula if necessary

1.4.2 Examples include:

1.4.2.1 A mom supplements her 4-month-old with 17 ounces of formula 2 days a week on a consistent basis, since she has gone back to work part time:

1.4.2.1.1 Baby is supplemented with approximately 34 ounces per week, or 136 ounces per month

1.4.2.1.2 Maximum issuance of reconstituted formula for a 4-month-old partially breastfed infant is 522 ounces per month;

1.4.2.1.3 Baby may be categorized as “Partially Breastfed” and 2 cans of powdered standard formula may be issued for this baby each month.

1.4.2.2 A mom supplements her 1 month old with 4 ounces of formula “when we go out to eat—maybe once a month, but we don’t go out every month”:

1.4.2.2.1 Since supplementation is not consistent, staff may recommend that mom purchase her own formula for the very occasional need she has, and leave baby categorized as “Fully Breastfed”, since she is supplementing so infrequently.

1.4.2.3 A mom supplements her 2-month-old with 24 ounces of formula every other week when she does work for her family’s business doing bookkeeping:

1.4.2.3.1 Baby is supplemented with approximately 48 ounces per month;

1.4.2.3.2 Maximum issuance of reconstituted formula for a 2-month-old partially breastfed infant is 435 ounces per month;

1.4.2.3.3 Baby may be categorized as “Partially Breastfed” and provided with one can of powdered standard formula each month.

1.4.2.4 A mom supplements her 6-month-old with 20 ounces of formula a day, 5 days per week while she is at work:

1.4.2.4.1 Baby is consistently supplemented with 100 ounces per week, or approximately 400 ounces per month;

1.4.2.4.2 Maximum issuance of powdered formula for a 6-month-old partially breastfed infant is 384 ounces per month;

1.4.2.4.3 Baby may be categorized as “Some Breastfed”;
1.4.2.4.4 Issuance of formula must be tailored to the amount of powder that will provide approximately 400 ounces per month (standard formulas = 5 cans per month).

2. See Maine CDC WIC Nutrition Program Formulary (http://www.maine.gov/dhhs/mecdc/health-equity/wic/health/index.shtml#F) or contact the State Agency for the can yield of formulas provided by the program.

3. Fully breastfed infants shall be issued a food package for infant cereal, infant meat and infant fruits and vegetables at 6 months, with a positive, reinforcing breastfeeding message.

3.1 Fully breastfed infants who do not receive infant foods will be issued a monthly non-negotiable food instrument stating “Fully Breastfeeding No Infant Foods” for the purpose of including the baby in monthly participation. This food instrument will be issued in cases including but not limited to:

3.1.1 Fully breastfed infant whose parent/guardian chooses to make all baby food and refuses all WIC jarred infant foods and infant cereal.

   Fully breastfed infant ≥6 months of age who is unable to eat solids due to such conditions as prematurity or medical/health complications.

4. The maximum monthly formula issuance, tailored for actual supplementation needs, for infants with a Breastfeeding Amount of “Partially Breastfeeding” is as follows:

4.1 Birth to 30 days: 1 can powder (provides approximately 2-3 ounces/day)

4.2 Age 1 month to 3 months: 435 ounces reconstituted powdered formula per month (approximately 14 ounces per day)

4.3 Age 4-5 months: 522 ounces reconstituted powdered formula per month (approximately 16 ounces per day)

4.4 Age 6-11 months: 384 ounces reconstituted powdered formula per month (approximately 12 ounces per day)

5. The maximum monthly formula issuance for infants with a Breastfeeding Amount of “Some Breastfeeding” is the same as non-breastfed infants. However, issuance must be tailored for actual supplemental formula needs.

6. The following WIC food packages are available:

6.1 Fully breastfeeding women with singletons—Federal Food Package VII

6.2 Fully breastfeeding women with multiple infants—Federal Food Package VII 1.5

6.3 Pregnant women who are fully or partially breastfeeding singleton infant—Federal Food Package VII
6.4 Partially breastfeeding women with singletons (whose infant receives not more than one half the total formula issued to a non-breastfed infant)—Federal Food Package V

6.5 Partially breastfeeding women with multiple infants from same pregnancy (whose infants receive no more than one half the total formula issued to a non-breastfed infant)—Federal Food Package VII

6.6 Some breastfeeding women with singletons or multiple infants whose infant(s) is/are 6-12 months and receive more than one half the total formulas issued to a non-breastfed infant—**no food benefits, but continues to participate for breastfeeding support and referrals.**

6.6.1 The State Agency authorizes Local Agencies to provide the maximum amount of all authorized foods for each of the seven WIC Food Packages (I-VII), including for fully breastfeeding women with singleton and fully breastfeeding women with multiple infants.

7. Partially breastfed infants shall be issued food benefits according to the following schedule:

7.1 **Birth-1 month** - issue no more than 1 can of supplemental powdered infant formula and explain that limited supplementation will enhance breast milk production.

7.2 **Months 1-5** - issue the smallest amount of powdered supplemental formula which meets the infant’s nutrition needs, up to no more than ½ the total amount of formula issued to a non-breastfed infant.

7.3 **Months 6-12** - issue up to no more than ½ the total amount of formula issued to a non-breastfed infant, along with infant cereal, and infant fruits and vegetables.

8. Nutrition staff shall increase or decrease supplemental formula based on the partially breastfed infant's nutrition needs, up to ½ the total formula issued to a non-breastfed infant.

9. Some circumstances may justify temporary supplementation, in conjunction with nutrition counseling. Examples may include, but are not limited to:

9.1 A breastfeeding mother’s temporary use of medication contraindicated for breastfeeding.

9.2 A breastfed infant with a special medical condition that increases the need for nutrition.

9.3 A breastfed infant separated from the mother for an extended period of time (mother is hospitalized, etc.).

9.4 A breastfed infant in final stages of weaning.
10. Breastfeeding women who have multiple infants from the same pregnancy shall receive food benefits according to Appendix NS-2-C Max Food Benefits of Breastfeeding Mom with Multiples.

11. WIC counseling staff shall ensure that all SPIRIT data entry for breastfeeding women and their multiple infants born from the same pregnancy accurately reflects the reported feeding levels for the infants.