

## Section II: Local Agency Procedure Manual

### II. Local Nutrition Services

#### D. Nutrition Education Contacts

##### **Purpose**

To ensure that all WIC participants are offered appropriate and up-to-date nutrition education.

##### **Policy**

WIC participants will be offered appropriate and up-to-date nutrition education according to standards and staff qualifications.

---

#### **1. Nutrition Education Contacts**

- Will be delivered by one of the following methods:
  - Face to face (individual or group) or remotely with qualified staff;
  - Online/app education; and/or
  - Other interactive education provided by a qualified/approved source as described in this policy.
- Will be conducted with the participant, parent/guardian, or their authorized representative and utilize Value Enhanced Nutrition Assessment (VENA), this participant centered method:
  - Identifies and addresses nutrition risks, needs and interests of the participant in order to provide benefits that are timely and appropriate;
  - Incorporates the use of OARS (open ended questions, affirmation, reflective listening and summary) interviewing techniques;
  - Encourages interaction with the participant.
- Consider factors outlined in Care Plan, when appropriate.
- Be offered at no cost to the participant.
- Be clearly documented in the participant's folder in a consistent and organized manner by the end of the day of the next business day.

#### **2. Frequency of Nutrition Education Contacts During a Certification Period**

- Participants will be offered a minimum of four nutrition education contacts per 12-month certification period and two contacts per 6-month certification period, approximately each quarter.
  - If a participant is scheduled more frequently than required (about every 3 months), education shall be provided with each appointment as this indicates high risk or greater intervention per the care plan.
  - If the increased frequency is simply related to scheduling considerations, then additional education is not needed but documentation of appointment is required.

### **3. Individual Follow-up Education**

- Contact will include:
  - A review of the participant's nutrition care plan.
  - Updated anthropometrics if indicated based on age or care plan.
  - Follow-up on nutrition education provided at previous visit(s) including progress on resolving nutrition concerns and nutrition risk codes.
    - High-risk issues (as identified on the *High-Risk Referrals* table) should only be discussed with the appropriate staff identified. WIC staff shall only work within their scope of practice.
    - Low risk education may be provided by trained paraprofessional staff.
  - Follow-up on and evaluation of prior referrals.
  - Follow-up on and evaluation of the participant's progress toward goals.
    - If the goal previously set has been achieved, a new goal should be set.
    - If the participant declines setting a subsequent goal, this should be clearly documented.
  - Nutrition education based on care plan and/or current issues expressed by participant.
  - Includes accurate and up-to-date information based on the participant's category, dietary history, health history and stated interests and concerns.
  - The language and cultural preferences of the participants.
  - Documentation of the discussion in the participant folder.

### **4. Contacts for High-Risk Participants**

- Documentation of visits will be maintained in the participant's folder, which shall include:
  - Assessment of issues that were the basis of the referral;
  - Any interventions and education provided; and
  - Plan for future appointments whether it be continued RD/High-Risk RN services or release to low-risk.
- If the appropriate staff completes the appointment where the risk was identified, the minimum requirement for this contact type will be considered met.
- The next appointment will be made with the appropriate staff.
- When RD services are declined, high-risk topics may only be addressed with a CPA if it is within their scope of practice, otherwise, other referrals will be assessed and made to address the issue.

### **5. Alternate Nutrition Education for Low-Risk Participants**

- Group Classes:
  - Will be presented according to the lesson plan for the class.

- Will be presented by staff or volunteers who have been trained on the subject matter prior to teaching the class.
- Document class name and record of attendance in the participant's folder.
- If group class is held through another program, such as SNAP Ed or Head Start, a local agency agreement must be in place to ensure that the lesson plan meets nutrition education criteria.
- Web-based education and/or self-paced lessons including: DVDs, printed materials, posters or bulletin boards with an interactive component.
  - An interactive component is defined as a two-way exchange of information and may include face-to-face, computer based through secure meeting software (i.e. WebEx) or telephone.
  - High-risk participants who have met with the RD or High-Risk RN and are no longer considered high-risk, as their issue may be under control or resolved, may use this form of secondary nutrition education at the discretion of the CPA.
    - The CPA (RD/High-Risk RN) who addresses the high-risk issue must document release to complete low risk education method at follow up appointment.
  - Web-based Education
    - Provide the WICSmart address to the participant as well as their local agency clinic name and full Household ID number, including any leading zeros.
    - May provide guidance on appropriate topics based on the participant's category, nutrition risks, stated interests, concerns, and goals.
    - Document the topic completed in the participant folder.
    - Determine and document the next nutrition contact.
    - Follow up of goal and referral may be completed at next agency appointment.

## 6. Mid-Year Assessment

- A mid-certification visit will be scheduled for children approximately 5-7 months after certification, and at about 6 months of age for infants and their breastfeeding mothers (if applicable), and will include:
  - Nutrition Assessment
    - Length/height and weight measurements.
    - Blood screening for all children under 2 years of age and for children over 2 if hemoglobin results at certification were below the established cut-off value.
    - Category appropriate mid-certification nutrition assessment questions.
      - ❖ Response required under each question (may put "N/A" or may refer to another question if it's already been addressed).
  - Nutrition Education

- Appropriate topics based on the participant's stated interests, concerns, risk codes, and/or nutrition care plan.
- Review of growth and if applicable, blood-work results.
- Referrals
  - Follow-up and document on referrals made at prior visits.
  - Make and document new referrals as appropriate.
- Goals
  - Follow-up on participant's progress of agreed upon goals, set new goal if applicable.
- Nutrition Care Plans
  - Time (if not the standard 3 months), type of appointment (if not standard in-person), follow-up items (hgb., wt., ht., etc. if beyond standard), potential education for next appointment.
- Mid-certification visits may be conducted using a distance method utilizing anthropometric measures and blood-work information from another qualified source.
  - The document needs to be completed in writing, signed, and dated by the healthcare provider or be a printed electronic health record.
  - The assessment questions and nutrition education may be completed by telephone or using a secure internet meeting function.
- If a participant is off schedule or misses their appointment during the timeframe specified, the mid-certification assessment will be completed at their next scheduled appointment.

## **7. Nutrition Forms Developed by Local Agencies**

- If a local agency has developed a nutrition form or pamphlet which meets a special need, it will be sent to the State WIC Office for approval before it is put into use.
  - The forms must be submitted for approval by the lead agency.
  - The State Office is looking for current, evidenced-based content and may request source citations when reviewing submitted materials for approval.

## **8. Refusal of Nutrition Education**

- Participants may decline nutrition education and will not be denied food benefits for refusal to attend or participate.
- Refusal of nutrition education must be documented in the participant's folder.
- Alternative nutrition education activities will be encouraged.
- Determine how many months of benefits to issue so that numerous opportunities for nutrition education contacts still exist.

## **9. Exit Counseling**

- At the final appointment for women participants (pregnancy and postpartum or breastfeeding), they must be provided exit counseling. The counseling shall include referrals to local programs for continuity of resource access, health tips for life stage, and local agency contact information for other referrals.
- A handout with this information is available on eLearn, this form must be edited with local agency and participant centered information.
- This activity must be documented in the participant file.