

Commission on Accreditation of Allied Health Education Programs

Standards and Guidelines for the Accreditation of Lactation Education Programs Standards initially adopted in 2011 by

American Academy of Pediatrics
International Lactation Consultant Association
International Board of Lactation Consultant Examiners
Lactation Education Accreditation and Approval Review Committee
and
Commission on Accreditation of Allied Health Education Programs

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) accredits programs upon the recommendation of the Lactation Education Accreditation and Approval Review Committee (LEAARC).

These accreditation **Standards and Guidelines** are the minimum standards of quality used in accrediting programs that prepare individuals to enter the Lactation profession. **Standards** are the minimum requirements to which an accredited program is held accountable. Guidelines are descriptions, examples, or recommendations that elaborate on the Standards. Guidelines are not required, but can assist with interpretation of the Standards. Standards are printed in regular typeface in outline form. *Guidelines* are printed in italic typeface in narrative form.

Preamble

The Commission on Accreditation of Allied Health Education Programs (CAAHEP), the Lactation Education Accreditation and Approval Review Committee (LEAARC), the International Lactation Consultant Association (ILCA), and the International Board of Lactation Consultant Examiners (IBLCE) cooperate to establish, maintain and promote appropriate standards of quality for educational programs in Lactation and Breastfeeding and to provide recognition for educational programs that meet or exceed the minimum standards outlined in these accreditation **Standards and Guidelines**. Lists of accredited programs are published for the information of students, employers, educational institutions and agencies, and the public.

These **Standards and Guidelines** are to be used for the development, evaluation, and self-analysis of Lactation and Breastfeeding programs. On-site review teams assist in the evaluation of a program's relative compliance with the accreditation Standards.

Description of the Profession

The lactation consultant is an allied health care professional who possesses the necessary skills, knowledge and attitudes to provide quality breastfeeding assistance to mothers and their children. Lactation consultants work within the professional code of ethics, clinical competencies, scope of practice and standards of practice. They integrate established knowledge and evidence when providing care for breastfeeding families, work within the legal framework of their respective geopolitical regions or settings, and maintain knowledge and skills through regular continuing education.

Lactation consultants educate women, families, health professionals and the community about breastfeeding and human lactation. They facilitate the development of policies which protect, promote and support breastfeeding, and act as advocates for breastfeeding as the child-feeding norm. They provide holistic, evidence-based breastfeeding support and care for women and their families from preconception to weaning. Using principles of adult education, they facilitate learning for clients, health care providers and others in the community.

Lactation consultants perform comprehensive maternal, child and feeding assessments related to lactation. They develop and implement an individualized feeding plan in consultation with the mother using evidence-based information. They integrate cultural, psychosocial and nutritional aspects of breastfeeding. They support and encourage mothers to successfully meet their breastfeeding goals, using effective therapeutic communication skills when interacting with clients and other health care providers. They use the principles of family-centered care while maintaining a collaborative, supportive relationship with clients.

Lactation consultants maintain accurate records and reports, where appropriate. They preserve client confidence by respecting the privacy, dignity and confidentiality of mothers and families. They act with reasonable diligence by assisting families with decisions regarding the feeding of children by providing information that is evidence-based and free of conflict of interest.

Lactation consultants provide follow-up services as required, and make necessary referrals to other health care providers and community support resources when necessary. They deliver coordinated services to women and families, and work collaboratively and interdependently with other members of the health care team.

I. Sponsorship

A. Sponsoring Educational Institution

- A sponsoring institution in the United States must be a post-secondary academic institution accredited by an institutional accrediting agency that is recognized by the U.S. Department of Education, and must be authorized under applicable law or other acceptable authority to provide a postsecondary program, which awards a minimum of a certificate/diploma at the completion of the program.
- A sponsoring institution outside the U.S. must be a post-secondary academic institution authorized under applicable law or other acceptable authority to provide a postsecondary program, which awards a minimum of a certificate/diploma at the completion of the program.

B. Consortium Sponsor

- 1. A consortium sponsor is an entity consisting of two or more members that exists for the purpose of operating an educational program. In such instances, at least one of the members of the consortium must meet the requirements of a sponsoring educational institution as described in I.A.
- 2. The responsibilities of each member of the consortium must be clearly documented in a formal affiliation agreement or memorandum of understanding, which includes governance and lines of authority.

C. Responsibilities of Sponsor

The Sponsor must ensure that the provisions of these **Standards and Guidelines** are met.

II. Program Goals

A. Program Goals and Outcomes

There must be a written statement of the program's goals and learning domains consistent with and responsive to the demonstrated needs and expectations of the various communities of interest served by the educational program. The communities of interest that are served by the program must include, but are not limited to students, graduates, faculty, sponsor administration, employers, physicians, lactation consultants, health care professionals involved in the care of breastfeeding women and children, and the public.

Program-specific statements of goals and learning domains provide the basis for program planning, implementation, and evaluation. Such goals and learning domains must be compatible with the mission of the sponsoring institution(s), the expectations of the communities of interest, and nationally accepted standards of roles and functions. Goals and learning domains are based upon the substantiated needs of health care providers and employers, and the educational needs of the students served by the educational program.

B. Appropriateness of Goals and Learning Domains

The program must annually assess and review its goals and learning domains. Program personnel must identify and respond to changes in the needs and/or expectations of its communities of interest.

An advisory committee, which is representative of at least each of the communities of interest named in these **Standards**, must be designated and charged with the responsibility of meeting at least annually, to assist program and sponsor personnel in formulating and periodically revising appropriate goals and learning domains, monitoring needs and expectations, and ensuring program responsiveness to change.

C. Minimum Expectations

The program must have the following goal defining minimum expectations: "To prepare competent entry-level lactation consultants in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains."

Programs adopting educational goals beyond entry-level competence must clearly delineate this intent and provide evidence that all students have achieved the basic competencies prior to entry into the field.

Nothing in this standard restricts programs from formulating goals beyond entrylevel competence.

III. Resources

A. Type and Amount

Program resources must be sufficient to ensure the achievement of the program's goals and outcomes. Resources must include, but are not limited to: faculty; clerical and support staff; curriculum; finances; offices; classroom, and, ancillary student facilities; clinical affiliates; equipment; supplies; computer resources; instructional reference materials, and faculty/staff continuing education.

These requirements may vary depending on whether the program is offered entirely through distance learning.

B. Personnel

The sponsor must appoint sufficient faculty and staff with the necessary qualifications to perform the functions identified in documented job descriptions and to achieve the program's stated goals and outcomes.

1. Program Director

a. Responsibilities

The Program director must:

- 1) Supervise those activities of the faculty and administrative staff that are in direct support of the program;
- 2) Organize, administer, continuously review, plan, and develop processes that assure general effectiveness of the program;
- 3) Assure that continuous, competent, and appropriate guidance for the clinically related program components is provided.

b. Qualifications

The program director must:

- 1) Have an appointment in the sponsor's academic institution.
- Hold a graduate degree in education, administration, health care, or the basic medical sciences
- 3) Have the requisite knowledge and skills to administer the classroom/academic aspects of the program.
- 4) Have the requisite knowledge and skills to administer the operation of the overall program.

2. Faculty/Instructional Staff

a. Responsibilities

- The faculty/instructional staff must be responsible for providing instruction, for evaluating students and reporting progress as required by the institution, and for periodically reviewing and updating course materials.
- 2) In each location where a student is assigned for didactic or supervised practice instruction, there must be a qualified individual designated to provide that supervision and related frequent assessments of the students' progress in achieving acceptable program requirements.

b. Qualifications

- 1) Faculty/instructional staff must be individually qualified by education and experience and must be effective in teaching the subjects assigned.
- 2) Faculty/instructional staff for the lactation portion of the educational program, both didactic and supervised clinical practice, must each be a currently certified lactation consultant for 5 years or more.

C. Curriculum

The curriculum must ensure the achievement of program goals and learning domains. Instruction must be an appropriate sequence of classroom, laboratory,

and clinical activities. Instruction must be based on clearly written course syllabithat include course description, course objectives, methods of evaluation, topic outline, and competencies required for completion.

The program must demonstrate by comparison that the curriculum offered meets or exceeds the content specified in Appendix B of these Standards.

D. Resource Assessment

The program must, at least annually, assess the appropriateness and effectiveness of the resources described in these **Standards**. The results of resource assessment must be the basis for ongoing planning and appropriate change. An action plan must be developed when deficiencies are identified in the program resources. Implementation of the action plan must be documented and results measured by ongoing resource assessment.

IV. Student and Graduate Evaluation/Assessment

A. Student Evaluation

1. Frequency and purpose

Evaluation of students must be conducted on a recurrent basis and with sufficient frequency to provide both the students and program faculty with valid and timely indications of the students' progress toward and achievement of the competencies and learning domains stated in the curriculum.

2. Documentation

Records of student evaluations must be maintained in sufficient detail to document learning progress and achievements.

B. Outcomes

1. Outcomes Assessment

The program must periodically assess its effectiveness in achieving its stated goals and learning domains. The results of this evaluation must be reflected in the review and timely revision of the program.

Outcome assessments must include, but are not limited to: national/international credentialing examination(s) performance, programmatic retention/attrition, graduate satisfaction, employer satisfaction, job (positive) placement, and programmatic summative measures. The program must meet the outcomes assessment thresholds.

2. Outcomes Reporting

The program must periodically submit to LEAARC the program goal(s), learning domains, evaluation systems (including type, cut score, and appropriateness), outcomes, its analysis of the outcomes, and an appropriate action plan based on the analysis.

Programs not meeting the established thresholds must begin a dialogue with the LEAARC to develop an appropriate plan of action to respond to the identified shortcomings.

V. Fair Practices

A. Publications and Disclosure

- Announcements, catalogs, publications, and advertising must accurately reflect the program offered.
- 2. At least the following must be made known to all applicants and students: the sponsor's institutional and programmatic accreditation status as well as the name, address and phone number of the accrediting agencies; admissions policies and practices, including technical standards (when used); policies on advanced placement, transfer of credits, and credits for experiential learning; number of credits required for completion of the program; tuition/fees and other costs required to complete the program; policies and processes for withdrawal and for refunds of tuition/fees.
- At least the following must be made known to all students: academic calendar, student grievance procedure, criteria for successful completion of each segment of the curriculum and for graduation, and policies and processes by which students may perform clinical work while enrolled in the program.
- 4. The sponsor must maintain, and provide upon request, current and consistent information about student/graduate achievement that includes the results of one or more of the outcomes assessments required in these **Standards**.

The sponsor should develop a suitable means of communicating to the communities of interest the achievement of students/graduates.

B. Lawful and Non-discriminatory Practices

All activities associated with the program, including student and faculty recruitment, student admission, and faculty employment practices must be non-discriminatory and in accord with the statutes, rules and regulations of the geopolitical regions or settings in which they are offered. There must be a faculty grievance procedure made known to all paid faculty.

C. Safeguards

The health and safety of patients/clients, students, and faculty associated with the educational activities of the students must be adequately safeguarded.

All activities required in the program must be educational and students must not be substituted for staff.

D. Student Records

Satisfactory records must be maintained for student admission, advisement, counseling, and evaluation. Grades and credits for courses must be recorded on the student transcript and permanently maintained by the sponsor in a safe and accessible location.

E. Substantive Change

The sponsor must report substantive change(s) as described in Appendix A to CAAHEP/LEAARC in a timely manner. Additional substantive changes to be reported to LEAARC within the time limits prescribed include:

- 1. Change in the institution's mission or objectives if these will affect the program
- 2. Change in institution's legal status or form of control
- 3. Change in legal status or ownership of the sponsor
- 4. Changes that represent significant departure in curriculum content
- 5. Change in method of curriculum delivery
- 6. Change in the degree or credential awarded

F. Agreements

There must be a formal affiliation agreement or memorandum of understanding between the sponsor and all other entities that participate in the education of the students describing the relationship, roles, and responsibilities of the sponsor and that entity.

APPENDIX A

(This Appendix will be added by CAAHEP after final approval of the **Standards and Guidelines** document.)

Application, Maintenance and Administration of Accreditation

A. Program and Sponsor Responsibilities

1. Applying for Initial Accreditation

a. The chief executive officer or an officially designated representative of the sponsor completes a "Request for Accreditation Services" form and returns it electronically or by mail to:

Lactation Education Accreditation and Approval Review Committee

International Lactation Consultant Association c/o 228 Park Lane Chalfont PA 18914

The "Request for Accreditation Services" form can be obtained from the CAAHEP website at www.caahep.org/Content.aspx?ID=11.

Note: There is **no** CAAHEP fee when applying for accreditation services; however, individual committees on accreditation may have an application fee.

b. The program undergoes a comprehensive review, which includes a written self-study report and an on-site review.

The self-study instructions and report form are available from the LEAARC. The on-site review will be scheduled in cooperation with the program and LEAARC once the self-study report has been completed, submitted, and accepted by the LEAARC

2. Applying for Continuing Accreditation

 Upon written notice from the LEAARC, the chief executive officer or an officially designated representative of the sponsor completes a "Request for Accreditation Services" form, and returns it electronically or by mail to:

Lactation Education Accreditation and Approval Review Committee
International Lactation Consultant Association
c/o 228 Park Lane
Chalfont PA 18914

The "Request for Accreditation Services" form can be obtained from the CAAHEP website at www.caahep.org/Content.aspx?ID=11.

b. The program may undergo a comprehensive review in accordance with the policies and procedures of the LEAARC.

If it is determined that there were significant concerns with the conduct of the on-site review, the sponsor may request a second site visit with a different team.

After the on-site review team submits a report of its findings, the sponsor is provided the opportunity to comment in writing and to correct factual errors prior to the LEAARC forwarding a recommendation to CAAHEP.

3. Administrative Requirements for Maintaining Accreditation

- a. The program must inform the LEAARC and CAAHEP within a reasonable period of time (as defined by the committee on accreditation and CAAHEP policies) of changes in chief executive officer, dean of health professions or equivalent position, and required program personnel (Refer to Standard III.B.).
- b. The sponsor must inform CAAHEP and the LEAARC of its intent to transfer program sponsorship. To begin the process for a Transfer of Sponsorship, the current sponsor must submit a letter (signed by the CEO or designated individual) to CAAHEP and the LEAARC that it is relinquishing its sponsorship of the program. Additionally, the new sponsor must submit a "Request for Transfer of Sponsorship Services" form. The LEAARC has the discretion of requesting a new self-study report with or without an on-site review. Applying for a transfer of sponsorship does not guarantee that the transfer of accreditation will be granted.
- c. The sponsor must promptly inform CAAHEP and the LEAARC of any adverse decision affecting its accreditation by recognized institutional accrediting agencies and/or state agencies (or their equivalent).
- d. Comprehensive reviews are scheduled by the LEAARC in accordance with its policies and procedures. The time between comprehensive reviews is determined by the LEAARC and based on the program's on-going compliance with the Standards, however, all programs must undergo a comprehensive review at least once every ten years.
- e. The program and the sponsor must pay LEAARC and CAAHEP fees within a reasonable period of time, as determined by the LEAARC and CAAHEP respectively.
- f. The sponsor must file all reports in a timely manner (self-study report, progress reports, probation reports, annual reports, etc.) in accordance with LEAARC policy.
- g. The sponsor must agree to a reasonable on-site review date that provides sufficient time for CAAHEP to act on a LEAARC accreditation recommendation prior to the "next comprehensive review" period, which was designated by CAAHEP at the time of its last accreditation action, or a reasonable date otherwise designated by the LEAARC.

Failure to meet any of the aforementioned administrative requirements may lead to administrative probation and ultimately to the withdrawal of accreditation. CAAHEP will immediately rescind administrative probation once all administrative deficiencies have been rectified.

4. Voluntary Withdrawal of a CAAHEP- Accredited Program

Notification of voluntary withdrawal of accreditation from CAAHEP must be made by the Chief Executive Officer or an officially designated representative of the sponsor by writing to CAAHEP indicating: the desired effective date of the voluntary withdrawal, and the location where all records will be kept for students who have completed the program.

5. Requesting Inactive Status of a CAAHEP- Accredited Program

Inactive status for any accredited program other than one holding Initial Accreditation may be requested from CAAHEP at any time by the Chief Executive Officer or an officially designated representative of the sponsor writing to CAAHEP indicating the desired date to become inactive. No students can be enrolled or matriculated in the program at any time during the time period in which the program is on inactive status. The maximum period for inactive status is two years. The sponsor must continue to pay all required fees to the LEAARC and CAAHEP to maintain its accreditation status.

To reactivate the program the Chief Executive Officer or an officially designated representative of the sponsor must provide notice of its intent to do so in writing to both CAAHEP and the LEAARC. The sponsor will be notified by the LEAARC of additional requirements, if any, that must be met to restore active status.

If the sponsor has not notified CAAHEP of its intent to re-activate a program by the end of the two-year period, CAAHEP will consider this a "Voluntary Withdrawal of Accreditation."

B. CAAHEP and Committee on Accreditation Responsibilities – Accreditation Recommendation Process

1. After a program has had the opportunity to comment in writing and to correct factual errors on the on-site review report, the LEAARC forwards a status of public recognition recommendation to the CAAHEP Board of Directors. The recommendation may be for any of the following statuses: initial accreditation, continuing accreditation, transfer of sponsorship, probationary accreditation, withhold of accreditation, or withdrawal of accreditation.

The decision of the CAAHEP Board of Directors is provided in writing to the sponsor immediately following the CAAHEP meeting at which the program was reviewed and voted upon.

 Before the LEAARC allows the Initial Accreditation of a program to expire, the sponsor must have the opportunity to request reconsideration of that decision or to request voluntary withdrawal of accreditation. The LEAARC's decision is final and CAAHEP will not entertain any appeal on behalf of the program. CAAHEP will notify the sponsor in writing of the LEAARC's decision.

3. Before the LEAARC forwards a recommendation to CAAHEP that a program be placed on probationary accreditation, the sponsor must have the opportunity to request reconsideration of that recommendation or to request voluntary withdrawal of accreditation. The LEAARC's reconsideration of a recommendation for probationary accreditation must be based on conditions existing both when the committee arrived at its recommendation as well as on subsequent documented evidence of corrected deficiencies provided by the sponsor.

The CAAHEP Board of Directors' decision to confer probationary accreditation is not subject to appeal.

4. Before the LEAARC forwards a recommendation to CAAHEP that a program's accreditation be withdrawn or that accreditation be withheld, the sponsor must have the opportunity to request reconsideration of the recommendation, or to request voluntary withdrawal of accreditation or withdrawal of the accreditation application, whichever is applicable. The LEAARC's reconsideration of a recommendation of withdraw or withhold accreditation must be based on conditions existing both when the LEAARC arrived at its recommendation as well as on subsequent documented evidence of corrected deficiencies provided by the sponsor.

The CAAHEP Board of Directors' decision to withdraw or withhold accreditation may be appealed. A copy of the CAAHEP "Appeal of Adverse Accreditation Actions" is enclosed with the CAAHEP letter notifying the sponsor of either of these actions.

At the completion of due process, when accreditation is withheld or withdrawn, the sponsor's Chief Executive Officer is provided with a statement of each deficiency. Programs are eligible to re-apply for accreditation once the sponsor believes that the program is in compliance with the accreditation Standards.

Note: Any student who completes a program that was accredited by CAAHEP at any time during his/her matriculation is deemed by CAAHEP to be a graduate of a CAAHEP-accredited program.

Appendix B Curriculum for Program in Human Lactation

This curriculum defines academic preparation for entry level lactation consultants, applicable for post-secondary institutions throughout the world. The general education curriculum provides a broad base of support to serve as a foundation for lactation consultant practice. The lactation curriculum presents the competencies and objectives required for any lactation program regardless of academic setting. Suggested course content and student skills and behaviors are *Guidelines* and appear in italics to indicate they are at the discretion of the curriculum developers.

This curriculum derives from the document, *Framework for Development of an Academic Program in Breastfeeding and Human Lactation*, developed in 2010 through a grant from the International Lactation Consultant Association.

General Education

The following general education is required:

- Biology: Growth, structure and function of living organisms.
- Research: Fundamental theories and concepts of scientific inquiry and evidence-based practice.
- Human anatomy: Structure of human body systems.
- Human physiology: Physiology and function of human organ systems.
- Child development: Developmental stages for infants and young children
- Basic nutrition: Principles of nutrition and health
- Psychology: Foundations of psychology, counseling or interpersonal communication
- Sociology: Sociological concepts of the cultural aspects of human behavior
- Health care profession: Medical documentation, health/medical terminology, ethics for health professionals (ethical conduct, confidentiality, informed consent and conflict of interest).
- Health safety: Occupational safety, universal safety precautions, infection control, basic life support.

Lactation Curriculum

Α.	Communication and	J		
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
1	Obtain the mother's permission to provide care to her and her child	Obtains permission and examines a mother and her child tactfully and comfortably at each encounter	 Responsibility of the health care provider to obtain direct or implied consent for care Difference between formal consent for care in a medical care setting, such as a hospital or physician office or a private practice, as well as informal permission to touch mother and child throughout a consult Variations within and between cultures 	 Ability to clearly state the purpose for providing care and respond appropriately if it is refused
2	Utilize appropriate counseling skills and techniques	Communicates with appropriate body language in a variety of clinical situations	 Impact of body language in any clinical situation 	 Respectful and accepting manner toward all mothers and families
		situations		 Appropriate use of body language
				 Ability to read and respond to body language of the mother/family member
				 Awareness of one's own attitudes and biases
3	Respect a mother's race, creed, religion, sexual orientation/gender identity/gender expression, age, and national origin Integrate cultural, psychosocial and nutritional aspects of breastfeeding	Interacts effectively across a variety of cultural expectations Describes a variety of cultural implications for breastfeeding support Sensitively presents research-based information about cultural practices	 Cultural and religious beliefs surrounding 1) pregnancy, 2) childbirth and breastfeeding 3) family structure and 4) children, and available local support, where appropriate Current research on norms for various populations Global programs and implementation Local belief systems and differences Cultural sensitivity: how to address a mother's or a family member's beliefs and practices in a respectful manner that includes accurate information and helps the mother accommodate the new information while retaining her ability to decide what to believe and do (mother and family are able to verbalize that they felt culturally respected in the encounter) 	 Adequate assessment of situations and people Ability to respond appropriately Adaptation of program and other approaches used elsewhere Counseling individuals from a variety of backgrounds Ability to calmly respond to the unexpected Acceptance and understanding of differences in circumstances and practices Creativity to support mother in meeting her needs and those of the child Ability to analyze and apply research evidence Teaching skills Active listening, counseling/positive discussion making

A.	Communication and	Counseling		
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
4	Ascertain the mother's goals for breastfeeding	Assesses mother's knowledge of breastfeeding and ascertains current breastfeeding goals Uses effective counseling techniques to elicits information and reflect	 Skills for eliciting maternal concerns Reflective listening History and note taking 	 Ability to ask probing questions and provide information paced to mother's interest, mental and psychological state
		mother's responses back for confirmation		
5	Provide support and encouragement to enable mothers to successfully meet their breastfeeding goals Utilize effective counseling and communication skills when interacting with mothers, children, their	Gathers correct, appropriate, and complete data for counseling purposes in a timely manner Elicits information using effective counseling techniques Effectively communicates gathered data to other	 Use of open-ended interview techniques, including how to elicit useful information Identifying key information for assessment Development and use of checklists Reflective listening 	 Observation Assessment Active listening Able to guide discussion Eliciting essential information Prioritization of mother's needs/plan of care
	families and other health care providers	health professionals for referral purposes	History and note taking	 Rapid evaluation and organization of information Multi-tasking, empathy Non-authoritarian approach
6	Assess maternal physical, mental and psychological states	Accurately assesses a mother's readiness and ability to learn	 Emotional changes pre and post birth Triage issues to address in one visit 	 Assessment of mood and underlying maternal and family issues Multi-tasking
			 Depression (differentiate baby blues, depression, psychosis), use of Edinburgh Scale) 	 Reflective listening and counseling skills
			 Factors in history that could put mother at risk for PPD/psychosis 	
7	Apply the principles of family- centered care while maintaining a collaborative, supportive relationship with breastfeeding families	Obtains permission from the mother to share information with significant family members Includes significant family members or friends	 Family theories Basics of social theory of decision-making Significance of including family members in teaching 	 Assessment of family dynamics Acceptance of different needs Creativity Reading reactions from more than one person at a time (multi-tasking)
8	Describe gender issues within a culture as they relate to breastfeeding	Identifies and counsels appropriately regarding gender issues and concerns as they relate to breastfeeding	Gender issues as they relate to women's ability/inability to breastfeed and nurture	 Reading sociology and related literature critically Recognition of one's own biases

A.	Communication and	Counseling		
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
9	Utilize adult education principles Select appropriate teaching aids	Presents information in response to a mother's expressed needs after assessing her learning style Assesses and selects materials appropriate to level of learning and readiness	 Principles of adult education in the clinical situation Assessing learning style Principles of how to assess readiness and ability to learn Evaluation of and/or development of written and other teaching aides 	 Ability to present concepts clearly and simply while avoiding medical and/or breastfeeding jargon Work interactively with mothers Pace information to meet real and perceived needs Respectful demeanor Assessment of readiness to learn and learning style Ability to tailor assistance to the mother and family Appropriate use of interpreters and other clinical assistance
10	Provide support and information to the mother to	Presents breastfeeding information to families in lay	Impact of breastfeeding and of no breastfeeding on maternal	Understanding of the literature on breastfeeding
	make evidence-informed decisions for her child and herself Provide information at a level which the mother can easily understand	terms Uses adult learning	and infant clinical health and on public health	 Ability to present clinical information in lay terms
		principles and responds to concerns and questions respectfully	 Presenting breastfeeding as the norm 	 Openness to the concerns of others
				 Ability to be an advocate without overstepping personal bounds
11	Provide evidence-based information regarding a lactating mother's use of medications (over-the-counter and prescription), alcohol, tobacco and street drugs, including their potential impact on milk	Appropriately discusses drug and folk remedies and their relationships to breastfeeding Provides reputable resources to reference	 How medications, herbs and recreational drugs/substances can transfer into milk or affect milk production Why herbal and other alternative remedies are not always as safe as approved medications, where to find 	 Recognition of commonly encountered drugs and folk remedies Decision making Encouraging adherence to regimen Understanding of research
	production and child safety Provide evidence-based information regarding complementary therapies during lactation and their impact on a mother's milk production and the effect on		 information regarding herbal or other alternative treatments Where to find information regarding herbal or other alternative treatments 	 and appropriate practices to support breastfeeding Sensitivity to parental beliefs, acceptance of patient's experience and perceptions
12	her child Provide anticipatory guidance to reduce potential risks to	Educates a mother about a breastfeeding event to	Preventing problems through anticipatory guidance	Assessment of readiness to learn and learning style
	the breastfeeding mother or her child	provide tools to avoid problems	 Timing of anticipatory guidance See also categories where anticipatory guidance is needed in Sections D, E, F, G, H, I, J 	Ability to tailor assistance to the mother and family
13	Counsel and support the mother/family in coping with the death of a child	Describes basics of counseling and supporting the mother/family in coping with the death of a child	 Appropriate counseling techniques, including what to say, how to addressing grieving, breastfeeding a sibling, donating expressed milk to a donor milk bank, and ending milk production 	 Grief counseling skills Ability to address mother's physical and emotional needs Recognition of own feelings

Α.	Communication and	Counseling		
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
14	Assess social supports and possible challenges Provide information on community resources for breastfeeding assistance Provide follow-up services as required and requested Make appropriate referrals to other health care providers and community support resources in a timely manner depending on the urgency of the situation	Defines limitations of IBCLC role Identifies appropriate professional and other resources available and method of referral Compiles, and shares community resources for assistance with breastfeeding Provides appropriate follow-up	 Professional scope of practice How to triage appropriate referrals How to identify community medical and social support resources Development of community ties to referral services for both clinical needs and social support needs How to locate, evaluate and promote breastfeeding support resources in a community, including one-on-one and group peer support, clinical follow-up where needed and information for specific situations and needs of a mother and family 	 Assessment of individual needs Ability to tailor referrals to meet individual needs Share responsibility for plan and outcomes with mother and family Organizational skills Knowledge of community resources Resourceful

В.	Documentation	and Communication	on	
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
1	Work collaboratively with the health care team to provide coordinated services to families	Communicates effectively with other members of the health care team, using documentation as appropriate to the	 Method and standards for developing written reports for other health care professionals to read 	 Basic written and verbal communication skills and familiarity with relevant medical terminology Organization of thoughts
		and culture in which the student is being trained		Neatness, accuracy, clarity
2	Obtain the mother's consent for obtaining and disclosing of information as needed or as specified by local jurisdiction	Demonstrates ability to protect personal and clinical privacy	 Privacy issues and concerns Local laws and policies Decision making models 	 Elicit consent for information sharing Discretion in protecting privacy and rights
3	Provide written assessments as required Maintain documentation of all contacts, assessments, feeding plans, recommendations and evaluations of care and retain records for the time specified by the local jurisdiction	Identifies and documents the mother's concerns or problems, planned interventions, evaluation of outcomes and follow-up for a clinical record entry or report to other members of the health care team	 Basic content expected in a health record entry, a report to a primary care provider, and a referral letter Common mistakes 	 Assessment of the mother's and baby's condition(s) Selection of relevant information to report Accuracy and organization of information Respect for intended recipient Attention to accuracy and detail

В. **Documentation and Communication Learning Objectives Core Competencies** Suggested Content Suggested Skills & Behaviors Respect the privacy, Recognizes, handles and • How to contact a health care provider, • Ability to remain calm, but 4 dignity and documents situations in introduce one's self and give a brief, persistent confidentiality of which immediate verbal clear, complete description of the Accurate and clear about the mothers and families communication with health concern using observations and data need observed except where the care provider is mandated • Laws and regulations concerning child · Ability to convey the sense of reporting of a danger by law, such as serious abuse or neglect in the region and what urgency to the mother to a mother or child is illness, abuse or neglect in is defined as reportable without causing undue specifically required by the infant, child, or mother • Conditions that may appear to be the distress law result of abuse, but are not, such as Assessment of the Mongolian spots and other birth marks mother/baby/child or scars from chest tubes · Ability to discuss with the parent(s) concerns and assess the need for reporting • Reporting accurately with information well organized

• Multi-tasking; organization

• Calm demeanor

C.	History Taking a		Compared Contract	Commented CLIN- 0. D. I.
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
1	Obtain a lactation history	Asks relevant questions, organizes, records, and analyzes data	 Components of medical/surgical, social and feeding history 	(active listening,, history
	Identify events that occurred during the	appropriately	 Relevant data to gather: prenatal, intrapartal, and postpartal 	assessment)
	pregnancy, labor and birth that may adversely affect breastfeeding Appropriately discusses and recommends breastfeeding adjustments to the mother experiencing cesarean birth	Identifies risk factors accurately	How to organize and analyze history data	
		 Steps for obtaining an adequate history and physical assessment of the child including gestational age, pertinent prenatal, intra-partal, neonatal risk factors, oro-facial anatomy, oral motor functions, coordination of suck-swallow- breathe and any other relevant issues on an individual basis 	physical findings • Decision making skills	
			 Risk factors that may impact lactation or breastfeeding for mothers that have cesarean section including possible delayed onset of lactogenesis II 	taking, observation, physical assessment) • Ability to analyze pertinent data and relate to history and physical findings • Decision making skills
			 Positioning post-cesarean mother and baby for comfortable skin-to-skin holding as soon as possible 	
			Effective early feedings	
2	Assess maternal physical, mental and psychological states psychological states psychosocial history (relationships, habits)	interprets a psychosocial	 Possible impact of family situations, the stresses of poverty, health issues and poor relationships 	discomfort, worry and safety
		 Mental health issues, including sexual abuse suffered by mother, substance abuse and other social problems' impact on breastfeeding 		
			 Screening for domestic violence while maintaining safety 	
3	Assess the breasts to determine if changes are consistent with	Performs breast assessment and identifies variations in normal	Steps and techniques in performing a physical assessment (observation/	
	adequate function in lactation	anatomy and implications for breastfeeding	 palpation) of the breast Normal breast and nipple anatomy and common variations 	assessment skills (including
		Appropriately assesses a mother's flat or inverted	 Expected changes in breasts related to pregnancy and lactation 	information, diagnosis, and
	nipple and utilizes techniques for achieving effective latch if parents desire	techniques for achieving effective latch if parents	 Evaluating nipple protractility and identifying a method for successfully latching the baby for effective milk transfer 	including physical exam and history taking, observation of breastfeeding (if applicable),
		previous breast surgery or	Evidence of previous breast surgery or	
		trauma	trauma and how previous breast surgeries or trauma can affect milk	
		Discusses various impacts	production	• Applying clinical algorithms
		of breast surgery/trauma		 Problem solving
		on breastfeeding		 Sensitivity to maintaining privacy during exam

C.	History Taking a	nd Assessment		
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
4	behavior and child behavior	Describes observations of child behavior accurately to a mother in a positive	r accurately gestational ages	 Ability to distinguish normal from abnormal development Observation skills
	milestones	manner	 Psychology; sociology; physiology of the child 	 History-taking and physical exam
				 Ability to distinguish normal from abnormal development Observation skills History-taking and physical
				variation within normal for
				and patiently elicit
5	Assess and determine strategies to initiate and continue breastfeeding when challenging situations	Performs a comprehensive breastfeeding assessment, and supports normal and effective breastfeeding Demonstrates ability to accurately evaluate and	Lactogenesis II	• Observation
			 Engorgement and non-lactating breast Nipple damage and probable cause(s) 	-
				 Multi-tasking
	exist/occur			 Organization
		work with a variety of mothers and babies		
		Demonstrates ability to make appropriate recommendations		• Planning care
6	Identify correct latch and attachment	Assesses effectiveness of latch Assists and describes in lay terms to the mother how	Identifying correct latch	demonstrate getting a baby to latch correctly and identify
		to achieve an effective latch		
				Respect for mother's report
				 Persistence
				 Willingness to try new methods

C.	History Taking a	nd Assessment		
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
7	Assess effective milk transfer Assess for adequate	Assesses milk intake and transfer by using multiple techniques including	 Components of assessing effective milk transfer, including signs of milk ejection reflex and effective feeding 	Basic breastfeeding history, observation and clinical assessment techniques
	milk intake of the infant/child Address inadequate milk intake	history, observation, and identifying concerns Provides feedback to the mother and relevant caregivers Demonstrates use of a pre/post feeding weight scale	 Signs of inadequate milk transfer and methods for improving milk transfer Use and interpretation of growth charts for breastfed children Use of clinical interventions such as pre/post feeding weight as an assessment tool Use of a digital scale and balance scale and different levels of accuracy Use of the metric system for pre/post feeding weights 	 Pre-post weighing procedures Decision making Proper use and interpretation of growth charts Ability to analyze pertinent data and relate to history and physical findings Accuracy, thoroughness in applying processes including weighing, etc. Ability to convert weight
				(lb/oz) to metric (grams)Ability to address a mother's denial, frustration
8	and normal no neurological responses suc	Recognizes and describes normal and abnormal sucking patterns relative to ability to breastfeed	 Effective sucking/suckling at the breast and how it differs from sucking from a bottle or pacifier How to recognize effective milk transfer 	 Counseling with terms appropriate to the mother's health literacy status Clinical assessment including
		Teaches parents how to recognize normal patterns	• How to recognize ejjective milk transjer and how to teach parents	 observation of breastfeeding and relevant history collection Observation skills Assisting mother in positioning child at breast and guiding mother to comfortable positions during breastfeeding Comfort with assisting mother
9	Assess the mother's milk supply and provide information regarding increasing or decreasing milk volume as needed	Comfortably and confidently discusses milk production physiology and growth spurts with parents Appropriately identifies insufficient milk intake and real versus perceived insufficiency	 Physiology of lactation, hormonal control of milk production, how milk production adjusts to meet the child's needs as he grows Factors that can interfere with adequate milk production and how to address them Etiology of and treatment(s) for perceived and actual low milk supply Management of low milk supply How to identify hyperlactation/excessive milk production, how it may affect the infant and how to treat it 	 Analytical and teaching skills History taking Decision making Ability to discuss with mothers and families using lay terms Skills for handling delayed milk ejection, mother and family fears of delayed 'coming in' of milk and empty breasts in first few days Classification and measurement of milk volume, outputs, weight and clinical assessment/decision making, job-aids, including protocols (clinical algorithms) Adult learning techniques, open to parental attitudes

D.	Prenatai and Pe	rinatal Breastfeeding	g support	
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
1	Teach a prenatal breastfeeding class	Develops an outline of topics to be covered in a class with teaching strategies for each topic Successfully teaches one class	 How principles of adult learning impact teaching style as well as content Lesson plan development including how to select the appropriate information to include in a class 	 Public speaking Ability to teach in an interactive format Ability to keep a mental agenda while teaching responsively Sensitivity to both individual and group responses Self-awareness regarding personal biases
2	Perform a prenatal breast assessment	Recognizes and describes normal and abnormal breast during pregnancy Counsels during breast exam at different stages of pregnancy and postpartum	Prenatal breast exam for breastfeeding readiness	 Ability to counsel during examination in support of breastfeeding Positive prospective support for breastfeeding success
3	Address health related life style issues, including alcohol, tobacco and drugs	Address health related life style issues: alcohol, tobacco and drugs appropriately	 Impact of alcohol, tobacco and illicit drug use on infant well-being, breastfeeding and the mother's ability to nurture 	 Ability to suggest change with sensitivity Ability to know when referral is necessary
4	Assess and counsel mother on her nutrition	Counsels women of various nutritional status and intakes, pre and postpartum Counsels women about nutritional needs following bariatric surgery	 Nutrition and micronutrient needs for the pre-pregnant and pregnant woman, including nursing during pregnancy Optimal and adequate nutrition during breastfeeding Nutritional deficiencies associated with some restrictive diets Local issues and variances in nutritional needs by region and level of poverty 	 Ability to know when to refer for dietary counseling Ability to develop good dietary content for mother and for complementary feeding Sensitivity to mother's discomfort or worry Comfort with assisting mother
5	Support labor and birth practices that optimize breastfeeding outcomes	Identifies how practices and events that occur during labor and birth can impact breastfeeding Presents the evidence and rationale for the role of labor support	 Positive outcomes associated with appropriate labor and delivery routines and family-centered maternity care Role of a labor support person such as a doula and how to advocate within local system Impact of labor and birth on the infant and mother 	 Experience in labor and delivery areas Respectful Patience; calm demeanor Reassuring presence Acceptance of mother's experience/perception Effective advocacy in local context Assessment Abstraction of pertinent chart information Acceptance of mother's experience/perception Reacting without blame and moving forward

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
6	Identify and promote positive breastfeeding practices	Identifies practices that support or interfere with breastfeeding in the clinical setting and suggests improvements where needed	 Policies and protocols to support breastfeeding immediately post partum Working as an agent for change regarding BFHI recommended practices 	 Understanding of evidence-based research and appropriate practices to support breastfeeding Ability to suggest change while respecting other professionals' experience Sensitivity for other
7	Promote continuous skin-to-skin contact of the newborn and mother	Presents the underlying technical arguments and counseling messages for skin-to-skin care	 Skin-to-skin care and its importance for breastfeeding Achieving skin-to-skin care in the health 	 professionals' experience Understanding of research and appropriate practices to support breastfeeding
	motilei	Counsels parents appropriately about keeping mother and newborn together Recognizes hospital practices that may be disruptive of establishment of breastfeeding	 Research on the impact of skin-to-skin care and rooming in on breastfeeding Ways to facilitate mother's rest with mother and newborn in close proximity 	 Ability to discuss and describe the research with families and help them to implement it to meet their needs Teaching skills mindful of mother's health literacy Creativity to facilitate mothers in meeting their own needs while meeting those of the child Willingness to try new methods
8	Discuss the appropriate continuation of breastfeeding when mother and child are separated	Appropriately discusses strategies with parents to meet the breastfeeding needs of a mother and child when separated	 Reasons for separation to determine need for milk expression and most appropriate means of expression for the situation Normal ranges of amounts of milk to express based upon days/ weeks/ months/ years postpartum 	Ability to prioritize
9	Provide education to assist the mother and family to identify newborn feeding cues and behavioral states	Identifies and describes newborn behavior and feeding cues to parents	 Feeding readiness cues in a full-term infant Range of normal infant feeding behavior Importance of feeding frequency and draining the breast adequately on both the newborn's learning to feed and the mother's milk production 	 Communication using lay terms, not medical or lactation consultant language (jargon) Observation skills Teaching skills Ability to complete an accurate physical exam of newborn Ability to demonstrate waking
10	Educate the mother and family on normal child behaviors indicating breastfeeding needs; signs of readiness to feed, and expected feeding patterns	Teaches the mother and family about feeding the child on cue, 8-10 times in each 24-hour period	Needs of the child to be fed and the breasts to be emptied to establish and maintain milk production	 Ability to discuss and describe the research with families and help them to implement it to meet their needs Creativity to facilitate mothers in meeting their own needs while meeting those of the child

D.	Prenatal and Pe	rinatal Breastfeedin	g Support	
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
11	Assist the mother and child to find comfortable positions for breastfeeding	Assists the mother to achieve comfortable and adequate positions for initial feedings	 Infant self-attachment and breastfeeding positions and how each may or may not be helpful 	 Ability to describe and demonstrate different feeding positions and assess which is most appropriate for an individual situation
				 Teaching skills
12	Provide suggestions as to when and how to stimulate a sleepy baby to feed	Appropriately describes when it is appropriate and how to awaken a sleepy baby Describes observations regarding her baby to mother in a non-threatening manner Develops an appropriate feeding plan, including milk expression as necessary to protect milk production and feeding the baby with human milk in preference to a substitute, the importance of skin-to-skin contact, and the ability to implement the plan	 Nonspecific nature of signs of newborn illness and situations when it is appropriate to awaken a sleepy baby Normal sleep cycles of newborns Waking techniques that are effective How to recognize and work with shutdown from cold or over stimulation Determining cause(s) of shutdown Nonspecific nature of signs of newborn illness, including inability to wake the infant to alertness (lethargy), poor suckling, temperature instability 	 Ability to recognize signs of an ill baby and distinguish illness/lethargy from "sleepy; Applies skills for getting babies to feed Creativity to facilitate mothers in meeting their own needs while meeting those of the baby
13	Provide education for the mother and her family regarding the use of pacifiers/dummies including the possible risks to lactation	Appropriately presents risks associated with use of pacifiers and artificial nipples to parents in a respectful manner, in consideration of parental wishes	 How pacifiers can affect infant weight gain as well as mother's nipple pain and milk production How pacifier use can interfere with imprinting on the mother's nipple and interfere with feeding How early use of artificial nipples (bottlefeeding) can interfere with learning to breastfeed effectively 	 Teaching skills Recognition of various conditions and solutions Decision making Ability to discuss and describe the research with families, inform of risks in positive way and provide parents with options to pacifier use, describe how it use in non breastfed Recognition of one's own biases Open to parental attitudes, respect for their needs and desires

D.	Prenatal and Pe	erinatal Breastfeedin	g Support	
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
14	and strategies to revent and resolve sore damaged nipples	resolve ed nipples Assists a mother appropriately in preventing and treating sore nipples and refer as needed Evaluates and assists a mother with improved baby and baby's lar behavior for optime prevention of nippl • Causes and treatm and management of during this time • Differentiating causore breasts caused	 Evaluation of position of the mother and baby and baby's latch and feeding behavior for optimal feeding and prevention of nipple trauma 	 Recognition of various conditions and solutions Clinical assessment including history taking
			 Causes and treatments of sore nipples and management of breastfeeding 	history takingObservation of breastfeedingAbility to prioritize
	Evaluates and assists a mother with improved latch, if needed Suggests modes of • Differentiating causes sore breasts caused by bacterial infection or y mastitis, abscess or pl	Differentiating causes of sore nipples and sore breasts caused by incorrect latch, bacterial infection or yeast infection,	 Problem solving, including use of protocols (clinical algorithms) and job aids 	
		symptomatic treatment	 Appropriate intervention(s) or 	Ability to recognize need for creativity and adaptation Sonsitivity to method's
		(pain control, etc.)	 recommendation to health care provider Positioning to heal certain types of damage Other therapies/devices and the 	 Sensitivity to mother's discomfort or worry including addressing, frustration,
				denial, tearfulness
			pros/cons (breast shells, nipple shields, moist wound healing principles, etc.)	 Creativity to facilitate mothe in meeting her needs and those of the baby
L5	Provide information and strategies to	ategies to differentiates problems t and resolve potentially requiring ement, blocked medical/surgical treatment	 Mastitis and subclinical mastitis signs, symptoms and management 	 Recognition of various conditions and solutions
	engorgement, blocked ducts and mastitis Appropriately assessed discusses engorgement treatment and preven with mother and described medical/surgical treatment and proven with mother and described modalities for the		 Indications for referral to other provider(s) 	 Clinical assessment including history taking
		prevention and treatment	 Stages of engorgement, its causes, and 	 Observation of breastfeeding
			why it should be treated	 Ability to prioritize
			 Risks of not treating engorgement, effectiveness of different treatment modalities, and management of breastfeeding during this time 	 Problem solving, including use of protocols (clinical algorithms) and job aids
		of engorgement		 Ability to recognize need for creativity and adaptation
				 Sensitivity to mother's discomfort or worry includin addressing, frustration, denial, tearfulness
				 Creativity to facilitate mother in meeting her needs and those of the child
L6	Provide appropriate education for the	Presents to parents the health risks to the child	Describe the principles of adult educationCounseling and presentation style as they	Presence in front of individuals and groups
	mother and her family regarding the	associated with mixed feedings with cow or soy	apply to communicating the concept of prevention	 Recognition of various conditions and solutions
	importance of exclusive breastfeeding to the health of the mother and child and the risk	milk, including allergies, in a respectful manner, and with respect for parental wishes	 Importance of breastfeeding for mother and child health (prevention of SIDS/SUDI, diabetes, certain cancers, child illnesses, maternal illnesses, impact 	 Ability to discuss and describe research with families and help them to implement it to meet their needs
	of using breastmilk		on birth spacing)	Skills for counseling mothers
	substitutes		 Consequences of lack of exclusive breastfeeding on immunology, allergy and gut development 	of non breastfed children separately and separating them from breastfed to avo
			 Possible consequences of feeding the 	the spillover effect
			baby other than at the breast	 Recognition/ acceptance the individuals learn in differing

ways

E.	Extended Breas	tfeeding Support		
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
1	Teach appropriate food selection for breastfed children	Counsels on child feeding for at least 3 different ages in the child's first 2 years	 Situations when formula use is warranted Appropriate commercial feeding products and proper use Complementary feeding principles and how to provide support as the child transitions to complementary feedings 	 Basic complementary feeding counseling for the breastfed and non-breastfed child Taking family norms into account Recognition of one's own biases
2	Provide information and strategies to	Respectfully teaches back sleeping using current	Role of breastfeeding in SIDS/SUDI prevention	Ability to counsel concerning various situations impacting SIDS/SUDI
	minimize the risk of rese Sudden Infant Death bre	research regarding breastfeeding in SIDS/SUDI prevention	 Significance of the supine sleeping position, and how to co-sleep safely 	 Understanding of research and appropriate practices to support breastfeeding Open to parental experiences with
3	(SUDI) Provide information regarding family planning methods including Lactation Amenorrhea Method (LAM) and their impact on lactation	Appropriately discusses various forms of contraception and the risks and benefits of use during breastfeeding	 Role of exclusive breastfeeding in child spacing, including such methods as LAM and natural family planning Potential effect of hormonal contraceptives on lactation, including pills, implants and injections Use of barrier forms of contraception, including foam and condoms and IUD's 	 Recognition of various options Clinical assessment including history taking Understanding of research and appropriate practices to support breastfeeding Sensitivity to parental autonomy and decision making Recognition of one's own biases
4	Assist the mother with her child's teething and biting as it impacts on breastfeeding	Works effectively with a mother/child dyad experiencing this condition	 How teething may affect feeding behavior and how to approach biting issues in an age-appropriate manner How the child who is feeding effectively is not able to bite during actual feeding 	 History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Ability to communicate complicated information in lay terms Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is taking in the information Ability to work collaboratively with specialists who may not focus on breastfeeding

E.	Extended Breas	tfeeding Support		
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
5	Indentify issues related to early weaning and appropriate	Works effectively with a mother/child dyad	 Description of a nursing strike and how to distinguish it from refusing 	 History-taking and physical exam, including oral-motor function
		experiencing this condition	to nurse because of pain such as an ear infection, teething, thrush or	 Breastfeeding observation and evaluation
	interventions/teaching for the family		gastric upsetHow to counsel the mother who is	 Ability to ask appropriate questions
			 How to counset the mother who is not ready to wean when her baby is ready 	 Ability to organize information, think outside the box and see relationships
				 Ability to communicate complicated information in lay terms
				 Patience with problems that do not have easy answers
				 Acceptance of different values and lifestyles without judgment
				 History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Ability to communicate complicated information in lay terms Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is taking in the information Ability to work collaboratively with specialists who may not focus on breastfeeding Decision making Ability to prioritize History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Ability to communicate complicated information in lay terms Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment
				specialists who may not focus on
6	Provide information	Appropriately counsels mothers about weaning issues at various ages and with multiples	 Infant-led and mother-led weaning, reasons for each including undesired and/or untimely weaning 	Decision making
	from the breast when issues a			Ability to prioritize
			 Anthropologic description of weaning, the role of the lactation consultant in discussing weaning with parents 	
			 World Health Organization Guidelines for Safe Preparation, Storage and Handling of Powdered Infant Formula 	
7	Provide instruction and guidance on	Counsels mothers of toddlers on breastfeeding maintenance in mother's social setting.	 Changing needs of the mother and child and the role breastfeeding plays in the child's life 	
	toddler breastfeeding			
				 Ability to ask appropriate questions
				 Ability to work collaboratively with specialists who may not focus on breastfeeding Decision making Ability to prioritize History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Ability to communicate complicated
				·
				 Sensitivity to how the family is taking in the information
				 Ability to work collaboratively with specialists who may not focus on breastfeeding

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
8	Core Competencies Describe and teach approaches to breastfeeding while pregnant and tandem nursing	Counsels on the pros and cons of tandem nursing, and on anticipatory planning.	 Research regarding breastfeeding through a pregnancy How the mother can make sure she is meeting the new child's needs as well as those of the older child Mother's changing emotional needs and how they vary from woman to woman Ways to approach weaning that are developmentally appropriate, if the mother decides to wean 	 Suggested Skills & Behaviors History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Ability to communicate complicated information in lay terms Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is
				 taking in the information Ability to work collaboratively with specialists who may not focus on breastfeeding

F.	Problem-Solving	g Skills		
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
1	Evaluate potential and existing factors impacting a mother's breastfeeding goals	Identifies and differentiates between normal and abnormal conditions and clinical situations Carries out basic diagnostics in problem situations	 Normal limits for child behavior, feeding patterns and growth Triaging common breastfeeding problems, recognizing and differentiating mechanical breastfeeding problems, milk supply, any maternal nutrient challenges Maternal and child contribution to problems Questions relevant to the presenting problem(s), multiple presenting problems to address the most significant issue(s) first Assessing situation for unexpressed/unrecognized problems 	 Clinical assessment (including history taking and physical assessment) Triaging Time management Critical thinking Pattern identification
2	Assist and support the mother to develop, implement and evaluate an appropriate, acceptable and achievable breastfeeding plan utilizing all resources available Evaluate the mother's understanding of all information and education provided	Works with the mother to create an appropriate plan that addresses all issues identified Assists with maternal implementation of the plan documented Demonstrates ability to carry out steps necessary for evaluation of outcomes Creates and shares follow-up plans with a mother to answer breastfeeding questions	 Identifying basic issue(s) and solutions and verifying understanding with the mother, including both child and maternal needs Discussing alternative choices with the family and how they will each impact child health, breastfeeding and milk production Creating an appropriate document at the maternal literacy level for the family Identifying community resources and making referrals as needed Defining the successful outcome of the plan as it meets the child's and mother's needs Determining that the family can implement the plan independent of intervention once they have left the consult Optimal health care follow-up of the breastfeeding child and mother postpartum Optimal breastfeeding support follow-up for the breastfeeding child and mother postpartum Eliciting which suggestion or parts of the suggested plan the mother is willing or able to follow and revisit any critical part of the plan the mother finds problematic 	 Counseling using lay terms Recognition of various conditions and solutions Decision making over the phone or in a community setting Culturally sensitive counseling skills Developing a plan of action Time management Interview and follow-up techniques Patient monitoring Organization Multi-tasking Openness Clarity of expression Sensitivity to mother's priorities Persistence in follow-up

G.		Breastfeeding Chall	_	Suggested Skills & Bahaviara
1	Develop and apply a plan of action to assist the breastfeeding dyad that has undergone a traumatic birth	Describes observations to mother regarding her newborn in a non-threatening manner Develops and implements a plan of action for feeding the newborn and protecting the milk supply	• Effects of labor and birth and birthing practices on the newborn's ability to feed, including the time frame in which they may appear • Techniques for helping the newborn who is having difficulty with feeding	Suggested Skills & Behaviors History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to recognize and correct for the effects of a birth trauma Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Ability to communicate complicated information in lay terms Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment
2	Develop and apply a plan of care for the breastfeeding mother with a preterm or late preterm infant	re for the a plan of action with a ding mother mother including both term or late feeding the newborn and protecting the milk supply	 Medical complications influenced by organ system immaturity in the infant born at 35-38 weeks, referred to as the late-preterm infant Unique needs and feeding behaviors of these infants 	 Sensitivity to how the family is taking in the information and difficult news clearly History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships
				 Ability to communicate complicated information in lay terms Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is taking in the information

G.	Newborn/Child	Breastfeeding Chall	enges	
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
3	Design and implement a plan of care for the	Develops and implements a plan of action with a	 Causes and effects of being LGA or SGA on the newborn's 	 History-taking and physical exam, including oral-motor function
	mother with a newborn that is small	mother including both feeding the newborn and	adaptation post birth and feeding behavior	 Breastfeeding observation and evaluation
	for gestational age (SGA) or large for	protecting the milk supply	 Safe feeding and maternal involvement/skin-to-skin 	• Ability to ask appropriate questions
	gestational age (LGA)		 Ability to organize information think outside the box and see relationships Ability to communicate compainformation in lay terms Patience with problems that of the problems information in lay terms 	 Ability to organize information, think outside the box and see relationships
				 Ability to organize information, think outside the box and see relationships Ability to communicate complicated information in lay terms Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is taking in the information History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation
4	Design and implement a plan of care for	Develops and implements a plan of action with a mother including both feeding the newborn and	 Potential medical complications that frequently occur with multiples/plural births Logistics of feeding more than 	
	breastfeeding multiples			
		protecting the milk supply	one child at the breast, as well as	Ability to ask appropriate questions
			developing and maintaining an adequate milk supply and how to assure appropriate newborn weight gain	 Ability to organize information, think outside the box and see relationships
			neight gam	 Ability to communicate complicated information in lay terms
				 Patience with problems that do not have easy answers
				 Acceptance of different values and lifestyles without judgment
				 Sensitivity to how the family is taking in the information

G.	Newborn/Child	Breastfeeding Chall	enges	
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
5	Facilitate breastfeeding for the	Describes to mother observations regarding her	Potential medical complications associated with preterm infants	 History-taking and physical exam, including oral-motor function
	medically fragile and child in a non-threatening physically manner • Establishing milk production the child cannot go to breast	 Establishing milk production when the child cannot go to breast, 	 Breastfeeding observation and evaluation 	
	compromised child	Develops and implements a plan of action that	including hand expression as well as with a pump	• Ability to ask appropriate questions
		includes ongoing assessment, evaluation and subsequent change in	ther garding her reatening garding her including holding including holding including holding h	think outside the box and see
		management, including expressing her milk to the		 History-taking and physical exam, including oral-motor function When Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Counseling with terms appropriate to the mother's health literacy status Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is taking in the information Ability to work collaboratively with specialists and recognize when referral is appropriate History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Ability to communicate complicated information in lay terms Patience with problems that do not have easy answers Acceptance of different values and
		milk supply, the importance of skin-to-skin contact when appropriate	that may be necessary for the	Patience with problems that do not
				 History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Counseling with terms appropriate to the mother's health literacy status Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is taking in the information Ability to work collaboratively with specialists and recognize when referral is appropriate History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Ability to communicate complicated information in lay terms Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is
			sick children and those with HIV	
			positive mothers	specialists and recognize when
6		Describes to mother observations regarding her	laboratory values relating to the	
	care for the breastfed hypoglycemic newborn	child in a non-threatening manner		 including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Counseling with terms appropriate to the mother's health literacy status Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is taking in the information Ability to work collaboratively with specialists and recognize when referral is appropriate History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Ability to communicate complicated information in lay terms Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is taking in the information Ability to work collaboratively with specialists and recognize when
	newborn	Develops and implements a plan of action, including		
		expressing her milk if necessary to establish a milk supply and to feed the	skin-to-skin holding, early feeding with colostrums, teaching the	 History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Counseling with terms appropriate to the mother's health literacy status Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is taking in the information Ability to work collaboratively with specialists and recognize when referral is appropriate History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Ability to communicate complicated information in lay terms Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is taking in the information Ability to work collaboratively with
		child with human milk in preference to formula, the	Recognizing when the child is too	
		importance of skin-to-skin contact	,	•

Newborn/Child Breastfeeding Challenges G. **Core Competencies Learning Objectives** Suggested Content Suggested Skills & Behaviors Calculate an a child's Differentiates slow weight • Triaging and problem-solving • History taking and physical exam 7 caloric/Kilojoule and gain from failure to thrive skills to evaluate if child is gaining • Oral-motor examination volume requirements weight and growing appropriately Assesses problem(s) Breastfeeding observation and for age Assess the contributing to poor evaluation breastfeeding child's weight gain • How to decide immediately if Application of technical skills growth using World there is danger of impending Develops a plan with the **Health Organization** Basic math shock due to dehydration mother for feeding the adapted growth charts child, including increasing • Evaluating cause(s) and context in milk production, if which weight loss or slow weight appropriate, and child gain is occurring using history and intake of physical exam of mother and child calories/Kilojoules • Use of growth standards and Evaluates need for referral curves appropriately for growth monitoring and for problem situations • Nutritional growth failure and growth failure caused by underlying illness Assessing adequate milk intake with and without a scale, and assessing weight gain over time • Facilitating optimal milk transfer and assess milk production When and how to use interventions including improved positioning and latch, increasing intake at a feeding, lactogogues and breastfeeding equipment • When supplementation of expressed mother's own, donor milk or formula is necessary • Calculating amount of fluids/ calories required by the child according to predicted weight for Conversion of English units to metric units and vice-versa (if applicable) for calculating feeding needs and weight loss/gain

Evaluating and

milk supply

optimizing/maintaining maternal

• How to teach parents effectively

G.	Newborn/Child Breastfeeding Challenges				
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors	
8	Assess and implement a breastfeeding plan	Describes to mother observations regarding her	Role of bilirubin in the newbornDangers of excess bilirubin	 History-taking and physical exam, including oral-motor function 	
	for the hyperbilirubinemic newborn	child's condition in a non- threatening manner	Role of adequate feeding in lowering bilirubin levels	 Breastfeeding observation and evaluation 	
	Hewborn	Develops a plan of action, including expressing her	Role of bilirubin lights and how	 Ability to ask appropriate questions 	
		milk if necessary to establish a milk supply and demonstrated ability to	they should be used for maximum effect	 Ability to organize information, think outside the box and see relationships 	
		use phototherapy and other devices effectively		 Ability to communicate complicated information in lay terms 	
		and safely		 Patience with problems that do not have easy answers 	
				 Acceptance of different values and lifestyles without judgment 	
				 Sensitivity to how the family is taking in the information 	
				 Ability to work collaboratively with specialists and recognize when referral is appropriate 	
9	Identify child conditions that may	Demonstrates abilities in counseling and problem	Causes of latch or sucking problems and suggestions for	 History-taking and physical exam, including oral-motor function 	
	impact breastfeeding, including but not limited to disorganized	solving with mothers and families for long-term solutions	management • Techniques for working with a	 Breastfeeding observation and evaluation 	
	or ineffective suck,	Recognizes signs and	child whose suck is disorganized or ineffective	 Ability to use breastfeeding devices 	
	ankyloglossia, cleft lip/palate, Pierre	symptoms of each	Common physical abnormalities	Ability to ask appropriate questions	
	Robin syndrome, and Down syndrome	condition, including breastfeeding risks	that can affect breastfeeding, including ankyloglossia, cleft lip/palate, and Pierre Robin	 Ability to organize information, think outside the box and see relationships 	
			syndrome	Ability to communicate complicated	
			Common neuro-developmental problems, such as the sequelae of	 information in lay terms Patience with problems that do not 	
			prematurity or hypoxia at birth, cerebral palsy, and Down Syndrome and how they can	 have easy answers Acceptance of different values and lifestyles without judgment 	
			affect feeding	 Sensitivity to how the family is 	
			 Problems a mother may have reading the feeding cues of a 	taking in the information	
			newborn with developmental delays	Ability to work collaboratively with specialists/complementary health sare providers and recognize when	
			Helping mothers maintain	care providers and recognize when referral is appropriate	
			optimal milk supply and get adequate calories into their		
			children, including careful positioning, use of breastfeeding aides and surgical interventions		

G.	Newborn/Child Breastfeeding Challenges			
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
10	Identify yeast infection and instruct the mother on appropriate interventions	Works effectively with a mother/child dyad experiencing this condition	 Symptoms of a yeast infection on the nipple and thrush in the child's mouth and how to distinguish nipple pain caused by yeast from other nipple pain Predisposing factors to yeast infections Range of treatments for thrush and when each is appropriate Potential for thrush to be associated with poor weight gain or fussy feeding 	 History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Ability to communicate complicated information in lay terms Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is taking in the information Ability to work collaboratively with specialists and recognize when referral is appropriate
11	Assess the child for colic/gastric reflux/lactose overload/food intolerances and their impact on breastfeeding	Works effectively with a mother/child dyad experiencing these conditions	 How to assess "colic" or fussy behavior and how to triage possible causes and treatments/solutions Gastric reflux and when it is a problem; discuss treatments, and when each is appropriate; how reflux may affect breastfeeding "Overfeeding colic" or "lactose overload" and how to distinguish it from hunger and other causes of fussing; how to manage lactose overload by changing feeding patterns Typical signs of food intolerance/sensitivity and the infrequency with which it occurs; completing a food diary; utilizing evidence-based information to determine problematic foods; making recommendations to the mother 	 History-taking and physical exam, including oral-motor function Breastfeeding observation and evaluation Ability to ask appropriate questions Ability to organize information, think outside the box and see relationships Ability to communicate complicated information at parent's health literacy level Patience with problems that do not have easy answers Acceptance of different values and lifestyles without judgment Sensitivity to how the family is taking in the information Ability to work collaboratively with specialists and recognize when referral is appropriate
12	Assist the mother of a child with a chronic medical condition that may impact breastfeeding	Works effectively with a mother/child dyad experiencing this condition	 Special child health needs and possible breastfeeding intervention needs for children with chronic medical conditions, especially spina bifida, neurological abnormalities, Phenylketonuria (PKU), Galactosemia 	 History taking and physical assessment Ability to use breastfeeding devices

G.	Newborn/Child	Breastfeeding Challe	enges	
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
13	Recognize and offer breastfeeding assistance for the child with cardiac problems	Works effectively with a mother/child dyad experiencing this condition	 Congenital heart defects and the potential for poor weight gain or failure to thrive (FTT) for these children Skills needed to address the issues of maternal milk supply and child intake of sufficient calories to grow adequately 	 History taking and physical assessment Ability to use breastfeeding devices Openness to working with the medical team so the family perceives a united and supportive team

H.	Maternal Breast	tfeeding Challenges		
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
1	Identify medical conditions that impact breastfeeding and appropriate teaching for the mother	Appropriately supports breastfeeding when various medical conditions (diabetes, PCOS, cystic fibrosis, etc.) are present	 Maternal medical or physical conditions that may impact breastfeeding; interventions that may work for specific situations Factors indicating need for referral and how to work effectively within the medical team 	 Ability to prioritize Evaluation of individual condition Clinical assessment including physical assessment, history taking, observation of breastfeeding (if applicable) Analysis of assessment Decision making Job-aids, including protocols (clinical algorithms)
2	Identify special needs of the adolescent breastfeeding mother	Appropriately supports adolescent mother's breastfeeding desires, including addressing school policies, developmental psychology for adolescents, and nutritional needs of mother	 Unique needs common to the typical adolescent mother and how they may impact the decision to breastfeed or to continue breastfeeding Possibility of sexual abuse as a factor in the pregnancy Addressing questions/remarks to the adolescent and not to her parent or guardian (as much as possible) 	 Recognition of one's own limits in clinical practice Teaching skills Analysis of mother's nutritional status Ability to work with schools and workplaces on breastfeeding policy Clinical skills and decision making Awareness of own attitudes
3	Assist and support the mother and family to identify strategies to cope with peripartum mood disorders (prenatal depression, "baby blues", postpartum depression, anxiety and psychosis) and access community resources	Appropriately identifies peripartum psychological issues and how they can impact breastfeeding Makes appropriate referrals.	 Range of peripartum mood disorders and symptoms of each Effects of untreated postpartum depression on the mother, father, child and family Management of different levels of depression, including communication with the primary care provider, possible referral for counseling and medications Risks inherent in working with someone who is depressed; thoughts of harm to the child; suicidal or psychotic thinking; knowing what to do if a mother has these extreme symptoms 	 and biases Clinical assessment including history taking Recognition of risk factors and behaviors that may indicate postpartum mood disorders Analysis of assessment Decision making Recognition of and follow through with the need for referrals

Н.	Maternal Breast	feeding Challenges		
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
4	Support the mother who is inducing lactation or relactating	Describes basics of induced lactation and relactation	 Common reasons for use of these techniques Realistic expectations Process of relactation Supplementing devices and approaches Nursing an adopted child, how to stimulate milk production; limitations of induction; importance of sucking 	 Use of lactation aids to stimulate milk production Use of supplementing devices
5	Address maternal physical disabilities which may limit her handling of her child	Counsels and plans with the mother and family to support optimal breastfeeding for a mother with physical disabilities which may limit her handling of her child	How physical disabilities, such as arthritis, multiple sclerosis, effects of a stroke or blindness may limit a mother's ability to care for or breastfeed her child	 Basic occupational therapy approaches Creativity Referral skills
6	Counsel and support HIV positive mothers and those of unknown HIV status, and be able to convey current recommendations on infant feeding	Counsel and supports HIV positive mothers and those of unknown HIV status Conveys current recommendations on infant feeding	 Local diagnostic criteria and standards of care WHO recommendations Research on exclusive breastfeeding and risk of HIV conversion for the child 	 Cultural sensitivity to the mother's decision regarding testing and her diagnosis and living situation Ability to assist mother with exclusive breastfeeding or formula feeding when that is appropriate

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
1	Provide evidence- based information to the mother regarding the use of techniques and devices Carefully choose a method of feeding when supplementation is unavoidable and use strategies to maintain breastfeeding to meet the mother's goal	Correctly identifies appropriate use of a device or aid; uses it safely and correctly and provides appropriate education to parents Clearly documents rationale for and use of aids and devices	 Broad range of breastfeeding and lactation aids, including, but not limited to: supports such as slings and pillows to assist the mother in holding her child; nipple shields and nipple everters to assist with difficult latch; accurate scales for pre/post feeding weight to determine milk transfer; nursing supplementing devices and other alternative feeding methods such as cup feeding and bottle feeding to improve intake; topical treatments and breast shells for sore nipples; milk expression skills (hand expression) and devices including pumps NOTE: the specific applications of these 	 Maternal and child assessment Critical thinking Problem-solving Technical skills with aids and devices Teaching skills Documentation Ability to analyze and apply research evidence
			aids may be addressed in greater depth in problem-solving lectures and clinical situations	
2	Evaluate and critique how techniques and devices may be used to ensure initiation and/or continuation of breastfeeding in certain circumstances	Correctly identifies indications for use of an aid or device and selects the most appropriate one	 Indications for use of specific breastfeeding aids, including both goals and expected outcomes Disadvantages or drawbacks to the use of devices in certain situations, including sustainability Evaluation of the effectiveness and any potential safety concerns 	 Critical thinking Problem-solving Technical skills with aids and devices Ability to analyze and apply research evidence

I.	. Use of Techniques and Devices				
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors	
3	Critique and evaluate indications, contraindications and use of techniques, appliances and devices which support breastfeeding Evaluate, critique and demonstrate the use of techniques and devices which support breastfeeding, understand that some devices may be marketed without evidence to support their usefulness and may be harmful to the continuation of breastfeeding	Considers all factors, including cost, acceptability for the client/patient and sustainability for a specific situation when recommending use of an aid or device Educates family appropriately in use and care of aids or devices Communicates with HCP as needed Describes ethical responsibility regarding financial gain from recommending aids or devices	 Decision-making based on relative costs and effectiveness Effective patient/client education regarding use and cleaning of devices Follow-up Legal /ethical issues, including obtaining informed consent and a HCP order, if needed, as well as financial gain for the lactation consultant Devices, marketing strategies, clinical evidence regarding usefulness and possible harmful effects 	Decision-making Acceptance of responsibility for ethical care of the mother and child, including follow-up assessment of interventions	
4	Counsel and support donations to milk banks	Objectively educates about milk banking, based on needs of learners Counsels and supports donations to milk banks Describes the components of recruitment, screening and processing, and safety criteria Describes the clinical uses of donor human milk	 How to educate other health professionals and parents about the operation of a donor human milk bank, being a donor and uses for donor milk, and how to remain current regarding both the location of milk banks, requirements for ordering milk and donating milk Local screening criteria and how to carry out a screening How non-profit donor human milk banks recruit and screen donors, process the milk and distribute it Effect of milk bank processing on the safety of the milk for recipient and the composition of the milk Therapeutic uses of human milk for infants, children and adults 	 Ability to assess knowledge and informational needs of learners Ability to teach Ability to utilize web resources for updating information about milk banks Ability to screen with attention to detail and appropriate behaviors Ability to review operations and assess functioning of a donor milk bank Ability to identify those in need of human milk, and to ethically and sensitively determine allocation Attention to detail 	

J.	Public Health				
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors	
1	Teach the use of breastfeeding during emergencies and appropriate support	Presents the importance of breastfeeding as preventative in emergencies Presents steps necessary to implement breastfeeding support in an emergency	Role of breastfeeding in emergency situations, including risks to health and survival	 Understanding work environment in emergencies Recognition of need to function in life-threatening conditions when necessary 	
2	Utilize quality assurance standards in delivery of care	Demonstrates awareness of local quality standards	 Local quality assurance standards and quality management Basic health systems structure and alternatives 	Underscore quality assurance issues in practice	
3	Develop a community outreach program	Carries out the steps necessary to develop and sustain outreach	 Basics of social marketing (marketing for behavior change) Intervention program design Basic line items in budgets 	 Assess possibilities in the community Understand basic budgeting for outreach opportunities Willingness to reach outside of the health system 	
4	Describe national and global policy and program development, history, rationale and current issues	Demonstrate understanding of basic aspects of policy analysis methods including problem identification, policy synthesis, preparation of policy background and overview documents, and development of policy options and recommendations	History of breastfeeding events and laws, regulation and agreements	 Reading and minimal memorization (up-to –date on current policies, issues) Can provide policy rationale Understanding how policy is achieved through negotiation and consensus, not universal agreement Open to opposing views and understanding the need for compromise 	

K.	Research, Legislation and Policy				
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors	
1	Critique, evaluate and incorporate evidence-informed findings into practice within the laws of the setting in which s/he works	Identifies and discusses basic theories and causal inference Differentiates appropriate research for a topic area Critically appraises relevant research and indicates how this may affect practice Presents and accurately describes a variety of graphic presentations of research findings Adheres to policies, procedures, protocols within a health care agency	 Basic study design issues, importance of defining breastfeeding, epidemiology/biostatistics skills, including: understanding of concepts of significance, basic statistical skills, at least one statistical software package Relating these concepts to evidence-based medical research and breastfeeding Economic basis of breastfeeding Establishing a Journal Club to allow students the opportunity to delve into research that can be applied to practice Use of graphic presentations of data, including preparation and presentation of a research poster Policies, procedures and protocols relevant to maternal/child care and breastfeeding Regional and national legislation related to breastfeeding 	 Ability to systematically review literature and perform a critical appraisal of it, comparing similar studies, etc. Public speaking Slide preparation Ability to understand and make graphic presentations of data within a study and comparing data among studies Ability to read and critically evaluate governmental policies, laws, etc., as well as health care setting policies and procedures Recognition that clinical research should inform practice and a willingness to stay current Practice lifelong learning and a willingness to stay current in the profession's research and practice Demonstrate a curiosity about causality Persistence to master the material Ability to understand and analyze research results Computer skills for development of a poster presentation 	
				 Organization Confidence	
				 Sensitivity to the audience's learning style 	
2	Evaluate research and breastfeeding data	Explains the definitions of breastfeeding used in research and practice, and how they impact interpretation of breastfeeding data	 Existing definitions of breastfeeding as related to the mother and to the child Impact of exclusive and partial breastfeeding as well as the feeding of expressed milk and how they differentially impact the mother and the child Importance of definitions in 	 Understanding of how interpretation of research can impact practice and policy Critical thinking 	
			interpretation of research and how that may impact health policy and funding		

K.	Research, Legislation and Policy				
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors	
3	Describe various research methods and the most appropriate method for a given research question	Differentiates between study designs Selects appropriate design for a given hypothesis and situation	 Research methods (prospective, retrospective, quantitative, qualitative, quasi-experimental, etc.) How to select the appropriate method for a given question 	 Critical reading skills Knowledge of research terminology Abstract thinking 	
4	Use appropriate resources for research to provide information to the health care team on conditions, modalities, and medications that affect breastfeeding and lactation	Successfully completes and communicates review of research on a relevant issue for the health care team	Using online data bases for health- related research	Working knowledge of research methods	
			 How to critically appraise research papers/journal articles for quality of work and relevance to current case 	 Critical reading skills Ability to distill complicated information and apply it to the current case 	
5	Describe and apply behavior change theories	Assesses progress from lack of knowledge, to knowledge, understanding, acceptance, action, and repeated action with selfefficacy	Behavior change theories	 Ability to apply concepts at the population level and individual level 	
6	Participate in the development of policies at global, national, and local levels which protect, promote and support breastfeeding	Locates, reads and interprets laws as they apply to breastfeeding or to health system support	 Laws and regulations within your region that have bearing on breastfeeding, directly or indirectly (depends on region: AMRO, EURO, WCE, PAHO, AFRO, etc.) 	 Ability to find, read and interpret laws as they apply to breastfeeding or to health system support Acceptance of cultural and regional differences 	

L.	Professional Responsibilities and Practice			
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
1	Conduct her/ himself in a professional manner, practicing within the framework defined by the IBLCE Code of Ethics, the Scope of Practice for the IBCLC, and the Clinical Competencies for the IBCLC's Practice	Demonstrates professional behavior in clinical setting	Standards for lactation consultant practice	Openness to the expertise of others
		framework the IBLCE hics, the ractice for and the mpetencies framework defined by the professional code of ethics, clinical competencies, and standards of practice Functions well with mutual	• Scope of practice	Critical thinking
			• Code of ethics	
			 Code of Marketing of Breastmilk Substitutes 	
			 Principles of collaboration within the health care team 	
			 Communication and documentation formats 	
			Interdisciplinary care	
			 Triaging appropriate referrals 	
			 Identifying community medical and social support resources 	
			 Recognition of one's own limitations in the clinical setting 	

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
2	Assist families with decisions regarding feeding their children by providing evidence-based information that is free of any conflicts of interest	Locates and uses current research findings to provide a strong evidence base for clinical practice	 Identifying sources of research findings Conducting a literature search Evaluating research Determining relevance to practice 	 Ability to read and critically evaluate research Ability to interpret statistical findings and discern the relevance to breastfeeding and human lactation
3	Advocate for breastfeeding women, children and families in all settings and promote breastfeeding as the child-feeding norm globally Promote the principles of the Baby Friendly Hospital Initiative Promote the principles of the WHO Global Strategy for Infant and Young Child Feeding	Advocates for breastfeeding families, mothers, infants, and children in the workplace, community, and within the health care system Participates in breastfeeding advocacy group	 Local and international aspects of Baby- Friendly Hospital Initiative Peer counseling, lay support groups and professional organizations 	 Understanding of how to advocate for change Ability to identify and move stakeholders to consensus
4	Demonstrate the process to report to IBLCE if found guilty of any offence under the criminal code of the IBCLC's country or jurisdiction in which they work or if sanctioned by another profession Demonstrate the process to report to IBLCE any IBCLC who is functioning outside this Scope of Practice for IBCLCs, not maintaining a practice which meets with the IBLCE Code of Ethics or the Clinical Competencies for IBCLC Practice	Demonstrates ethical activity and decision-making	Code of ethics Code of Marketing of Breastmilk Substitutes	Understanding and acceptance of an ethical construct for practice

Professional Responsibilities and Practice L. **Core Competencies Learning Objectives** Suggested Content Suggested Skills & Behaviors Describe and analyze Differentiates the roles of • Role of the lactation consultant in various • Basic business and marketing 5 practice setting the lactation consultant in skills setting various practice settings options for lactation • Basics of setting up an independent Understanding of the consultants Outlines steps for setting practice, and setting up a collaborative reimbursement system for a up a practice in a clinical practice, such as with physicians given locale setting and an Techniques needed to develop • Ability to look a the larger independent setting community awareness of lactation picture and relate to others Develops a draft marketing consultant services professionally approach, either social or • Job description, résumé • Ability to implement commercial management strategies • Establishing services, setting up referral Defines strategies for around budgets, personnel, systems working within a budget structures, etc • Social marketing and commercial and with current resources • Open to the attitudes and marketing basics Correctly completes forms opinions of others and ability • Financial issues, including for third party for reimbursement to delegate reimbursement, and self-pay (where (including forms for 3rd • Observational skills relevant) party payers where applicable) Typical workplace culture, vision/mission and hierarchies; including how to work Demonstrates agency and with senior leadership, find a mentor, office/bureaucratic skills and achieve recognition Skills necessary to balance resources and constraints (financial, political and human resource) to achieve goals

Leadership and Teaching M. **Core Competencies Learning Objectives** Suggested Content Suggested Skills & Behaviors Demonstrate personal Demonstrates group leadership and Team building Organization 1 leadership skills that team building skills • Elements of leadership and how Observation reflect self-awareness Reflects on actions and attitudes and they influence motivation and · Personal integrity and vision applies them to understanding of effectiveness Group work self • Developing a personal and Self-efficacy Develops a personal leadership professional long-term career statement that maintains core Multi-tasking perspective principles and values Developing and applying a Self-reflection Develops a personal or professional personal leadership statement • Recognition of personal vision as a lactation consultant and of philosophy biases shares it with others Incorporating core values that • Finding a balance between Creates a personal professional fit with and recognize the personal and professional life development program importance of diversity and Ability to modify leadership context of the larger system Presents a model proposal for a behavior based on evaluation (students, stakeholders, project information organization, and society) • Creativity and imagination Incorporating core values that fit with and recognize the • Ability to articulate the vision importance of diversity and • Self awareness context of the larger system • Ability to guide organization (students, stakeholders, in others organization, and society) · Continued interest in learning Creating and periodically reviewing a personal • Ability to conceptualize a development/career plan that project, define the steps, incorporates continuing expected outcomes and a assessment, feedback and general budget and present it change to include modification with clarity Enlisting mentoring help with appropriate person Basic steps in designing a new program or activity, including goals, objectives, and measurable outcomes How to develop a budget with essential line items and any

research issues specific to the

local situation

M.	Leadership and Teaching				
	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors	
2	Demonstrate leadership and cultural awareness when communicating within an organization and when representing an organization to others	Communicates to negotiate, listen, find key agreement and disagreement areas to move discussion forward, including crisis management Demonstrates an understanding of diverse cultures and meets diverse needs Develops and implements a strategy for internal communication within an organization's management Creates a shared strategy around an issue so that partners and stakeholders can see themselves in it and moving forward	 Developing and applying a comprehensive model (including formal and informal methods) to keep organizational communities connected Recognizing, understanding, and appreciating diversity Enhancing skills for listening, dialoguing and presentation, while maintaining and articulating personal values 	 Thoughtful, clear presentation of ideas Ability to send a consistent message while listening and understanding the directions of diverse audiences through dialogue Ability to hear different perceptions and then act on them Open to and seeking engagement from diverse persons across cultures Grounding in personal values Ability to clearly present issues without emotional investment 	
3	Provide breastfeeding information to lay and health professional audiences utilizing adult learning methods and demonstrating public speaking skills	Prepares and presents an accurate and appropriate presentation Creates an assessment tool for a course to evaluate effectiveness Identifies and utilizes the elements of adult learning theory and teaching methods in both group and individual settings Speaks effectively outside the classroom for lay and health professional audiences	 Techniques of concept mapping: time, audience, purpose Systematic approaches to course and curriculum evaluation Elements of adult learning theory and teaching methods Language and cultural elements of communication 	 Teaching skills Research skills Observation of audience feedback to content Appropriate body language Thorough knowledge of the topic Organization Critical thinking Presentation and public speaking skills 	