

WIC Breastfeeding Peer Counseling Time Study Report

Employee: _____ Job Title: _____ Month/Year: _____

Record the daily time dedicated to the WIC Breastfeeding Peer Counseling (BFPC) Program.*

Date	Time Spent (Hours or Minutes)	Task Description
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		
26		
27		
28		
29		
30		
31		
Total		

I hereby certify that the number of hours worked and shown above are true and correct to the best of my knowledge.

Employee signature and date

Supervisor or authorized personnel signature and date

Date

Date

* See the Breastfeeding Peer Counseling Time Study Procedure located on the WIC web portal in the Nutrition Services Procedures section.

Task Description: Briefly describe task(s)

Peer Counselors (indicate task letter or name under Task Description):

- A. Client time (contacting clients, documenting contacts, etc.)
- B. Non-client time (specify activity such as BFPC meetings, talking with BFPC Coordinator/DBE, continuing education, paid time off, etc.)

BFPC Coordinators (indicate task number or name under Task Description):

1. Assigning caseload
2. Caseload monitoring
3. Documentation review
4. BFPC observation
5. BFPC meeting preparation
6. BFPC meeting
7. BFPC training
8. BFPC mentoring
9. Breastfeeding Awards of Excellence (BFAE) application preparation
10. Other (specify activity)

DBEs:

- DBE referral from BFPC (time spent on yields/referrals from BFPCs only including contacting the client, documenting, and following up with the BFPC)

When time is split between multiple tasks, record the total time in the “Time” column and provide a breakdown in the “Task Description” column. For example, enter 120 minutes under “Time” and “60 minutes client contacts, 60 minutes BFPC meeting” under “Task Description”.