

Step 2: Provide initial and ongoing competency-based education and training for all clinic staff on topics necessary to establish and maintain the infant feeding policy and protocols that support delivery of comprehensive breastfeeding education and clinical services.

GUIDELINE	DESIRED OUTCOMES	ADVICE FROM THE FIELD	TOOLS & RESOURCES
<p>2A: Assess staff learning needs and resources to implement the infant feeding policy. During employee orientation, introduce the infant feeding policy, including worksite lactation accommodation. Within three months of hire, or within the clinic’s scheduled evaluations, conduct a competency-based evaluation on infant feeding and breastfeeding support for each clinic employee, based on her/his area of practice.</p>	<ol style="list-style-type: none"> <i>1. New employee handbook or manual will show that infant feeding policy, including worksite lactation accommodation, is part of the orientation process.</i> <i>2. Of randomly-selected employee charts, 80% will show that a competency-based evaluation on infant feeding and breastfeeding support was performed within 3 months of hire.</i> 	<p>Review with new employees their lactation training, including documentation of professional units.</p> <p>Employees may view lactation training as a welcome professional development opportunity. The field of lactation includes several levels of expertise, and opportunities for all staff. Medical assistants have a role to play in breastfeeding support and should be offered lactation education. Health educators, nutritionists, social workers and allied health professionals can use lactation expertise in their practice, or at least have enough training to recognize a need address lactation in patient care, and in appropriate cases arrange for a referral to lactation staff.</p>	<p>Core Competencies in Breastfeeding Care and Services for All Health Professionals - US Breastfeeding Committee</p> <p>Breastfeeding Promotion and Support - California WIC Program Manual (Policy/Procedure)</p> <p><i>Job Descriptions:</i> IBCLC Job Description - Communicare Health Centers Certified Lactation Consultant - Contra Costa County Outpatient Lactation Program Coordinator - Contra Costa County Sample Job Descriptions - International Lactation Consultant Association IBCLC Duty Statement - Solano County WIC Contract IBCLC Scope of Work - Solano County Breastfeeding Peer Counselor Supervisor IBCLC - Solano County WIC</p>
<p>2B: Develop appropriate individual and departmental training plans. Maintain a written plan for assessing, planning, implementing, evaluating, and updating the education and</p>	<ol style="list-style-type: none"> <i>1. Clinic manager/director or human resource staff will provide access to the written training plan for assessing,</i> 	<p>Survey staff for lactation training background, include topics, record of professional units, certificates of completion and dates.</p>	<p>Lactation Support Education for Nurses - Miller Children’s/Long Beach Memorial Hospital</p>



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<p>training curriculum. Use or adapt standardized curriculum based on training materials available from American Academy of Pediatrics (AAP), International Lactation Consultant Association (ILCA) or the Centers for Disease Control and Prevention (CDC). A qualified clinic staff member will maintain and coordinate education and training curriculum records. A staff or consultant IBCLC (see Guideline 2E), or physician with breastfeeding medicine expertise, will evaluate the infant feeding education and training curriculum.</p>	<p><i>planning, implementing, evaluating, and updating the infant feeding education and training curriculum.</i></p> <ol style="list-style-type: none"> 2. <i>The clinic staff member in charge of maintaining and coordinating the education and training curriculum records will provide access to such records, which will show they have been kept current.</i> 3. <i>A copy of the curricula or course outlines for competency-based training in breastfeeding will be available for review.</i> 4. <i>A review of the curricula for breastfeeding education will clearly identify the staff or consultant IBCLC or physician with breastfeeding medicine expertise who has evaluated and signed off on the training curricula.</i> 		<p>Information for Professionals (resources for training) - CDPH Children & Families</p> <p>Breastfeeding Curriculum - AltaMed:</p> <ul style="list-style-type: none"> ● Chapter 1: Introduction ● Chapter 2: Why Breastfeed ● Chapter 3: Talking with Patients ● Chapter 4: Anatomy & Physiology ● Chapter 5: Early Breastfeeding ● Chapter 6: Latching On ● Chapter 7: Pumping & Storage ● Chapter 8: Assessing Milk Supply ● Chapter 9: Troubleshooting <p>Breastfeeding Training Course for Health Professionals - The Breastfeeding Friendly Consortium (Virginia)</p> <p>Curriculum Guidance - UNICEF UK</p> <p>Breastfeeding Promotion and Support in WIC - USDA/FNS, including: Using Loving Support® to Grow and Glow in WIC (Breastfeeding Competency Training)</p>

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<p>2C: Deliver competency-based education and training regarding breastfeeding to all clinic staff based on each employee’s function, responsibility, and previously-acquired training, as follows:</p> <ol style="list-style-type: none"> 1. Within six months of hire, deliver competency-based training in infant feeding including breastfeeding support to all providers and staff, appropriate to their areas of practice and according to a training matrix. 2. Provide access to accurate and evidence-based infant feeding and breastfeeding reference materials, including on-line and print resources. 3. Include in training: how to use clinical decision support tools specific to the clinic (such as pre-formatted progress notes, checklists, and electronic medical record reminders); clinical care protocols; and appropriate lactation aids (such as hand expression, electric and manual pumps, supplemental feeders, 	<ol style="list-style-type: none"> 1. <i>The designated health care professional(s) will provide documentation that clearly shows competency-based training for breastfeeding is provided for all employees caring for mothers, infants and/or young children and that new employees are oriented upon hire and scheduled for training within six months.</i> 2. <i>The designated health care professional will provide access to reference materials, including on-line and print resources, which are available for staff members.</i> 3. <i>A review of the training material will clearly identify the clinical decision support tools and clinical care protocols that clinic staff and providers are encouraged to use.</i> 4. <i>A review of the training material will clearly identify the sections that provide appropriate guidance on the use of lactation</i> 	<p>Reach out to community organizations, particularly WIC and local breastfeeding coalitions, hospitals, other community health centers, or community organizations to explore shared trainings and expertise.</p> <p>Clinics have found that including short lactation in-services, provided as part of regularly scheduled meetings, can provide consistent and ongoing training, have a broad reach across staff, and help build and maintain a culture of breastfeeding awareness as part of clinical care and the clinic environment.</p>	

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<p>breast shells, nipple shields, breast pads and hydrogels, and any other accepted tools and aids).</p>	<p><i>aids as identified.</i></p> <p>5. <i>At least 80% of randomly-selected clinic staff members serving women and infants will confirm that they have completed the described training and competency verification or, if they have been hired within six months, have at least been oriented.</i></p> <p>6. <i>At least 80% of randomly-selected clinic staff members serving women and infants will be able to answer questions on breastfeeding management correctly.</i></p> <p>7. <i>At least 80% of randomly-selected clinic staff members serving women and infants will be able to identify two appropriate topics to discuss with women who are considering feeding their babies something other than human milk.</i></p>		
<p>2D: Evaluate the clinical-based skills related to infant feeding and breastfeeding support of all</p>	<p>1. <i>Training records will clearly show that clinic staff is given a</i></p>		

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<p>employees who deliver clinical care upon completion of training, within six months of hire and every three years thereafter. Ensure that evaluations are appropriate to each employee’s area of practice, per a clinical skills matrix.</p>	<p><i>skills evaluation on infant feeding and breastfeeding support within six months of hire and every three years thereafter.</i></p> <p>2. <i>A review of the evaluations to be given to different clinic staff will show that they are appropriate to each employee’s area of practice per the clinical skills matrix.</i></p>		
<p>2E: Employ, contract with, or develop a memorandum of understanding (MOU) with one or more IBCLC, or providers with expertise in breastfeeding medicine, to oversee the education and training of providers and staff delivering clinical care.</p>	<p>1. <i>Clinic records will show that one or more IBCLCs, or provider with expertise in breastfeeding medicine, are employed, contracted with, or have an MOU with the organization, and that said individual(s) oversee the education and training of clinic staff delivering clinical care.</i></p>	<p>Consider collaborating with other community organizations to:</p> <ul style="list-style-type: none"> ● co-plan training where staff from the clinic and community organization can participate together ● explore if another local organization is planning a training in which clinic staff could participate 	<p>Article about pay ranges for IBCLCs - Journal of Human Lactation</p>
<p>Suggestion: Consider hosting clinical students and residents for training rotations in lactation.</p>		<p>This could include students, interns or residents of various disciplines: medical, dental, nursing, nutrition & dietetics, social work, health education, and medical assistance.</p>	