

TRAINING OUTLINE

- **Recorded Power Point** – approx 16 min.
 - USDA VENA Videos – approx 40 min.
 - Review of VENA Appendices – approx 5 min.
- **15 question SSM**
- **Review of IL WIC Policy Addenda Referenced:**
 - WIC Program Explanation to Participants
 - Anthropometric Flowchart & Tip Sheet
 - Certification Standards 5.4
 - NPS Breastfeeding
 - I-WIC Assessment Guides
 - NPS Documenting in WIC MIS

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VALUE ENHANCED NUTRITION ASSESSMENT (VENA) & WIC

Illinois Department of Human Services
Illinois WIC Program
FY23



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OBJECTIVES

- Identify the role of Value Enhanced Nutrition Assessment (VENA) in the WIC program
- Apply the Value Enhanced Nutrition Assessment (VENA) throughout the WIC nutrition assessment process



3

KEEP IN MIND



Training is designed to be
self-paced



Take time to review each
section carefully



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REQUIRED TRAINING RESOURCES

USDA Value Enhanced Nutrition Assessment (VENA) Guidance <https://bit.ly/3czu2tv>

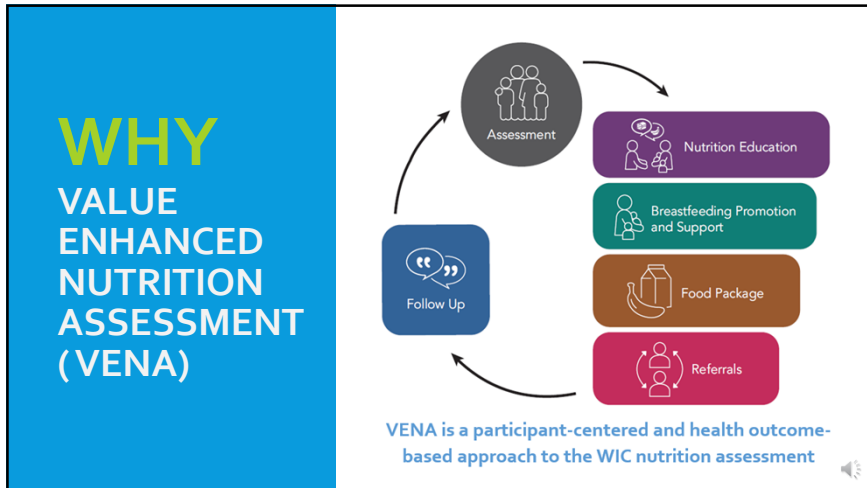
Illinois WIC Policy Manual <https://bit.ly/3JoEDJT>

Certification Standards Policy & Addenda
Nutrition Education Policy & Addenda

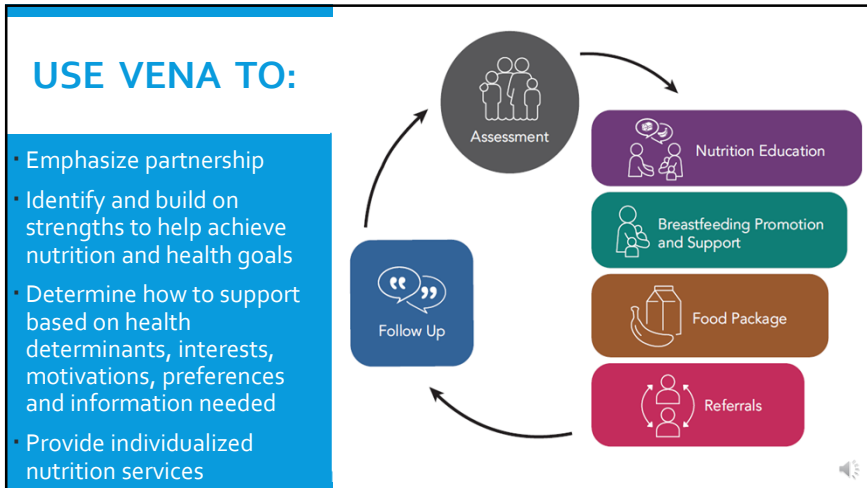
5

AS YOU WORK THROUGH THIS TRAINING

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BEFORE MOVING FORWARD...

USDA VENA Training Videos:


- 1A Introduction to VENA: (9 min.)
Nutrition Assessment in WIC
- 1B Introduction to VENA: (6 min.)
A Systemic and Personalized Process
- 1C Introduction to VENA: (22 min.)
Conducting a WIC Nutrition and Breastfeeding Assessment



<https://bit.ly/3b1KbaG>

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THE VENA APPROACH



- Uses the CPA's skills in communication and rapport building to collect and evaluate information elicited from the participant
- Ensures quality and consistency across assessment activities

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SET THE AGENDA

Reduces Participant Anxiety
Keep in mind many participants requesting WIC services do not know all the process entails

Creates a Power-Sharing Dynamic
Communicating the visit shows respect and allows for the establishment of open and honest communication throughout the visit

Increases Participant Engagement (buy-in)
Understanding the intent of the visit will help build interest and encourage participation

WIC Program Explanation to Participants

The following information must be provided, as part of a positive, participant-centered visit. For more information review PPM Nutrition Education, Section 4.2.

The recommended times at which this information is covered will fit with the WIC visit flow and assist staff in incorporating throughout the appointment.

Setting the Stage: Welcome to WIC! We look forward to working with you to help your family be healthy. You will receive nutrition education, healthy foods, breastfeeding promotion and education, and referrals to other community programs here.

Nutrition Assessment Relationship (WICVE 2*) Today I will ask you questions about your /your family's eating habits, medical conditions, like height and weight measurements, as well as check in (if applicable as part of a nutrition assessment). This information will help provide food benefits and nutrition education specific to you/ your family's needs.

Recommended 30min: certification, before assigning food benefits.

Food Benefits Supplemental (Key Nutrients (WICVE 2*) Certification Periods (WICVE 2*)) WIC foods are supplemental, which means they are only part of the foods he/she/you need every day. The food benefits you receive today are for you/your child and have key nutrients needed for healthy pregnancy/after having a baby/your child to grow and develop.

Recommended 30min: Review with participant:

- Use of EBT card (i.e. WIC PPM SFD 1-4)
- Family Shopping List, WIC Food List, and how to get the full nutrition benefits from the foods in that package
- Vendor list (MPH and pharmacy vendors as applicable)
- WIC Card - participant rights / responsibilities

Food Benefits WIC ID Card (WICVE 2*) You may also want to ask, "What questions or concerns do you have about shopping for WIC foods or using your EBT card?"

*WICVE 1-5 relate to Certification Observation Sheet for CPA to ensure all required components are covered.

8 - 02-2021 WIC Program Explanation

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COLLECT RELEVANT INFORMATION

Anthropometric
(height, weight)

Biochemical
(hemoglobin, lead)

Breastfeeding
(history, healthcare provider recommendations, participant's goals)

Clinical
(immunizations, pre-existing/new medical conditions effecting nutrition status)

Dietary
(food preferences, intolerances, dietary patterns, infant/child feeding practices)

Environmental
(home environment, SES, substance use)

WIC Assessment Guide: Children (C1, C2, C3, C4)

The following guidance is to assist a CPA in using a participant-centered (PC) approach during the category specific WIC assessment. CPAs should be familiar with the WIC screens to know some questions collect specific data and others the CPA should ask open-ended questions to engage the participant/family, rather than reading each question from the WIC screens.

Setting the Stage & Explaining the WIC Visit

- Establish rapport and individualize visit to the family/participant (i.e. address by name, if acceptable, ask about past experience/knowledge, cultural practices, etc.). Explain to parent/caregiver what to expect during WIC visit, time of visit, and why information is collected, possible explanation.
- Thank you for bringing (CHILD's name) to WIC today, this visit will take about (time). Throughout your participation in WIC, we will ask questions and gather information to get a better understanding of your family's overall nutrition and lifestyle practices. To start with we will complete a nutrition assessment, this includes: collecting measurements, to ask your child's growth and screen the parent's weight status, check the iron in the blood, and discuss your child's eating and physical activity habits. Following, we can talk about some ideas (CPA's notes) for you to continue to grow healthy, how to use your WIC foods, and if there are community resources that may benefit your family, we'll share those with you."
- Possible conversation starter questions:
 - o "Tell me how you feel about how (CHILD's name) is eating and what WIC can help you with today?"
 - o "The last time you were here, you talked about (iron/grow or secondary of topic), how is that going for you?"

Note: Upon completing the Core Action screen, the Breastfeeding up box will appear and is required to be completed, whether child is or was breastfeeding. At the time of Recertification, this pop-up should occur only if was breastfeeding at time of last certification.

WICVEN - Child

Anthropometric & Biochemical Data, per system requirements:
 Add Anthropometric & Biochemical Data, enter "Unknown" if not presented in writing. Add Immunization Status as Reviewed or Referred (and document on Referral screen).

Growth Chart Tab:
 Review age appropriate growth chart. If 2' plot point, explain WIC will continue to follow growth while on WIC and if several points, explain growth patterns. As CPA moves on to health screen, may start to ask questions to parent/caregiver related to growth:

- "How do you feel about your child's growth, do you feel it is too slow, just right, or too fast?"
- "When was the last time (CHILD's name) was measured at the doctor's office? What did they share about their growth?" (If applicable, probe for any diagnosed growth related medical condition, i.e. Failure to Thrive)
- "How do you feel about your child's growth?"
- "You are concerned with how (CHILD's name) is growing."
- "You are happy with (CHILD's name) size for his/her age on the growth chart."

8-02-21 Addendum WIC Child Assessment Guide 12-20

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CLARIFY & SYNTHESIZE

Circular approach moving from identifying information to synthesize and back until satisfied and feel a thorough assessment has been completed and nutrition risk(s) and protective factors identified

Table A3-5. Health Outcome-Based WIC Nutrition Assessment for a Child 12-60 Months of Age

Nutrition/Health Objective	Nutrition/Health Determinant Category	Desired health outcome: Achieve optimal growth and development in a nurturing environment and begin to acquire dietary and lifestyle habits associated with a lifetime of good health.	
		Examples of Potential WIC Nutrition Risk Factors*	Competent Professional Authority's (CPA) Role†
Consume a variety of foods to meet energy and nutrient requirements, achieve developmental milestones for self-feeding, and remain free from foodborne illnesses.	Dietary Intake/Nutrition Practices	<ul style="list-style-type: none"> Consumes an appropriate amount of breast milk or formula in the primary milk source High intake of sugar-containing beverages Intake of potentially contaminated foods Routine inappropriate use of nursing bottles, nipples, or pacifiers Inappropriate feeding practices for the child's developmental stage/level 	<ul style="list-style-type: none"> Eat fruits and vegetables, lean meats, and whole grains Limit sodium from added sugars and sodium chloride and limits sodium intake Consumes adequate vitamins daily Assesses parental fear of the bottle at an appropriate age Achieves self-feeding milestones Assesses developmental knowledge and attitudes regarding development of good eating habits, safety, and nutrition recommendations Assesses current and potential impact on nutritional needs, and feeding Assess cultural, medical, and other influences on feeding practices Assess developmental skills related to feeding Assess parent/ caregiver knowledge and attitudes regarding development of good eating habits, safety, and nutrition recommendations
Receive ongoing health care, including immunizations and communications.	Health/Dental Care	<ul style="list-style-type: none"> Inappropriate immunizations Lack of medical or dental home 	<ul style="list-style-type: none"> Attends regular appointments for immunizations and dental care after the age of 24 months and requires a child only that requires blood lead exposure and immunizations Assess barriers to ongoing care Ask about dental status and treatment status or follow-up medical care
Achieve a normal growth pattern.	Weight/Height Status (Anthropometry)	<ul style="list-style-type: none"> Underweight Overweight Low status 	<ul style="list-style-type: none"> Consumes sufficient calories to meet energy and nutrient requirements Assesses and addresses nutritional status Determine possible contributors to growth issues Assess caregiver knowledge and attitudes regarding development of good eating habits, safety, and nutrition recommendations

*Values Enhanced Nutrition Assessment in WIC | Appendix 2 | 37

Table A3-6. Health Outcome-Based WIC Nutrition Assessment for a Pregnant Woman

Desired health outcome: Delivery of a healthy full-term infant while maintaining the mother's optimal health status.

Nutrition/Health Objective	Examples of Springboard Assessment Question	Examples of Probing Questions
<p>Receiving ongoing health care, including prenatal care.</p>	<p>Are you going to all of your prenatal appointments?</p>	<ul style="list-style-type: none"> Are you having trouble getting a doctor's appointment?
<p>Achieving the recommended weight gain.</p>	<p>How do you feel about your weight gain during this pregnancy?</p>	<ul style="list-style-type: none"> How much weight did your doctor tell you to gain? How much did you gain with your last pregnancy? How often do you go on walks or work out?
<p>Remain free from nutrition-related illness or complications.</p>	<p>Tell me about any concerns or problems you are having with this pregnancy. Do you have any medical conditions?</p>	<ul style="list-style-type: none"> Do you take any medications? Are you on a special diet? Do you receive treatments for any medical condition?
<p>Avoid alcohol, tobacco, and drugs.</p>	<p>Is there anything you feel you should do less of in order to have a healthy pregnancy?</p>	<ul style="list-style-type: none"> Do you use nicotine products? Do you drink alcohol? Does anyone living with you use nicotine products?

†Values Enhanced Nutrition Assessment in WIC | Appendix 2 | 37

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Appendix 5 of the VENA Guidance provides examples of springboard & probing questions!

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Appendix 3 of the VENA Guidance provides information on WIC nutrition risks as they related to the health objectives

Appendix 3. Crosswalk of Health Objectives and WIC Nutrition Risks

The purpose of this appendix is to list the WIC nutrition risks that correspond to the health objectives within the framework of a health outcome-based assessment.

Health Objective	WIC Nutrition Risk		
Consume a diet to meet energy and nutrient requirements and remain free from foodborne illnesses	<ul style="list-style-type: none"> Failure to Meet Dietary Guidelines for Americans Inappropriate Nutrition Practices for Women <ul style="list-style-type: none"> Consuming a diet low in calories and/or essential nutrients or reported risks: inadequate energy and nutrient intake Consumption of potentially contaminated foods Pregnant women ingesting foods that could be contaminated with pathogenic microorganisms 		
Receive ongoing preventative health care including prenatal care	<ul style="list-style-type: none"> Lack of Appropriate Prenatal Care 		
Achieve a recommended maternal weight gain	<ul style="list-style-type: none"> Underweight (BMI<20) Overweight (BMI>30) Low Maternal Weight Gain High Maternal Weight Gain 		
Remain free from nutrition-related illness or complication	<table border="0"> <tr> <td> <ul style="list-style-type: none"> Low Hemoglobin and Hematocrit Elevated Blood Lead Levels Systemic Conditions Gestational Diabetes History of Diabetes History of Pre-eclampsia/Eclampsia History of Preterm or Early Term Delivery History of Low Birth Weight History of Spontaneous Abortion, Fetal or Neonatal Loss Pregnancy at Young Age Short Interpregnancy Interval Mitral Valve Disease Preval Growth Restrictions History of Birth Defects or Gestational Age-Related Problems History of Birth with Nutrition-Related Complication (e.g., SGA, LGA) Maternal Defeating Diseases Genes/Hereditary Disorders Thyroid Disorders </td> <td> <ul style="list-style-type: none"> Prehypertension and Hypertension Stroke Disease Cancer Central Nervous System Disorders Genetic and Congenital Disorders Ischemic Heart Disease (MI and CHD) Diabetes Color Blindness Stroke Lactose Intolerance Hypoglycemia Food Allergies/Intolerances Seizure Disorders Heart Murmur/Surgery/Physical Trauma, Burns Chronic Kidney Conditions Obesity Chronic Medical Conditions Obesity History of Injury History of Injury to Ear Child Health Conditions Fetal Alcohol Spectrum Disorder </td> </tr> </table>	<ul style="list-style-type: none"> Low Hemoglobin and Hematocrit Elevated Blood Lead Levels Systemic Conditions Gestational Diabetes History of Diabetes History of Pre-eclampsia/Eclampsia History of Preterm or Early Term Delivery History of Low Birth Weight History of Spontaneous Abortion, Fetal or Neonatal Loss Pregnancy at Young Age Short Interpregnancy Interval Mitral Valve Disease Preval Growth Restrictions History of Birth Defects or Gestational Age-Related Problems History of Birth with Nutrition-Related Complication (e.g., SGA, LGA) Maternal Defeating Diseases Genes/Hereditary Disorders Thyroid Disorders 	<ul style="list-style-type: none"> Prehypertension and Hypertension Stroke Disease Cancer Central Nervous System Disorders Genetic and Congenital Disorders Ischemic Heart Disease (MI and CHD) Diabetes Color Blindness Stroke Lactose Intolerance Hypoglycemia Food Allergies/Intolerances Seizure Disorders Heart Murmur/Surgery/Physical Trauma, Burns Chronic Kidney Conditions Obesity Chronic Medical Conditions Obesity History of Injury History of Injury to Ear Child Health Conditions Fetal Alcohol Spectrum Disorder
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†Values Enhanced Nutrition Assessment in WIC | Appendix 3 | 39

LET'S REVIEW

- Appendix 2 (pg 48) Health Outcome-Based Assessment by Category
- Appendix 3 (pg 59) Crosswalk of Health Objectives and WIC Nutrition Risks
- Appendix 5 (pg 73) Sample Springboard Assessment Questions and Probing Questions for Nutrition/Health Objectives

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Reflecting on the WIC assessment process:

- What do you do well?
- Where could you improve?

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GUIDE NUTRITION SERVICES

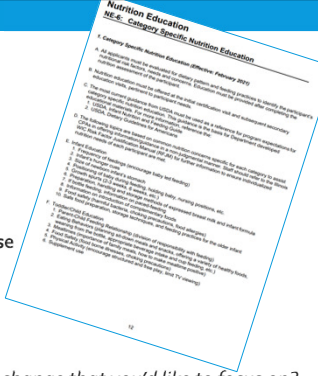
- **Prioritize Counseling**
Limit nutrition messages so participants do not feel overwhelmed
- **Accuracy of Information Sharing**
Ensure what is shared is appropriate and actionable
- **Individualized Services**
Messages, referrals, food package
- **Efficient Use of Time**
Focus on the most important issues

Nutrition/Health Objective	Example of a Participant Goal	Example of Action Step
Consume a variety of foods to meet energy and nutrient requirements and remain free from foodborne illness.	• Bring a homemade lunch and healthy snacks, including fruits and/or vegetables, to work instead of eating fast food.	• Prepare lunch and snacks the night before work.
Receive ongoing health care, as appropriate.	• Find a medical and dental home for child.	• Make an appointment with a health care provider. • Contact one of the pediatric dentists on the WIC referral list.
Achieve appropriate weight for life stage.	• Increase physical activity. • Decrease sugar intake.	• Take a walk four times per week. • Limit juice offered to a child to 4 ounces or less per day.
Remain free from nutrition-related illness or complications.	• Manage hyperemesis gravidarum to reduce nausea.	• Put crackers or dry cereal by bed to eat before getting up in the morning.
Avoid alcohol, tobacco, and drugs.	• Reduce the number of cigarettes smoked per day.	• Contact a smoking cessation helpline for additional information and support.
Breastfeed successfully for as long as desired.	• Exclusively breastfeed infant for 6 months.	• Create a plan for breastfeeding support after delivery. • Attend breastfeeding class next month.
Receive proper environmental and family support to thrive.	• Feel like healthy behaviors are supported by family members.	• Enroll in a free parenting class at a local health center. • Ask a partner to read the breastfeeding handout.

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BRINGING IT ALL TOGETHER

- Summarize what you've heard
- **Use your Participant Centered Counseling tools:**
 - Circle charts
 - Scaling
- Offer a menu of choices and allow the participant to choose what's most important to them
- Ask permission before sharing information / providing education
- Invite the participant to set a goal for change
 - *Out of all the information we've covered, is there one change that you'd like to focus on?*
 - *Why is this change important to you?*
 - *What ideas do you have for making that change?*



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NEED MORE COUNSELING TIPS?



Check out Dawn Clifford's *MI Tips* on YouTube!
<https://bit.ly/3v8qQVU>

USDA MI Trainings & Resources on WIC Works
<https://bit.ly/3PYBlTc>

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DOCUMENT ASSESSMENT

Ensures the continuity of care

NPS Documenting in WIC MIS

- General Guidance
- I-WIC Notes
- SAP Format
- Approved abbreviations list
- Documenting Secondary Education Contacts
- Breastfeeding Peer Counselor Documentation and Notes

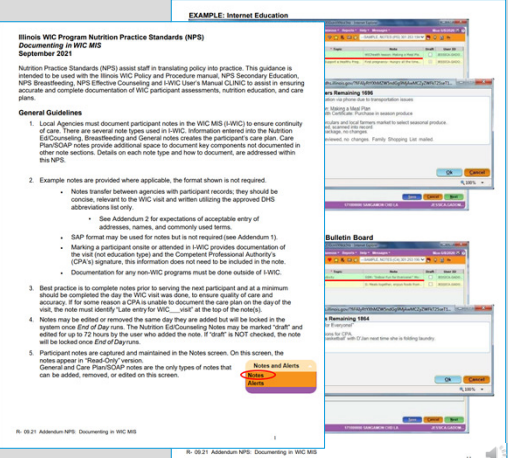
EXAMPLE: Internet Education

Illinois WIC Program Nutrition Practice Standards (NPS) Documenting in WIC MIS September 2021

Nutrition Practice Standards (NPS) assist staff in translating policy into practice. This guidance is intended to be used with the Illinois WIC Policy and Procedure manual, NPS Secondary Education, NPS Breastfeeding, NPS Effective Counseling and I-WIC User's Manual. C/WHC is assist in ensuring accurate and complete documentation of WIC participant assessments, nutrition education, and care plans.


General Guidelines

- Local Agencies must document participant notes in the WIC MIS (i-WIC) to ensure continuity of care. There are several note types used in i-WIC: information entered into the Nutrition Education, Breastfeeding and General notes creates the participant's care plan. Care Plan/SAP notes provide additional space to document key components and documented in other note sections. Details on each note type and how to document, are addressed within this NPS.
- Example notes are provided where applicable, the format shown is not required.
 - Notes transfer between agencies with participant records; they should be concise, relevant to the WIC visit and written utilizing the approved DHS abbreviations list only.
 - See Addendum 2 for expectations of acceptable entry of addresses, names, and commonly used terms.
 - SAP format may be used for notes but is not required (see Addendum 1).
 - Making a participant unable to attend in i-WIC provides documentation of the visit (not education type) and the Competent Professional Authority's (CPA) signature; this information does not need to be included in the note.
 - Documentation for any non-WIC programs must be done outside of i-WIC.
- Best practice is to complete notes prior to serving the next participant and at a minimum should be completed the day the WIC visit ends. To ensure quality of care and accuracy, if for some reason a CPA is unable to document the care plan on the day of the visit, the note must identify "late entry for WIC..." at the top of the note(s).
- Notes may be edited or removed the same day they are added but will be locked in the system once End of Day runs. The Nutrition Education notes may be marked "draft" and edited for up to 72 hours by the user who added the note. If "draft" is NOT checked, the note will be locked once End of Day runs.
- Participant notes are captured and maintained in the Notes screen. On this screen, the notes appear in "Read-Only" version. General and Care Plan/SAP notes are the only types of notes that can be added, removed, or edited on this screen.




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CONDUCT FOLLOW-UP




Assessment process is on-going



Previous documentation creates the foundation for subsequent WIC visits



Focus on what has changed since the previous visit:
Checking on status of a prior referral
 Assessing progress towards goal(s)



Work with the participant to set new goal(s) or address any challenges

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Assessment

- 1 Set the Agenda
- 2 Collect Relevant Information
- 3 Clarify and Synthesize
- 4 Guide Nutrition Services
- 5 Document Assessment
- 6 Conduct Follow-Up

WHAT YOU'VE LEARNED IN THIS TRAINING...

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TRUE

FALSE

KNOWLEDGE CHECK

Participant-centered is a systems approach designed to focus on topics and issues that are relevant to the participant- focusing on their capacities, strengths and developmental needs- not solely on the problems, risks, or negative behaviors

23

TRUE

FALSE

KNOWLEDGE CHECK

Setting the agenda of the visit with the participant, helps them understand what to expect during the visit, reducing anxiety, increasing respect and allowing the formation of a partnership

24



TRUE
— OR —
FALSE

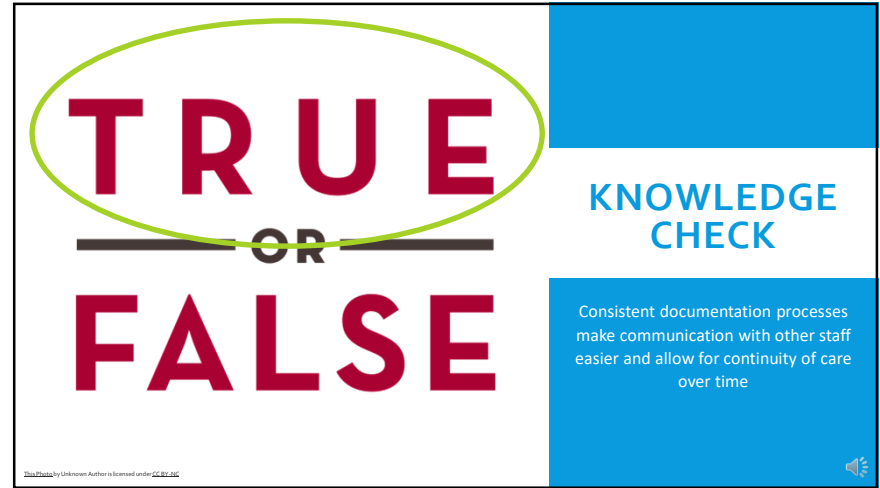
KNOWLEDGE CHECK

If a participant has a question during the assessment, the CPA must wait and answer it at the very end, when the entire assessment is complete

This image by Unknown Author is licensed under CC BY-NC

A slide for a knowledge check. The words 'TRUE' and 'FALSE' are in large red font, separated by 'OR' in black. 'FALSE' is circled in green. The right side has a blue background with the text 'KNOWLEDGE CHECK' and a paragraph of text.

25



TRUE
— OR —
FALSE

KNOWLEDGE CHECK

Consistent documentation processes make communication with other staff easier and allow for continuity of care over time

This image by Unknown Author is licensed under CC BY-NC

A slide for a knowledge check. The words 'TRUE' and 'FALSE' are in large red font, separated by 'OR' in black. 'TRUE' is circled in green. The right side has a blue background with the text 'KNOWLEDGE CHECK' and a paragraph of text.

26



TRUE
— OR —
FALSE

KNOWLEDGE CHECK

Less is more when setting participant goals?

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A slide for a knowledge check. The words 'TRUE' and 'FALSE' are in large red font, separated by 'OR' in black. 'TRUE' is circled in green. The right side has a blue background with the text 'KNOWLEDGE CHECK' and a question.

27



THANK YOU!

WE HOPE YOU ENJOYED THIS TRAINING

A slide with a blue background. On the left, there is a graphic of three blue silhouettes of people sitting at a table under a white canopy. The text 'THANK YOU!' is in green. On the right, the text 'WE HOPE YOU ENJOYED THIS TRAINING' is in white on a blue background.

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<p>Congratulations!</p> <p>You have successfully completed VENA training</p> <p>This certificate is awarded to:</p> <hr/> <p>Completed on</p> <hr/> 	<p>VALUE ENHANCED NUTRITION ASSESSMENT (VENA) & WIC TRAINING</p>
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