

NJBC Trustee's Second Tuesday Phone Call

November 12, 2019

12:30pm-1:30pm

Minutes

Call-in

Dial-in Number: (605) 313-5751

Access Number: 409-302

Host PIN: 1751

## **Participants:**

Judy, Ellen, Mary, Jill, John, Kay, Jessica Meeting called to order at 12:38 pm

Mary posts the draft agenda at the end of the shared Google Doc. All are welcome to make comments and suggestions for our agenda items.

The agenda items from the last meeting were summarized from the most frequently mentioned topics over the past year. The goal would be to have items that we can actually accomplish and then move on to other things.

## Patient's Breastfeeding Bill of Rights:

Feedback about New York's document: It is suggested that it is too lengthy and wordy, but everyone agrees about the idea. There is a one page poster but it is also lengthy. Maybe we can come up with our own, simpler version? It looks like the summary section of our NJ Hospital regulations on our website. Even if we want to make it less wordy, there is a fine line between being clear and accurate, and making it simpler. The NY document is a good place to start from, especially the poster. It could be a good way to help circulate the care that women are entitled to. We could merge our document on the NJ hospital regulations and something like this. Should we also include rights regarding birth? Breastfeeding is only part of this. Mary volunteers to work on our NJ version.

This bill of rights is not the same thing as the breastfeeding strategic plan, but having a breastfeeding bill of rights for NJ could be a recommendation within the Strategic Plan. The NY one was mandated by law

and it wouldn't have to be that way in NJ. It can be posted in the hospitals but this info should be disseminated prenatally as well. We could be the ones who would take on the task of creating it, even if it is included as a recommendation in the Strategic Plan, but the maternity and birth aspect might be too much for us to handle. In the Strategic Plan we could also recommend that the maternity aspect be taken on by another group of experts as a collaborative partnership. We should look around to see what other states have come up with.

# Committee to apply for grants for IBCLC/CLC support:

Several people volunteered to be part of this committee at the general meeting, but Max Spivak, owner of Laally, nipple shield with colostrum tube, is one of them. How does his partnership fit in with our by-laws? (Mary reads by-laws). The Laally product is to be used as a tool AT THE BREAST, not as a substitute. It is a teat but not a replacement. However we should be careful of their commercial interest. Max has offered to help on the grant applications committee. Can he help out without being a member of the committee, asan outside person even if he doesn't qualify for membership? He has already signed up to be a member. No one can remember another member of the NJBC who had a similar commercial interest. We can err on the side of caution and cite by-laws to refuse him, or allow him to participate. We shouldn't vote on it without discussing it with Max and his wife. All agree that Mary will call him and discuss the reasons he wants to participate, then circle back with us.

# Milk Banking Legislation:

Mary and Florence are not allowed to participate in the conversation about milk banking. The DOH is drafting regulations as required by the bill passed by Governor Christie. There was a public listening session after which we submitted our position. Florence spoke to the director of HMBANA and attended a meeting with other local milk banking experts to discuss on which standards to base the NJ regulations. PA had an issue with Prolacta's aggressively lobbying for higher standards of testing. There were concerns that following these standards would make it difficult for HMBANA to operate. Prolacta's involvement is always concerning because of the price of their human milk fortifier. HMBANA has always been considered the gold standard.

Like Mary and Florence, Ellen M is also in a difficult position regarding becoming too involved with milk banking legislation. Mary asks for a volunteer from the coalition but due to the time constraints involved, no one volunteered. We did send in our commentary that we agree with followingHMBANA's standards. After the comment period ends, there will be a draft of regulations circulated, and then another comment period, but we don't know when. However they didn't make any changes based on anyone's comments on the breastfeeding regulations, so we are unsure if they would be open to making any changes on this legislation. When it begins, the comment period is at least 30 if not 60 days. The HMBANA guidelines were in the initial language of the bill, and all were happy with it. Then the bill was amended at the last minute and the HMBANA part was taken out.

Testing for drugs is what makes the Prolacta standards difficult for HMBANA to follow. Prolacta uses a costly test that is not reliable and produces a lot of false positives. We are assuming that Prolacta is pushing in NJ as they did in PA. Mary asks for suggestions for someone among the membership to step up and work on this.

Ellen M comments that work on the Strategic Plan is going well. They are currently in the stakeholder engagement phase. Some data collection is still going on but is winding down now in time for analysis. The next meetings are on November 18 and December 11. There are around 60 stakeholders taken from among healthcare, government, business and community members. At the upcoming meeting Ellen will be asking stakeholders to think about priorities and recommend areas to be addressed by the Strategic Plan. The stakeholder input will be joined with the information from the data collectionand other background info collected. Funding ends at the end of February so it is a tight time frame. Ellen will be working on writing to get a draft out ASAP that will go up the chain of command in the DOH. She is not sure how long it will take for the final Strategic Plan to be available. There will be no dissemination phase in this grant, so we need to think about the role the NJBC should take in the implementation. We don't know how much responsibility the DOH will take on. A lot is up in the air but we should think about how we can keep the plan alive. It will be a three year plan. It's a start. NJ has never done something like this besides *Shaping NJ* a few years ago. The Strategic Plan is an ongoing project and we will make our best efforts to get out the best plan we can. We should think big now and keep checking in with Ellen even if our recommendations aren't fully fleshed out.

#### **Additional Items:**

Kay reports three donations in October. The rest of the money was from before October. We only have 41 people who have filled out the membership form. We need to get people to fill out the new form with the demographic info and diversity statement. Mary will send out an invite on Google Groups to fill out the new form.

Kay asks for feedback on a letter for donations to turn in to the IRS. She would like to send this out before the end of the year. Kay will sign it as the treasurer of the NJBC. Mary's note will go out to everyone on the google email list. We have a lot of people on it but only people who fill it the membership from are eligible to vote for the trustees next year. The form needs to be filled out annually. Our income for the year was \$385 so we need reminders about donating after we send out the initial announcement.

Mary reminds the group about the 211 phone number resource. She called and pretended to be a participant and asked about breastfeeding resources. They finally did connect her with someone but they didn't know about zipmilk. She will approach them to offer zipmilk as a referral. On the survey of pediatricians for the NJ StategicPlan, zipmilkhad the lowest numbers. This indicates that we need to make more efforts with the AAP to reach out to pediatricians. Kay offers to write a blurb on zipmilk for their quarterly newsletter. Someone from the NJBC could possibly attend the AAP NJ in May.

The next meeting is to be held on January 15 in person. The call was adjourned at 1:30pm.