

Senate Bill No. 22

CHAPTER 460

An act to amend Section 123360 of, and to add Sections 1257.9 and 123361 to, the Health and Safety Code, and to add Section 14134.55 to the Welfare and Institutions Code, relating to breast-feeding.

[Approved by Governor October 11, 2007. Filed with
Secretary of State October 11, 2007.]

LEGISLATIVE COUNSEL'S DIGEST

SB 22, Migden. Breast-feeding.

Under existing law, the State Department of Public Health licenses and regulates health facilities, including hospitals.

This bill would require the State Department of Public Health to recommend specified training that is intended to improve breast-feeding rates among mothers and infants for general acute care hospitals and special hospitals that provide maternity care, and that have exclusive patient breast-feeding rates in the lowest 25%, as described. The bill would require the department to notify the hospital director or other person in charge of the hospital that the training is available, upon request, to the hospital.

Existing law provides for the California Special Supplemental Food Program for Women, Infants, and Children (WIC) administered by the State Department of Public Health and counties, under which nutrition and other assistance is provided to low-income postpartum and lactating women, infants, and children under 5 years of age. Existing law also requires the department to conduct a public service campaign that includes the promotion of mothers breast-feeding their infants.

This bill would require the department not later than July 1, 2008, to the extent that specified federal funds and private grants or donations are made available for this purpose, to begin expansion of the breast-feeding peer counseling program at local agency WIC sites, as provided.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which health care services are provided to qualified low-income persons. Existing law provides that Medi-Cal benefits include various services to lactating mothers and infants.

This bill would require the department to streamline and simplify existing Medi-Cal program procedures in order to improve access to lactation supports and breast pumps among Medi-Cal recipients.

The people of the State of California do enact as follows:

SECTION 1. The Legislature hereby finds and declares all of the following:

(a) The United States Surgeon General and the American Academy of Pediatrics (AAP) recommend exclusive breast-feeding for most babies, unless specifically contraindicated, for the first six months and continued breast-feeding with the addition of appropriate foods up to at least one year of age.

(b) Medical research provides strong evidence that breast-feeding decreases the incidence and severity of diarrhea, respiratory tract infections, otitis media, a wide range of infectious diseases, necrotizing enterocolitis, and urinary tract infections.

(c) The California Obesity Prevention Plan highlights breast-feeding as a key strategy. The United States Government's Healthy People 2010 goals seek to increase breast-feeding initiation (any breast milk) to at least 75 percent of babies, at least 60 percent of babies exclusively breast-feeding at three months, at least 50 percent of babies having some breast milk at six months, and at least 25 percent of babies exclusively breast-feeding at six months.

(d) The California Special Supplemental Food Program for Women, Infants, and Children (WIC) program provided for pursuant to Article 2 (commencing with Section 123275) of Chapter 1 of Part 2 of Division 106 of the Health and Safety Code, provides nutritious foods and breast-feeding support to 1.4 million pregnant and postpartum women and their children up to five years of age. While 67 percent of WIC mothers initiate breast-feeding at least partially in the hospital, only 15 percent are exclusively breast-feeding by the time their babies are two months old.

(e) Skilled, culturally competent support is critical to increasing breast-feeding among high-risk low-income women. Key factors that appear to increase the duration of breast-feeding among WIC mothers include all of the following:

- (1) Attendance at a breast-feeding class.
- (2) Knowing others who have breast-fed.
- (3) Support of breast-feeding by significant others.

(f) In the past five years, WIC pilot projects, which are typically funded by foundations, First Five program grants, and United States Department of Agriculture special grants, have demonstrated that using breast-feeding peer counselors and lactation consultants has a direct, positive impact on breast-feeding rates in this population.

SEC. 2. Section 1257.9 is added to the Health and Safety Code, to read:

1257.9. (a) (1) The department shall recommend training for general acute care hospitals, as defined in subdivision (a) of Section 1250, and special hospitals, as defined in subdivision (f) of Section 1250, that is intended to improve breast-feeding rates among mothers and infants. This recommended training should be designed for general acute care hospitals that provide maternity care and have exclusive patient breast-feeding rates

in the lowest 25 percent, according to the data published yearly by the State Department of Public Health, when ranked from highest to lowest rates. The training offered shall include a minimum of eight hours of training provided to appropriate administrative and supervisory staff on hospital policies and recommendations that promote exclusive breast-feeding. Hospitals that meet the minimum criteria for exclusive breast-feeding rates prescribed in the most current Healthy People Guidelines of the United States Department of Health and Human Services shall be excluded from the training requirements recommended by this paragraph.

(2) The department shall notify the hospital director or other person in charge of a hospital to which paragraph (1) applies, that the eight-hour model training course developed pursuant to subdivision (b) of Section 123360, is available, upon request, to the hospital.

(b) The recommendations provided for in this section are advisory only. Nothing in this section shall require a hospital to comply with the training recommended by this section. Section 1290 shall not apply to this section, nor shall meeting the recommendations of this section be a condition of licensure.

SEC. 3. Section 123360 of the Health and Safety Code is amended to read:

123360. (a) The State Department of Public Health shall include in its public service campaign the promotion of mothers breast-feeding their infants.

(b) The department shall develop a model eight-hour training course of hospital policies and recommendations that promote exclusive breast-feeding, incorporating available materials already developed by the department, and shall specify hospital staff for whom this model training is appropriate. The department shall also provide the model training materials to hospitals, upon request.

SEC. 4. Section 123361 is added to the Health and Safety Code, to read:

123361. To the extent that non-United States Department of Agriculture (USDA) federal funds and private grants or donations are made available for this purpose, the State Department of Public Health shall, no later than July 1, 2008, begin expansion of the breast-feeding peer counseling program at local agency California Special Supplemental Food Program for Women, Infants, and Children (WIC) sites. Plans for the expansion of the program shall take into account local WIC agency program models that have demonstrated the greatest improvement in breast-feeding rates, including exclusive breast-feeding rates. Program expansion shall be contingent upon the availability of non-USDA federal funds and private grants or donations being made available for this purpose. Nothing in this section shall impact USDA federal funding for the WIC Supplemental Food Program or the breast-feeding peer counseling program at local agency WIC sites.

SEC. 5. Section 14134.55 is added to the Welfare and Institutions Code, to read:

14134.55. The department shall streamline and simplify existing Medi-Cal program procedures in order to improve access to lactation supports and breast pumps among Medi-Cal recipients.