

SENATE BILL REPORT

HB 2329

As Reported by Senate Committee On:
Health Care, February 27, 2014

Title: An act relating to creating the breastfeeding-friendly Washington designation.

Brief Description: Creating the breastfeeding-friendly Washington designation.

Sponsors: Representatives Riccelli, Short, Hudgins, Cody, Stanford, Walkinshaw, Bergquist, Farrell, Jinkins, S. Hunt, Green, Tharinger, Morrell, Van De Wege, Clibborn, Harris, Tarleton, Vick, Moeller, Kagi, Roberts, Senn and Pollet.

Brief History: Passed House: 2/13/14, 85-13.

Committee Activity: Health Care: 2/24/14, 2/27/14 [DPA].

SENATE COMMITTEE ON HEALTH CARE

Majority Report: Do pass as amended.

Signed by Senators Becker, Chair; Dammeier, Vice Chair; Pedersen, Ranking Member; Angel, Bailey, Cleveland, Keiser and Parlette.

Staff: Bonnie Kim (786-7316)

Background: The Baby-Friendly Hospital Initiative is a global program to encourage and recognize hospitals and birthing centers that promote breastfeeding for infant feeding and mother and baby bonding. Studies show that breastfed babies are less likely to suffer from serious illnesses, including gastroenteritis, asthma, eczema, and respiratory and ear infections. Adults who were breastfed as babies may be less likely to develop risk factors for heart disease such as obesity and high blood pressure. Women who breastfeed are less likely to develop heart disease, hypertension, diabetes, high cholesterol, breast cancer, and ovarian cancer in later life.

In 2001 legislation was enacted to allow employers to use an infant-friendly designation if their workplace breastfeeding policy (1) provided flexible work schedules to accommodate expressing milk; (2) maintained a convenient, sanitary, safe, and private location for breastfeeding or expressing milk; (3) provided a convenient and safe water source for washing hands and breast-pumping equipment; and (4) had a convenient, hygienic refrigerator in the workplace for storing breast milk. Funding for the program was eliminated in 2002.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Summary of Bill (Recommended Amendments): The Department of Health (DOH) must create the Breastfeeding-Friendly Washington designation for hospitals and birthing centers that support and encourage breastfeeding. To participate in this voluntary program, hospitals and birthing centers must submit their breastfeeding policies and supporting documentation with an application to DOH. DOH then reviews and approves policies that meet designation requirements and issues a designation based on the number of steps met by the hospital.

Beginning July 1, 2014, approved hospitals and birthing centers may use the designation on promotional materials if they achieve criteria defined by DOH based on the following ten steps:

- have a written breastfeeding policy that is routinely communicated to all health care staff;
- train all health care staff in skills necessary to implement this policy;
- inform all pregnant women about the benefits and management of breastfeeding;
- help mothers initiate breastfeeding within one hour of birth;
- show mothers how to breastfeed and how to maintain lactation, even if they are separated from their infants;
- encourage breast milk over alternatives, but may provide guidance on formula supplementation or bottle feeding, if preferred by the mother or medically indicated;
- practice rooming in by allowing mothers and infants to remain together 24 hours per day;
- encourage breastfeeding on demand;
- inform all pregnant women about the risks and benefits of pacifiers or artificial nipples to infants; or
- foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic.

DOH may issue two types of Breastfeeding-Friendly Washington designations: (1) a designation recognizing a facility meeting the criteria for five or more steps; and (2) a designation recognizing a facility meeting all the criteria for all ten steps.

By December 31, 2016, DOH must report to the Legislature on the levels of achievement by, and locations of, participating hospitals and birthing centers and with recommendations to improve or expand the program.

EFFECT OF CHANGES MADE BY HEALTH CARE COMMITTEE (Recommended Amendments): Removes program components related to health care providers, workplaces, and child day care centers; removes a section defining the program and places a shortened program definition in subsection (1); replaces a step requiring a hospital to "give newborn infants no food or drink other than breast milk, unless medically indicated" with "encourage breast milk over alternatives, but may provide guidance on formula supplementation or bottle feeding, if preferred by the mother or medically indicated"; replaces a step requiring a hospital to "give no pacifiers or artificial nipples to breastfeeding infants" with "inform all pregnant women about the risks and benefits of pacifiers or artificial nipples to infants"; requires DOH to issue two designations: one to applicants meeting five or more steps and another to applicants meeting all ten steps; and requires DOH to report to the Legislature by December 31, 2016.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on House Bill: PRO: Breast milk provides ideal nutrition for infants. This bill creates a permissive designation available to those who want to seek it. This bill encourages communities to increase breastfeeding-friendly policies. The Baby-Friendly USA designation is difficult to achieve and this legislation helps hospitals to reach that goal. The committee should support this bill because it includes health care providers, employers, and day cares. It is a voluntary recognition program that leaves no one out. This bill does not diminish the needs of formula-feeding mothers. Six hospitals in Washington have already adopted the ten steps. Formula can cost a family up to \$1,500 per year.

OTHER: The bill should be amended to allow for pacifiers. Infant formula is the only safe and supported nutrition when breast milk is not available. Restricting information on infant formula restricts access to health care information and limits the patient-provider relationship.

Persons Testifying: PRO: Representative Riccelli, prime sponsor; Alison Carl White, WithinReach; Lisa Thatcher, WA State Hospital Assn.; Jane Dimer, Group Health Cooperative, American Congress of Obstetricians and Gynecologists; Jennifer McNamara, DOH.

OTHER: Mardi Mountford, International Formula Council; Matthew Johnson, Girlfriends Health Guide; Kristina Hermach, citizen.