

WIC Assessment Guide: Pregnant (PG)

This guidance was designed to support CPAs in using a participant-centered (PC) approach during the category specific WIC Assessment. It reviews the screens in I-WIC to assist staff in understanding that some questions collect specific data, while others should be asked in a way that engages the participant/family in conversation, rather than reading each question verbatim off the screen. Before asking questions, consider if the participant has already provided the answer – confirm and probe as needed.

Setting the Stage and Explaining the WIC Visit

- Establish rapport and individualize the visit to the participant/family (address by name, if appropriate; ask about past experiences/knowledge/cultural practices, etc.)
- Explain what to expect during the WIC visit, how long the visit should take and why information is collected. Refer to *Welcome to WIC: WIC Program Explanation to Participants*.
 - **“Thank you for coming to WIC Today! This visit will take about (__ minutes). Throughout your time in WIC, we will ask questions and gather information to get a better understanding of your overall nutrition practices and lifestyle. We will begin with a nutrition assessment, which includes: collecting measurements, checking the iron in your blood and discussing your eating and physical activity habits. Afterwards, we can talk about some ideas for you to have a healthy pregnancy and the baby to grow healthy, how to use the WIC foods and if there are any resources that may benefit you or your family in the community. How does that sound to you?”**
- Possible starters to continue the conversation:
 - **“Tell me how you are feeling about your pregnancy and what WIC can help you with today?”**
 - **“What have you noticed or what has changed for you, since you found out you were pregnant?”**

At the Cert Action screen, a pop-up box will appear asking if the participant is pregnant- the CPA must select ‘ok’ to continue the pregnancy certification and complete the required fields on the screen (ADD and EDD).

I-WIC Lab screen – Pregnant Woman

- Add anthropometric, prenatal and bloodwork data, per system and policy requirements.
WIC allows a verbal response for: lead and pre-pregnancy weight, or if still within the first trimester, may use weight collected at the time of the WIC visit– all other measurements must be taken by the WIC clinic or from referral data per Policy requirements.

Prenatal Chart button:

Review Prenatal Weight Gain chart and recommended weight gain for a participant’s pre-pregnancy weight status. I-WIC has a ‘letter code’ for pre-pregnancy BMI status:

- A: Underweight (Pre-pregnancy BMI less than 18.5) 28-40 pounds
- B: Normal (Pre-pregnancy BMI 18.5 – 24.9) 25-35 pounds
- C: Overweight (Pre-pregnancy BMI greater than or equal to 25) 15-25 pounds
- D: Obese (Pre-pregnancy BMI greater than or equal to 30) 11-20 pounds

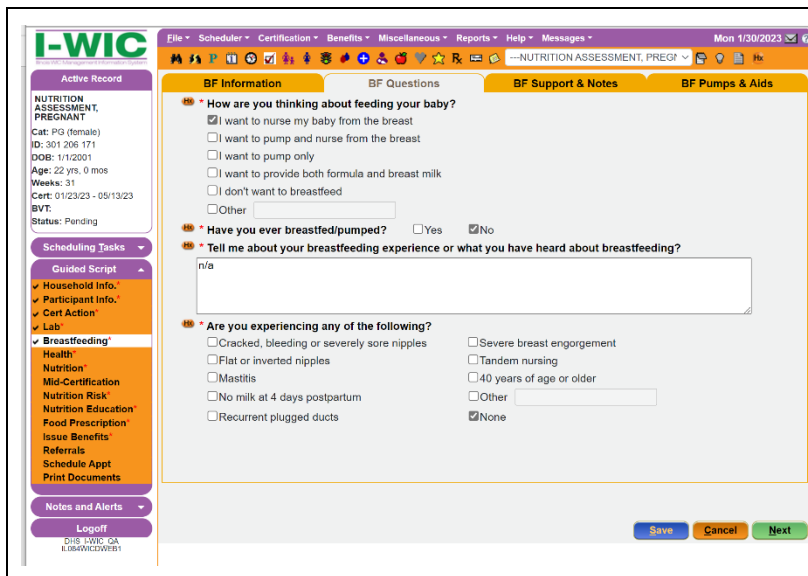
Ask the participant to share, while reviewing the chart:

- “What have you heard about or experienced (with past pregnancies) regarding weight gain for a healthy pregnancy?”
- “How do you feel about weight changes during pregnancy?”

I-WIC Breastfeeding – Pregnant Woman (4 tabs)

BF Information Tab:

Pregnancy certification (new applicant), questions do not apply and fields are disabled.



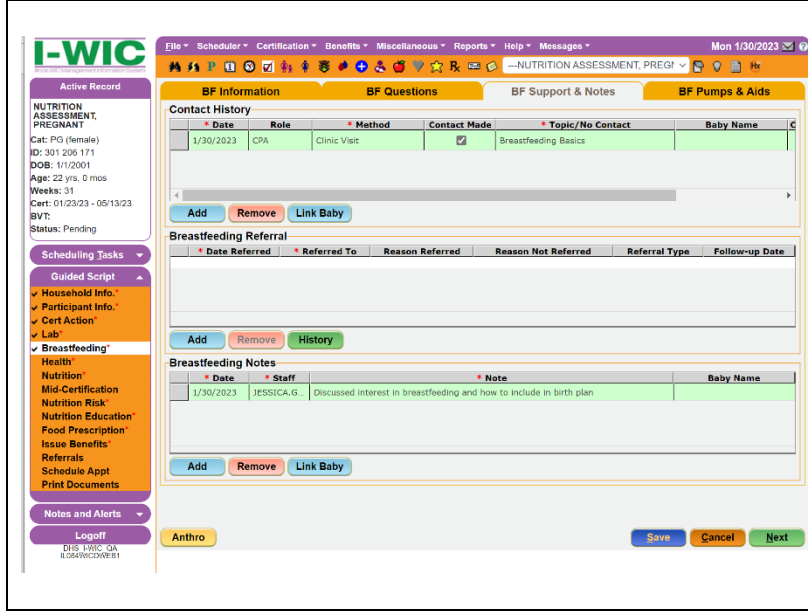
BF Questions

Complete questions, last question: **“Are you experiencing any of the following?”**

If pregnant and not currently breastfeeding, select “None”.

If pregnant and also currently breastfeeding an infant/child, review with participant and answer the question appropriately.

If pregnant and currently breastfeeding another infant, select “currently breastfeeding” from health screen question #5. This will ensure the participant receives the “Pregnant and fully/mostly Breastfeeding” food package.

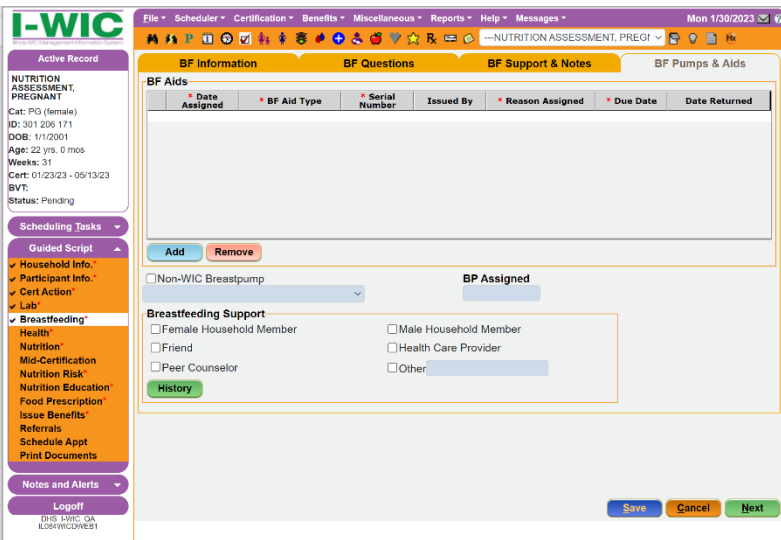


BF Support & Notes Tab:

Document any breastfeeding contacts, referrals and notes, if/where applicable during the pregnancy.

Breastfeeding Contacts: Refer to *NPS: Breastfeeding Addendum 1* for recommended breastfeeding contact schedule.

Documentation: Refer to *NPS: Documenting in WIC MIS* for guidance.

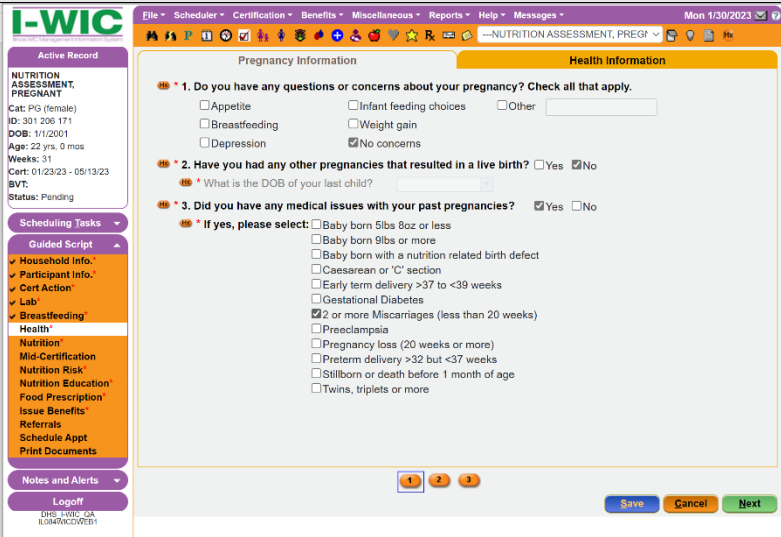


BF Pumps & Aids Tab:

Not applicable during pregnancy.

Note – breast pumps should not be issued until after the infant is born to ensure proper education is provided.

I-WIC Health screen – Pregnant Woman (Pregnancy Information Tab: 3 pages)



Before beginning assessment, open with a broad question to gather permission before proceeding.

- **“If it is alright with you, I would like to start by asking about your most recent and any past pregnancies?”**

Question #1 & #2: Complete using participant centered skills to ask, probe, and reflect to assist in collecting relevant information.

- **“Do you mind sharing what questions or concerns you have related to your pregnancy, including items like: your appetite, breastfeeding, infant feeding choices, weight gain, your emotional well-being or depression, or if there are any other questions or concerns you have?”**

Question #3: You may ask additional open ended questions to allow the participant to share and have a conversation about her past pregnancy experience

- **“Tell me about your past pregnancies, any medical concerns for you or baby? (miscarriage or loss)”**
 - **“Were your deliveries full term or preterm?”**
 - **“How did you deliver in the past (C-section)?”**

I-WIC File Scheduler Certification Benefits Miscellaneous Reports Help Messages Mon 1/30/2023

Active Record

NUTRITION ASSESSMENT, PREGNANT
 Cat: PG (female)
 ID: 301 206 171
 DOB: 1/1/2001
 Age: 22 yrs, 0 mos
 Weeks: 31
 Cert: 01/23/23 - 05/13/23
 BVT:
 Status: Pending

Scheduling Tasks

Guided Script

- Household Info.
- Participant Info.
- Cert Action
- Lab
- Breastfeeding
- Health*
- Nutrition
- Mid-Certification
- Nutrition Risk
- Nutrition Education*
- Food Prescription*
- Issue Benefits*
- Referrals
- Schedule Appt
- Print Documents

Notes and Alerts

Logoff
 DIB SWIC CA
 L08WACDVEB

Pregnancy Information

Health Information

4. Do you regularly take any of the following medications? Yes No
 * If yes, please select: Anticoag
 Blood Formation/Coagulation Hormones: Growth, Steroid, Other
 Cardio/Blood Pressure/Lipid Insulin/Antidiabetic
 Digestive Enzymes Thyroid/Antithyroid
 Diuretic

5. Do you or your health care provider have any special concerns about your pregnancy? Yes No
 * If yes, please select: Currently breastfeeding Preeclampsia
 Excessive weight gain Twins, triplets or more
 Fetal Growth Restriction Weight loss while pregnant
 Gestational Diabetes
 Hyperemesis gravidarum

1 2 3 Save Cancel Next

Question #4:

- **“Are you regularly taking any medications?**
 - If on medications; **“Tell me more about what it is for, and how long you will be on this?”**

Question #5:

- **“With this pregnancy, has your doctor’s office shared any concerns; such as with your weight gain, blood pressure or mentioned gestational diabetes?”**
 - **“What did your doctor share about how to manage this condition?”**

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Logoff
 DIB SWIC CA
 L08WACDVEB

Pregnancy Information

Health Information

6. Do you use any nicotine or tobacco products including, cigarettes, pipes, cigars, e-cigarettes, vape, hookahs, chewing tobacco, or tobacco replacement therapies (gums, patches).
 Yes No

7. Are you ever in an enclosed area while someone is using tobacco products?
 Yes No

8. Drink alcohol? Yes No

9. Use marijuana in any form? Yes No

10. Misuse prescription medication? Yes No

11. Use other illegal substances? Yes No

1 2 3 Save Cancel Next

Questions #6 - #11: solicit information related to tobacco, alcohol and substance use.

These are all data collection/closed-ended questions. Sharing with the participant that you will be asking this prior to asking may create a more receptive and open environment to sharing current habits, such as:

- **“This last series of pregnancy questions are about the use of any tobacco, alcohol, or other substances, they are mainly a yes/no or numbered response. Please know your responses are confidential and we ask them to all adult participants for WIC program data, as well as the opportunity to share any education or referrals that we may be able to provide you and your family.”**

I-WIC Health screen – Pregnant Woman (Health Information Tab: 1 page)

The screenshot shows the IWIC software interface for a pregnant assessment. The main window displays the 'Pregnancy Information' form with the following questions and options:

- 1. Do you have any health or medical issues?** Yes No
- 2. Do you have any food related allergies?** Yes No
 - If yes, please select:
 - Milk (Lactose Intolerant)
 - Egg
 - Soy
 - Fish
 - Tree nuts
 - Milk (Allergy)
 - Peanut
 - Wheat
 - Shellfish
 - Other
- 3. Do you have access to dental care?** Yes No
- 4. Do you have any dental problems?** Yes No
 - If yes, please select:
 - Gingivitis
 - Oral Condition which Impairs Eating (tooth loss/ineffectively replaced teeth/oral infections)
 - Periodontal Disease
 - Tooth Decay
- 5. Do you take any of the following?**
 - Prenatal Vitamins:** Yes No (If yes) #/week Excessive? Yes No
 - Vitamins/Minerals:** Yes No (If yes) #/week Excessive? Yes No
 - Herbs, Supplements or Remedies:** Yes No
- 6. Are you regularly eating any non-food items?** Yes No
 - If yes, please select:
 - Ashes
 - Clay
 - Baby powder
 - Cornstarch
 - Baking soda
 - Dirt
 - Large amounts of ice
 - Other

The sidebar on the left contains navigation options: Active Record, NUTRITION ASSESSMENT, PREGNANT, Household Info., Participant Info., Cert Action, Lab, Breastfeeding, Health, Nutrition, Mid-Certification, Nutrition Risk, Nutrition Education, Food Prescription, Issue Benefits, Referrals, Schedule Appt, Print Documents, Notes and Alerts, and Logoff.

Question #1: Consider if this may have been answered when asking questions from the Pregnancy Information tab- *confirm and probe, as needed*

- **“What health or medical issues are you and your doctor monitoring?”**
- **“You mentioned you have ___(medical condition); are there any other medical issues, recent trauma, or health concerns that you would like to share?”**

Question #2:

- **“How about any food allergies or intolerances?”**
If confirmed food allergy or intolerance- modify food benefits prior to issuing.

Question #3 - #4:

- **“Do you have access to dental care?”** *Possible referral.*
- **“Any current dental problems, impacting your ability to eat and drink?”**

Question #5:

- **“Of the following supplements, what are you taking, and how often; Prenatal, vitamin, minerals or any herbs?”** *Probe to determine if “excessive”.*
 - **“How about any home remedies for anything?”**

Question #6:

- **“Some people may crave and eat non-food items, like cornstarch or excessive amounts of ice or frost, which may be related to a nutrient deficiency; currently, are you eating any non-food items like these?”**

I-WIC Nutrition screen – Pregnant Woman (3 pages)

I-WIC
 NUTRITION ASSESSMENT, PREGNANT
 Cat: PG (female)
 ID: 301 200 171
 DOB: 1/12/2001
 Age: 22 yrs, 0 mos
 Weeks: 31
 Cert: 01/23/23 - 05/13/23
 BVT:
 Status: Pending

1. How do you feel about your appetite? fine

2. What milk do you drink most often?
 Fat-free/skim cow's or lactose free
 Reduced fat/2% cow's or lactose free
 Formula
 Homemade mixtures/non-dairy creamer
 Rice beverages
 Soy beverage (unfortified)
 Other

3. Do you regularly drink any of the following?
 Beer, wine or drinks with alcohol
 100% fruit juice
 Other

4. Do you eat these foods every day?
 Fruit
 Vegetables
 Whole grains

Save Cancel Next

Question #1:

- “Since you have been pregnant, how do you feel about your appetite?”

Question #2 - #3:

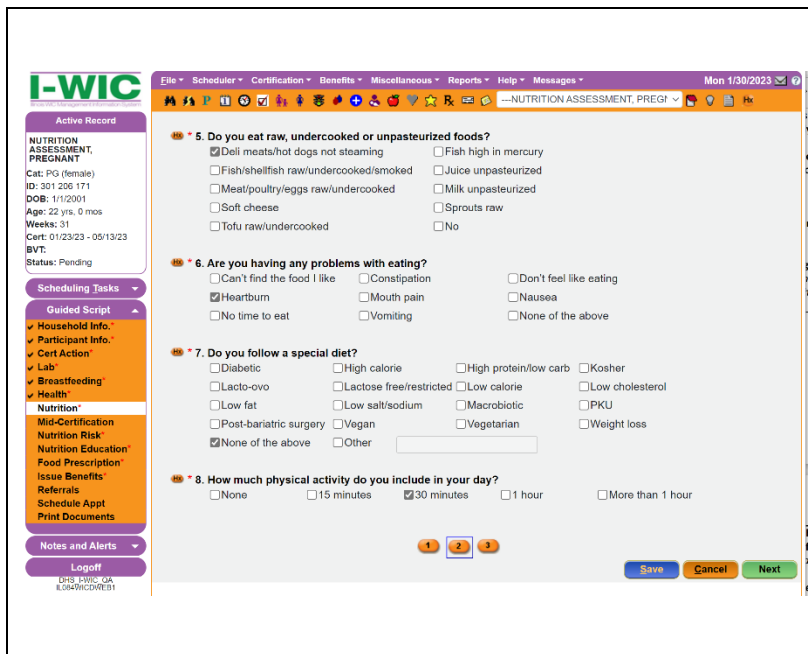
- “Let’s first talk about what you like to drink; what kind of milk do you drink most often?”
 - “In addition to milk, what else do you drink regularly?” *Provide choices.*

Question #4: *Prior to asking, the CPA may ask open-ended questions to inquire about eating habits or start by asking the question, then probe further about other eating habits. Asking about eating habits in general, can assist in identifying individualized counseling/education needs related to diet and nutrition.*

- “Since becoming pregnant, what do you feel is most important when it comes to what you drink? Now let’s talk about mealtimes and what you like to eat.”
 - “What times of the day do you usually eat? Would you say you eat at regular mealtimes and is it with anyone else (family)?”
 - “Give me an idea of some of the foods you are eating?”
 - “Would you say yes or no that you eat the following every day: Fruits? Vegetables? Whole grains?”

Affirm or reflect on responses to ensure understanding and offer praise

- “It sounds like you are making nutritious choices for yourself!”
- “You sound like you are struggling with _____” *any issue identified/concerned about since you became pregnant.*
- “You would like to be better about _____” *desired habit identified that the participant would like to change (reflected change talk)*



Question #5:

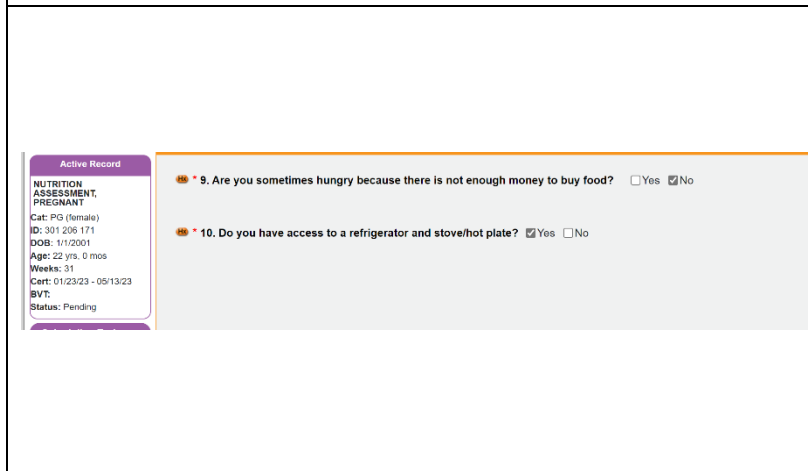
- **“Some foods are at risk for hidden bacteria that can be harmful to you, specially while you are pregnant. May I ask if you eat any of these foods?” ask from foods listed, may also show Food Safety Desktop tool: “Foods with Hidden Bacteria” for visual**

Question #6 - #7:

- **“Share with me, are you following a special diet or having any problems when eating, like heart burn, maybe not feeling like eating or no time to eat?”**

Question #8:

- **“What would you say describes your daily physical activity right now; none, 15 or 30 minutes, 1 hour or more than an hour every day? This might include things like walking, swimming, riding a stationary bike, or yoga”**



Question #9:

- **“WIC has community food resources that we can share with you if needed, would you say there are times when you are hungry and you just don’t have the money to buy food?”**

Question #10:

- **“In order to help me determine which WIC foods to offer you, do you currently have access to refrigeration and a stove or hot plate for cooking?”**

Now is a good time for the CPA to Reflect and/or Summarize; highlighting any key points from the assessment.

I-WIC Nutrition Risk screen – Pregnant Woman

Cert Start Date	Date	Detailed Description	Staff	Source	Note
1/23/2023	1/30/2023	427.04[4] - Inadequate Essential...	JESSICA.G.	SYSTEM	
1/23/2023	1/30/2023	427.05[4] - Ingesting Foods with...	JESSICA.G.	SYSTEM	
1/23/2023	1/30/2023	904[1] - Environmental Tobacco ...	JESSICA.G.	SYSTEM	

The Nutrition Risk screen is for a CPA to review following the assessment to:

1. Confirm all risks generated/appropriately assigned
 - a. If any risks listed should not have been generated, select the row with the risk and click the 'Reason' button to display a pop-up box showing the screen/question that generated the risk. The CPA can go back and correct, if needed
 - b. Click 'Risk Help' button to open/view the Illinois I-WIC Nutrition Risk Criteria document, as needed
2. Add a manual risk, if applicable:
 - a. 131 Low Maternal Weight Gain
 - b. 133 High Maternal Weight Gain
 - c. 334 Lack of Adequate Prenatal Care
 - d. 903 Foster Care – If Pregnant participant is in foster care, transitioned into foster care or moved from one foster care home to another in the past 6 months
3. If no risks generated from the assessment for a Pregnant Woman, the Presumptive Eligibility risk will assign:
 - a. 401 Failure to meet Dietary Guidelines

If participant is high risk (red heart), refer to IWIC Appointment Types for follow-up.

If a manual risk must be added, the Presumptive risk will stay on the screen, it cannot be removed.

CPA will continue following the I-WIC "Guided Script" for the remaining screens needed to complete the certification

Upon completing the assessment, the CPA should summarize key points from the assessment to highlight any 'change talk,' concerns shared by the parent/caregiver and/or any behavior change opportunities identified as the visit moves into education.

Refer to *Welcome to WIC: WIC Program Explanation to Participants*.