



**3 NUTRITION SERVICES**  
**3.10 Nutrition Assessment at Certification**

*Effective: 12/1/95*

*Revised: 10/1/09*

**POLICY:** A Value Enhanced Nutrition Assessment (VENA) is the process of obtaining and synthesizing relevant and accurate information about a participant in order to develop the most appropriate WIC intervention that is responsive to the participant's wants and needs. (See VENA resources in the Training Connection site in WICPRO.) To achieve VENA, standardized nutrition assessment procedures, using equipment meeting established specifications (see policy 3.50), standardized data collection procedures, and standardized risk criteria are used to determine eligibility for the WIC Program at each certification. These serve as the basis for WIC services (i.e., selection of the WIC food package; provision of appropriate counseling/education and referrals; determination of a mutually agreed upon objective(s) for the participant's next visit; and scheduling of appropriate secondary nutrition education). While different staff are involved in the assessment process (e.g., health screeners), a Competent Professional Authority (CPA) (see Administration Chapter) must complete the assessment and determine WIC eligibility.

**PROCEDURE:**

**A. WIC NUTRITION ASSESSMENT AT INITIAL CERTIFICATION**

1. Collect the assessment information as identified below. Refer to *ROSIE Nutrition Guidance* in ROSIE Help (ROSIE and Central Office Resources, Reference and Guidance, Nutrition and Health) for the specific information collected, what data autofills in the ROSIE Care Plan, and additional interpretation. See the *ROSIE Care Plan Abbreviations* in ROSIE Help (ROSIE and Central Office Resources, Reference and Guidance, Nutrition and Health) for allowable documentation abbreviations.
  - a) (Optional) Explain to the participant that the assessment process is necessary to identify their nutrition needs and provide benefits that are responsive to their wants and needs, and that the relationship between WIC staff and the participant is a partnership – with open dialogue and 2-way communication – working to achieve positive health outcomes.
  - b) Obtain a hematocrit or hemoglobin (see Policy 3.11).
  - c) Obtain a length or height and weight (see Policy 3.12). For pregnant women, obtain a pre-gravid weight (self-reported or via referral data; if unknown, estimate as closely as possible).



- d) Obtain information about medical conditions and health history using the ROSIE Health tab, and information about nutrition practices (e.g. eating habits, diet, cultural food preferences and dietary concerns) using the ROSIE Diet tab.
1. **The goal is to obtain responses to all the Health and Diet tab questions. The use of “umbrella” questions (i.e., general questions through which answers to more than one question may be obtained) is recommended.** (See *Umbrella questions* in the VENA Toolkit in the WIC Training Connection web site.) **Exceptions include when the information is not or is no longer relevant to an individual participant.**
  2. Questions/responses in red font are required.
  3. Questions/responses with asterisks indicate the question is used for risk factor determination.
  4. Questions/responses that are italicized are flags for suspected and diagnosed special health care needs. (See the *Italicized questions in the WIC ROSIE Health and Diet Tabs* in the CSHCN Toolkit in ROSIE Help and in WICPRO.)
  5. **If a breastfeeding mother reports any concerns or problems that may be related to latch and position, observing a feeding is recommended (if possible).**
  6. There may be limited situations when it is not possible to complete all relevant health and diet questions. If so, **document the reason why** in the Care Plan and use professional judgment for prioritizing what can be accomplished during the certification appointment.
2. Review all the information collected. Clarify responses and obtain additional information, if needed. The CPA can add risk criteria previously missed during the interview and deselect auto-generated risks if not sure that a risk is present.
  3. **Determine the overall assessment (i.e., the “diagnosis” or the overall conclusion about the nutritional status and needs of the participant):** Use critical thinking skills to synthesize the information, analyze the interrelationships between and root causes of the risks (e.g., how one might cause another), determine other influences on or priorities of the participant, and/or determine anticipatory guidance needs.



4. Document the results. (See the *ROSIE Care Plan Abbreviations* for allowable documentation abbreviations.)
  - a) In ROSIE, selected information from the various tabs is auto-filled within the Care Plan. (Refer to *ROSIE Nutrition Guidance* for the specific information that will auto-fill into the Care Plan.)
  - b) **Document any additional subjective and objective information that is relevant to the assessment of the participant in the Subjective (S) and Objective (O) sections of the ROSIE Care Plan** (using allowable abbreviations). Subjective information includes what the client reports and observations by the CPA or other staff. Objective information includes factual data (e.g., data on WIC Prescription/Clinical Data forms).
  - c) **Document the overall assessment, i.e., the “diagnosis” or overall conclusion, in the Assessment (A) section of the ROSIE Care Plan.** Entering information already auto-filled is not adequate. **CPAs may use ADA’s Nutrition Care Process (NCP), including the use of Problem, Etiology, Signs and Symptoms (“PES”) statements. If used, WIC RDs must assure that it is used properly.**
  - d) For policies pertaining to the provision of services after the assessment is completed, see policies in Chapter 3 that pertain to nutrition education and the Plan, policies in Chapter 5 that pertain to referrals, policies in Chapter 4 that pertain to food package selection, and policy 3.21 regarding the Rights and Responsibilities.

## **B. DETERMINATION OF RISK**

1. Wisconsin WIC utilizes USDA’s standardized risk criteria and definitions. Auto-risk and priority level determination has been built into ROSIE for the majority of risks. For information on allowable risks, their definitions, priority levels and how they are assigned, see the following in ROSIE Help (ROSIE and Central Office Resources, Reference and Guidance, Nutrition and Health): *WIC Risk Criteria and Guidelines*, *ROSIE Risk Codes*, and *ROSIE Nutrition Guidance*. The first digit in the risk codes is the priority level (see policy 2.5).
2. Risk codes should be assigned through the auto-determination process in ROSIE. However, CPAs can manually assign or delete auto-generated risks (see part A.2.).



3. ROSIE will place breastfeeding mothers and their infants in the highest priority for which either is eligible.
4. See policy 3.21 regarding final eligibility determination and the Rights and Responsibilities.

### **C. WIC NUTRITION ASSESSMENT AT SUBSEQUENT CERTIFICATIONS**

1. In addition to following the steps outlined in Section A, 1 and 2:
  - a) Review last Care Plan, secondary nutrition education scheduled and received, and the food prescription, as needed.
  - b) Assess attainment of behavioral objective(s) and follow-through on referrals.
  - c) If the behavioral objective (or primary one, if more than one) from the last individual visit was met, the Plan Met checkbox in the Care Plan can be checked.
2. To facilitate continuity of care, responses to health and diet questions that do not change (e.g., a chronic disease) are carried forward from the previous visit to the current visit. Update these responses, if needed, and obtain responses to the remaining questions.

#### **RESOURCES:**

In ROSIE Help, ROSIE and Central Office Resources, Reference and Guidance, Nutrition and Health:

- CSHCN Toolkit
- Health – Diet Tab Questions
- ROSIE Care Plan Abbreviations
- ROSIE Nutrition Guidance
- ROSIE Risk Codes (listing of risk codes, brief definitions, and priority levels)
- WIC Risk Criteria and Guidelines

In the Wisconsin WIC web site, WICPRO, Training Connection:

- VENA Toolkit