

## BreastfeedLA Lactation Education Specialist Training Program Description

This lactation educator series touches on all areas of the IBCLE Detailed Content Outline (for those preparing to sit for the IBCLC Board Exam) and meets the Step 2 Baby-Friendly USA Staff Education Requirements, 2016 Edition.

Lactation educators work in many settings in our community including WIC offices, hospitals, providing education alongside doula and midwifery care, and as volunteers. While lactation educators do not provide hands-on breastfeeding support without supervision, the scope of practice for a lactation educator does position the individual to provide prenatal breastfeeding education to groups and individuals, facilitate breastfeeding support groups, and to advocate for breastfeeding in the community and the public health realm.

Prerequisites include a high school diploma or GED and a passion for elevating breastfeeding as a public health strategy to improve disparities in health outcomes.

This 45-course in lactation education covers basic breastfeeding management techniques such as Positioning, Attachment, Physiology & Hormones of Breastfeeding, Milk Production, Common Breastfeeding Challenges, Counseling Skills, Creating a Prenatal Breastfeeding Class, Adult Learning Techniques, plus more.

BreastfeedLA's Lactation Education Specialist Training was created to provide opportunities for the lactation-specific education required for all individuals aspiring to pursue designation as IBCLCs and to supplement the training and education of existing healthcare professionals in the area of human lactation. All concepts, skills, and education in human lactation are taught in accordance with the IBLCE Detailed Content Outline ([www.iblce.org](http://www.iblce.org)) and meet the standards for supporting breastfeeding practices advised by the World Health Organization, American Academy of Pediatrics, and Baby-Friendly USA.

### Faculty

To Be Announced

### Continuing Education Credits

offered at no additional charge

**Nurses:** BreastfeedLA is an approved provider by the California Board of Registered Nursing. This course offers 45 contact hours of continuing education. BreastfeedLA's provider number is CEP 16435. Licensee must maintain certificate for a period of four years.

**Lactation Consultants:** BreastfeedLA is an approved Long-Term Provider by the International Board of Lactation Consultant Examiners #CLT113-36. CERP's will be awarded to re-certifying IBCLCs.

**Registered Dietitians:** Maintain a copy of the agenda and certificate of attendance for CPEs for your Professional Development Portfolio.

Sponsored by



2851 W. 120<sup>th</sup> St., Ste. E #335  
Hawthorne, CA 90250  
Phone and Fax: (213) 596-5776  
[www.breastfeedla.org](http://www.breastfeedla.org)



## Lactation Education Specialist Training

### 2019

April 2, 11, 18, 24, 30  
8:30 am to 5:30 pm

South LA Health Project  
2930 West Imperial HWY  
Inglewood, CA 90250

## Course Objectives

Following the didactic presentations and skills competency demonstrations, participants will:

- ❖ Possess the necessary skills to educate prenatally about breastfeeding in both group & individual settings, including teaching a prenatal breastfeeding class;
- ❖ Possess sufficient education in basic breastfeeding management to independently provide information & support to a breastfeeding parent via telephone or in a group setting, and while supervised by an IBCLC in a clinic or hospital environment;
- ❖ Possess the necessary counseling skills to provide sensitive and culturally appropriate care to the breastfeeding parent and family;
- ❖ Possess clinical judgment sufficient to refer breastfeeding parents appropriately to other healthcare providers including, but not limited to, IBCLCs in cases where medical issues or complex cases of lactation are present ; and to
- ❖ Recognize and discuss solutions to alleviate common barriers to supporting a mother's choice to exclusively breastfeed.

**Completion of this course does not confer a hands-on breastfeeding support certification and participants should be supervised by an IBCLC or working under a separate healthcare credential if providing hands-on lactation care.**

## Registration Fees

Registration includes digital version of syllabus and continuing education credit.

\$495 Early Bird

\$550 General Registration

### Location & Parking

South LA Health Project  
2930 West Imperial HWY  
Inglewood, CA 90250

\*\*Free parking is available.\*\*

### Participant Instructions

Digital files containing curriculum will be **emailed** to participant by March 25, 2019. Curriculum must be **printed** and put in binder prior to first day of class. No printed copies of the curriculum will be provided.

**Participants should bring their own lunch or plan to purchase your lunch at nearby restaurants.**

No refunds will be granted after March 18, 2019

### Target Audience

Individuals interested in pursuing a career in professional lactation support, including those with no previous healthcare background, physicians, midwives, Registered Nurses, Registered Dietitians, Nutritionists, Occupational Therapists, CPHWs, LLL Leaders, Health Educators, Case Managers, Home Visitors, Doulas, Breastfeeding Peer Counselors, Students, and others interested in supporting families in the initiation and maintenance of breastfeeding

## Registration Form

LES 2019

Register Online: <https://goo.gl/wp2Bcj>

Mail: BreastfeedLA, 2851 W. 120<sup>th</sup> St.  
Ste. E #335  
Hawthorne, CA 90250

Email: [info@breastfeedla.org](mailto:info@breastfeedla.org) Price

Early Bird (on or before March 18, 2019) \$495

General (on or after March 19, 2019) \$550

Total: \$ \_\_\_\_\_

Name \_\_\_\_\_

Job Title \_\_\_\_\_

Company/Hospital \_\_\_\_\_

Billing Address \_\_\_\_\_

Billing City, ZIP \_\_\_\_\_

Email Address—required to receive confirmation \_\_\_\_\_

Phone \_\_\_\_\_

RN License No. \_\_\_\_\_

IBCLC? If yes, check this box

### Method of Payment

Check (All checks must be at the general admission price)

Visa

Mastercard

CCV \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp.Date \_\_\_\_\_

Signature \_\_\_\_\_

Billing ZIP \_\_\_\_\_