# Attachment: Certification and nutrition education checklists

## **Applicant Prescreening**

Observation	(x)	Comments/Questions
Screened for eligibility		
Collected basic participant info		
Scheduled appointment		
Informed what to bring to appointment		
Participant not eligible		

# **Certification – Pregnant Woman**

Observation	(x)	Comments/Questions
Check-in at front desk		
Collected basic participant info		
Proof of income, residency and ID		
Rights and Responsibilities		
Participant Signature Form		
Offered voter registration		
Height and weight		
Blood test		
Health history		
Diet information		
Nutrition education		
Next steps		
Risk factors		
Food package assignment		
Scheduled for quarterly nutrition education		
Referrals given		
Health outcome summary statement		
Food benefits and food list issued and instructed on use		
eWIC card issued and instructed on use		

# **Certification – Breastfeeding Woman**

Observation	(x)	Comments/Questions
Check-in at front desk		
Collected basic participant info		
Proof of income, residency and ID		
Rights and Responsibilities		
Participant Signature Form		
Offered voter registration		
Height and weight		
Blood test		
Health history		
Diet information		
Nutrition education		
Next steps		
Risk factors		
Food package assignment		
Scheduled for quarterly nutrition education		
Referrals given		
Health outcome summary statement		
Food benefits and food list issued and instructed on use		
eWIC card issued and instructed on use		

## **Certification – Infant**

Observation	(x)	Comments/Questions
Check-in at front desk		
Collected basic participant info		
Proof of income, residency and ID		
Rights and Responsibilities		
Participant Signature Form		
Height and weight		
Health history		
Diet information		
Nutrition education		
Next steps		
Risk factors		
Food package assignment		
Scheduled for quarterly nutrition		
education		
Referrals given		
Health outcome summary statement		
Food benefits and food list issued and		
instructed on use		
eWIC card issued and instructed on use		

#### **Certification - Child**

Observation	(x)	Comments/Questions
Check-in at front desk		
Collected basic participant info		
Proof of income, residency and ID		
Rights and Responsibilities		
Participant Signature Form		
Height and weight		
Blood test		
Immunizations reviewed		
Health history		
Diet information		
Nutrition education		
Next steps		
Risk factors		
Food package assignment		
Scheduled for quarterly nutrition education		
Referrals given		
Health outcome summary statement		
Food benefits and food list issued and instructed on use		
eWIC card issued and instructed on use		

#### **Recertification - Child**

Observation	(x)	Comments/Questions
Check-in at front desk		
Updated basic participant info		
Proof of income, residency and ID		
Rights and Responsibilities		
Participant Signature Form		
Height and weight		
Blood test		
Immunizations reviewed		
Health history		
Diet information		
Nutrition education		
Next steps		
Risk factors		
Food package assignment		
Scheduled for quarterly nutrition education		
Referrals given		
Health outcome summary statement		
Food benefits and food list issued and instructed on use		
eWIC card issued (if needed)		

#### **Individual Follow-Up (Nutrition Education)**

Observation	(x)	Comments/Questions
Check-in at front desk		
Updated participant information		
Nutrition education provided		
Food benefits issued		
Documentation in data system		

#### **Group Education (Nutrition Education)**

Observation	(x)	Comments/Questions
Check-in at front desk		
Nutrition education provided		
Food benefits issued		
Documentation in data system		

## **Breastfeeding Group for Pregnant Women** (Nutrition Education)

Observation	(x)	Comments/Questions
Check-in at front desk		
Breastfeeding education provided		
Food benefits issued		
Documentation in data system		