



OUR MISSION: TO BUILD AND SUSTAIN A NATIONAL ASSOCIATION THAT ADVOCATES FOR LACTATION PROFESSIONALS.
OUR VISION: IBCLCS ARE VALUED RECOGNIZED MEMBERS OF THE HEALTH CARE TEAM.

USLCA eNEWS

United States Lactation Consultant Association

April 2010

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Patch Yet?

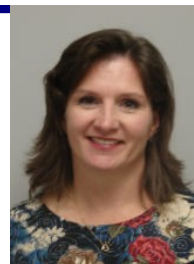


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From the President Laurie Beck, RN, MSN, IBCLC, RLC Celebrating Spring with USLCA!



Lots of exciting things are happening during the month of April:

- The USLCA Board of Directors will be meeting in Raleigh, North Carolina on April 16-18, 2010 – Reports to follow!
- You won't want to miss participating in USLCA's first 3 hour Webinar on "Assessment and Treatment of Tongue-Tied" by Alison Hazelbaker, PhD, IBCLC, RLC, on April 28th. We have listened to our members on what their needs are!
- Volunteer your expertise and time to help with one of the many USLCA committee projects that are taking place. It truly takes all of us working together to make a difference!
- Register today for the upcoming ILCA Conference in San Antonio, Texas. USLCA will be looking forward to meeting all of our members in person!
- Enjoy your monthly eNews and share with a non-USLCA member! Remember it is never too late to join your professional organization!

Laurie Beck, RN, MSN, IBCLC, RLC, USLCA President



Happy Birthday, ILCA! If you haven't already registered for this year's ILCA conference, it's not too late! The Early Bird Discount deadline is May 15th—save over \$100 by registering early! You'll find sessions on ethics and the business of being a lactation consultant; on preterm, late preterm, and full term infant breastfeeding; on special population lactation support; advocacy for the profession as well as for breastfeeding; and a world of fun that can only be found in the Texas-style celebration of our organization's history. You can hear sessions from presenters you've always wanted to hear, from presenters you've heard before, and from those that you will remember in years to come. Your biggest problem will be in deciding which sessions to attend! [Click here](#) to register online.

Plan on attending the USLCA General Meeting on Friday, July 23, from 9-10am, to hear what USLCA is doing for you—and to let us know how we can help you!

See you in San Antonio!

Healthcare Reform Includes Support for Employed Breastfeeding Mothers

By Marsha Walker, RN, IBCLC, RLC, Director of Public Policy

The passage of the workplace breastfeeding support provision in the [Patient Protection and Affordable Care Act](#) (also known as healthcare reform) represents a much needed boost to help address employment barriers to breastfeeding. Return to work is one of the major reasons for the avoidance or abandonment of breastfeeding. The provision states that employers shall provide reasonable, unpaid break time and a private, non-bathroom place for an employee to express breast milk for her nursing child for up to one year after the child's birth. [See next page to read the provision] Employers with less than 50 employees are not subject to the requirement if it would cause "undue hardship."

It takes little for a company to provide lactation support. Basic needs include a clean place to express milk in privacy and break time to express milk approximately every 3 hours during the work period. A model law in Oregon defines reasonable time for milk expression as 30 minutes for every four hours worked; a good match between natural breastfeeding cycles and the rhythms of the workday. A growing number of companies across the United States offer worksite lactation programs that also include access to information and professional support from a lactation consultant or other health experts.

Currently, [24 U.S. states, Puerto Rico, and the District of Columbia](#) have legislation related to breastfeeding in the workplace. The new federal provision will provide a minimum level of support in *all* states, but it will not preempt a State law that provides stronger protections.

Although the law is effective immediately upon President Obama's signing of the [Patient Protection and Affordable Care Act](#), the U.S. Department of Labor must now work to define terms and enforcement procedures. USLCA will be closely monitoring and supporting this process and stands ready to support employers and breastfeeding employees with tools, information, and resources. USLCA members can refer employers, human resources managers, and breastfeeding employees who are interested in helping to establish worksite lactation programs at their place of employment to a list of frequently asked questions on the [US Breastfeeding Committee website](#). The Colorado Breastfeeding Coalition has helpful videos available on their channel at <http://www.youtube.com/user/cobfcvideos>. The three videos are:

- **Breastfeeding and working** - moms share their stories
- **Employer perspective on accommodating breastfeeding employees** - an employer and a breastfeeding employee discuss how and why they made their workplace mother-friendly
- **Workplace Accommodations for Nursing Mothers** - overview of the law in Colorado - also relevant in other states, as legislation is similar

A useful resource for employers, employees, and lactation consultants is [The Business Case for Breastfeeding](#), published in 2008 by the Department of Health and Human Services. Materials in this program report an impressive return on investment for employers that provide workplace lactation support, including lower health care

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99 Hudson Street 12th Floor
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Healthcare Reform, Continued:

Employees whose companies provide breastfeeding support consistently report improved morale, better satisfaction with their jobs, and higher productivity. State breastfeeding coalitions in 32 states (Alabama, Alaska, Arizona, California, Colorado, Connecticut, District of Columbia, Florida, Georgia, Hawaii, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Michigan, Minnesota, Nevada, New York, North Carolina, Oregon, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, Texas, Utah, Vermont, Washington, West Virginia, and Wisconsin) have received training and are using this program to approach employers in their state to institute worksite breastfeeding support. With this new law, USLCA members may wish to contact their [state breastfeeding coalition](#) and join in this effort. USLCA chapters may wish to utilize the materials and approach employers and employer groups regarding how to help implement the provisions of the law.

HR 3590 EAS/PP SEC. 4207. REASONABLE BREAK TIME FOR NURSING MOTHERS.

Section 7 of the Fair Labor Standards Act of 1938 (29 U.S.C. 207) is amended by adding at the end the following:

(r)(1) An employer shall provide—

- (A) a reasonable break time for an employee to express breast milk for her nursing child for 1 year after the child's birth each time such employee has need to express the milk; and
- (B) a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public, which may be used by an employee to express breast milk.

(2) An employer shall not be required to compensate an employee receiving reasonable break time under paragraph (1) for any work time spent for such purpose.

(3) An employer that employs less than 50 employees shall not be subject to the requirements of this subsection, if such requirements would impose an undue hardship by causing the employer significant difficulty or expense when considered in relation to the size, financial resources, nature, or structure of the employer's business.

(4) Nothing in this subsection shall preempt a State law that provides greater protections to employees than the protections provided for under this subsection.

Did You Know? A Little Bit of History

In 1919, the International Labor Organization Maternity Protection Convention recommended nursing women be allowed 30 minutes twice a day during work hours for this purpose. The ILO continues to support breastfeeding women. Its [2000 Maternity Protection Convention and Recommendations](#) include the following:

- A woman shall be provided with the right to one or more daily breaks or a daily reduction of hours of work to breastfeed her child.
- The period during which nursing breaks or the reduction of daily hours of work are allowed, their number, the duration of nursing breaks, the procedures for the reduction of daily hours of work shall be determined by national law and practice. These breaks or the reduction of daily hours of work shall be counted as working time and remunerated accordingly.
- Each member shall, after consulting the representative organizations of employers and workers, adopt appropriate measures to ensure that pregnant or breastfeeding women are not obliged to perform work which has been determined by the competent authority to be prejudicial to the health of the mother or the child, or where an assessment has established a significant risk to the mother's health or that of her child.
- On production of a medical certificate or other appropriate certification as determined by national law and practice, the frequency and length of nursing breaks should be adapted to particular needs.
- Where practical and with the agreement of the employer and the women concerned, it should be possible to combine the time allotted for daily nursing breaks to allow a reduction of hours of work at the beginning or at the end of the working day.
- Where practical, provision should be made for the establishment of facilities for nursing under adequate hygienic conditions at or near the workplace.

MORE ON HEALTHCARE REFORM AND ADVOCACY: A letter signed by 90 organizations was recently sent to Congress, thanks to Dr. Melissa Bartick of American Public Health Association.

USLCA is one of many professional or health related organizations and associations that have signed on to a letter that will be sent to the Senate and House Congressional Appropriations Committees as well as the Secretary and Assistant Secretary of Health regarding the formation of a federal interagency workgroup on breastfeeding. The letter in part calls upon Congress ". . . to dedicate new sustainable line item funding to breastfeeding in order to raise our nation's rates to approach the levels recommended by major national and international health organizations. Funding is required for strong central federal government leadership to strategically coordinate, develop and implement plans to accomplish the following:

- a. Transform maternity care and infant feeding practices of our maternity facilities into fully evidence based Interventions (e.g., the Ten Steps to Successful Breastfeeding), including health professional education.
- b. Help shift social norms to ensure that breastfeeding is supported as the healthiest choice for infants and mothers.
- c. Support practices that allow working women to continue to breastfeed.
- d. Ensure sustainable federal oversight in all agencies that address maternal or child health with funding to carry out the necessary research, services and education.

We urge that this \$15 million be directed to the office of the Secretary of Health and Human Services. The Inter agency Work Group on Breastfeeding, would then serve as the coordinating body that makes recommendations to the Secretary and departmental and agency leaders as to how to allocate these funds for research, education, and services in order to accomplish breastfeeding goals. At least one third of the funds should be used to improve maternity care practices such as through building hospital collaboratives and training programs."

USLCA is hopeful that better coordination of breastfeeding funding and strategy at the Federal level will help remove some of the barriers to breastfeeding encountered by so many mothers in this country.

[Click here](#) to read the letter in its entirety

UPCOMING USLCA WEBINARS!

- **"Assessment and Treatment of Tongue-Tie,"** presented by Alison K. Hazelbaker, PhD, IBCLC, RLC, on Wednesday, April 28, at 2pm Eastern, 1pm Central, noon Mountain, and 11am Pacific. 3 L-CERPs. *NOTE: This is a 3 hour webinar—imagine trying to cover this topic in 60 minutes! The cost for this webinar is \$40 for members—3 times the CERPs for only twice the price! See next page for a flyer you can print and post for your co-workers.*
- **"Foremilk-Hindmilk Imbalance: Signs, Symptoms, and Interventions,"** presented by Ellen Lechtenberg, RD, CSP, IBCLC, on Tuesday, May 18. Look for the time to be posted soon on the USLCA [Education and Resources](#) page.

Remember that you can access all previous webinars from the USLCA website. These make perfect presentations to use for chapter meetings, and a great way to earn cheap CERPs. If you would like to present a webinar on your

Don't Forget the Monthly Chapter Conference Calls!

Does your state have a Chapter? USLCA's goal is to have a strong Chapter in each state to represent the IBCLC at the state level. Learn what other Chapters are doing, and share what is going on in your area. Participants on these calls are finding they have a lot in common and are struggling with similar issues. Perhaps your Chapter has a creative solution to the problem another Chapter is having! The next call is scheduled for May 2, at 4:00pm Eastern. Email [Debbie Costello](#) for more information about these calls and about how to start a Chapter in your area if you don't have one yet.



USLCA's Mission:

To build and sustain a national association that advocates for
lactation professionals

USLCA's Vision:

IBCLCs are valued recognized members of the health care team

Lunch and Learn Webinars -Earn IBLCE CERPs

"Assessment and Treatment of Tongue-Tie"

Alison K. Hazelbaker, PhD, IBCLC, RLC

Wednesday, April 28, 2010

2pm Eastern, 1pm Central, 12pm Mountain, 11am Pacific

3 Hour program,

3 L CERPs

Certificates are
emailed to
attendees

Prices:

USLCA Members

\$40

Non-members \$55,

Groups 2-10 \$70,

10 or more \$90

Objectives

1. The learner will be able to define tongue-tie.
2. The learner will be able to discuss proper assessment of tongue-tie.
3. The learner will be able to describe the various treatment approaches.
4. The learner will be able to describe the political issues currently surrounding tongue-tie assessment and treatment.

United States Lactation Consultant Association

2501 Aerial Center
Parkway
Suite 103
Morrisville,
North Carolina 27560

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1. Download the sign up sheet for the appropriate webinar. [Click here](#) for list of scheduled webinars.
2. Submit your sign up sheet and payment information to our headquarters using these options:
Attention: USLCA Webinar
email ScottSherwood@uslcaonline.org
or fax 919-459-2075
3. You will then receive an email invitation to register for the webinar. Please complete this as soon as possible. You will not be able to sign on to the webinar until this registration is submitted and approved.



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2501 Aerial Center Parkway, Suite 103
919-861-4543

Morrisville , NC 27560
Info@uslcaonline.org

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And look for USLCA on [Facebook](#), too!

BRIEFLY NOTED: Two recent research articles address the importance of looking at the *risks of formula-feeding* rather than the *benefits of breastfeeding*:

- McNeil ME, Labbok MH, Abrahams SW. 2010. What are the risks associated with formula feeding? A re-analysis and review. *Birth* 37(1):50-58. Abstract available at <http://www3.interscience.wiley.com/journal/123302749/abstract>.
- Nommsen-Rivers LA, Chantry CJ, Cohen RJ. 2010. Comfort with the idea of formula-feeding helps explain ethnic disparity in breastfeeding intentions among expectant first-time mothers. *Breastfeeding Medicine* 5(1): 25-33. Article available for free at: <http://www.liebertonline.com/doi/pdfplus/10.1089/bfm.2009.0052>

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