



# Commission on Accreditation of Allied Health Education Programs

## Standards and Guidelines

for the Accreditation of Educational Programs in  
*Human Lactation and Breastfeeding*

Standards initially adopted in 2011 by

International Lactation Consultant Association

International Board of Lactation Consultant Examiners

Accreditation and Approval Review Committee on Education in Human Lactation and Breastfeeding  
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 Accreditation and Approval Review Committee on Education in Human Lactation and Breastfeeding (AARC).

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 Accreditation and Approval Review Committee on Education in Human Lactation and Breastfeeding (AARC), 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

1. 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.
2. 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 entry-level 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.
- 2) 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

- 1) 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 supervised clinical practice portion of the educational program 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 syllabi

that 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 AARC 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 AARC to develop an appropriate plan of action to respond to the identified shortcomings.

## V. Fair Practices

### A. Publications and Disclosure

1. 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.
3. 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/AARC in a timely manner. Additional substantive changes to be reported to AARC 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:

**Accreditation and Approval Review Committee on Education in  
Human Lactation and Breastfeeding**

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](http://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 AARC. The on-site review will be scheduled in cooperation with the program and AARC once the self-study report has been completed, submitted, and accepted by the AARC

##### 2. Applying for Continuing Accreditation

- a. Upon written notice from the AARC, 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:

**Accreditation and Approval Review Committee on Education in  
Human Lactation and Breastfeeding**

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](http://www.caahep.org/Content.aspx?ID=11).

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

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 AARC forwarding a recommendation to CAAHEP.

### **3. Administrative Requirements for Maintaining Accreditation**

- a. The program must inform the AARC 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 AARC 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 AARC that it is relinquishing its sponsorship of the program. Additionally, the new sponsor must submit a “Request for Transfer of Sponsorship Services” form. The AARC 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 AARCC 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 AARC in accordance with its policies and procedures. The time between comprehensive reviews is determined by the AARC 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 AARC and CAAHEP fees within a reasonable period of time, as determined by the AARC 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 AARC policy.
- g. The sponsor must agree to a reasonable on-site review date that provides sufficient time for CAAHEP to act on a AARC 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 AARC.

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 AARC 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 AARC. The sponsor will be notified by the AARC 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 AARC 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.

2. Before the AARC 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 AARC’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 AARC’s decision.
3. Before the AARC 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 AARC'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 AARC 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 AARC's reconsideration of a recommendation of withdraw or withhold accreditation must be based on conditions existing both when the AARC 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

## A. Communication and Counseling

Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
<b>1</b> 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	<ul style="list-style-type: none"> <li>• <i>Responsibility of the health care provider to obtain direct or implied consent for care</i></li> <li>• <i>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</i></li> <li>• <i>Variations within and between cultures</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to clearly state the purpose for providing care and respond appropriately if it is refused</i></li> </ul>
<b>2</b> Utilize appropriate counseling skills and techniques	Communicates with appropriate body language in a variety of clinical situations	<ul style="list-style-type: none"> <li>• <i>Impact of body language in any clinical situation</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Respectful and accepting manner toward all mothers and families</i></li> <li>• <i>Appropriate use of body language</i></li> <li>• <i>Ability to read and respond to body language of the mother/family member</i></li> <li>• <i>Awareness of one's own attitudes and biases</i></li> </ul>
<b>3</b> 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	<ul style="list-style-type: none"> <li>• <i>Cultural and religious beliefs surrounding 1) pregnancy, 2) childbirth and breastfeeding 3) family structure and 4) children, and available local support, where appropriate</i></li> <li>• <i>Current research on norms for various populations</i></li> <li>• <i>Global programs and implementation</i></li> <li>• <i>Local belief systems and differences</i></li> <li>• <i>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)</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Adequate assessment of situations and people</i></li> <li>• <i>Ability to respond appropriately</i></li> <li>• <i>Adaptation of program and other approaches used elsewhere</i></li> <li>• <i>Counseling individuals from a variety of backgrounds</i></li> <li>• <i>Ability to calmly respond to the unexpected</i></li> <li>• <i>Acceptance and understanding of differences in circumstances and practices</i></li> <li>• <i>Creativity to support mother in meeting her needs and those of the child</i></li> <li>• <i>Ability to analyze and apply research evidence</i></li> <li>• <i>Teaching skills</i></li> <li>• <i>Active listening, counseling/positive discussion</i></li> <li>• <i>Evidence-based decision making</i></li> </ul>

## 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 mother's responses back for confirmation	<ul style="list-style-type: none"> <li>• <i>Skills for eliciting maternal concerns</i></li> <li>• <i>Reflective listening</i></li> <li>• <i>History and note taking</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to ask probing questions and provide information paced to mother's interest, mental and psychological state</i></li> </ul>
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 families and other health care providers	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 health professionals for referral purposes	<ul style="list-style-type: none"> <li>• <i>Use of open-ended interview techniques, including how to elicit useful information</i></li> <li>• <i>Identifying key information for assessment</i></li> <li>• <i>Development and use of check-lists</i></li> <li>• <i>Reflective listening</i></li> <li>• <i>History and note taking</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Observation</i></li> <li>• <i>Assessment</i></li> <li>• <i>Active listening</i></li> <li>• <i>Able to guide discussion</i></li> <li>• <i>Eliciting essential information</i></li> <li>• <i>Prioritization of mother's needs/plan of care</i></li> <li>• <i>Rapid evaluation and organization of information</i></li> <li>• <i>Multi-tasking, empathy</i></li> <li>• <i>Non-authoritarian approach</i></li> </ul>
6	Assess maternal physical, mental and psychological states	Accurately assesses a mother's readiness and ability to learn	<ul style="list-style-type: none"> <li>• <i>Emotional changes pre and post birth</i></li> <li>• <i>Triage issues to address in one visit</i></li> <li>• <i>Depression (differentiate baby blues, depression, psychosis), use of Edinburgh Scale)</i></li> <li>• <i>Factors in history that could put mother at risk for PPD/psychosis</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Assessment of mood and underlying maternal and family issues</i></li> <li>• <i>Multi-tasking</i></li> <li>• <i>Reflective listening and counseling skills</i></li> </ul>
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	<ul style="list-style-type: none"> <li>• <i>Family theories</i></li> <li>• <i>Basics of social theory of decision-making</i></li> <li>• <i>Significance of including family members in teaching</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Assessment of family dynamics</i></li> <li>• <i>Acceptance of different needs</i></li> <li>• <i>Creativity</i></li> <li>• <i>Reading reactions from more than one person at a time (multi-tasking)</i></li> </ul>
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	<ul style="list-style-type: none"> <li>• <i>Gender issues as they relate to women's ability/inability to breastfeed and nurture</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Reading sociology and related literature critically</i></li> <li>• <i>Recognition of one's own biases</i></li> </ul>

## A. Communication and Counseling

Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
<p><b>9</b> Utilize adult education principles</p> <p>Select appropriate teaching aids</p>	<p>Presents information in response to a mother's expressed needs after assessing her learning style</p> <p>Assesses and selects materials appropriate to level of learning and readiness</p>	<ul style="list-style-type: none"> <li>• Principles of adult education in the clinical situation</li> <li>• Assessing learning style</li> <li>• Principles of how to assess readiness and ability to learn</li> <li>• Evaluation of and/or development of written and other teaching aides</li> </ul>	<ul style="list-style-type: none"> <li>• Ability to present concepts clearly and simply while avoiding medical and/or breastfeeding jargon</li> <li>• Work interactively with mothers</li> <li>• Pace information to meet real and perceived needs</li> <li>• Respectful demeanor</li> <li>• Assessment of readiness to learn and learning style</li> <li>• Ability to tailor assistance to the mother and family</li> <li>• Appropriate use of interpreters and other clinical assistance</li> </ul>
<p><b>10</b> Provide support and information to the mother to make evidence-informed decisions for her child and herself</p> <p>Provide information at a level which the mother can easily understand</p>	<p>Presents breastfeeding information to families in lay terms</p> <p>Uses adult learning principles and responds to concerns and questions respectfully</p>	<ul style="list-style-type: none"> <li>• Impact of breastfeeding and of no breastfeeding on maternal and infant clinical health and on public health</li> <li>• Presenting breastfeeding as the norm</li> </ul>	<ul style="list-style-type: none"> <li>• Understanding of the literature on breastfeeding</li> <li>• Ability to present clinical information in lay terms</li> <li>• Openness to the concerns of others</li> <li>• Ability to be an advocate without overstepping personal bounds</li> </ul>
<p><b>11</b> 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 production and child safety</p> <p>Provide evidence-based information regarding complementary therapies during lactation and their impact on a mother's milk production and the effect on her child</p>	<p>Appropriately discusses drug and folk remedies and their relationships to breastfeeding</p> <p>Provides reputable resources to reference</p>	<ul style="list-style-type: none"> <li>• How medications, herbs and recreational drugs/substances can transfer into milk or affect milk production</li> <li>• Why herbal and other alternative remedies are not always as safe as approved medications, where to find information regarding herbal or other alternative treatments</li> <li>• Where to find information regarding herbal or other alternative treatments</li> </ul>	<ul style="list-style-type: none"> <li>• Recognition of commonly encountered drugs and folk remedies</li> <li>• Decision making</li> <li>• Encouraging adherence to regimen</li> <li>• Understanding of research and appropriate practices to support breastfeeding</li> <li>• Sensitivity to parental beliefs, acceptance of patient's experience and perceptions</li> </ul>
<p><b>12</b> Provide anticipatory guidance to reduce potential risks to the breastfeeding mother or her child</p>	<p>Educates a mother about a breastfeeding event to provide tools to avoid problems</p>	<ul style="list-style-type: none"> <li>• Preventing problems through anticipatory guidance</li> <li>• Timing of anticipatory guidance</li> <li>• See also categories where anticipatory guidance is needed in Sections D, E, F, G, H, I, J</li> </ul>	<ul style="list-style-type: none"> <li>• Assessment of readiness to learn and learning style</li> <li>• Ability to tailor assistance to the mother and family</li> </ul>
<p><b>13</b> Counsel and support the mother/family in coping with the death of a child</p>	<p>Describes basics of counseling and supporting the mother/family in coping with the death of a child</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<ul style="list-style-type: none"> <li>• Grief counseling skills</li> <li>• Ability to address mother's physical and emotional needs</li> <li>• Recognition of own feelings</li> </ul>

## A. Communication and Counseling

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
14	<p>Assess social supports and possible challenges</p> <p>Provide information on community resources for breastfeeding assistance</p> <p>Provide follow-up services as required and requested</p> <p>Make appropriate referrals to other health care providers and community support resources in a timely manner depending on the urgency of the situation</p>	<p>Defines limitations of IBCLC role</p> <p>Identifies appropriate professional and other resources available and method of referral</p> <p>Compiles, and shares community resources for assistance with breastfeeding</p> <p>Provides appropriate follow-up</p>	<ul style="list-style-type: none"> <li>Professional scope of practice</li> <li>How to triage appropriate referrals</li> <li>How to identify community medical and social support resources</li> <li>Development of community ties to referral services for both clinical needs and social support needs</li> <li>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</li> </ul>	<ul style="list-style-type: none"> <li>Assessment of individual needs</li> <li>Ability to tailor referrals to meet individual needs</li> <li>Share responsibility for plan and outcomes with mother and family</li> <li>Organizational skills</li> <li>Knowledge of community resources</li> <li>Resourceful</li> </ul>

## B. Documentation and Communication

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
1	<p>Work collaboratively with the health care team to provide coordinated services to families</p>	<p>Communicates effectively with other members of the health care team, using documentation as appropriate to the geopolitical region, facility, and culture in which the student is being trained</p>	<ul style="list-style-type: none"> <li>Method and standards for developing written reports for other health care professionals to read</li> </ul>	<ul style="list-style-type: none"> <li>Basic written and verbal communication skills and familiarity with relevant medical terminology</li> <li>Organization of thoughts</li> <li>Neatness, accuracy, clarity</li> </ul>
2	<p>Obtain the mother's consent for obtaining and disclosing of information as needed or as specified by local jurisdiction</p>	<p>Demonstrates ability to protect personal and clinical privacy</p>	<ul style="list-style-type: none"> <li>Privacy issues and concerns</li> <li>Local laws and policies</li> <li>Decision making models</li> </ul>	<ul style="list-style-type: none"> <li>Elicit consent for information sharing</li> <li>Discretion in protecting privacy and rights</li> </ul>
3	<p>Provide written assessments as required</p> <p>Maintain documentation of all contacts, assessments, feeding plans, recommendations and evaluations of care and retain records for the time specified by the local jurisdiction</p>	<p>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</p>	<ul style="list-style-type: none"> <li>Basic content expected in a health record entry, a report to a primary care provider, and a referral letter</li> <li>Common mistakes</li> </ul>	<ul style="list-style-type: none"> <li>Assessment of the mother's and baby's condition(s)</li> <li>Selection of relevant information to report</li> <li>Accuracy and organization of information</li> <li>Respect for intended recipient</li> <li>Attention to accuracy and detail</li> </ul>

## B. Documentation and Communication

	<b>Core Competencies</b>	<b>Learning Objectives</b>	<b>Suggested Content</b>	<b>Suggested Skills &amp; Behaviors</b>
<b>4</b>	Respect the privacy, dignity and confidentiality of mothers and families except where the reporting of a danger to a mother or child is specifically required by law	Recognizes, handles and documents situations in which immediate verbal communication with health care provider is mandated by law, such as serious illness, abuse or neglect in the infant, child, or mother	<ul style="list-style-type: none"><li>• <i>How to contact a health care provider, introduce one's self and give a brief, clear, complete description of the concern using observations and data</i></li><li>• <i>Laws and regulations concerning child abuse or neglect in the region and what is defined as reportable</i></li><li>• <i>Conditions that may appear to be the result of abuse, but are not, such as Mongolian spots and other birth marks or scars from chest tubes</i></li></ul>	<ul style="list-style-type: none"><li>• <i>Ability to remain calm, but persistent</i></li><li>• <i>Accurate and clear about the need observed</i></li><li>• <i>Ability to convey the sense of urgency to the mother without causing undue distress</i></li><li>• <i>Assessment of the mother/baby/child</i></li><li>• <i>Ability to discuss with the parent(s) concerns and assess the need for reporting</i></li><li>• <i>Reporting accurately with information well organized</i></li><li>• <i>Multi-tasking; organization</i></li><li>• <i>Calm demeanor</i></li></ul>

## C. History Taking and Assessment

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
1	<p>Obtain a lactation history</p> <p>Identify events that occurred during the pregnancy, labor and birth that may adversely affect breastfeeding</p>	<p>Asks relevant questions, organizes, records, and analyzes data appropriately</p> <p>Identifies risk factors accurately</p> <p>Appropriately discusses and recommends breastfeeding adjustments to the mother experiencing cesarean birth</p>	<ul style="list-style-type: none"> <li>• <i>Components of medical/surgical, social and feeding history</i></li> <li>• <i>Relevant data to gather: prenatal, intrapartal, and postpartal</i></li> <li>• <i>How to organize and analyze history data</i></li> <li>• <i>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</i></li> <li>• <i>Risk factors that may impact lactation or breastfeeding for mothers that have cesarean section including possible delayed onset of lactogenesis II</i></li> <li>• <i>Positioning post-cesarean mother and baby for comfortable skin-to-skin holding as soon as possible</i></li> <li>• <i>Effective early feedings</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Clinical assessment skills (active listening,, history taking, observation, physical assessment)</i></li> <li>• <i>Ability to analyze pertinent data and relate to history and physical findings</i></li> <li>• <i>Decision making skills</i></li> </ul>
2	<p>Assess maternal physical, mental and psychological states</p>	<p>Obtains and appropriately interprets a psychosocial history (relationships, habits)</p>	<ul style="list-style-type: none"> <li>• <i>Possible impact of family situations, the stresses of poverty, health issues and poor relationships</i></li> <li>• <i>Mental health issues, including sexual abuse suffered by mother, substance abuse and other social problems' impact on breastfeeding</i></li> <li>• <i>Screening for domestic violence while maintaining safety</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Sensitivity to mother's discomfort, worry and safety</i></li> <li>• <i>Open to parental desires</i></li> <li>• <i>Comfort with assisting mother</i></li> </ul>
3	<p>Assess the breasts to determine if changes are consistent with adequate function in lactation</p>	<p>Performs breast assessment and identifies variations in normal anatomy and implications for breastfeeding</p> <p>Appropriately assesses a mother's flat or inverted nipple and utilizes techniques for achieving effective latch if parents desire</p> <p>Assesses evidence of previous breast surgery or trauma</p> <p>Discusses various impacts of breast surgery/trauma on breastfeeding</p>	<ul style="list-style-type: none"> <li>• <i>Steps and techniques in performing a physical assessment (observation/ palpation) of the breast</i></li> <li>• <i>Normal breast and nipple anatomy and common variations</i></li> <li>• <i>Expected changes in breasts related to pregnancy and lactation</i></li> <li>• <i>Evaluating nipple protractility and identifying a method for successfully latching the baby for effective milk transfer</i></li> <li>• <i>Evidence of previous breast surgery or trauma and how previous breast surgeries or trauma can affect milk production</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Diagnostic skills for physical exam of the breast</i></li> <li>• <i>Observational and clinical assessment skills (including history taking, analysis of information, diagnosis, and counseling)</i></li> <li>• <i>Clinical assessment of trauma including physical exam and history taking, observation of breastfeeding (if applicable), analysis of history and observation, diagnosis</i></li> <li>• <i>Decision making</i></li> <li>• <i>Applying clinical algorithms</i></li> <li>• <i>Problem solving</i></li> <li>• <i>Sensitivity to maintaining privacy during exam</i></li> </ul>

## C. History Taking and Assessment

	<b>Core Competencies</b>	<b>Learning Objectives</b>	<b>Suggested Content</b>	<b>Suggested Skills &amp; Behaviors</b>
<b>4</b>	Assess for normal child behavior and developmental milestones	Describes observations of child behavior accurately to a mother in a positive manner	<ul style="list-style-type: none"> <li>• <i>Normal child behavior at various gestational ages</i></li> <li>• <i>Child development and behavior</i></li> <li>• <i>Psychology; sociology; physiology of the child</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to distinguish normal from abnormal development</i></li> <li>• <i>Observation skills</i></li> <li>• <i>History-taking and physical exam</i></li> <li>• <i>Basic math skills applications</i></li> <li>• <i>Acceptance of the wide variation within normal for most behaviors</i></li> <li>• <i>Acceptance of the wide variation within normal for most behaviors</i></li> <li>• <i>Ability to focus on the child and patiently elicit appropriate behaviors</i></li> </ul>
<b>5</b>	Assess and determine strategies to initiate and continue breastfeeding when challenging situations exist/occur	<p>Performs a comprehensive breastfeeding assessment, and supports normal and effective breastfeeding</p> <p>Demonstrates ability to accurately evaluate and work with a variety of mothers and babies</p> <p>Demonstrates ability to make appropriate recommendations</p>	<ul style="list-style-type: none"> <li>• <i>Lactogenesis II</i></li> <li>• <i>Engorgement and non-lactating breast</i></li> <li>• <i>Nipple damage and probable cause(s)</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Observation</i></li> <li>• <i>Assessment of normal lactating breasts</i></li> <li>• <i>Multi-tasking</i></li> <li>• <i>Organization</i></li> <li>• <i>Appropriate reaction to unusual or abnormal findings</i></li> <li>• <i>Planning care</i></li> </ul>
<b>6</b>	Identify correct latch and attachment	<p>Assesses effectiveness of latch</p> <p>Assists and describes in lay terms to the mother how to achieve an effective latch</p>	<ul style="list-style-type: none"> <li>• <i>Identifying correct latch</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to describe and demonstrate getting a baby to latch correctly and identify an incorrect latch</i></li> <li>• <i>Observation and assessment skills</i></li> <li>• <i>Respect for mother's report</i></li> <li>• <i>Persistence</i></li> <li>• <i>Willingness to try new methods</i></li> </ul>

## C. History Taking and Assessment

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
7	<p>Assess effective milk transfer</p> <p>Assess for adequate milk intake of the infant/child</p> <p>Address inadequate milk intake</p>	<p>Assesses milk intake and transfer by using multiple techniques including history, observation, and identifying concerns</p> <p>Provides feedback to the mother and relevant caregivers</p> <p>Demonstrates use of a pre/post feeding weight scale</p>	<ul style="list-style-type: none"> <li>• <i>Components of assessing effective milk transfer, including signs of milk ejection reflex and effective feeding</i></li> <li>• <i>Signs of inadequate milk transfer and methods for improving milk transfer</i></li> <li>• <i>Use and interpretation of growth charts for breastfed children</i></li> <li>• <i>Use of clinical interventions such as pre/post feeding weight as an assessment tool</i></li> <li>• <i>Use of a digital scale and balance scale and different levels of accuracy</i></li> <li>• <i>Use of the metric system for pre/post feeding weights</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Basic breastfeeding history, observation and clinical assessment techniques</i></li> <li>• <i>Pre-post weighing procedures</i></li> <li>• <i>Decision making</i></li> <li>• <i>Proper use and interpretation of growth charts</i></li> <li>• <i>Ability to analyze pertinent data and relate to history and physical findings</i></li> <li>• <i>Accuracy, thoroughness in applying processes including weighing, etc.</i></li> <li>• <i>Ability to convert weight (lb/oz) to metric (grams)</i></li> <li>• <i>Ability to address a mother's denial, frustration</i></li> </ul>
8	<p>Assess oral anatomy and normal neurological responses and reflexes</p>	<p>Recognizes and describes normal and abnormal sucking patterns relative to ability to breastfeed</p> <p>Teaches parents how to recognize normal patterns</p>	<ul style="list-style-type: none"> <li>• <i>Effective sucking/suckling at the breast and how it differs from sucking from a bottle or pacifier</i></li> <li>• <i>How to recognize effective milk transfer and how to teach parents</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Counseling with terms appropriate to the mother's health literacy status</i></li> <li>• <i>Clinical assessment including observation of breastfeeding and relevant history collection</i></li> <li>• <i>Observation skills</i></li> <li>• <i>Assisting mother in positioning child at breast and guiding mother to comfortable positions during breastfeeding</i></li> <li>• <i>Comfort with assisting mother</i></li> </ul>
9	<p>Assess the mother's milk supply and provide information regarding increasing or decreasing milk volume as needed</p>	<p>Comfortably and confidently discusses milk production physiology and growth spurts with parents</p> <p>Appropriately identifies insufficient milk intake and real versus perceived insufficiency</p>	<ul style="list-style-type: none"> <li>• <i>Physiology of lactation, hormonal control of milk production, how milk production adjusts to meet the child's needs as he grows</i></li> <li>• <i>Factors that can interfere with adequate milk production and how to address them</i></li> <li>• <i>Etiology of and treatment(s) for perceived and actual low milk supply</i></li> <li>• <i>Management of low milk supply</i></li> <li>• <i>How to identify hyperlactation/excessive milk production, how it may affect the infant and how to treat it</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Analytical and teaching skills</i></li> <li>• <i>History taking</i></li> <li>• <i>Decision making</i></li> <li>• <i>Ability to discuss with mothers and families using lay terms</i></li> <li>• <i>Skills for handling delayed milk ejection, mother and family fears of delayed 'coming in' of milk and empty breasts in first few days</i></li> <li>• <i>Classification and measurement of milk volume, outputs, weight and clinical assessment/decision making, job-aids, including protocols (clinical algorithms)</i></li> <li>• <i>Adult learning techniques, open to parental attitudes</i></li> </ul>

## D. Prenatal and Perinatal Breastfeeding Support

	<b>Core Competencies</b>	<b>Learning Objectives</b>	<b>Suggested Content</b>	<b>Suggested Skills &amp; Behaviors</b>
<b>1</b>	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	<ul style="list-style-type: none"> <li>• <i>How principles of adult learning impact teaching style as well as content</i></li> <li>• <i>Lesson plan development including how to select the appropriate information to include in a class</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Public speaking</i></li> <li>• <i>Ability to teach in an interactive format</i></li> <li>• <i>Ability to keep a mental agenda while teaching responsively</i></li> <li>• <i>Sensitivity to both individual and group responses</i></li> <li>• <i>Self-awareness regarding personal biases</i></li> </ul>
<b>2</b>	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	<ul style="list-style-type: none"> <li>• <i>Prenatal breast exam for breastfeeding readiness</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to counsel during examination in support of breastfeeding</i></li> <li>• <i>Positive prospective support for breastfeeding success</i></li> </ul>
<b>3</b>	Address health related life style issues, including alcohol, tobacco and drugs	Address health related life style issues: alcohol, tobacco and drugs appropriately	<ul style="list-style-type: none"> <li>• <i>Impact of alcohol, tobacco and illicit drug use on infant well-being, breastfeeding and the mother's ability to nurture</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to suggest change with sensitivity</i></li> <li>• <i>Ability to know when referral is necessary</i></li> </ul>
<b>4</b>	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	<ul style="list-style-type: none"> <li>• <i>Nutrition and micronutrient needs for the pre-pregnant and pregnant woman, including nursing during pregnancy</i></li> <li>• <i>Optimal and adequate nutrition during breastfeeding</i></li> <li>• <i>Nutritional deficiencies associated with some restrictive diets</i></li> <li>• <i>Local issues and variances in nutritional needs by region and level of poverty</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to know when to refer for dietary counseling</i></li> <li>• <i>Ability to develop good dietary content for mother and for complementary feeding</i></li> <li>• <i>Sensitivity to mother's discomfort or worry</i></li> <li>• <i>Comfort with assisting mother</i></li> </ul>
<b>5</b>	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	<ul style="list-style-type: none"> <li>• <i>Positive outcomes associated with appropriate labor and delivery routines and family-centered maternity care</i></li> <li>• <i>Role of a labor support person such as a doula and how to advocate within local system</i></li> <li>• <i>Impact of labor and birth on the infant and mother</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Experience in labor and delivery areas</i></li> <li>• <i>Respectful</i></li> <li>• <i>Patience; calm demeanor</i></li> <li>• <i>Reassuring presence</i></li> <li>• <i>Acceptance of mother's experience/perception</i></li> <li>• <i>Effective advocacy in local context</i></li> <li>• <i>Assessment</i></li> <li>• <i>Abstraction of pertinent chart information</i></li> <li>• <i>Acceptance of mother's experience/perception</i></li> <li>• <i>Reacting without blame and moving forward</i></li> </ul>

## D. Prenatal and Perinatal Breastfeeding Support

	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	<ul style="list-style-type: none"> <li>• <i>Policies and protocols to support breastfeeding immediately post partum</i></li> <li>• <i>Working as an agent for change regarding BFHI recommended practices</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Understanding of evidence-based research and appropriate practices to support breastfeeding</i></li> <li>• <i>Ability to suggest change while respecting other professionals' experience</i></li> <li>• <i>Sensitivity for other professionals' experience</i></li> </ul>
7	Promote continuous skin-to-skin contact of the newborn and mother	<p>Presents the underlying technical arguments and counseling messages for skin-to-skin care</p> <p>Counsels parents appropriately about keeping mother and newborn together</p> <p>Recognizes hospital practices that may be disruptive of establishment of breastfeeding</p>	<ul style="list-style-type: none"> <li>• <i>Skin-to-skin care and its importance for breastfeeding</i></li> <li>• <i>Achieving skin-to-skin care in the health care setting</i></li> <li>• <i>Research on the impact of skin-to-skin care and rooming in on breastfeeding</i></li> <li>• <i>Ways to facilitate mother's rest with mother and newborn in close proximity</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Understanding of research and appropriate practices to support breastfeeding</i></li> <li>• <i>Ability to discuss and describe the research with families and help them to implement it to meet their needs</i></li> <li>• <i>Teaching skills mindful of mother's health literacy</i></li> <li>• <i>Creativity to facilitate mothers in meeting their own needs while meeting those of the child</i></li> <li>• <i>Willingness to try new methods</i></li> </ul>
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	<ul style="list-style-type: none"> <li>• <i>Reasons for separation to determine need for milk expression and most appropriate means of expression for the situation</i></li> <li>• <i>Normal ranges of amounts of milk to express based upon days/ weeks/ months/ years postpartum</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to prioritize</i></li> </ul>
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	<ul style="list-style-type: none"> <li>• <i>Feeding readiness cues in a full-term infant</i></li> <li>• <i>Range of normal infant feeding behavior</i></li> <li>• <i>Importance of feeding frequency and draining the breast adequately on both the newborn's learning to feed and the mother's milk production</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Communication using lay terms, not medical or lactation consultant language (jargon)</i></li> <li>• <i>Observation skills</i></li> <li>• <i>Teaching skills</i></li> <li>• <i>Ability to complete an accurate physical exam of newborn</i></li> <li>• <i>Ability to demonstrate waking techniques</i></li> </ul>
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	<ul style="list-style-type: none"> <li>• <i>Needs of the child to be fed and the breasts to be emptied to establish and maintain milk production</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to discuss and describe the research with families and help them to implement it to meet their needs</i></li> <li>• <i>Creativity to facilitate mothers in meeting their own needs while meeting those of the child</i></li> </ul>

## D. Prenatal and Perinatal Breastfeeding 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	<ul style="list-style-type: none"> <li>• <i>Infant self-attachment and breastfeeding positions and how each may or may not be helpful</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to describe and demonstrate different feeding positions and assess which is most appropriate for an individual situation</i></li> <li>• <i>Teaching skills</i></li> </ul>
12	Provide suggestions as to when and how to stimulate a sleepy baby to feed	<p>Appropriately describes when it is appropriate and how to awaken a sleepy baby</p> <p>Describes observations regarding her baby to mother in a non-threatening manner</p> <p>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</p>	<ul style="list-style-type: none"> <li>• <i>Nonspecific nature of signs of newborn illness and situations when it is appropriate to awaken a sleepy baby</i></li> <li>• <i>Normal sleep cycles of newborns</i></li> <li>• <i>Waking techniques that are effective</i></li> <li>• <i>How to recognize and work with shut-down from cold or over stimulation</i></li> <li>• <i>Determining cause(s) of shut-down</i></li> <li>• <i>Nonspecific nature of signs of newborn illness, including inability to wake the infant to alertness (lethargy), poor suckling, temperature instability</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to recognize signs of an ill baby and distinguish illness/lethargy from "sleepy;"</i></li> <li>• <i>Applies skills for getting babies to feed</i></li> <li>• <i>Creativity to facilitate mothers in meeting their own needs while meeting those of the baby</i></li> </ul>
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	<ul style="list-style-type: none"> <li>• <i>How pacifiers can affect infant weight gain as well as mother's nipple pain and milk production</i></li> <li>• <i>How pacifier use can interfere with imprinting on the mother's nipple and interfere with feeding</i></li> <li>• <i>How early use of artificial nipples (bottle-feeding) can interfere with learning to breastfeed effectively</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Teaching skills</i></li> <li>• <i>Recognition of various conditions and solutions</i></li> <li>• <i>Decision making</i></li> <li>• <i>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</i></li> <li>• <i>Recognition of one's own biases</i></li> <li>• <i>Open to parental attitudes, respect for their needs and desires</i></li> </ul>

## D. Prenatal and Perinatal Breastfeeding Support

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
<b>14</b>	Provide information and strategies to prevent and resolve sore damaged nipples	<p>Assesses a mother's nipples clinically</p> <p>Assists a mother appropriately in preventing and treating sore nipples and refer as needed</p> <p>Evaluates and assists a mother with improved latch, if needed</p> <p>Suggests modes of symptomatic treatment (pain control, etc.)</p>	<ul style="list-style-type: none"> <li>• <i>Evaluation of position of the mother and baby and baby's latch and feeding behavior for optimal feeding and prevention of nipple trauma</i></li> <li>• <i>Causes and treatments of sore nipples and management of breastfeeding during this time</i></li> <li>• <i>Differentiating causes of sore nipples and sore breasts caused by incorrect latch, bacterial infection or yeast infection, mastitis, abscess or plugged duct</i></li> <li>• <i>Appropriate intervention(s) or recommendation to health care provider</i></li> <li>• <i>Positioning to heal certain types of damage</i></li> <li>• <i>Other therapies/devices and the pros/cons (breast shells, nipple shields, moist wound healing principles, etc.)</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Recognition of various conditions and solutions</i></li> <li>• <i>Clinical assessment including history taking</i></li> <li>• <i>Observation of breastfeeding</i></li> <li>• <i>Ability to prioritize</i></li> <li>• <i>Problem solving, including use of protocols (clinical algorithms) and job aids</i></li> <li>• <i>Ability to recognize need for creativity and adaptation</i></li> <li>• <i>Sensitivity to mother's discomfort or worry including addressing, frustration, denial, tearfulness</i></li> <li>• <i>Creativity to facilitate mother in meeting her needs and those of the baby</i></li> </ul>
<b>15</b>	Provide information and strategies to prevent and resolve engorgement, blocked ducts and mastitis	<p>Identifies and differentiates problems potentially requiring medical/surgical treatment</p> <p>Appropriately assesses and discusses engorgement treatment and prevention with mother and describes modalities for the prevention and treatment of engorgement</p>	<ul style="list-style-type: none"> <li>• <i>Mastitis and subclinical mastitis signs, symptoms and management</i></li> <li>• <i>Indications for referral to other provider(s)</i></li> <li>• <i>Stages of engorgement, its causes, and why it should be treated</i></li> <li>• <i>Risks of not treating engorgement, effectiveness of different treatment modalities, and management of breastfeeding during this time</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Recognition of various conditions and solutions</i></li> <li>• <i>Clinical assessment including history taking</i></li> <li>• <i>Observation of breastfeeding</i></li> <li>• <i>Ability to prioritize</i></li> <li>• <i>Problem solving, including use of protocols (clinical algorithms) and job aids</i></li> <li>• <i>Ability to recognize need for creativity and adaptation</i></li> <li>• <i>Sensitivity to mother's discomfort or worry including addressing, frustration, denial, tearfulness</i></li> <li>• <i>Creativity to facilitate mother in meeting her needs and those of the child</i></li> </ul>
<b>16</b>	Provide appropriate education for the mother and her family regarding the importance of exclusive breastfeeding to the health of the mother and child and the risk of using breastmilk substitutes	<p>Presents to parents the health risks to the child associated with mixed feedings with cow or soy milk, including allergies, in a respectful manner, and with respect for parental wishes</p>	<ul style="list-style-type: none"> <li>• <i>Describe the principles of adult education</i></li> <li>• <i>Counseling and presentation style as they apply to communicating the concept of prevention</i></li> <li>• <i>Importance of breastfeeding for mother and child health (prevention of SIDS/SUDI, diabetes, certain cancers, child illnesses, maternal illnesses, impact on birth spacing)</i></li> <li>• <i>Consequences of lack of exclusive breastfeeding on immunology, allergy and gut development</i></li> <li>• <i>Possible consequences of feeding the baby other than at the breast</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Presence in front of individuals and groups</i></li> <li>• <i>Recognition of various conditions and solutions</i></li> <li>• <i>Ability to discuss and describe research with families and help them to implement it to meet their needs</i></li> <li>• <i>Skills for counseling mothers of non breastfed children separately and separating them from breastfed to avoid the spillover effect</i></li> <li>• <i>Recognition/ acceptance that individuals learn in differing ways</i></li> </ul>

## E. Extended Breastfeeding Support

	<b>Core Competencies</b>	<b>Learning Objectives</b>	<b>Suggested Content</b>	<b>Suggested Skills &amp; Behaviors</b>
<b>1</b>	Teach appropriate food selection for breastfed children	Counsels on child feeding for at least 3 different ages in the child's first 2 years	<ul style="list-style-type: none"> <li>• <i>Situations when formula use is warranted</i></li> <li>• <i>Appropriate commercial feeding products and proper use</i></li> <li>• <i>Complementary feeding principles and how to provide support as the child transitions to complementary feedings</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Basic complementary feeding counseling for the breastfed and non-breastfed child</i></li> <li>• <i>Taking family norms into account</i></li> <li>• <i>Recognition of one's own biases</i></li> </ul>
<b>2</b>	Provide information and strategies to minimize the risk of Sudden Infant Death Syndrome (SIDS) or Sudden Unexplained Death of an Infant (SUDI)	Respectfully teaches back sleeping using current research regarding breastfeeding in SIDS/SUDI prevention	<ul style="list-style-type: none"> <li>• <i>Role of breastfeeding in SIDS/SUDI prevention</i></li> <li>• <i>Significance of the supine sleeping position, and how to co-sleep safely</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to counsel concerning various situations impacting SIDS/SUDI</i></li> <li>• <i>Understanding of research and appropriate practices to support breastfeeding</i></li> <li>• <i>Open to parental experiences with SIDS/SUDI</i></li> </ul>
<b>3</b>	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	<ul style="list-style-type: none"> <li>• <i>Role of exclusive breastfeeding in child spacing, including such methods as LAM and natural family planning</i></li> <li>• <i>Potential effect of hormonal contraceptives on lactation, including pills, implants and injections</i></li> <li>• <i>Use of barrier forms of contraception, including foam and condoms and IUD's</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Recognition of various options</i></li> <li>• <i>Clinical assessment including history taking</i></li> <li>• <i>Understanding of research and appropriate practices to support breastfeeding</i></li> <li>• <i>Sensitivity to parental autonomy and decision making</i></li> <li>• <i>Recognition of one's own biases</i></li> </ul>
<b>4</b>	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	<ul style="list-style-type: none"> <li>• <i>How teething may affect feeding behavior and how to approach biting issues in an age-appropriate manner</i></li> <li>• <i>How the child who is feeding effectively is not able to bite during actual feeding</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History-taking and physical exam, including oral-motor function</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Ability to ask appropriate questions</i></li> <li>• <i>Ability to organize information, think outside the box and see relationships</i></li> <li>• <i>Ability to communicate complicated information in lay terms</i></li> <li>• <i>Patience with problems that do not have easy answers</i></li> <li>• <i>Acceptance of different values and lifestyles without judgment</i></li> <li>• <i>Sensitivity to how the family is taking in the information</i></li> <li>• <i>Ability to work collaboratively with specialists who may not focus on breastfeeding</i></li> </ul>

## E. Extended Breastfeeding Support

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
5	Identify issues related to early weaning and appropriate interventions/teaching for the family	Works effectively with a mother/child dyad experiencing this condition	<ul style="list-style-type: none"> <li>• <i>Description of a nursing strike and how to distinguish it from refusing to nurse because of pain such as an ear infection, teething, thrush or gastric upset</i></li> <li>• <i>How to counsel the mother who is not ready to wean when her baby is ready</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History-taking and physical exam, including oral-motor function</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Ability to ask appropriate questions</i></li> <li>• <i>Ability to organize information, think outside the box and see relationships</i></li> <li>• <i>Ability to communicate complicated information in lay terms</i></li> <li>• <i>Patience with problems that do not have easy answers</i></li> <li>• <i>Acceptance of different values and lifestyles without judgment</i></li> <li>• <i>Sensitivity to how the family is taking in the information</i></li> <li>• <i>Ability to work collaboratively with specialists who may not focus on breastfeeding</i></li> </ul>
6	Provide information regarding weaning from the breast when appropriate, including care of mother's breasts and preparation and use of breastmilk substitutes	Appropriately counsels mothers about weaning issues at various ages and with multiples	<ul style="list-style-type: none"> <li>• <i>Infant-led and mother-led weaning, reasons for each including undesired and/or untimely weaning</i></li> <li>• <i>Anthropologic description of weaning, the role of the lactation consultant in discussing weaning with parents</i></li> <li>• <i>World Health Organization Guidelines for Safe Preparation, Storage and Handling of Powdered Infant Formula</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Decision making</i></li> <li>• <i>Ability to prioritize</i></li> </ul>
7	Provide instruction and guidance on toddler breastfeeding	Counsels mothers of toddlers on breastfeeding maintenance in mother's social setting.	<ul style="list-style-type: none"> <li>• <i>Changing needs of the mother and child and the role breastfeeding plays in the child's life</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History-taking and physical exam, including oral-motor function</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Ability to ask appropriate questions</i></li> <li>• <i>Ability to organize information, think outside the box and see relationships</i></li> <li>• <i>Ability to communicate complicated information in lay terms</i></li> <li>• <i>Patience with problems that do not have easy answers</i></li> <li>• <i>Acceptance of different values and lifestyles without judgment</i></li> <li>• <i>Sensitivity to how the family is taking in the information</i></li> <li>• <i>Ability to work collaboratively with specialists who may not focus on breastfeeding</i></li> </ul>

## E. Extended Breastfeeding Support

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
8	Describe and teach approaches to breastfeeding while pregnant and tandem nursing	Counsels on the pros and cons of tandem nursing, and on anticipatory planning.	<ul style="list-style-type: none"><li>• <i>Research regarding breastfeeding through a pregnancy</i></li><li>• <i>How the mother can make sure she is meeting the new child's needs as well as those of the older child</i></li><li>• <i>Mother's changing emotional needs and how they vary from woman to woman</i></li><li>• <i>Ways to approach weaning that are developmentally appropriate, if the mother decides to wean</i></li></ul>	<ul style="list-style-type: none"><li>• <i>History-taking and physical exam, including oral-motor function</i></li><li>• <i>Breastfeeding observation and evaluation</i></li><li>• <i>Ability to ask appropriate questions</i></li><li>• <i>Ability to organize information, think outside the box and see relationships</i></li><li>• <i>Ability to communicate complicated information in lay terms</i></li><li>• <i>Patience with problems that do not have easy answers</i></li><li>• <i>Acceptance of different values and lifestyles without judgment</i></li><li>• <i>Sensitivity to how the family is taking in the information</i></li><li>• <i>Ability to work collaboratively with specialists who may not focus on breastfeeding</i></li></ul>

## F. Problem-Solving 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	<ul style="list-style-type: none"> <li>• <i>Normal limits for child behavior, feeding patterns and growth</i></li> <li>• <i>Triaging common breastfeeding problems, recognizing and differentiating mechanical breastfeeding problems, milk supply, any maternal nutrient challenges</i></li> <li>• <i>Maternal and child contribution to problems</i></li> <li>• <i>Questions relevant to the presenting problem(s), multiple presenting problems to address the most significant issue(s) first</i></li> <li>• <i>Assessing situation for unexpressed/unrecognized problems</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Clinical assessment (including history taking and physical assessment)</i></li> <li>• <i>Triaging</i></li> <li>• <i>Time management</i></li> <li>• <i>Critical thinking</i></li> <li>• <i>Pattern identification</i></li> </ul>
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	<ul style="list-style-type: none"> <li>• <i>Identifying basic issue(s) and solutions and verifying understanding with the mother, including both child and maternal needs</i></li> <li>• <i>Discussing alternative choices with the family and how they will each impact child health, breastfeeding and milk production</i></li> <li>• <i>Creating an appropriate document at the maternal literacy level for the family</i></li> <li>• <i>Identifying community resources and making referrals as needed</i></li> <li>• <i>Defining the successful outcome of the plan as it meets the child's and mother's needs</i></li> <li>• <i>Determining that the family can implement the plan independent of intervention once they have left the consult</i></li> <li>• <i>Optimal health care follow-up of the breastfeeding child and mother postpartum</i></li> <li>• <i>Optimal breastfeeding support follow-up for the breastfeeding child and mother postpartum</i></li> <li>• <i>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</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Counseling using lay terms</i></li> <li>• <i>Recognition of various conditions and solutions</i></li> <li>• <i>Decision making over the phone or in a community setting</i></li> <li>• <i>Culturally sensitive counseling skills</i></li> <li>• <i>Developing a plan of action</i></li> <li>• <i>Time management</i></li> <li>• <i>Interview and follow-up techniques</i></li> <li>• <i>Patient monitoring</i></li> <li>• <i>Organization</i></li> <li>• <i>Multi-tasking</i></li> <li>• <i>Openness</i></li> <li>• <i>Clarity of expression</i></li> <li>• <i>Sensitivity to mother's priorities</i></li> <li>• <i>Persistence in follow-up</i></li> </ul>

## G. Newborn/Child Breastfeeding Challenges

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
<b>1</b>	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	<ul style="list-style-type: none"> <li>• <i>Effects of labor and birth and birthing practices on the newborn's ability to feed, including the time frame in which they may appear</i></li> <li>• <i>Techniques for helping the newborn who is having difficulty with feeding</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History-taking and physical exam, including oral-motor function</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Ability to recognize and correct for the effects of a birth trauma</i></li> <li>• <i>Ability to ask appropriate questions</i></li> <li>• <i>Ability to organize information, think outside the box and see relationships</i></li> <li>• <i>Ability to communicate complicated information in lay terms</i></li> <li>• <i>Patience with problems that do not have easy answers</i></li> <li>• <i>Acceptance of different values and lifestyles without judgment</i></li> <li>• <i>Sensitivity to how the family is taking in the information and difficult news clearly</i></li> </ul>
<b>2</b>	Develop and apply a plan of care for the breastfeeding mother with a preterm or late preterm infant	Develops and implements a plan of action with a mother including both feeding the newborn and protecting the milk supply	<ul style="list-style-type: none"> <li>• <i>Medical complications influenced by organ system immaturity in the infant born at 35-38 weeks, referred to as the late-preterm infant</i></li> <li>• <i>Unique needs and feeding behaviors of these infants</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History-taking and physical exam, including oral-motor function</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Ability to ask appropriate questions</i></li> <li>• <i>Ability to organize information, think outside the box and see relationships</i></li> <li>• <i>Ability to communicate complicated information in lay terms</i></li> <li>• <i>Patience with problems that do not have easy answers</i></li> <li>• <i>Acceptance of different values and lifestyles without judgment</i></li> <li>• <i>Sensitivity to how the family is taking in the information</i></li> </ul>

## G. Newborn/Child Breastfeeding Challenges

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
<b>3</b>	Design and implement a plan of care for the mother with a newborn that is small for gestational age (SGA) or large for gestational age (LGA)	Develops and implements a plan of action with a mother including both feeding the newborn and protecting the milk supply	<ul style="list-style-type: none"> <li>• <i>Causes and effects of being LGA or SGA on the newborn's adaptation post birth and feeding behavior</i></li> <li>• <i>Safe feeding and maternal involvement/skin-to-skin</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History-taking and physical exam, including oral-motor function</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Ability to ask appropriate questions</i></li> <li>• <i>Ability to organize information, think outside the box and see relationships</i></li> <li>• <i>Ability to communicate complicated information in lay terms</i></li> <li>• <i>Patience with problems that do not have easy answers</i></li> <li>• <i>Acceptance of different values and lifestyles without judgment</i></li> <li>• <i>Sensitivity to how the family is taking in the information</i></li> </ul>
<b>4</b>	Design and implement a plan of care for breastfeeding multiples	Develops and implements a plan of action with a mother including both feeding the newborn and protecting the milk supply	<ul style="list-style-type: none"> <li>• <i>Potential medical complications that frequently occur with multiples/plural births</i></li> <li>• <i>Logistics of feeding more than one child at the breast, as well as developing and maintaining an adequate milk supply and how to assure appropriate newborn weight gain</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History-taking and physical exam, including oral-motor function</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Ability to ask appropriate questions</i></li> <li>• <i>Ability to organize information, think outside the box and see relationships</i></li> <li>• <i>Ability to communicate complicated information in lay terms</i></li> <li>• <i>Patience with problems that do not have easy answers</i></li> <li>• <i>Acceptance of different values and lifestyles without judgment</i></li> <li>• <i>Sensitivity to how the family is taking in the information</i></li> </ul>

## G. Newborn/Child Breastfeeding Challenges

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
5	Facilitate breastfeeding for the medically fragile and physically compromised child	<p>Describes to mother observations regarding her child in a non-threatening manner</p> <p>Develops and implements a plan of action that includes ongoing assessment, evaluation and subsequent change in management, including expressing her milk to the milk supply, the importance of skin-to-skin contact when appropriate</p>	<ul style="list-style-type: none"> <li>• <i>Potential medical complications associated with preterm infants</i></li> <li>• <i>Establishing milk production when the child cannot go to breast, including hand expression as well as with a pump</i></li> <li>• <i>Reading the preterm infant's cues</i></li> <li>• <i>Use of kangaroo mother care</i></li> <li>• <i>Transitioning the preterm infant to breastfeeding effectively</i></li> <li>• <i>Range of long-term feeding plans that may be necessary for the preterm infant</i></li> <li>• <i>Optimal feeding practices of preterms</i></li> <li>• <i>Managing feeding problems in sick children and those with HIV positive mothers</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History-taking and physical exam, including oral-motor function</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Ability to ask appropriate questions</i></li> <li>• <i>Ability to organize information, think outside the box and see relationships</i></li> <li>• <i>Counseling with terms appropriate to the mother's health literacy status</i></li> <li>• <i>Patience with problems that do not have easy answers</i></li> <li>• <i>Acceptance of different values and lifestyles without judgment</i></li> <li>• <i>Sensitivity to how the family is taking in the information</i></li> <li>• <i>Ability to work collaboratively with specialists and recognize when referral is appropriate</i></li> </ul>
6	Describe and implement a plan of care for the breastfed hypoglycemic newborn	<p>Describes to mother observations regarding her child in a non-threatening manner</p> <p>Develops and implements a plan of action, including expressing her milk if necessary to establish a milk supply and to feed the child with human milk in preference to formula, the importance of skin-to-skin contact</p>	<ul style="list-style-type: none"> <li>• <i>Background information and laboratory values relating to the diagnosis of hypoglycemia in the newborn</i></li> <li>• <i>Minimizing the risk of hypoglycemia with immediate skin-to-skin holding, early feeding with colostrums, teaching the mother to hand express</i></li> <li>• <i>Recognizing when the child is too sick to breastfeed</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History-taking and physical exam, including oral-motor function</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Ability to ask appropriate questions</i></li> <li>• <i>Ability to organize information, think outside the box and see relationships</i></li> <li>• <i>Ability to communicate complicated information in lay terms</i></li> <li>• <i>Patience with problems that do not have easy answers</i></li> <li>• <i>Acceptance of different values and lifestyles without judgment</i></li> <li>• <i>Sensitivity to how the family is taking in the information</i></li> <li>• <i>Ability to work collaboratively with specialists and recognize when referral is appropriate</i></li> </ul>

## G. Newborn/Child Breastfeeding Challenges

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
7	<p>Calculate an a child's caloric/Kilojoule and volume requirements</p> <p>Assess the breastfeeding child's growth using World Health Organization adapted growth charts</p>	<p>Differentiates slow weight gain from failure to thrive</p> <p>Assesses problem(s) contributing to poor weight gain</p> <p>Develops a plan with the mother for feeding the child, including increasing milk production, if appropriate, and child intake of calories/Kilojoules</p> <p>Evaluates need for referral</p>	<ul style="list-style-type: none"> <li>• <i>Triaging and problem-solving skills to evaluate if child is gaining weight and growing appropriately for age</i></li> <li>• <i>How to decide immediately if there is danger of impending shock due to dehydration</i></li> <li>• <i>Evaluating cause(s) and context in which weight loss or slow weight gain is occurring using history and physical exam of mother and child</i></li> <li>• <i>Use of growth standards and curves appropriately for growth monitoring and for problem situations</i></li> <li>• <i>Nutritional growth failure and growth failure caused by underlying illness</i></li> <li>• <i>Assessing adequate milk intake with and without a scale, and assessing weight gain over time</i></li> <li>• <i>Facilitating optimal milk transfer and assess milk production</i></li> <li>• <i>When and how to use interventions including improved positioning and latch, increasing intake at a feeding, lactogogues and breastfeeding equipment</i></li> <li>• <i>When supplementation of expressed mother's own, donor milk or formula is necessary</i></li> <li>• <i>Calculating amount of fluids/calories required by the child according to predicted weight for age</i></li> <li>• <i>Conversion of English units to metric units and vice-versa (if applicable) for calculating feeding needs and weight loss/gain</i></li> <li>• <i>Evaluating and optimizing/maintaining maternal milk supply</i></li> <li>• <i>How to teach parents effectively</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History taking and physical exam</i></li> <li>• <i>Oral-motor examination</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Application of technical skills</i></li> <li>• <i>Basic math</i></li> </ul>

## G. Newborn/Child Breastfeeding Challenges

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
8	Assess and implement a breastfeeding plan for the hyperbilirubinemic newborn	<p>Describes to mother observations regarding her child's condition in a non-threatening manner</p> <p>Develops a plan of action, including expressing her milk if necessary to establish a milk supply and demonstrated ability to use phototherapy and other devices effectively and safely</p>	<ul style="list-style-type: none"> <li>• <i>Role of bilirubin in the newborn</i></li> <li>• <i>Dangers of excess bilirubin</i></li> <li>• <i>Role of adequate feeding in lowering bilirubin levels</i></li> <li>• <i>Role of bilirubin lights and how they should be used for maximum effect</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History-taking and physical exam, including oral-motor function</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Ability to ask appropriate questions</i></li> <li>• <i>Ability to organize information, think outside the box and see relationships</i></li> <li>• <i>Ability to communicate complicated information in lay terms</i></li> <li>• <i>Patience with problems that do not have easy answers</i></li> <li>• <i>Acceptance of different values and lifestyles without judgment</i></li> <li>• <i>Sensitivity to how the family is taking in the information</i></li> <li>• <i>Ability to work collaboratively with specialists and recognize when referral is appropriate</i></li> </ul>
9	Identify child conditions that may impact breastfeeding, including but not limited to disorganized or ineffective suck, ankyloglossia, cleft lip/palate, Pierre Robin syndrome, and Down syndrome	<p>Demonstrates abilities in counseling and problem solving with mothers and families for long-term solutions</p> <p>Recognizes signs and symptoms of each condition, including breastfeeding risks</p>	<ul style="list-style-type: none"> <li>• <i>Causes of latch or sucking problems and suggestions for management</i></li> <li>• <i>Techniques for working with a child whose suck is disorganized or ineffective</i></li> <li>• <i>Common physical abnormalities that can affect breastfeeding, including ankyloglossia, cleft lip/palate, and Pierre Robin syndrome</i></li> <li>• <i>Common neuro-developmental problems, such as the sequelae of prematurity or hypoxia at birth, cerebral palsy, and Down Syndrome and how they can affect feeding</i></li> <li>• <i>Problems a mother may have reading the feeding cues of a newborn with developmental delays</i></li> <li>• <i>Helping mothers maintain optimal milk supply and get adequate calories into their children, including careful positioning, use of breastfeeding aides and surgical interventions</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History-taking and physical exam, including oral-motor function</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Ability to use breastfeeding devices</i></li> <li>• <i>Ability to ask appropriate questions</i></li> <li>• <i>Ability to organize information, think outside the box and see relationships</i></li> <li>• <i>Ability to communicate complicated information in lay terms</i></li> <li>• <i>Patience with problems that do not have easy answers</i></li> <li>• <i>Acceptance of different values and lifestyles without judgment</i></li> <li>• <i>Sensitivity to how the family is taking in the information</i></li> <li>• <i>Ability to work collaboratively with specialists/complementary health care providers and recognize when referral is appropriate</i></li> </ul>

## 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	<ul style="list-style-type: none"> <li>• <i>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</i></li> <li>• <i>Predisposing factors to yeast infections</i></li> <li>• <i>Range of treatments for thrush and when each is appropriate</i></li> <li>• <i>Potential for thrush to be associated with poor weight gain or fussy feeding</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History-taking and physical exam, including oral-motor function</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Ability to ask appropriate questions</i></li> <li>• <i>Ability to organize information, think outside the box and see relationships</i></li> <li>• <i>Ability to communicate complicated information in lay terms</i></li> <li>• <i>Patience with problems that do not have easy answers</i></li> <li>• <i>Acceptance of different values and lifestyles without judgment</i></li> <li>• <i>Sensitivity to how the family is taking in the information</i></li> <li>• <i>Ability to work collaboratively with specialists and recognize when referral is appropriate</i></li> </ul>
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	<ul style="list-style-type: none"> <li>• <i>How to assess "colic" or fussy behavior and how to triage possible causes and treatments/solutions</i></li> <li>• <i>Gastric reflux and when it is a problem; discuss treatments, and when each is appropriate; how reflux may affect breastfeeding</i></li> <li>• <i>"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</i></li> <li>• <i>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</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History-taking and physical exam, including oral-motor function</i></li> <li>• <i>Breastfeeding observation and evaluation</i></li> <li>• <i>Ability to ask appropriate questions</i></li> <li>• <i>Ability to organize information, think outside the box and see relationships</i></li> <li>• <i>Ability to communicate complicated information at parent's health literacy level</i></li> <li>• <i>Patience with problems that do not have easy answers</i></li> <li>• <i>Acceptance of different values and lifestyles without judgment</i></li> <li>• <i>Sensitivity to how the family is taking in the information</i></li> <li>• <i>Ability to work collaboratively with specialists and recognize when referral is appropriate</i></li> </ul>
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	<ul style="list-style-type: none"> <li>• <i>Special child health needs and possible breastfeeding intervention needs for children with chronic medical conditions, especially spina bifida, neurological abnormalities, Phenylketonuria (PKU), Galactosemia</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>History taking and physical assessment</i></li> <li>• <i>Ability to use breastfeeding devices</i></li> </ul>

## G. Newborn/Child Breastfeeding Challenges

	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	<ul style="list-style-type: none"> <li>• Congenital heart defects and the potential for poor weight gain or failure to thrive (FTT) for these children</li> <li>• Skills needed to address the issues of maternal milk supply and child intake of sufficient calories to grow adequately</li> </ul>	<ul style="list-style-type: none"> <li>• History taking and physical assessment</li> <li>• Ability to use breastfeeding devices</li> <li>• Openness to working with the medical team so the family perceives a united and supportive team</li> </ul>

## H. Maternal Breastfeeding 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	<ul style="list-style-type: none"> <li>• Maternal medical or physical conditions that may impact breastfeeding; interventions that may work for specific situations</li> <li>• Factors indicating need for referral and how to work effectively within the medical team</li> </ul>	<ul style="list-style-type: none"> <li>• Ability to prioritize</li> <li>• Evaluation of individual condition</li> <li>• Clinical assessment including physical assessment, history taking, observation of breastfeeding (if applicable)</li> <li>• Analysis of assessment</li> <li>• Decision making</li> <li>• Job-aids, including protocols (clinical algorithms)</li> <li>• Recognition of one's own limits in clinical practice</li> </ul>
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	<ul style="list-style-type: none"> <li>• Unique needs common to the typical adolescent mother and how they may impact the decision to breastfeed or to continue breastfeeding</li> <li>• Possibility of sexual abuse as a factor in the pregnancy</li> <li>• Addressing questions/remarks to the adolescent and not to her parent or guardian (as much as possible)</li> </ul>	<ul style="list-style-type: none"> <li>• Teaching skills</li> <li>• Analysis of mother's nutritional status</li> <li>• Ability to work with schools and workplaces on breastfeeding policy</li> <li>• Clinical skills and decision making</li> <li>• Awareness of own attitudes and biases</li> </ul>
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.	<ul style="list-style-type: none"> <li>• Range of peripartum mood disorders and symptoms of each</li> <li>• Effects of untreated postpartum depression on the mother, father, child and family</li> <li>• Management of different levels of depression, including communication with the primary care provider, possible referral for counseling and medications</li> <li>• 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</li> </ul>	<ul style="list-style-type: none"> <li>• Clinical assessment including history taking</li> <li>• Recognition of risk factors and behaviors that may indicate postpartum mood disorders</li> <li>• Analysis of assessment</li> <li>• Decision making</li> <li>• Recognition of and follow through with the need for referrals</li> </ul>

## H. Maternal Breastfeeding 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	<ul style="list-style-type: none"> <li>• Common reasons for use of these techniques</li> <li>• Realistic expectations</li> <li>• Process of relactation</li> <li>• Supplementing devices and approaches</li> <li>• Nursing an adopted child, how to stimulate milk production; limitations of induction; importance of sucking</li> </ul>	<ul style="list-style-type: none"> <li>• Use of lactation aids to stimulate milk production</li> <li>• Use of supplementing devices</li> </ul>
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	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<ul style="list-style-type: none"> <li>• Basic occupational therapy approaches</li> <li>• Creativity</li> <li>• Referral skills</li> </ul>
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	<ul style="list-style-type: none"> <li>• Local diagnostic criteria and standards of care</li> <li>• WHO recommendations</li> <li>• Research on exclusive breastfeeding and risk of HIV conversion for the child</li> </ul>	<ul style="list-style-type: none"> <li>• Cultural sensitivity to the mother's decision regarding testing and her diagnosis and living situation</li> <li>• Ability to assist mother with exclusive breastfeeding or formula feeding when that is appropriate</li> </ul>

## I. Use of Techniques and Devices

	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	<ul style="list-style-type: none"> <li>• 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</li> <li>• NOTE: the specific applications of these aids may be addressed in greater depth in problem-solving lectures and clinical situations</li> </ul>	<ul style="list-style-type: none"> <li>• Maternal and child assessment</li> <li>• Critical thinking</li> <li>• Problem-solving</li> <li>• Technical skills with aids and devices</li> <li>• Teaching skills</li> <li>• Documentation</li> <li>• Ability to analyze and apply research evidence</li> </ul>
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	<ul style="list-style-type: none"> <li>• Indications for use of specific breastfeeding aids, including both goals and expected outcomes</li> <li>• Disadvantages or drawbacks to the use of devices in certain situations, including sustainability</li> <li>• Evaluation of the effectiveness and any potential safety concerns</li> </ul>	<ul style="list-style-type: none"> <li>• Critical thinking</li> <li>• Problem-solving</li> <li>• Technical skills with aids and devices</li> <li>• Ability to analyze and apply research evidence</li> </ul>

## I. Use of Techniques and Devices

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
<b>3</b>	<p>Critique and evaluate indications, contraindications and use of techniques, appliances and devices which support breastfeeding</p> <p>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</p>	<p>Considers all factors, including cost, acceptability for the client/patient and sustainability for a specific situation when recommending use of an aid or device</p> <p>Educates family appropriately in use and care of aids or devices</p> <p>Communicates with HCP as needed</p> <p>Describes ethical responsibility regarding financial gain from recommending aids or devices</p>	<ul style="list-style-type: none"> <li>• <i>Decision-making based on relative costs and effectiveness</i></li> <li>• <i>Effective patient/client education regarding use and cleaning of devices</i></li> <li>• <i>Follow-up</i></li> <li>• <i>Legal /ethical issues, including obtaining informed consent and a HCP order, if needed, as well as financial gain for the lactation consultant</i></li> <li>• <i>Devices, marketing strategies, clinical evidence regarding usefulness and possible harmful effects</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Decision-making</i></li> <li>• <i>Acceptance of responsibility for ethical care of the mother and child, including follow-up assessment of interventions</i></li> </ul>
<b>4</b>	<p>Counsel and support donations to milk banks</p>	<p>Objectively educates about milk banking, based on needs of learners</p> <p>Counsels and supports donations to milk banks</p> <p>Describes the components of recruitment, screening and processing, and safety criteria</p> <p>Describes the clinical uses of donor human milk</p>	<ul style="list-style-type: none"> <li>• <i>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</i></li> <li>• <i>Local screening criteria and how to carry out a screening</i></li> <li>• <i>How non-profit donor human milk banks recruit and screen donors, process the milk and distribute it</i></li> <li>• <i>Effect of milk bank processing on the safety of the milk for recipient and the composition of the milk</i></li> <li>• <i>Therapeutic uses of human milk for infants, children and adults</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to assess knowledge and informational needs of learners</i></li> <li>• <i>Ability to teach</i></li> <li>• <i>Ability to utilize web resources for updating information about milk banks</i></li> <li>• <i>Ability to screen with attention to detail and appropriate behaviors</i></li> <li>• <i>Ability to review operations and assess functioning of a donor milk bank</i></li> <li>• <i>Ability to identify those in need of human milk, and to ethically and sensitively determine allocation</i></li> <li>• <i>Attention to detail</i></li> </ul>

<b>J. Public Health</b>				
	<b>Core Competencies</b>	<b>Learning Objectives</b>	<b>Suggested Content</b>	<b>Suggested Skills &amp; Behaviors</b>
<b>1</b>	Teach the use of breastfeeding during emergencies and appropriate support	<p>Presents the importance of breastfeeding as preventative in emergencies</p> <p>Presents steps necessary to implement breastfeeding support in an emergency</p>	<ul style="list-style-type: none"> <li>• <i>Role of breastfeeding in emergency situations, including risks to health and survival</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Understanding work environment in emergencies</i></li> <li>• <i>Recognition of need to function in life-threatening conditions when necessary</i></li> </ul>
<b>2</b>	Utilize quality assurance standards in delivery of care	Demonstrates awareness of local quality standards	<ul style="list-style-type: none"> <li>• <i>Local quality assurance standards and quality management</i></li> <li>• <i>Basic health systems structure and alternatives</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Underscore quality assurance issues in practice</i></li> </ul>
<b>3</b>	Develop a community outreach program	Carries out the steps necessary to develop and sustain outreach	<ul style="list-style-type: none"> <li>• <i>Basics of social marketing (marketing for behavior change)</i></li> <li>• <i>Intervention program design</i></li> <li>• <i>Basic line items in budgets</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Assess possibilities in the community</i></li> <li>• <i>Understand basic budgeting for outreach opportunities</i></li> <li>• <i>Willingness to reach outside of the health system</i></li> </ul>
<b>4</b>	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	<ul style="list-style-type: none"> <li>• <i>History of breastfeeding events and laws, regulation and agreements</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Reading and minimal memorization (up-to-date on current policies, issues)</i></li> <li>• <i>Can provide policy rationale</i></li> <li>• <i>Understanding how policy is achieved through negotiation and consensus, not universal agreement</i></li> <li>• <i>Open to opposing views and understanding the need for compromise</i></li> </ul>

## 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	<p>Identifies and discusses basic theories and causal inference</p> <p>Differentiates appropriate research for a topic area</p> <p>Critically appraises relevant research and indicates how this may affect practice</p> <p>Presents and accurately describes a variety of graphic presentations of research findings</p> <p>Adheres to policies, procedures, protocols within a health care agency</p>	<ul style="list-style-type: none"> <li>• <i>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</i></li> <li>• <i>Relating these concepts to evidence-based medical research and breastfeeding</i></li> <li>• <i>Economic basis of breastfeeding</i></li> <li>• <i>Establishing a Journal Club to allow students the opportunity to delve into research that can be applied to practice</i></li> <li>• <i>Use of graphic presentations of data, including preparation and presentation of a research poster</i></li> <li>• <i>Policies, procedures and protocols relevant to maternal/child care and breastfeeding</i></li> <li>• <i>Regional and national legislation related to breastfeeding</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to systematically review literature and perform a critical appraisal of it, comparing similar studies, etc</i></li> <li>• <i>Public speaking</i></li> <li>• <i>Slide preparation</i></li> <li>• <i>Ability to understand and make graphic presentations of data within a study and comparing data among studies</i></li> <li>• <i>Ability to read and critically evaluate governmental policies, laws, etc., as well as health care setting policies and procedures</i></li> <li>• <i>Recognition that clinical research should inform practice and a willingness to stay current</i></li> <li>• <i>Practice lifelong learning and a willingness to stay current in the profession's research and practice</i></li> <li>• <i>Demonstrate a curiosity about causality</i></li> <li>• <i>Persistence to master the material</i></li> <li>• <i>Ability to understand and analyze research results</i></li> <li>• <i>Computer skills for development of a poster presentation</i></li> <li>• <i>Organization</i></li> <li>• <i>Confidence</i></li> <li>• <i>Sensitivity to the audience's learning style</i></li> </ul>
2	Evaluate research and breastfeeding data	Explains the definitions of breastfeeding used in research and practice, and how they impact interpretation of breastfeeding data	<ul style="list-style-type: none"> <li>• <i>Existing definitions of breastfeeding as related to the mother and to the child</i></li> <li>• <i>Impact of exclusive and partial breastfeeding as well as the feeding of expressed milk and how they differentially impact the mother and the child</i></li> <li>• <i>Importance of definitions in interpretation of research and how that may impact health policy and funding</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Understanding of how interpretation of research can impact practice and policy</i></li> <li>• <i>Critical thinking</i></li> </ul>

## 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	<ul style="list-style-type: none"> <li>• <i>Research methods (prospective, retrospective, quantitative, qualitative, quasi-experimental, etc.)</i></li> <li>• <i>How to select the appropriate method for a given question</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Critical reading skills</i></li> <li>• <i>Knowledge of research terminology</i></li> <li>• <i>Abstract thinking</i></li> </ul>
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	<ul style="list-style-type: none"> <li>• <i>Using online data bases for health-related research</i></li> <li>• <i>How to critically appraise research papers/journal articles for quality of work and relevance to current case</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Working knowledge of research methods</i></li> <li>• <i>Critical reading skills</i></li> <li>• <i>Ability to distill complicated information and apply it to the current case</i></li> </ul>
5	Describe and apply behavior change theories	Assesses progress from lack of knowledge, to knowledge, understanding, acceptance, action, and repeated action with self-efficacy	<ul style="list-style-type: none"> <li>• <i>Behavior change theories</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to apply concepts at the population level and individual level</i></li> </ul>
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	<ul style="list-style-type: none"> <li>• <i>Laws and regulations within your region that have bearing on breastfeeding, directly or indirectly (depends on region: AMRO, EURO, WCE, PAHO, AFRO, etc.)</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to find, read and interpret laws as they apply to breastfeeding or to health system support</i></li> <li>• <i>Acceptance of cultural and regional differences</i></li> </ul>

## 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 Performs within the framework defined by the professional code of ethics, clinical competencies, and standards of practice Functions well with mutual respect in settings with other health professionals	<ul style="list-style-type: none"> <li>• <i>Standards for lactation consultant practice</i></li> <li>• <i>Scope of practice</i></li> <li>• <i>Code of ethics</i></li> <li>• <i>Code of Marketing of Breastmilk Substitutes</i></li> <li>• <i>Principles of collaboration within the health care team</i></li> <li>• <i>Communication and documentation formats</i></li> <li>• <i>Interdisciplinary care</i></li> <li>• <i>Triaging appropriate referrals</i></li> <li>• <i>Identifying community medical and social support resources</i></li> <li>• <i>Recognition of one's own limitations in the clinical setting</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Openness to the expertise of others</i></li> <li>• <i>Critical thinking</i></li> </ul>

## L. Professional Responsibilities and Practice

	<b>Core Competencies</b>	<b>Learning Objectives</b>	<b>Suggested Content</b>	<b>Suggested Skills &amp; Behaviors</b>
<b>2</b>	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	<ul style="list-style-type: none"> <li>• <i>Identifying sources of research findings</i></li> <li>• <i>Conducting a literature search</i></li> <li>• <i>Evaluating research</i></li> <li>• <i>Determining relevance to practice</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Ability to read and critically evaluate research</i></li> <li>• <i>Ability to interpret statistical findings and discern the relevance to breastfeeding and human lactation</i></li> </ul>
<b>3</b>	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	<ul style="list-style-type: none"> <li>• <i>Local and international aspects of Baby-Friendly Hospital Initiative</i></li> <li>• <i>Peer counseling, lay support groups and professional organizations</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Understanding of how to advocate for change</i></li> <li>• <i>Ability to identify and move stakeholders to consensus</i></li> </ul>
<b>4</b>	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	<ul style="list-style-type: none"> <li>• <i>Code of ethics</i></li> <li>• <i>Code of Marketing of Breastmilk Substitutes</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Understanding and acceptance of an ethical construct for practice</i></li> </ul>

## L. Professional Responsibilities and Practice

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
5	Describe and analyze practice setting options for lactation consultants	<p>Differentiates the roles of the lactation consultant in various practice settings</p> <p>Outlines steps for setting up a practice in a clinical setting and an independent setting</p> <p>Develops a draft marketing approach, either social or commercial</p> <p>Defines strategies for working within a budget and with current resources</p> <p>Correctly completes forms for reimbursement (including forms for 3rd party payers where applicable)</p> <p>Demonstrates agency and office/bureaucratic skills</p>	<ul style="list-style-type: none"> <li>• <i>Role of the lactation consultant in various setting</i></li> <li>• <i>Basics of setting up an independent practice, and setting up a collaborative practice, such as with physicians</i></li> <li>• <i>Techniques needed to develop community awareness of lactation consultant services</i></li> <li>• <i>Job description, résumé</i></li> <li>• <i>Establishing services, setting up referral systems</i></li> <li>• <i>Social marketing and commercial marketing basics</i></li> <li>• <i>Financial issues, including for third party reimbursement, and self-pay (where relevant)</i></li> <li>• <i>Typical workplace culture, vision/mission and hierarchies; including how to work with senior leadership, find a mentor, and achieve recognition</i></li> <li>• <i>Skills necessary to balance resources and constraints (financial, political and human resource) to achieve goals</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Basic business and marketing skills</i></li> <li>• <i>Understanding of the reimbursement system for a given locale</i></li> <li>• <i>Ability to look at the larger picture and relate to others professionally</i></li> <li>• <i>Ability to implement management strategies around budgets, personnel, structures, etc</i></li> <li>• <i>Open to the attitudes and opinions of others and ability to delegate</i></li> <li>• <i>Observational skills</i></li> </ul>

## M. Leadership and Teaching

	Core Competencies	Learning Objectives	Suggested Content	Suggested Skills & Behaviors
1	Demonstrate personal leadership skills that reflect self-awareness and vision	<p>Demonstrates group leadership and team building skills</p> <p>Reflects on actions and attitudes and applies them to understanding of self</p> <p>Develops a personal leadership statement that maintains core principles and values</p> <p>Develops a personal or professional vision as a lactation consultant and shares it with others</p> <p>Creates a personal professional development program</p> <p>Presents a model proposal for a project</p>	<ul style="list-style-type: none"> <li>• <i>Team building</i></li> <li>• <i>Elements of leadership and how they influence motivation and effectiveness</i></li> <li>• <i>Developing a personal and professional long-term career perspective</i></li> <li>• <i>Developing and applying a personal leadership statement of philosophy</i></li> <li>• <i>Incorporating core values that fit with and recognize the importance of diversity and context of the larger system (students, stakeholders, organization, and society)</i></li> <li>• <i>Incorporating core values that fit with and recognize the importance of diversity and context of the larger system (students, stakeholders, organization, and society)</i></li> <li>• <i>Creating and periodically reviewing a personal development/career plan that incorporates continuing assessment, feedback and change to include modification</i></li> <li>• <i>Enlisting mentoring help with appropriate person</i></li> <li>• <i>Basic steps in designing a new program or activity, including goals, objectives, and measurable outcomes</i></li> <li>• <i>How to develop a budget with essential line items and any research issues specific to the local situation</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Organization</i></li> <li>• <i>Observation</i></li> <li>• <i>Personal integrity</i></li> <li>• <i>Group work</i></li> <li>• <i>Self-efficacy</i></li> <li>• <i>Multi-tasking</i></li> <li>• <i>Self-reflection</i></li> <li>• <i>Recognition of personal biases</i></li> <li>• <i>Finding a balance between personal and professional life</i></li> <li>• <i>Ability to modify leadership behavior based on evaluation information</i></li> <li>• <i>Creativity and imagination</i></li> <li>• <i>Ability to articulate the vision</i></li> <li>• <i>Self awareness</i></li> <li>• <i>Ability to guide organization in others</i></li> <li>• <i>Continued interest in learning</i></li> <li>• <i>Ability to conceptualize a project, define the steps, expected outcomes and a general budget and present it with clarity</i></li> </ul>

## 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	<p>Communicates to negotiate, listen, find key agreement and disagreement areas to move discussion forward, including crisis management</p> <p>Demonstrates an understanding of diverse cultures and meets diverse needs</p> <p>Develops and implements a strategy for internal communication within an organization's management</p> <p>Creates a shared strategy around an issue so that partners and stakeholders can see themselves in it and moving forward</p>	<ul style="list-style-type: none"> <li>• <i>Developing and applying a comprehensive model (including formal and informal methods) to keep organizational communities connected</i></li> <li>• <i>Recognizing, understanding, and appreciating diversity</i></li> <li>• <i>Enhancing skills for listening, dialoguing and presentation, while maintaining and articulating personal values</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Thoughtful, clear presentation of ideas</i></li> <li>• <i>Ability to send a consistent message while listening and understanding the directions of diverse audiences through dialogue</i></li> <li>• <i>Ability to hear different perceptions and then act on them</i></li> <li>• <i>Open to and seeking engagement from diverse persons across cultures</i></li> <li>• <i>Grounding in personal values</i></li> <li>• <i>Ability to clearly present issues without emotional investment</i></li> </ul>
3	Provide breastfeeding information to lay and health professional audiences utilizing adult learning methods and demonstrating public speaking skills	<p>Prepares and presents an accurate and appropriate presentation</p> <p>Creates an assessment tool for a course to evaluate effectiveness</p> <p>Identifies and utilizes the elements of adult learning theory and teaching methods in both group and individual settings</p> <p>Speaks effectively outside the classroom for lay and health professional audiences</p>	<ul style="list-style-type: none"> <li>• <i>Techniques of concept mapping: time, audience, purpose</i></li> <li>• <i>Systematic approaches to course and curriculum evaluation</i></li> <li>• <i>Elements of adult learning theory and teaching methods</i></li> <li>• <i>Language and cultural elements of communication</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Teaching skills</i></li> <li>• <i>Research skills</i></li> <li>• <i>Observation of audience feedback to content</i></li> <li>• <i>Appropriate body language</i></li> <li>• <i>Thorough knowledge of the topic</i></li> <li>• <i>Organization</i></li> <li>• <i>Critical thinking</i></li> <li>• <i>Presentation and public speaking skills</i></li> </ul>