

Partnering to Promote Continuity of Care in Southwest Kansas

Implementing the Continuity of Care in Breastfeeding Support Blueprint

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Lactancia Latina en el Suroeste de Kansas

To build a culture of breastfeeding support for rural, Latinx families, it will require working with partners both within and outside of public health. The Continuity of Care Blueprint provides a “road map” to partners and innovative strategies. We reached out to childcare providers, a school district, and several local health departments to help them improve their support of breastfeeding families and to achieve a breastfeeding-friendly designation. (Strategy 2.8). From November 2022 to July 2023, through NACCHO’s Blueprint implementation project, the Lactancia Latina of Southwest Kansas with support from the Kansas breastfeeding coalition, have created a lactation billing collaborative to learn and share successful billing procedures that will be assembled into a lactation billing manual. (Strategy 3.7). To determine the availability and accessibility of existing community-level breastfeeding data, we administered a survey to healthcare systems. (Strategy 4.1) and an EHR/EMR self-assessment tool. (Strategy 4.5) We awarded 15 scholarships to local Latinx breastfeeding supporters to complete a lactation course in Spanish and encouraged 10 childcare providers to complete the childcare training in Spanish. (Strategy 6.6).

Challenge

The [Landscape of Breastfeeding Support in Southwest Kansas](#) details breastfeeding support in Southwest Kansas (SWKS). Peer breastfeeding support is available only through WIC and Facebook Groups. SWKS has 1.28 IBCLCs per 1,000 live births compared to the state rate of 5.79. Fewer than 5 are Latinx. With over 40% of SWKS being Latinx, more Latinx lactation support providers (LSPs) are needed. In addition to limited culturally responsive skilled support available, there is a lack of feasible compensation for lactation support outside of private insurances or out-of-pocket payments.

Medicaid policies and fee payment rates are the largest barriers to payments to LSPs.

Systems-level breastfeeding support in SWKS needs to be strengthened. No childcare programs have achieved the “[Breastfeeding Friendly Child Care Provider](#)” designation. No school districts have received the “[Breastfeeding Employee Support Award](#).” No local health departments have achieved the “[Breastfeeding Friendly Local Health Department](#)” designation.

There is a lack of publicly accessible community-level breastfeeding data. Currently, this limited to 1) Kansas birth certificate data (2018-2019 data at CDC’s [Breastfeeding Initiation Rates by County or County Equivalent in Kansas](#)); and 2) WIC data which represents approximately 40% of families in Kansas. All available county-level data is available at [Breastfeeding Support by Kansas County](#). Although many healthcare systems do collect some breastfeeding data, the metrics and milestones are not consistent. Data sharing between community partners is nonexistent. Many healthcare systems, including health departments, do not measure breastfeeding rates at the same time points or exclusivity. Their electronic health record/electronic medical record systems limit what data is collected and reported.



Solution

To address the continuity of care problems identified, we set out to:

1. Increase access to Spanish-speaking Latinx lactation support providers (LSPs) in Southwest Kansas (SWKS) through:
 - a. Scholarships to a 53-hour online breastfeeding course in Spanish and an in-person skills day to reinforce what the participants learned in the online course. Scholarship recipients are from county extension offices, federally qualified health centers and community members.
 - b. Increase the number of LSPs able to be reimbursed by insurance and Medicaid through the creation of a billing cohort with diverse lactation support providers from different healthcare and community settings in SWKS. Together they experimented with insurance codes and report their findings back to the group every month. The billing cohort met online from February 13 – July 10, 2023. The cohort plans to continue meeting after the grant ends.
2. Increase systems-level support of breastfeeding through:
 - a. Assisting a child care provider to achieve the “Breastfeeding Friendly Child Care Provider” designation and support Spanish-speaking child care providers to complete the child care training for breastfeeding support.
 - b. Assisting a school district to implement a lactation accommodation policy, identify suitable lactation spaces in all buildings, and achieve the Gold-level “Breastfeeding Employee Support Award.”
 - c. Assisting at least one local health department to achieve the “Breastfeeding Friendly Local Health Department” designation.
3. Increase access to community-level breastfeeding data through:
 - a. Surveying health care systems and public health about the availability and accessibility of existing community-level

breastfeeding data through their EHR/EMR systems.

- b. Providing a self-assessment tool for healthcare systems and public health partners to assess their EHR/EMR capabilities to collect breastfeeding data.



Results

- Kansas Medicaid is planning to increase the fee payment for CPT code S9443 for lactation classes, non-physician provider, from \$9.91 to \$40 in October 2023 (*fee payments vary by state*). In addition, they will add IBCLCs as an independent provider type, who will be able to bill Medicaid directly in 2024. Both changes resulted from their involvement in the billing cohort
- Joy! Child Care achieved the “Breastfeeding Friendly Child Care Provider” designation, increasing breastfeeding support for the families whose children are in their care.
- Finney and Scott County Health Departments received the “Breastfeeding Friendly Local Health Department” designation, increasing breastfeeding support for their clients and employees.
- Dodge City USD 443 school district achieved the “Breastfeeding Employee Support Award”, increasing breastfeeding support for their 300+ employees, including teachers.

- We provided breast milk cooler bags to all partners as a part of receiving the designation.
- A lactation billing collaborative formed and determined successful billing codes for private insurance payment of lactation support services. The group will continue meeting monthly.
- The EHR/EMR online survey and assessment tool increased awareness among healthcare systems about collecting and querying breastfeeding data. It also revealed a willingness to share breastfeeding data with the community partners. In addition, it provided valuable insight into to increase breastfeeding referrals.

- 15 scholarships were awarded to Spanish-speaking individuals for a Spanish-language 53-hour breastfeeding certification course. An in-person skills day for these individuals will be held in early 2024, facilitated by a bilingual IBCLC.

The main differences before and after the grant period are:

- Increased collaboration – partners and individuals have been working together to improve continuity of breastfeeding care for nearly three years. They have built a strong working relationship and mutual trust.
- Stronger coalition – Lactancia Latina of SW KS has a core group of emerging leaders with experience implementing successful projects and activities

project has reminded us that we need to make sure we are using familiar, preferred forms of communication, or we will not be effective.

The Blueprint provided us with new ideas and lent credibility to our outreach with partners. It was easier to bring them on board when we could point to the Blueprint as our source and our roadmap. We plan to continue using the Blueprint as our framework for future activities, especially now that our region is familiar with it. After nearly three years of working with the Blueprint, our partners understand the concepts and recommendations. We hope to continue building a warm chain of breastfeeding support in SWKS using the Blueprint as our guide.



Lessons Learned

The secret to our success was timing and time itself. We learned when to pause our outreach to partners and when to reach out again, (and again, and again...) with encouragement and resources. Time became one of our most valuable resources. We gave it freely to help busy partners complete award applications and to support their learning. We learned to be both patient and persistent. We learned to motivate busy, understaffed, and under-resourced organizations and individuals who are not in “lactation land” by showing them what was in it for them.

One of our biggest hurdles during this project was communicating with the 15 scholarship recipients to complete the Spanish-language breastfeeding course. We now understand how important it is to obtain more than one contact information, such as phone numbers and emails for individuals to remind them about the course deadlines. In rural Kansas, there is a technology barrier as well as a language barrier. We usually assume that others have the same access to opportunities and resources as we do. This

Resources

[Landscape of Breastfeeding Support in Southwest Kansas](#)

[Breastfeeding Friendly Local Health Department” designation.](#)

[Breastfeeding Support by Kansas County](#)

Download the Continuity of Care in Breastfeeding Support and read other success stories at:

<http://www.breastfeedingcontinuityofcare.org/>

- Contact us at: breastfeeding@naccho.org