



LEVEL 3 - BREASTFEEDING CURRICULUM CHECKLIST

WIC Trainee's Name: _____

Preceptor's Name: _____

Trainee Start Date: _____ Clinic: _____

Section 1 – WIC and Breastfeeding

- Handout: Six Steps to Achieve Breastfeeding Goals Yes Date: _____
- Handout: WIC Support Services Yes Date: _____
- Handout: Model Components for Peer Counseling Yes Date: _____
- Action Journal: Breastfeeding Support Yes Date: _____
- Completion: Integrating Breastfeeding Support Yes Date: _____
- Handout: WIC Breastfeeding Policy and Guidance Yes Date: _____
- Action Journal: WIC Food Packages Yes Date: _____
- Completion: Tailoring Food Packages Yes Date: _____
- Action Journal: Health Communication Yes Date: _____
- Completion: Health Communication- Video Conferencing Yes Date: _____
- Handout: Health Communication- Easy to Understand? Yes Date: _____
- Handout: WIC Nutrition Services Standards Yes Date: _____
- Action Journal: Health Communication Yes Date: _____
- Completion: Health Communication- Adult Learning Yes Date: _____
- Action Journal: Continuity of Care Yes Date: _____
- Completion: Continuity of Care- Community Partnerships Yes Date: _____
- Action Journal: Continuity of Care Yes Date: _____
- Completion: Continuity of Care- Engaging Providers Yes Date: _____

Section 2 - Counseling

- Action Journal: Difficult Counseling Situations Yes Date: _____
- Completion: Difficult Situations- Addressing Barriers to Counseling Yes Date: _____
- Handout: Sample Affirmations Yes Date: _____
- Handout: Reflective Listening Yes Date: _____
- Action Journal: Advanced Counseling Yes Date: _____
- Completion: Advanced Counseling- VENA Skills Building Yes Date: _____
- Handout: Setting Breastfeeding Goals Yes Date: _____
- Action journal: Advanced Counseling Yes Date: _____
- Completion: Advanced Counseling: Setting SMART Goals for BF Yes Date: _____
- Handout: Breastfeeding Balance Sheet Yes Date: _____
- Activity: Think About a Goal You Accomplished Yes Date: _____
- Action Journal: Advanced Counseling Yes Date: _____
- Completion: Advanced Counseling- Motivational Interviewing Basics Yes Date: _____
- Handout: Motivation/Confidence Ruler Yes Date: _____

- Action Journal: Advanced Counseling Yes Date: _____
- Completion: Advanced Counseling- Evoking Motivation and Confidence Yes Date: _____

Section 3 – Preparing to Breastfeed

- Action Journal: Reasons to Breastfeed Yes Date: _____
- Completion: Reasons to Breastfeed- Microbiome Yes Date: _____
- Action Journal: Barriers Yes Date: _____
- Completion: Barriers- Contraindications Yes Date: _____
- Handout: Mind the Gap Yes Date: _____
- Activity: Sphere of Influence Yes Date: _____
- Action Journal: Pregnancy Yes Date: _____
- Completion: Pregnancy- Socio Ecological Model Yes Date: _____

Section 4 – Normal Breastfeeding

- Handout: Continuum of Care Yes Date: _____
- Action Journal: Hospital Support Yes Date: _____
- Completion: Hospital Support- Partnerships Yes Date: _____
- Handout: Infant Nutrition and Feeding Guide Yes Date: _____
- Handout: Tips for Breastfeeding Moms Yes Date: _____
- Handout: Guidelines for Feeding Healthy Infants Yes Date: _____
- Action Journal: Ongoing Breastfeeding Yes Date: _____
- Completion: Ongoing Breastfeeding- Nutrition During Breastfeeding Yes Date: _____
- Resource: WIC Breastfeeding Policy and Guidance Yes Date: _____
- Action Journal: Milk Expression Yes Date: _____
- Completion: Milk Expression- Pumping Assessment and Guidelines Yes Date: _____
- Handout: Resources List Yes Date: _____
- Action Journal: Mother/Baby Separation Yes Date: _____
- Completion: Mother/Baby Separation-Supporting Moms Work/School Yes Date: _____

Section 5 – Problem Solving

- Handout: Prenatal Breastfeeding Assessment Yes Date: _____
- Action Journal: Prenatal Assessment Yes Date: _____
- Completion: Prenatal Assessment- Prenatal Factors Yes Date: _____
- Handout: Touchpoints for Breastfeeding Yes Date: _____
- Handout: General Observation Worksheet Yes Date: _____
- Action Journal: Breastfeeding Dyad Assessment Yes Date: _____
- Completion: Breastfeeding Dyad-Conducting a Breastfeeding Assessment Yes Date: _____
- Action Journal: Care Plans and Case Studies Yes Date: _____
- Completion: Care Plans and Case Studies- Care Plan Overview Yes Date: _____

Section 6 – Problem Solving

- Action Journal: Common Infant Issues Yes Date: _____
- Completion: Working as a Team for Common Infant Issues Yes Date: _____
- Handout: Low Milk Production Summary Yes Date: _____
- Completion: Peer Counselors- Job Duties Yes Date: _____

- Handout: Low Milk Production Scenarios Yes Date: _____
- Action Journal: Low Milk Production Yes Date: _____
- Completion: Low Milk Production- Assessing Low Milk Production Yes Date: _____
- Handout: Supplementation Scenarios Yes Date: _____
- Handout: Touchpoints for Breastfeeding Assessment Yes Date: _____
- Action Journal: Supplementation Yes Date: _____
- Completion: Supplementation Yes Date: _____
- Action Journal: Supplementation Yes Date: _____
- Completion: Supplementation- Returning to Breastfeeding Yes Date: _____
- Action Journal: Complex Maternal Problems Yes Date: _____
- Completion: Complex Maternal Problems- Metabolic Disorders Yes Date: _____
- Action Journal: Complex Maternal Problems Yes Date: _____
- Completion: Complex Maternal Problems- Other Maternal Conditions Yes Date: _____
- Handout: Complex Infant Problems Summary Yes Date: _____
- Action Journal- Complex Infant Problems Yes Date: _____
- Completion: Complex Infant Problems- GI Nutrition Issues Yes Date: _____
- Action Journal: Preterm Infants Yes Date: _____
- Completion: Preterm Infants- Care Plan for Vulnerable Babies Yes Date: _____

Comments:

Preceptor's Signature _____

Date _____