



International Board of Lactation Consultant Examiners Background Information

History of the International Board of Lactation Consultant Examiners

The International Board of Lactation Consultant Examiners founded in 1985 is a non-profit organization established to develop and administer a voluntary certification program for lactation consultants. IBLCE is a 501(c)(6), governed by its Board of Directors and has no membership. IBLCE has administered examinations yearly to date.

Because of an explosion of scientific studies validating the benefits of breastfeeding during the 70s and 80s, paralleled with the proliferation of a significant body of management skills by the La Leche League and other mother support organizations, a new allied health care provider began to emerge in the early 1980s. However, there were no competency standards for this new role.

As an international leader in providing guidelines for breastfeeding and mother-to-mother support, La Leche League International (LLL) made a commitment to develop standards for this field. The LLLI Lactation Consultant Department was established in 1982. A panel of 60 experts representing a variety of health professions, backgrounds, and geographic locations developed standards out of which the competencies and scope of practice for lactation consultants was developed.

The US Department of Health and Human Services founded the National Commission for Health Certifying Agencies with a grant in 1977, to foster self-regulation of the health care industry and avoid the need for government regulation. The NCHCA's mission was to develop stringent guidelines for health certifying organizations, and to accredit those that met the criteria. The International Board of Lactation Consultant Examiners utilized the NCHCA's guidelines from its inception, and is one of only a handful of organizations that were accredited by the Commission on its first application. Because certifying organizations must face the same issues of validity and reliability, regardless of whether or not the credentials they confer are health-related or not, the "H" was dropped by the Commission in 1994, forming the National Commission for Certifying Agencies, NCCA.

NCCA Guidelines required that certification organizations be administratively, financially, and corporately independent, and thus not subject to outside control. Accordingly, the International Board of Lactation Consultant Examiners, while founded with an LLLI loan of \$40,000 in March of 1985, is a completely independent organization. After the administration of the first examination in July of 1985, a group of lactation consultants met in Washington, DC, to found the International Lactation Consultant Association, Inc., a professional association. While sharing many common interests and working together on many common goals, the three (IBLCE, LLLI and ILCA) are distinct organizations with different purposes.

IBLCE Accreditation and Reaccreditation

After three annual examination administrations and analysis of the data obtained, IBLCE was fully accredited by the NCCA in 1988. Accredited organizations must reapply every five years. IBLCE was reaccredited in 1993, 1998, 2003, and 2008.

IBLCE Implementation of Validity

A representative panel of 60 experts assembled in Washington in March of 1985 to delineate role, content and scope of practice under the expert guidance of Leon Gross, Ph.D., Psychometrician for IBLCE and NCHCA Commissioner. A task analysis was performed by survey of all respondents to advertisements in nursing journals, mother-support-group journals, and childbirth education journals, to identify people functioning in the role. The original examination blueprint was developed from the data obtained. A second Representative Panel of Experts assembled in Alexandria, Virginia, on February 19, 1993. The original content outline was expanded and refined. A task analysis was conducted. Surveys were mailed to all current certificants. Results were utilized to revise the *IBLCE Exam Blueprint* for 1995 and beyond. A further refinement of the Exam Content Outline and additional educational prerequisites resulted from additional Role Delineation Studies completed in 1996, 2000 and 2007 which was conducted in six languages.

Role Delineation, Content, and Scope of Practice

The IBLCE Role Delineation Studies provide the data about the practices of IBCLCs and are used to review, revise and validate the content outline or blueprint of the examination. It includes an empirical verification of content, knowledge and skills, including frequency and criticality measurements.

Criterion Referenced Exam

The IBLCE examination is criterion rather than norm referenced, and is scored according to the Nedelsky-Gross technique. It consists of 175 multiple choice questions, 100 of which are in response to clinical pictures, a modified practical exam. Each of the optional answers is evaluated according to difficulty level, and each question receives a point value, according to difficulty of options, used in calculating the cut-score. There is only one right answer to each question, and no partial credit for choosing a sophisticated rather than unsophisticated distracter in determining candidate scores. But in determining the cut-score, a multiple-point index is utilized which takes into account the level of difficulty of each question as analysed by the Exam Committee and Board.

The higher the level of difficulty of the overall exam, based on a myriad of individual analyses of each question, the lower the cut-score will be and vice-versa. This process insures that no person or group of people will be able to predetermine a cut-score based on the number or percentage of candidates they would like to see pass, or simply on the assumption that such a particular score as, for example, 70%, is natural or fitting.

Following the administration of the examination, each question is statistically analysed according to standard psychometric procedures. The purpose of these analyses is to identify any questions which did not perform as expected, i.e. were ambiguous or miss-keyed or was more likely to have been answered correctly by candidates who scored poorly overall. Such questions are reviewed by the Exam Review Committee of the Board, in conjunction with the psychometrician. Those questions judged to be defective are deleted and candidates' scores recomputed. Each year, a percentage of previously used questions are included in the current exam, and the performance of the current candidates is compared

with that of previous cohorts. This procedure provides a check on whether competence levels of candidate bodies are changing and whether the difficulty level of the exam changes.

References

Interestingly enough, the first year when the exam was sent out to independent reviewers, final copies were sent which did not indicate which answer was correct. Some reviewers, seeing commonly held mistaken answers among the options, made the assumption that those answers were intended as correct. All questions, all correct answers, are referenced to the scientific, technical and medical literature.

Moderate Scores, Low Failure Rate

Each year the psychometric evaluation has shown a low failure rate and yet highest scores typically falling in the high 80% to low 90% range. This result demonstrates a well prepared, well screened candidate body and a challenging exam.

Period of Certification

It is recognized that the skills and knowledge acquired before and examined at initial certification do not necessarily relate to the competence of the person to practice in the field in years to come, especially if the skills and knowledge are not regularly updated to incorporate new insights and practice.

International Board Certified Lactation Consultants are certified for a period of five years. IBLCE has established strict recertification criteria to fulfill its mandate of protecting the public and to encourage the development of quality continuing education in the field.

Recertification

Only two ways of measuring continued competency have been validated by research: practice audit and re-examination. Continuing Education has not been correlated by research with continuing competency. Since practice audit is financially impractical, IBLCE has chosen to require recertification by exam, at least every ten years.

Recertification through continuing education may be used, five years after passing the certification examination. It demonstrates the certificant's desire to ensure his/her knowledge and practice are up-to-date. IBLCE chose to permit this pathway in order to foster the establishment and development of a wide variety of educational programs in breastfeeding and lactation. Currently, most IBCLCs choose to recertify at five years by continuing education, but they are free to recertify by exam every five years, if they wish.

Annual Exam Development Committee

A committee of six to eight experts convenes each October/November to put together the upcoming examination, under the guidance of the psychometrician and according to the *IBLCE Exam Blueprint*. It is composed of representatives from the various disciplines and practice settings. Exam Development Subcommittee composition changes each year to incorporate the expertise of as many contributors to the field as possible. Examination items are solicited from practicing IBCLCs and other interested contributors, revised and rewritten by the Exam Committee. The Board then reviews the exam at the March Board meeting each year.