



Connecticut WIC Program Breastfeeding Peer Counseling Implementation Plan - 2022 Update for FY 2023 State Plan

State Program Overview and Update:

Due to the continued Covid-19 impacts, and impacts of the formula recall and shortage, we are limiting edits to the State Program Overview and Update section of this submission.

The Connecticut WIC Program maintains a hybrid-peer counseling model with support from the USDA WIC Breastfeeding Peer Counseling funding. Currently, one hospital-based WIC peer counseling program is in the diverse city of New Haven which operates a WIC clinic-based peer counseling in all four local agencies with International Board-Certified Lactation Consultants (IBCLC) on staff. Currently, the Connecticut WIC Program operates six clinic based local agency peer counseling programs with International Board-Certified Lactation Consultants (IBCLC) on staff in Access/Day Kimball Hospital (DKH), Bridgeport, East Hartford, Hartford, Meriden, and Norwich/New London. During FY 2022, the Waterbury WIC program continued to be awarded funds to work towards collaborating with a privately funded Breastfeeding Peer Counseling Program that recruits and serve participants enrolled in the Waterbury WIC program. In 2022, the State agency continued to work for a Memorandum of Understanding (MOU) to be signed between Hispanic Health Council (HHC) and the City of Waterbury. The goal of the MOU is to establish communication flows and improve continuity of care for participants enrolled concurrently in the HHC peer counseling program and WIC. We hope that an MOU will be signed in FY 2022 or FY 2023. On a positive note, HHC has signed a revised MOU with the City of Hartford and East Hartford in the 3rd quarter of FY 22.

The Hartford WIC program clinic-based peer counseling program contract executed late in the 4th quarter of 2021. Before contract execution and after, the Hartford WIC Program Coordinator, Designated Breastfeeding Expert (DBE), and the State Breastfeeding Peer Counselor Coordinator have meet on a weekly basis while the host agency posted positions. A per diem IBCLC was onboarded for at least 5 hours per week to assist with collaboration of peer services with other local WIC offices that that have peer programs and non-WIC peer programs. Also, the IBCLC was able to train in Level 1-2 of the Regional Breastfeeding

curriculum training. Currently the Hartford IBCLC provides DBE/IBCLC services when yielded by WIC Nutritionists' who see participants with a breastfeeding need. They also assisted in recruitment and hiring for the peer position that was approved by the host agency in in the 3rd quarter of FY 22. Peer interviews are currently underway.

The Access agency (DKH site) and Meriden WIC Program peer counseling contracts executed in the 4th quarter of FY 21. Technical assistance was provided to both agencies to facilitate rapid implementation - hiring and training - once contracts are executed. The State Breastfeeding Coordinator trained both peers at DKH in the first quarter of FY 22 and the Meriden peer in the 2nd quarter of FY 22.

Bridgeport hired an African American peer. She was trained by the State Breastfeeding Peer Counseling Coordinator and Optimus IBCLC during the 4th quarter of FY 21. The new peer is currently enrolled in WIC and has breastfeeding experience with her two sons, one of which she is still breastfeeding. In the third quarter of FY 21, the Optimus BFPC team has formed a strong connection with Bridgeport Hospital's Neonatal Intensive Care Unit (NICU). The outreach allowed for the WIC IBCLC and peer to take a tour of the NICU, meet the hospital IBCLC and form a relationship with the unit (and Head Neonatologist). To date if a NICU family does not have WIC, the hospital will make a referral to the WIC IBCLC Nutritionist. Once the family is an active WIC participant(s), staff will make referral to the peer counseling program. Bridgeport's current Hispanic bilingual/bicultural peer was a former NICU Mom, bringing an additional layer support to families in this challenging time.

The Norwich/New London (TVCCA) program received additional funding in FY 2021 and the contract for this was executed in the 4th quarter. This fiscal increase allowed the peer to extend hours in both Norwich and New London locations, increasing participant access to enhanced peer services. Additionally, the peer is a new Connecticut Breastfeeding Coalition (CBC) board member. In May 2022, the veteran IBCLC at TVCCA retired after 28 years of service to the WIC Program. The State Breastfeeding Unit has been in conversations with the local agency to ensure that clinical lactation support is available during this time of transition. Two Nutrition staff are in the process of taking their IBCLC exam. The agency has contracted with an IBCLC from the DKH WIC Office (10 hours per month) to support peer services until the necessary infrastructure is in place. Additionally, the State Breastfeeding Coordinator is working with DPH SPAN program to leverage funds to pilot the Pacify service in the Norwich/New London area to provide additional IBCLC coverage. The pilot is expected to begin in September. In the interim, the State Breastfeeding Peer Counseling Coordinator and State Breastfeeding Coordinator will assist as needed.

Implemented in 2019, the East Hartford WIC Program has set the bar for best practices and pandemic operations that will be used to improve peer services statewide. The East Hartford WIC Program has infrastructure that lends itself to optional breastfeeding support for participants. The program still encompasses an IBCLC, DBE BF Coordinator, part time

African American and bilingual peer. The team meets biweekly to discuss cases and best practices. Peers attend all WIC staff meetings and utilize this time to highlight case studies and lesson learned. They have partnerships deep in the community for breastfeeding promotion and support. For example, the City of East Hartford Health Department website widely advertised WIC peer services during FY 21 including their World Breastfeeding Week activities and presence at local health fair to promotion peer services. East Hartford staff often provides current insight into participant reported trends in breastfeeding, concerns and lessons learned to allow for innovative work with participants and often these topics that are brought to the forefront are discussed at statewide monthly breastfeeding peer counseling calls. For example, this year we discussed an increase in infant bottle refusal.

This year the New Haven WIC Breastfeeding Peer Counseling Program has done an exceptional job of meeting participants' needs during the pandemic and staff fluctuations in FY 22. In the 2nd quarter of FY 22 the peer employed from the collaboration with CDC REACH grantee, Community Alliance for Research and Engagement (CARE) left for career advancement. In the 3rd quarter another African American WIC participant with 2 children (who is also a doula) joined the team to continue to raise the profile of breastfeeding in New Haven, shining a light on the impact of structural racism on breastfeeding. CARE's peers were trained with assistance from both New Haven IBCLC and WIC State Breastfeeding Peer Counseling Coordinator as well as being able to participate in the regional breastfeeding curriculum training, receiving Level 1 and 2 trainings. In the 4th quarter of FY 21, the African American peer left the New Haven WIC program to pursue a career as an IBCLC. We are excited with her work and advocacy within the community. Another African American peer joined the team the 3rd quarter of FY 22, she also was able to participate in training. She is funded through WIC funds. Due to staff fluctuations, an African American peer employed part time in Bridgeport was hired in New Haven as a per diem peer to fill gaps in services. This has been a creative use of resources to maximize participant participation in the peer program services. With excitement and dedication two bilingual/bicultural peers are close to completion of the Healthy Children Project's Certified Lactation Counselor (CLC) course sponsored via SPAN funding. They are preparing to sit for the exam.

The State Breastfeeding Peer Counseling Coordinator continued to facilitate monthly virtual peer counseling conference calls using the Teams platform. Peers prefer the interactive platform where camera use is strongly encouraged versus the pre pandemic conference line. Being able to readily share documents, post in the chat and "see" each other bring comradery and team building. Plans to continue to use this platform monthly will continue after the pandemic for sustainability.

Most peers remain teleworking and have proven to be critical supports to our breastfeeding families. Virtual platforms and calls can incorporate the DBE/IBCLC easily to co-counsel and yield when outside a peer scope. It provides valuable assessment of the dyad, environment and allows for comprehensive cost-effective care. Many participants prefer and respond to

text messages. Using the Brush Art electronic materials, USDA BF Support website and other links allows for evidenced based resources to be customized to participants needs and efficient communication for those who prefer to only text and receive information electronically to utilize quickly. Information can also be forwarded from the participant to support network as appropriate to help ensure feeding goals are met.

Formal monitoring of local agencies with peer counseling programs occurred this year. As described above, the East Hartford WIC Program's peer services were monitored this year in the third quarter. Monitoring tools developed in FY 2018 were used for the FY 2022 WIC Management Evaluation Review (MER). Tools include Connecticut WIC Program Management Evaluation Report for Breastfeeding Peer Counseling, Breastfeeding Peer Counseling Addendum Chart Audit tool to be used with the Nutrition Services Chart Audit Tool for participants enrolled in Breastfeeding Peer Counseling and a Peer Counseling Observation Tool.

Updates to the local agency Orientation Checklists for the positions of Consultant IBCLC (for peer programs) and peer counselors are planned for the fourth quarter.

Both the WIC-hospital based, and WIC-clinic based peer counseling programs 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. USDA FNS WIC Breastfeeding Curriculum was received at the end of April. Connecticut joined the NERO regional Breastfeeding Curriculum training team to roll out virtual leveled training required. Joining this Regional training team has provided excellent support on how to navigate the platform and to brainstorm effective ways to teach regional WIC staff effectively. Planning and preparation occurred in FY 22 quarter 2 and the roll out of the regional training occurred in FY 22 quarter 3rd with Levels 1 and 2. The State Breastfeeding Coordinator and BF PC Coordinator presented both on Levels 1 and 2. More than half of the Connecticut local agency staff participated this Spring. In the Fall, the regional team will provide Levels 1 and 2 again (Connecticut WIC Breastfeeding Unit will present again). They will also present modules in Levels 3 and 4. Communication to local agencies management for transparency of scheduling and of expectations of the platform has been frequent. The Breastfeeding Unit also reviewed the importance of requirements of training to set the stage for local agency Program Management staff once the regional team developed a training plan. Adjustments with the pandemic conditions/recommendations will dictate how/when training will occur in the future, after initial training occurs. This will allow all newly hired staff to be trained on this curriculum as part of a sustainability process.

Monitoring of peer programs will continue in FY 2022, using the modified monitoring schedule and procedures that was used during the pandemic. The State WIC Breastfeeding Peer Counseling Coordinator continues to stress the importance for both nutritionists and

peer counselors to review notes and providing concise, timely documentation to ensure continuity of care for peer counseling participants. Consistent use of CT-WIC allows for comprehensive breastfeeding support and education and can facilitate a peer/WIC staff approach that is engaged with moms to assist in meeting their infant feeding goals at the same time likely increasing the satisfaction with the services they receive at WIC

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.

The State WIC Breastfeeding Peer Counseling Coordinator has been part of the WIC Breastfeeding Unit since 2016. The State WIC Breastfeeding Peer Counseling Coordinator has a Master of Science in Nutrition is IBCLC, RD and brought her experience, managing a WIC-clinic and peer counseling program at the Fair Haven WIC office, to the State agency.

BREASTFEEDING HERITAGE AND PRIDE: HISPANIC HEALTH COUNCIL, HARTFORD HOSPITAL PROGRAM SERVING THE HARTFORD WIC (AND A FEW NEIGHBORING LOCATIONS)

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 (HHC) and Hartford Hospital (HH). 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. At the conclusion of FY 2020 USDA FNS WIC funds were redirected from HHC to the City of Hartford of clinic-based peer counseling services.

2023 Update

See State section above for relevant updates. See relevant quarterly reports attached (New Haven).

NEW HAVEN WIC BREASTFEEDING PEER COUNSELING PROGRAM FORMALLY: BREASTFEEDING HERITAGE AND PRIDE: YALE NEW HAVEN HOSPITAL PROGRAM AND FHCHC

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.

2023 Update

See State section above for relevant updates.

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. An IBCLC consultant was hired to provide technical assistance to both the State and local agencies and to provide training to WIC peer counselors. Since 2011 peer counseling was expanded to other local agencies (Bridgeport (2016), East Hartford (2019), Waterbury (Non-WIC funded peers) (2020), DKH (restored 2021), Meriden (2021) Hartford (2021)). Connecticut will have a total of 7 clinic-based programs.

2023 Update

See State section above for relevant updates.

LATCH Study: Research partners have applied for NIH funding to expand the LATCH study.

The YNHH (currently New Haven WIC Breastfeeding Peer Counseling Program) and HHC BHP programs and the two-current WIC clinic-based Breastfeeding Peer Counseling programs (Fair Haven and TVCCA) participated in the expanded LATCH (**LATCH Lactation Advice thru Texting Can Help**) study that concluded in FY 2016. This study was 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 built on the LATCH pilot project and will examine the effectiveness of using texting to provide enhanced support through peer counselors. We've included a listing of published research.

To note, in Q4 of FY 2019, the Journal of Nutrition Education and Behavior selected *Impact of the Lactation Advice through Texting Can Help (LATCH) Trial on Time-to-First-Contact and Exclusive Breastfeeding among WIC Participants* by the journal's readership as one of the top three publications of the year. The article will be recognized in the September issue.

LATCH results showed 50% of Moms exclusively breastfeeding at 2 week in the intervention arm versus 31.8% in the control arm. The study was underpowered to determine if this was statistically significant. Participants had high satisfaction with the texting they received. The study showed shortened first time contact with a Peer Counselor after delivery. This is critical to receive personalized breastfeeding support and education to a WIC participant from her Breastfeeding Peer Counselor.

Published in FY 2018,

Martinez, J.L., Harari, N., Segura-Pérez-S., Goeschel, L., Bozzi, V., Pérez-Escamilla, R. (2017). Impact of the Lactation Advice through Texting Can Help (LATCH) Trial on Time-to-First-Contact and Exclusive Breastfeeding among WIC Participants. *Journal of Nutrition Education and Behavior*. Vol 50: 33-42

Feasibility and Acceptability of a Text Message Intervention Used as an Adjunct Tool by WIC Breastfeeding Peer Counselors: the LATCH pilot to Maternal & Child Nutrition. Vol 14 12488

Published previously

Martinez, J.L., Harari, N., Pérez-Escamilla, R. (2017). Lactation Advice Through Texting Can Help (LATCH): An analysis of intensity of engagement via two-way text messaging. *Journal of Health Communication*.

Martinez, J.L., Shebl, F., Harari, N., Pérez-Escamilla, R. (2017). An Assessment of the Social Cognitive Predictors of Exclusive Breastfeeding Behavior Using the Health Action Process Approach. *Social Science and Medicine*. Vol. 182: 106-116

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

State Breastfeeding Peer Counseling Coordinator, Lori Goeschel, responsible for contract management and administrative oversight of the 8 peer programs in the state. As outlined above Lori has spent time since FY 18 on site targeted peer training, technical assistance and CT-WIC use and troubleshooting. She has also worked extensively with New Haven WIC Program on implementing the city-wide peer services which included part time office hours for peers within the permanent WIC sites (Yale New Haven Hospital York Street and St. Raphael's Campus and the Cornel Scott Hill Health Center). A contract extension was processed for HHC through September 30, 2019, the end of FY 20 HHC funds were redirected to the City of Hartford for a clinic-based peer program. She is responsible for ensuring that the USDA WIC Breastfeeding Peer Counseling funds are used to expand WIC breastfeeding support services through peer counseling.

The State Breastfeeding Peer Counseling Coordinator maintains contact with subcontractors that hold BFPC programs regarding the status of the program and quarterly reports are required to document progress. Due to design of CT-WIC reports will have more qualitative updated to reflect program progress. Once enhancements are completed in CT-WIC reports there will be more quantitative data to reflect contract language changes.

3. Defined job parameters and job descriptions for peer counselors

- The breastfeeding peer counselors are community women, *reflective of the WIC participant population*, 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 (texting) 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 \$15.00 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

- Some WIC clinic-based peers attended the La Leche League of Connecticut (CT-LLL) annual Healthcare Provider Seminar in March 2021.
- The State agency met as needed with WIC funded peer programs in 2021 routinely and on an as needed basis.
- Peer counselors provided input and feedback on use of CT-WIC peer module including identification of bugs and development of solutions.
- On-going targeted Peer Counseling Module (CT-WIC) training ongoing in FY 21 for clinic-based peer programs that were onboarded this fiscal year. Ongoing support and TA provided based on needs as peer programs onboard.
- Peer counselors were invited to attend WIC Statewide Meetings.
- Peer counseling staff attending statewide WIC new staff orientations as appropriate.
- Virtual annual retreat with Leading-Edge Coaching and Development occurred over the 3rd and 4th quarters of FY 21. All breastfeeding peer counseling teams participated in a two-half day training. Day one was comprised of a coaching skills workshop and day two contained information on engaging others through feedback. A survey monkey was distributed for feedback and resources were shared to assist in working with participants.

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. In April 2021 the WIC Breastfeeding Curriculum was released and since Spring of 2022 Connecticut WIC staff including peer teams started to receive this training.
- **Documentation of client contacts:** All participant contacts, including unsuccessful attempts, will be documented in CT-WIC.
- **Referral protocols:** Peer Counseling Programs continue to use CT-WIC to make referrals. Ongoing training is provided on this process. See specific protocols for referral procedures.

- **Confidentiality:** The Participant Consent will be verbally given when the referring staff member makes a referral to the program. 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 Connecticut WIC program has developed many community partnerships to enhance breastfeeding in general, but also the effectiveness of its peer counseling program. 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. Currently, there are 10 Baby-Friendly Designated Hospitals in the State. Through its administration of the SPAN 1807 cooperative agreement, the Department has worked effectively with the Connecticut Breastfeeding Coalition (CBC), Hartford and New Haven REACH grantees and their contractors, as well as the Mothers' Milk Bank of Northeast (MMBNE). While DPH doesn't have a contract with the Hispanic Health Council Breastfeeding Heritage and Pride (BHP) program for peer services in Hartford, local agencies in the service areas maintain Memorandums of Understanding (MOU) with HHC-BHP to ensure continuity of care for shared families.

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

Infrastructure at local agencies allows for access to DBE and IBCLC's.

Peers are mentored by staff IBCLC’s employed by WIC local agencies. Four are also Nutritionists. The WIC IBCLC/DBE are partially funded by the peer counseling grant. WIC IBCLC/DBE have access to medical support as needed through their host agencies.

Peer Counseling staff Performance Plan addresses:

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

BHP Peer Counselor Performance Plan Goals:
Successfully complete peer counselor training process (Levels 1-2 of DBE Curriculum and applicable post-tests). Demonstrate competencies based on supervisor observation
Follow-up on all prenatal referrals within 1 week of assignment; postpartum within one day
Home visits provided according to the following protocols: Since the pandemic home visits have been suspended. Virtual visits have taken the place of this and allow for co-counseling and efficient yielding when needed. Postpartum: (minimum of) once within 24-72 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
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 peer counseling virtual team meetings for training and coordination activities
Communication regarding clients with hospital clinicians as needed

WIC clinic-based Peer Counselor Performance Plan Goals:
Successfully complete peer counselor training process. (Levels 1-2 of WIC Breastfeeding Curriculum and applicable post-tests). Demonstrate competencies based on supervisor observation.
Follow-up on all prenatal referrals within 1 week of assignment; postpartum 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 for all BF PC staff and after the call IBCLC's and state staff have specific time for peer management teams.
This is utilized as needed.

Engage in community outreach per instructed by WIC IBCLC mentor or clinic supervisor to foster continuity of care for peer counseling participants.

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 participated in monthly virtually breastfeeding peer counseling meetings. All peer counselors are expected to participate in any staff meetings, training activities sponsored by their local WIC Program when deemed appropriate from the DBE/IBCLC, peer counseling management staff and WIC State and Local management staff.

- 2022 Trainings
 - Due to the WIC Breastfeeding Curriculum Regional training an annual peer team retreat was placed on hold for FY 22.
 - Monthly Conference calls 4th Tuesday of the month
 - Technical Assistance calls and meeting for program operation assistance, CT-WIC and planning for implementation of BF PC programs for agencies that will commence services once contracts executed.
 - NSA funds supported Virtual CT-LLL Healthcare Provider Seminar (March 2022)
 - CR annual training
 - Virtual all staff WIC Statewide meetings December 2021
 - MI (GLBW) Breastfeeding Network webinars ongoing
- 2023 Trainings (tentative)
 - Peer Retreat - TBD
 - 11 Monthly Conference calls
 - Technical Assistance calls and meeting for program operation assistance and CT-WIC.
 - CT-LLL Healthcare Provider Seminar-possibly virtual
 - CR annual training
 - Regional training: USDA WIC Breastfeeding Curriculum for all peers and WIC staff in addition to ongoing training for new peer hired after the initial trainings area completed.

- Hartford peer counselors, hired, trained and onboarding of the clinic-based WIC peer program.
- Bristol/New Britain/Torrington if become executed in contract extensions will open a clinic based breastfeeding peer counseling program.
- Technical Assistance and guidance with established BF PC programs as well as continued onboarding and oversight for Bristol/New Britain/Torrington and The City of Hartford. Once contract execution with peer counseling services occurs and peer counselors are hired at both agencies BFPC services will be operational.
- CT-WIC bug corrections and enhancement development with the State WIC MIS Nutritionist.

Training Overview

The training focus was the collaboration, planning, technical assistance, and implementation of the regional training model for the WIC Breastfeeding Curriculum. Relationships with NERO State breastfeeding coordinators/nutritionists/breastfeeding peer counselor coordinators allowed an innovative approach to execute the curriculum virtually for over 300 staff. By using the platform to implement content regionally, this reduced the burden on individual State agencies and exposed Connecticut WIC staff (and other states) to different training styles and perspectives. The regional concept also allows for more consistent messaging and uniformity to the region in the area of breastfeeding promotion and support as WIC's primary goal. The Breastfeeding Unit believes this collaboration not only provides sustainability but also increases cohesion and common purpose around WIC's mission to increase both breastfeeding initiation and duration outcomes.

The CT-LLL Health Care Provider Seminar for Health Care Professionals took place in a virtual format again this year and NSA funds support the attendance of some peer counseling staff. In light of the CT-LLL conference and spring Levels 1 and 2 training no retreat for peer counseling teams were held this year.

Enhancements in CT-WIC for Peer Counseling are being designed and prioritized and were released in CT-WIC version 3.3. The goal is for the developers of CT-WIC to add enhancements that would improve functionality to the system. Some bugs from this release are being recertified by the developers and staff have been trained to utilize the system with appropriate documentation until the fix is in place. The State Breastfeeding Peer Counseling Coordinator will continue to provide targeted education to individual sites and provide guidance when the further enhancements are put into production of CT-WIC as well as the State WIC MIS Nutritionist.

FY 2022 Breastfeeding Conference calls topics were selected based on need of CT-WIC operations, current breastfeeding initiatives in Connecticut, topics of current breastfeeding interest and a platform to discuss feedback from seminars and training. All calls open with announcements, follow up questions and comments from the last call, followed by the "topic of the month" and at the close of the meeting open topic/question time if necessary. There is time dedicated at the end of the call for program management only, for concerns and questions. Agenda and summaries about the call are emailed to Peer Counseling teams and their management.

- 10/2021: Rev of new brush art developed materials
- 11/2021: Discussion of New York Grand Rounds: [Marijuana Use During Pregnancy and Breastfeeding](#)
- 12/2021: Discussion of peer counseling changes in CT-WIC release 3.3 and 3.4
- 1/2022: Peer sharing on how participants are handling COVID-19 Omicron Variant
- 2/2022: Formula recall, the effects on breastfeeding and peer counselors
- 3/2022: Anti-partum breastmilk expression
- 4/2022: CT-LLL Health Care Provider seminar debrief
- 5/2022: Canceled d/t WIC Breastfeeding Curriculum training
- 6/2022: Baby bottle refusal for the breastfeed infant
- 7/2022: New AAP updated policy statement discussion. Breastfeeding and the Use of Human Milk
- 8/2022: WBW discussion and report out of WBW events
- 9/2022: TBD-likely discussion of Roe v. Wade overturn as may peers have inquired how this will potentially change how they work with participants.