



LEVEL 1 - BREASTFEEDING CURRICULUM CHECKLIST

WIC Trainee's Name: _____

Preceptor's Name: _____

Trainee Start Date: _____ Clinic: _____

Section 1 – WIC and Breastfeeding

- Action Journal: Breastfeeding Promotion Yes Date: _____
- Completion Why and How WIC Supports Breastfeeding Yes Date: _____
- Handout: Circle of Care for WIC Moms Yes Date: _____
- Action Journal: Breastfeeding Promotion Yes Date: _____
- Completion: Roles of WIC Staff Yes Date: _____
- Action Journal: National Initiatives Yes Date: _____
- Completion: National Breastfeeding Roles Yes Date: _____
- Action Journal: WIC Food Packages Yes Date: _____
- Completion: WIC Food Packages Yes Date: _____
- Action Journal: Continuity of Care Yes Date: _____
- Completion: Continuity of Care Yes Date: _____

Section 2 - Counseling

- Handout: What If? Yes Date: _____
- Handout: Personal Inventory Yes Date: _____
- Activity: What did you think when you first saw someone breastfeeding? Yes Date: _____
- Action Journal: Beliefs and Basics Yes Date: _____
- Completion: Beliefs and Basics Yes Date: _____
- Handout: Beliefs and Basics – Emotion Practice Yes Date: _____
- Action Journal: Beliefs and Basics Yes Date: _____
- Completion: Listening Skills Yes Date: _____
- Handout: Switching Our Language Yes Date: _____
- Action Journal: Beliefs and Basics Yes Date: _____
- Completion: Customer Service Yes Date: _____
- Handout: What's Missing? Yes Date: _____
- Handout: Open/Closed? Yes Date: _____
- Handout: Open Up! Yes Date: _____
- Handout: Conversation Starters Yes Date: _____
- Action Journal: 3-Step Counseling Yes Date: _____
- Completion: Open-Ended Questions Yes Date: _____
- Handout: Affirm! Yes Date: _____
- Activity: Affirmation Case Examples Yes Date: _____
- Action Journal: Affirm Yes Date: _____
- Completion: Pregnancy – Affirm Yes Date: _____

Section 3 – Preparing to Breastfeed

- Action Journal: Reasons to Breastfeed Yes Date: _____
- Completion: Why Breastfeeding Matters Yes Date: _____
- Activity: Watch video recording in the lesson and discuss the barriers Yes Date: _____
- Action Journal: Barriers Yes Date: _____
- Completion: Common Myths and Barriers Yes Date: _____
- Action Journal: Family Support Yes Date: _____
- Completion: Supporting Families Yes Date: _____
- Activity: Oh Baby! Yes Date: _____
- Action Journal: Pregnancy Yes Date: _____
- Completion: Feeding Decisions Yes Date: _____
- Action Journal: How Milk is Made Yes Date: _____
- Completion: Promoting Exclusive Breastfeeding Yes Date: _____

Section 4 – Normal Breastfeeding

- Action Journal: Ongoing Breastfeeding Yes Date: _____
- Completion: Being a New Mom Yes Date: _____
- Action Journal: Milk Expression Yes Date: _____
- Completion: Milk Expression – Requests for Breast Pumps Yes Date: _____
- Action Journal: Mother/Baby Separation Yes Date: _____
- Completion: Mother/Baby Separation - Legislation Yes Date: _____

Section 5 – Problem Solving

- Action Journal: Low Milk Production Yes Date: _____
- Completion: Why Women Doubt Yes Date: _____
- Action Journal: Supplementation Yes Date: _____
- Completion: Handling Formula Requests Yes Date: _____

Comments:

Preceptor’s Signature

Date