



LEVEL 2 - BREASTFEEDING CURRICULUM CHECKLIST

WIC Trainee's Name: _____

Preceptor's Name: _____

Trainee Start Date: _____ Clinic: _____

Section 1 – WIC and Breastfeeding

- WIC Breastfeeding 101 Yes Date: _____
- Action Journal: Breastfeeding Promotion Yes Date: _____
- Completion: Scope of Practice Yes Date: _____
- Action Journal: National Initiatives Yes Date: _____
- Completion: Breastfeeding Policies and Laws Yes Date: _____
- Action Journal: Health Communication Yes Date: _____
- Completion: Technology Yes Date: _____
- Action Journal: Health Communication Yes Date: _____
- Completion: Group Education Yes Date: _____
- Action Journal: Continuity of Care Yes Date: _____
- Completion: Community Partnerships Yes Date: _____
- Action Journal: Continuity of Care Yes Date: _____
- Completion: Making Referrals Yes Date: _____

Section 2 - Counseling

- Handout: Practice Probes Yes Date: _____
- Action Journal: 3-Step Counseling Yes Date: _____
- Completion: Basic Education and Probing Yes Date: _____
- Action Journal: 3-Step Counseling Yes Date: _____
- Completion: Ready or Not Yes Date: _____
- Action Journal: Difficult Counseling Situations Yes Date: _____
- Completion: Counseling in Difficult Counseling Situations Yes Date: _____
- Action journal: Adverse Outcomes Yes Date: _____
- Completion: Adverse Outcomes Yes Date: _____

Section 3 – Preparing to Breastfeed

- Action Journal: Reasons to Breastfeed Yes Date: _____
- Completion: Impact of Breastfeeding Yes Date: _____
- Action Journal: Reasons to Breastfeed Yes Date: _____
- Completion: Components of Human Milk Yes Date: _____
- Action Journal: Barriers Yes Date: _____
- Completion: Addressing Barriers to Breastfeeding Yes Date: _____
- Action Journal: Family Support Yes Date: _____
- Completion: Partner Support Yes Date: _____
- Action Journal: Family Support Yes Date: _____
- Completion: Grandparent Support Yes Date: _____

- Action Journal: Ongoing Breastfeeding Yes Date: _____
 - Completion: Helping Participants Manage the Early Weeks Yes Date: _____
 - Activity: Counseling Practice Yes Date: _____
 - Activity: Counseling Role Play Yes Date: _____
 - Action Journal: Ongoing Breastfeeding Yes Date: _____
 - Completion: Ongoing Breastfeeding- Talking with Moms Yes Date: _____
 - Action Journal: Milk Expression Yes Date: _____
 - Completion: Milk Expression- Hand Expression Yes Date: _____
 - Action Journal: Milk Expression Yes Date: _____
 - Completion: Milk Expression- Handling and Storing Human Milk Yes Date: _____
 - Action Journal: Milk Expression Yes Date: _____
 - Completion: Milk Expression- Using a Breast Pump Yes Date: _____
 - Action Journal: Milk Expression Yes Date: _____
 - Completion: Milk Sharing Yes Date: _____
 - Activity: Counseling Practice Yes Date: _____
 - Activity: Counseling Role Play Yes Date: _____
 - Action Journal: Milk Expression Yes Date: _____
 - Completion: Milk Expression- Talking with Moms Yes Date: _____
 - Action Journal: Mather/Baby Separation Yes Date: _____
 - Completion: Mother and Baby Separation- Reasons for Separation Yes Date: _____
 - Handout: Workplace Space Solutions Yes Date: _____
 - Action Journal: Mother/Baby Separation Yes Date: _____
 - Completion: Mother and Baby Separation- Support Options for Work and School Yes Date: _____
 - Action Journal: Mother/Baby Separation Yes Date: _____
 - Completion: Mother and Baby Separation- Childcare and Maintaining Production Yes Date: _____
 - Activity: Counseling Practice Yes Date: _____
 - Activity: Counseling Role Play Yes Date: _____
 - Action Journal: Mother/Baby Separation Yes Date: _____
 - Completion: Mother and Baby Separation-Talking with Moms Yes Date: _____
- Section 5 – Problem Solving**
- Action Journal: Common Maternal Issues Yes Date: _____
 - Completion: Common Maternal Issues- Sore Nipples Yes Date: _____
 - Action Journal: Common Maternal Issues Yes Date: _____
 - Completion: Common Maternal Issues-Engorgement Yes Date: _____
 - Action Journal: Common Maternal Issues Yes Date: _____
 - Completion: Maternal Issues- Plugged Ducts, Mastitis, Abscess Yes Date: _____
 - Action Journal: Common Maternal Issues Yes Date: _____
 - Completion: Maternal Issues- Structural Issues Yes Date: _____
 - Handout: Common Maternal Issues Yes Date: _____
 - Handout: Solution Cards Yes Date: _____
 - WIC Action Journal: Problem Solving Yes Date: _____
 - Completion: Common Maternal Issues- Talking with Moms Yes Date: _____
 - Action Journal: Common Infant Issues Yes Date: _____

- Completion: Common Infant Issues- Latch Difficulties Yes Date: _____
- Action Journal: Common Infant Issues- Slow Weight Gain Yes Date: _____
- Completion: Common Infant Issues- Slow Weight Gain Yes Date: _____
- Action Journal: Common Infant Issues-Talking with Moms Yes Date: _____
- Completion: Common Infant Issues-Talking with Moms Yes Date: _____
- Handout: Low Milk Production Summary Yes Date: _____
- Action Journal: Low Milk Production Yes Date: _____
- Completion: Low Milk Supply-Signs of Low Milk Production Yes Date: _____
- Handout: Supplementation Summary Yes Date: _____
- Action Journal: Supplementation Yes Date: _____
- Completion: Supporting Moms with Combination Feeding Yes Date: _____
- Action Journal: Supplementation Yes Date: _____
- Completion: Talking with Moms Yes Date: _____
- Action Journal: Preterm Infants Yes Date: _____
- Completion: Promoting Human Milk for Vulnerable Infants Yes Date: _____
- Action Journal: Management Tools Yes Date: _____
- Completion: Breast Compression and Massage Yes Date: _____

Section 6 – Peer Counselors

- Handout: Job Duties Yes Date: _____
- Handout: Who Can Help Me in My Job Yes Date: _____
- Action Journal: Peer Counselors Yes Date: _____
- Completion: Peer Counselors- Job Duties Yes Date: _____
- Handout: Scope of Practice Yes Date: _____
- Handout: Scenarios Yes Date: _____
- Handout: When to Yield Yes Date: _____
- Action Journal: Peer Counselors Yes Date: _____
- Completion: Peer Counselors- Scope of Practice Yes Date: _____
- Handout: Telephone Tips Yes Date: _____
- Handout: Texting Tips Yes Date: _____
- Activity: Texting Fun Yes Date: _____
- Action Journal: Peer Counselors Yes Date: _____
- Completion: Peer Counselors- Ways to Connect Yes Date: _____
- Handout: Confidentiality Yes Date: _____
- Handout: Documentation Yes Date: _____
- Handout: PC Contact Log Yes Date: _____
- Action Journal- Peer Counselors Yes Date: _____
- Completion: Peer Counselors- Documentation Yes Date: _____

