OVERVIEW AND EXAMPLES
Required Guidance for Nutrition Education
Review the following slides for:

- An **overview** of the 6 Required Guidance documents
- **Participant stories** with nutrition education documentation examples for Initial, Subsequent Certifications, the Presume Eligible Complete Assessment, the Mid Certification Health Assessment, and Nutrition Education - Individual
- **Information** for the High Risk Care Plan written by the WIC RDN, the non-WIC RDN, and Group Classes
- **Contact** information for questions
Required Guidance for Nutrition Education

Review – 6 Required Nutrition Education Guidance documents

Initial Nutrition Education

- Nutrition Education at the Initial and Subsequent Certification and Presume Eligible Complete Assessment

Second Nutrition Education

- Nutrition Education – Individual
- The Mid Certification Health Assessment
- High Risk with a WIC Registered Dietitian Nutritionist (RDN)
- High Risk Care Plan Provided by a Non-WIC Registered Dietitian Nutritionist (RDN)
- Nutrition Education – Group Classes
Overview - New Required Guidance

The Required Guidance:

• **Supports** staff in using their participant centered skills.

• **Follows** federal documentation requirements and the Nutrition Services Standards.

• **Clarifies** where and how to document in Cascades.
Overview - Participant Centered Services - Assessment and Education

We strengthened requirements for assuring a participant centered interaction during the assessment and nutrition education contacts.

Key requirements for staff include:

• Review the nutrition risks and concerns identified at the assessment.

• Have a participant centered conversation about the participant’s nutrition breastfeeding, physical activity, and health related needs, interests, and goals.

• Offer topics of relevance when no topics or areas of concern are identified.
We clarified documentation requirements to assure consistency in where and how to document notes in Cascades.

- Document notes in the participant’s **Individual Care Plan**, including:
  - The title
  - Participant’s thoughts and feelings
  - Information offered/shared/discussed
  - A goal or if a goal wasn’t set
  - Additional information for future support and follow-up
- Document the nutrition education topic(s) discussed
Overview - Documenting Goals

We clarified documentation requirements to assure consistency in where and how staff document goals.

• Have a **goal setting conversation** at the Initial, Subsequent Certification, and Presume Eligible Complete Assessment and the High Risk with a WIC RDN appointment.

• **Follow-up on any previously set goals** at the Mid-Certification Health Assessment and the Second Nutrition Education-Individual.

• **Document “Goal” in the Individual Care Plan** note or that the participant isn’t ready to set a goal.

• It’s optional to use Maintain Goals.
Overview – Tips for Goal Setting

The Three Steps to Goal Setting

1. Use an open-ended question to ask the participant about their next step.

2. Help narrow the goal to something that feels achievable to the participant.

3. Summarize and express confidence.
Review Examples

Documenting nutrition education and topics in Cascades
The following slides include nutrition education documentation examples for:

- The Initial Certification
- The Subsequent Certification
- The Presume Eligible Complete Assessment
- The Mid Certification Health Assessment without a goal (6-month-old infant)
- The Mid Certification Health Assessment with an optional goal (6-month-old infant)
- The Mid Certification Health Assessment - follow up to previous goal (4-year-old child)
- Nutrition Education – Individual - follow up to previous goal and new goal set (3-year-old child)
Example: Nutrition Education at the Initial Certification

Mike’s Story:
• Mike is a 2-year-old who prefers playing to eating on most days. During the certification, Mike’s parent shared concerns about feeding a busy 2-year-old and knowing how much he should be eating.
• Mike’s nutrition risk factor is - Not Meeting Dietary Guidelines 2-5 years.

Nutrition Education Topic: Division of Responsibility
Example: Nutrition Education at the Subsequent Certification

Danika’s Story:
• Danika is a 1-year-old who eats a variety of table foods, she’s transitioning from a bottle to a cup. During the subsequent certification, Danika’s parent shared she’s still drinking 3 bottles per day and since she’s teething, she often wakes and has a nighttime bottle. They’ve started to introduce whole milk.
• Danika’s nutrition risk factor is - Inappropriate Use of Bottle/Cup.

Nutrition Assessment

SC: Danika is eating well/transitioning from bottle to cup. Parent feels Danika isn’t ready to wean from the bottle. Drinking 3 bottles/day and a nighttime bottle due to teething. Shared handout: I’m Ready for a Cup.

Goal: Will offer one less bottle each day and replace it with cup. Will save the nighttime bottle for last. Check at next NE-I appt.

Nutrition Education Topic: Cup Use
Example: Nutrition Education
Presume Eligible Complete Assessment

Lily’s Story:
- Lily is a first-time pregnant adult in her first trimester. She’s having some nausea/vomiting and is worried about not eating enough variety. Prior to pregnancy, she ate a wide variety of foods, including many types of vegetables. She’s taking a prenatal vitamin with food before bed.
- Lily’s nutrition risk factor is - Not Meeting Dietary Guidelines.

Nutrition Education Topics: MyPlate
Example: Nutrition Education at the Mid Certification Health Assessment at 6 months

Malia’s Story:
• Malia is a breastfed 6-month-old infant beginning to use a cup. Parent has vitamin D supplement from MD but hasn’t started giving it to Malia yet.
• Malia’s nutrition risk factor from the certification is – Inadequate Vitamin/Mineral Supplementation.

Example note: doesn’t include a goal (setting a goal is optional at the Mid-Cert Health Assessment)

Nutrition Assessment

**MC-HA:** Parent feels Malia is showing signs of readiness for a cup. Hasn’t started vitamin D supplement from MD. Shared info on vit D and tips on when and how to introduce a cup. Follow up on vit D at next appt.

Nutrition Education Topic: Cup Use + Vit/Min Supplements + Mid Cert HA Completed
Example: Nutrition Education at the
Mid Certification Health Assessment at 6 months

Malia’s Story:
• Malia is a breastfed 6-month-old infant beginning to use a cup. Parent has vitamin D supplement from MD but hasn’t started giving it to Malia yet.
• Malia’s nutrition risk factor from the certification is – Inadequate Vitamin/Mineral Supplementation.

Example note: With optional goal

Nutrition Assessment

MC-HA: Parent feels Malia is showing signs of readiness for a cup. Hasn’t started vitamin D supplement from MD. Shared info on vit D and tips on when and how to introduce a cup.

Goal: Parent will begin vit D supp and use an open-mouth cup with pumped breastmilk at least one time per day. Follow up at NE-I in 2 months.

Nutrition Education Topic: Cup Use + Vit/Min Supplements + Mid Cert HA Completed
Example: Nutrition Education at the Mid Certification Health Assessment for a child

Tonia’s Story:
• Tonia is a 4-year-old. At the subsequent certification parent reported low iron at Tonia’s 4-year check with the pediatrician. The goal set at the certification was to increase iron-rich protein foods along with vitamin C foods.
• Tonia’s nutrition risk factor from the certification was – Low Hematocrit/Hemoglobin.

Example note: follow up to previous goal set at subsequent certification

Nutrition Assessment

MC-HA: Tonia had low iron at her doctor’s visit. Set goal at sub-cert to increase protein and offer with vitamin C foods. Iron level at last MD appt improved. Parent feels they’re successful finding several iron containing foods and pairing with vit C, affirmed excellent progress. Parent asked for information on family friendly activities. Schedule for virtual NE-2C: Jumping to the Mooves with Barn Yard Dance class.

Nutrition Education Topic: Activity Exercise + Mid Cert HA Completed
Example: Nutrition Education at the Second Nutrition Education – Individual

Joey’s Story:
• Joey is a 3-year-old and the Care Plan note from the subsequent certification says: “likes to eat the same foods every day and new foods on his plate cause a melt-down.” Pediatrician visit showed Joey is growing well, however parents are still concerned about challenges at mealtimes.
• Joey’s nutrition risk factor is - Not Meeting Dietary Guidelines (2-5 years).

Example note: follow up to previous goal with new goal set

Nutrition Assessment

NE-I – The family feels they’ve had good success with a few new foods. Still worried Joey isn’t getting the foods he needs and wanted ideas for healthy snacks. Shared Healthy Choices for Kids.

Goal: Parents plan to continue to be patient and not pressure Joey and involve him in preparing some snacks and meals. Follow-up to progress at the SC.

Nutrition Education Topic: Feeding Children 2-5
The following slides include information from the required guidance for:

- High Risk with a WIC Registered Dietitian Nutritionist (RDN)
- High Risk Care Plan Provided by a Non-WIC Registered Dietitian Nutritionist (RDN)
- Nutrition Education – Group Classes
Documentation for the High Risk with a WIC Registered Dietitian Nutritionist (RDN)

- Provide a high risk contact and write a High Risk Care Plan (HRCP) for participants identified as high risk based on Washington WIC’s nutrition high risk criteria or by Professional Discretion High Risk.
- See the participant one time per certification unless:
  - the RDN determines additional follow up is needed
  - a new high risk factor is identified later in the eligibility period
- Have a participant centered conversation guided by the high risk factors and the participant’s interests or needs.
- Facilitate a goal setting conversation with the participant and set a goal if ready.
Documentation for the High Risk with a WIC Registered Dietitian Nutritionist (RDN)

The RDN documents:

• A High Risk Care Plan (HRCP) in the Individual Care Plan which includes:
  • The title: HRCP
  • Participant’s thoughts and feelings
  • Information offered/shared/discussed
  • A goal or if a goal wasn’t set
  • Information for future support and follow-up.

• Nutrition education topic(s) discussed and “HRCP Completed” in the Care Plan – Nutrition Education.

NOTE: Use a standardized individual care plan documentation method, such as:
• Subjective, Objective, Assessment, Plan Intervention, Evaluation (SOAPIE),
• Assessment, Diagnoses, Intervention, Monitoring & Evaluation (ADIME)
Documentation for the High Risk Care Plan Provided by a Non-WIC Registered Dietitian Nutritionist (RDN)

- Assure the participant receives one high risk contact for each certification period when the participant is identified as high risk.
- Obtain the High Risk Care Plan (HRCP) provided by a non-WIC RDN.
  - Determine the HRCP provided by a non-WIC RDN addresses the high risk topic(s) identified by WIC to meet the WIC HRCP requirement.
- Scan the non-WIC RDN HRCP into the Assigned Risk Factors screen.

Have the participant fill out and sign an Individual Authorization to Release WIC Information form to obtain information from the non-WIC RDN.
Documentation for the High Risk Care Plan Provided by a Non-WIC Registered Dietitian Nutritionist (RDN)

- Document the non-WIC RDN HRCP in the Individual Care Plan:
  - The title: HRCP – non-WIC RDN.
  - The note: “See scanned non-WIC RDN HRCP.”
  - The plan for follow-up as determined by the non-WIC RDN.
  - Add the participant’s goal(s) from the non-WIC RDN’s HRCP if available and label this section of the note as “Goal.”

- Document nutrition education topic(s) discussed and “HRCP Completed” in the Care Plan - Nutrition Education.
Second Nutrition Education

Group Classes

• The group class is a facilitated discussion where participants or parent guardians have the opportunity to talk and learn from each other.
• The facilitator considers and explores nutrition education topics of interest to the group.
• The facilitator assures accurate and relevant information is shared through a facilitated group discussion and affirms any next steps shared by participants.
• Staff document class attendance in the Clinic Master Calendar.

Note: Documenting class attendance marks the topic for the group class as “Complete” for each participant in the family when the topic applies to their category.
Contact Information

Send questions to: WAWICTraining@doh.wa.gov

We hope this review helps you implement the Nutrition Education Required Guidance.

• Please share with all staff who provide and document nutrition education.

• Staff must follow the Required Guidance beginning May 2, 2022.
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DOH 962-1024 April 2023

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