

Oregon WIC Training Dietary Risk Module



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Instructions for Training Supervisor

Overview

Welcome to the *Training Supervisor's Guide* for the *Dietary Risk Module*! In addition to this guide, you will also need a copy of the student's version of the *Dietary Risk Module*.

Training Supervisor's role

Your role as the Training Supervisor is to oversee the staff members at your local agency and/or clinic who are completing the *Dietary Risk Module*. You will:

1. Help students start and complete the *Dietary Risk Module*.
2. Be available to answer questions about the module. Help the student find the answers within the module or in other reference books.
3. Meet with the students to review and evaluate progress and administer the *Posttest*.
4. Observe student during *Practice Activities* and *Skill Checks*.
5. Document the student's competency achievement and module completion.

Dietary risk competencies

Upon completion of the *Dietary Risk Module*, WIC staff will achieve the following competencies:

1. CPA will correctly interpret and compare feeding behaviors of WIC participants to federal risk definitions.
2. CPA will use diet assessment information to determine eligibility, select appropriate food packages, provide appropriate nutrition education, and make appropriate referrals.
3. CPA will perform individualized diet assessments for WIC participants.
4. CPA will use diet assessment techniques that consider the varied needs of age-specific populations.
5. CPA will obtain timely and relevant assessment data from current and previous WIC visits, dietary, family and social environment information.
6. CPA will use TWIST according to State agency policies.
7. CPA will assign dietary risks correctly.
8. CPA will document dietary risks correctly.

To do before training

1. Read the *Dietary Risk Module*.
2. Know the following information that will be specific to your local agency and/or clinic.
 - ◆ The location of the *Items Needed* (section S-4 in “Starting the Module”).
 - ◆ Your agency’s documentation procedure, including location.
 - ◆ The names of agency staff to whom participants may be referred.

3. Have a location available where students can access the practice database in TWIST.
 - ◆ They will need to use TWIST to practice the case studies, which can be found in the section entitled “*Case Studies*,” located in the module after the *Job Aids*.
 - ◆ Staff new to TWIST may need a co-worker who is experienced with TWIST to work on the case studies with them.
 - ◆ To help them access the practice database, see the Practice Database lesson in the TWIST Training Manual (Chapter 6, lesson 600).
 - ◆ Assign each staff person a different middle initial to use in the case study names.
4. Make a copy of the *Competency Achievement Checklist* on pages 41-42 of the Training Supervisor's Guide.

When to meet with the student

Before the Student Begins the Module

1. Make a training plan for the student. Module chapters may be completed in the order presented, and upon completion the student would be able to assess the diets of all WIC participants. An alternate training plan would be to have students complete Chapter 1, the chapter covering the dietary risks for a specific category of participant, and Chapter 5. After completing those three chapters, students would be able to assess the diets for that participant category. For example, in order to perform a diet assessment for women, the student would need to complete chapters 1, 2, and 5. Students would be able to assess diets for other categories of participants after completing the chapters that cover the dietary risks for that specific category.
2. Develop a timeline using the *Steps for Completing the Module* (see Section S-3 in “Starting the Module”).

3. Show the student where to find the *Items Needed* to complete the module (see Section S-4 in “Starting the Module”).
4. Show the student how to locate and use the *Risk Info Sheets* and the *Job Aids* for each participant category.

After the Student Completes Each Chapter

1. Review *Practice Activities* and *Skill Checks* from the lessons in the chapter just completed.
2. Complete the *Review Activity* with the student. This discussion will help you determine if the student is confident with the material covered in that chapter and if any further review is necessary.
3. Role-play participant interaction scenarios with the student.
4. Document completion of Review Activities on a copy of the *Competency Achievement Checklist*.

When the Student has completed the Module

1. Review with the student the *Steps for Completing the Module* (see Section S-3 in “Starting the Module”).
2. Ask the student to complete the *Posttest*. The *Posttest* is an open book exercise. Have the student use the module to help find the answers.
3. Check the *Posttest* for correct answers (see page 28).
4. Discuss incorrect answers.
5. If the score is 89% or lower, guide the student on areas to review and reissue the *Posttest* when student is ready.
6. Document completion of the *Posttest* on a copy of the *Competency Achievement Checklist*.

To Finalize Completion of the Module

1. Congratulate the student on their achievement!
2. Give the completed *Competency Achievement Checklist* to the Local Agency Coordinator. The Local Agency Coordinator will file the form and posttests and document into TWIST, according to WIC Policy 440.

3. Collect the student's *Training Module Evaluation* and mail it to the State WIC office (see Policy 440).
4. Follow the procedure in WIC Policy 440 to print a *Module Completion Certificate*.

NOTE

It is estimated that you will spend a total of about **5.75 hours** meeting with the student.

Guidance for review activities

The following pages are copies of the *Review Activities* from the end of each chapter in the *Dietary Risk Module*, along with additional information to help your interaction with the student.

This additional information includes

1. Instructions for completing the *Review Activity* with the student.
2. Answers to *Practice Activities* and *Skill Check* questions for which there is a specific, objective answer.
3. Information on completing the *Practice Activities*, *Skill Checks*, and *Case Studies*.

It is important that staff complete the *Practice Activities*, the *Skill Checks*, and the *Case Studies* in each chapter. *Practice Activities* are designed to ensure that the student has gained the knowledge needed to understand the task or function. *Skill Checks* and *Case Studies* are the practical application of the knowledge. They provide an opportunity for the student to practice performing a function and to demonstrate competence. *Case Studies* make sure the student is able to use the data system to perform the function. The combination of these training activities should ensure that the student is able to pass the *Posttest* and successfully perform the necessary functions in the clinic.

As the Training Supervisor, you may adjust which *Practice Activities* and *Skill Checks* a particular student completes. You may do this based on your understanding of their knowledge, skills and abilities as they relate

to the content and based on your confidence in their ability to pass the *Posttest* at the end of the module.

Information on using the job aids

The *Completing a Diet Assessment* for ___ job aids in the module are designed to help the student learn the steps for completing a diet assessment. They include the diet assessment questions found in TWIST for each category of WIC participant.

NOTE

Answers are not included for all *Practice Activities* and *Skill Checks* because in most cases there is not one right answer to the problem. If a student has a question about a *Practice Activity* or *Skill Check*, or is having problems completing the activities, help them find the solution within the lesson of the module that they just completed, or discuss with them other possible solutions.

Review Activity – Chapter 1

Guidance for Training Supervisor

1. This *Review Activity* requires the Training Supervisor to meet with the student.
2. During the meeting:
 - ◆ Discuss the *Review Activity* questions.
 - ◆ Talk about how the student did on the *Practice Activities* and *Skill Checks* in each of the lessons in Chapter 1.
 - ◆ Review the student's answers to the written *Practice Activities* and *Skill Checks*.
 - ◆ Ask the student if he or she has any questions.
3. Document when the student has met the objectives for Chapter 1 on the *Competency Achievement Checklist*.

WIC policies

675 – Risk Criteria Codes and Descriptions

Practice activity and skill check answers

NOTE

Answers are given only when there is a specific, objective answer. The answer key will state “subjective” if there is not an objective answer.

**Lesson 1-1: Introduction to Dietary Risk
Practice Activity (page 15)**

1. Observe another CPA doing a diet assessment.
 - ◆ Subjective
 - ◆ Subjective
 - ◆ Subjective

2. The number of sub-risks:
 - ◆ 411 = 11
 - ◆ 425 = 9
 - ◆ 427 = 5
 - ◆ 401 = 0 (no sub-risk, only the risk number)
 - ◆ 428 = 0 (no sub-risk, only the risk number)

**Lesson 1-1: Introduction to Dietary Risk
Skill Check (page 16)**

1. What are the 5 steps of a diet assessment?
 - Step ①** Ask the participant about their feeding behaviors.
 - Step ②** Use **probing questions** to find out more information.
 - Step ③** **Assign dietary risks** in TWIST (if appropriate).
 - Step ④** Use **critical thinking** to **review** all information to ensure risks are appropriately assigned.
 - Step ⑤** **Correctly document** in TWIST.

2. What are the 4 groups of nutrition risks?
 - ◆ Anthropometric risks
 - ◆ Biochemical risks
 - ◆ Clinical/health/medical risks
 - ◆ Dietary risks
3. What are the 3 reasons to do a diet assessment?
 - ◆ To collect data
 - ◆ To identify risks
 - ◆ To guide nutrition education
4. How is a dietary risk different than other nutrition risks?
 - ◆ Dietary risks are only a small portion of all of the nutrition risks. Dietary risks are based on the actions and behaviors of the participants, rather than any physical or medical factors.

Lesson 1-2: The CPA's Role
Practice Activity (page 23)

1. Subjective
2. Subjective
3. Subjective

Lesson 1-2: The CPA's Role
Skill Check (page 24)

1. What are the four basic components to critical thinking?
 - ◆ Collect all pertinent information from the participant.
 - ◆ Clarify or gather additional details.
 - ◆ Analyze and evaluate all the information you have collected.
 - ◆ Determine the best course of action.
2. What risk level are dietary risks?
 - ◆ Low

3. In the *Nutrition Risk Module* you learned that risks are either TWIST-selected or CPA-selected. How are dietary risks assigned?
 - ◆ CPA-selected
4. Where are all the places in TWIST that dietary risks can be assigned?
 - ◆ Diet Assessment-Questionnaire tab
 - ◆ Diet Assessment-Risk Factors tab
 - ◆ NE Plan-Risk/Interventions tab
5. What might you document?
 - ◆ Rambo: Risk 425.2 – Document the specific sweetened beverage
 - ◆ Unique: Risk 411.1 – Document the specific substitute offered

Lesson 1-3: Gathering Information from the Participant

Practice Activity (page 30)

1. Which questions are mandatory? The first question on each questionnaire plus the breastfeeding related questions
2. Practice re-writing TWIST questions in your own words.
 - ◆ Subjective
 - ◆ Subjective
 - ◆ Subjective

Lesson 1-3: Gathering Information from the Participant

Practice Activity (page 32)

1. Changing close-ended questions into open-ended questions.
 - ◆ Subjective
 - ◆ Subjective
 - ◆ Subjective
 - ◆ Subjective

**Lesson 1-3: Gathering Information from the Participant
Practice Activity (page 34)**

1. Developing probing questions.
 - ◆ Subjective
2. Developing probing questions.
 - ◆ Subjective

**Lesson 1-3: Gathering Information from the Participant
Practice Activity (page 36)**

1. Review job aid and think about how you might ask the questions in TWIST.
 - ◆ Subjective
2. Role-play with co-worker.
 - ◆ Subjective

**Lesson 1-3: Gathering Information from the Participant
Practice Activity (page 37)**

1. Special activity for certifying in a language other than English.
 - ◆ Subjective

**Lesson 1-4: Variations in Diet
Skill Check (page 42)**

1. Lesli
 - ◆ Subjective
 - ◆ Subjective
 - ◆ Subjective
2. Esmarelda
 - ◆ Subjective
 - ◆ Subjective

- ◆ Subjective

Lesson 1-4: Variations in Diet

Skill Check (page 44)

1. How would you define “routine” as it relates to a dietary risk?
 - ◆ “As it relates to dietary risks, a routine feeding behavior is one that happens on a regular basis. It means the behavior is habitual, something that is repeated, or is a standard procedure.”
2. How would you define “appropriate” as it relates to one’s feeding practices?
 - ◆ “What is appropriate for one participant could be inappropriate for another. Appropriate feeding practices could be matched to the person’s age, development, and abilities. For example, giving an infant a bottle is appropriate for that age and developmental stage. Giving a bottle to a normal three year old would be inappropriate for that age and developmental stage.”
3. On the *Risk Info Sheets*, where can you find more information to help clarify some of these ambiguous terms?
 - ◆ A section on the *Risk Info Sheets* titled *Considerations for Assigning Risks*.

Lesson 1-5: A “Complete” Diet Assessment

Practice Activity (page 48)

(Uses *Job Aid: Completing a Diet Assessment for Pregnant Women*)

1. What are discussion items under the topic area of **Attitudes**?
 - ◆ Eating issues
 - ◆ Interest in eating
 - ◆ Appetite
 - ◆ Nutrition knowledge
2. What are discussion items under the topic area of **Actions**?

- ◆ Eating Behaviors
 - ◆ Meal patterns
 - ◆ Food preferences
 - ◆ Food fads
 - ◆ Food avoidance
 - ◆ Cultural issues
3. What question in TWIST is used to gather information on the topic area of **Supplementation**?
 - ◆ What vitamins or supplements do you use?
 4. What probing question could be used to gather information about the participant's meal patterns?
 - ◆ Subjective

Lesson 1-5: A "Complete" Diet Assessment

Practice Activity (page 51)

1. Does the data collected match the information you heard from Kaitlin?
 - ◆ Subjective
2. Did the CPA in this scenario do a complete diet assessment?
 - ◆ No, not at the point noted in the scenario (Supplementation not discussed.)
3. What topic would you propose to the participant as a priority for nutrition education?
 - ◆ Subjective

Lesson 1-5: A "Complete" Diet Assessment

Skill Check (page 52)

1. What are the three topic areas you will hear the mother talk about during a complete diet assessment?

- ◆ Attitudes
 - ◆ Actions
 - ◆ Supplementation
2. How will you know when you are done with the diet assessment?
- ◆ You hear the mother speak about the 3 topic areas within feeding behaviors
 - ◆ You have assigned and documented dietary risk if appropriate
 - ◆ You have answered the mandatory diet assessment 'TWIST' questions.

Review Activity – Chapter 2

Guidance for Training Supervisor

1. This *Review Activity* requires the Training Supervisor to meet with the student.
2. During the meeting:
 - ◆ Discuss the *Review Activity* questions.
 - ◆ Talk about how the student did on the *Practice Activity* and *Skill Check* in the lesson in Chapter 2.
 - ◆ Review the student's answers to the written *Practice Activity* and *Case Study A*.
 - ◆ Review the completed *Observation Tool*.
 - ◆ Ask the student if he or she has any questions.
 - ◆ Role-play a diet assessment of a pregnant woman with the student
3. Document when the student has met the objectives for Chapter 2 on the *Competency Achievement Checklist*.

WIC policies

675 – Risk Criteria Codes and Descriptions

Practice activity and skill check answers

NOTE

Answers are given only when there is a specific, objective answer. The answer key will state “subjective” if there is not an objective answer.

Lesson 2-1: Women's Dietary Risks

Practice Activity (page 56)

1. Which of these risks is only appropriate for pregnant women?
 - ◆ 427.5 – Eating Potentially Harmful Foods

2. What information, if anything, should be documented if you assign the following risks?

Risk	Documentation
427.1 – Inappropriate Use of Dietary Supplements	The specific inappropriate use of dietary supplements
427.2 – Consuming Very Low Calorie or Nutrient Diets	The specific diet
427.3 – Pica	The non-food items eaten
427.4 – Inadequate Iron, Iodine or Folic Acid Supplementation	None
427.5 – Eating Potentially Harmful Foods (Pregnant Women only)	The specific food

3. Yes – Risk 427.5
4. Yes – Risk 427.1
5. Yes – Risk 427.4
6. No
7. Yes – Risk 427.3
8. Yes – Risk 427.4

9. No
10. No
11. Yes – Risk 427.5
12. Yes – Risk 427.1

Case Study A (pg. 229)

1. What dietary risk(s) did you assign?
 - ◆ Risk 427.4
2. What additional documentation did you enter for her risks?
 - ◆ None
3. Did you make any referrals?
 - ◆ Yes – referral to the participant's health care provider.

Review Activity – Chapter 3

Guidance for Training Supervisor

1. This *Review Activity* requires the Training Supervisor to meet with the student.
2. During the meeting:
 - ◆ Discuss the *Review Activity* questions.
 - ◆ Talk about how the student did on the *Practice Activity* and *Skill Check* in the lesson in Chapter 3.
 - ◆ Review the student's answers to the written *Practice Activity* and *Case Study B*.
 - ◆ Review the completed job aids, *Your Personalized Diet Assessment for Children* and *Observation Tool*.
 - ◆ Ask the student if he or she has any questions.
 - ◆ Role-play a diet assessment of a pregnant woman with the student.
3. Document when the student has met the objectives for Chapter 3 on the *Competency Achievement Checklist*.

WIC policies

675 – Risk Criteria Codes and Descriptions

Practice activity and skill check answers

NOTE

Answers are given only when there is a specific, objective answer. The answer key will state “subjective” if there is not an objective answer.

Lesson 3-1: Children's Dietary Risks

Practice Activity (page 85)

1. What information, if anything, should be documented if you assign the following risks?

Risk	Documentation
425.1 – Inappropriate Beverages as Milk Source	The specific beverage
425.2 – Feeding Sweetened Beverages	The specific sweetened beverage
425.3 – Inappropriate Use of Bottles, Cups or Pacifiers	The specific inappropriate use
425.4 – Inappropriate Feeding Practices	The specific inappropriate feeding practice
425.5 – Feeding Potentially Harmful Foods	The specific food
425.6 – Feeding Very Low Calorie or Nutrient Diet	The specific diet
425.7 – Inappropriate Use of Dietary Supplements	The specific inappropriate use of dietary supplements
425.8 – Inadequate Fluoride or Vitamin D Supplementation	None
425.9 – Pica	The non-food item eaten

2. No
3. Yes – Risk 425.5
4. Yes – Risk 425.1
5. No
6. Yes – Risk 425.3
7. No
8. Yes – Risk 425.9
9. Yes – Risk 425.7
10. Yes – Risk 425.3
11. No
12. Yes – Risk 425.8

Case Study B (page 230)

1. What dietary risk(s) did you assign?
 - ◆ Risks 425.2 & 425.5
2. What additional documentation did you enter for his risks?
 - ◆ Risk 425.2 – the specific sweetened beverage
 - ◆ Risk 425.5 – the specific food
3. Did you make any referrals?
 - ◆ No

Review Activity – Chapter 4

Guidance for Training Supervisor

1. This *Review Activity* requires the Training Supervisor to meet with the student.
2. During the meeting:
 - ◆ Discuss the *Review Activity* questions.
 - ◆ Talk about how the student did on the *Practice Activity* and *Skill Check* in the lesson in Chapter 4.
 - ◆ Review the student's answers to the written *Practice Activity* and *Case Studies C* and *D*.
 - ◆ Review the completed job aids, *Your Personalized Diet Assessment for Exclusively Breastfed Infants* and *Your Personalized Diet Assessment for Infants Receiving Formula*, and *Observation Tool*.
 - ◆ Ask the student if he or she has any questions.
 - ◆ Role-play a diet assessment of an infant with the student
3. Document when the student has met the objectives for Chapter 4 on the *Competency Achievement Checklist*.

WIC policies

675 – Risk Criteria Codes and Descriptions

Practice activity and skill check answers

NOTE

Answers are given only when there is a specific, objective answer. The answer key will state “subjective” if there is not an objective answer.

Lesson 4-1: Infant's Dietary Risks

Practice Activity (page 121)

1. Which of these risks is only appropriate for exclusively breastfed infants?
 - ◆ 411.7 – Infrequent Breastfeeding

2. What information, if anything, should be documented if you assign the following risks?

Risk	Documentation
411.1 – Use of Substitutes for Breast Milk or Formula	The specific substitute offered
411.2 – Inappropriate Use of Bottles or Cups	The specific inappropriate use
411.3 – Early Introduction of Beverages or Solid Foods	None
411.4 – Inappropriate Feeding Practices	The specific inappropriate feeding practice
411.5 – Feeding Potentially Harmful Foods	The specific food
411.6 – Incorrect Dilution of Formula	The specific issue with formula dilution
411.7 – Infrequent Breastfeeding	None

Risk	Documentation
411.8 – Feeding Very Low Calorie or Nutrient Diet	The specific diet
411.9 – Improper Handling of Expressed Breast Milk or Formula	The specific issue
411.10 – Inappropriate Use of Dietary Supplements	The specific inappropriate use of dietary supplements
411.11 – Inadequate Fluoride or Vitamin D Supplementation	None

3. Yes – Risk 411.9
4. Yes – Risk 411.8
5. No
6. Yes – Risk 411.2
7. Yes – Risk 411.3
8. Yes – Risk 411.4 and Risk 411.7
9. Yes – Risk 411.6
10. Yes – Risk 411.1
11. No
12. Yes – Risk 411.5
13. No
14. Yes – Risk 411.10
15. Yes – Risk 411.11

Case Study C (page 231)

1. What dietary risk(s) did you assign?
 - ◆ Risks 411.2, 411.3, 411.4, 411.5, 411.7, & 411.11
2. What additional documentation did you enter for her risks?
 - ◆ Risk 411.2 – the specific inappropriate use

- ◆ Risk 411.3 – none
 - ◆ Risk 411.4 – the specific inappropriate feeding practice
 - ◆ Risk 411.5 – the specific food
 - ◆ Risk 411.7 – none
3. Did you make any referrals?
- ◆ Risk 411.2 – no
 - ◆ Risk 411.3 – no
 - ◆ Risk 411.4 – no
 - ◆ Risk 411.5 – no
 - ◆ Risk 411.7 – yes, referral to the WIC breastfeeding specialist

Case Study D (page 232)

1. What dietary risk(s) did you assign?
- ◆ Risks 411.1, 411.4, 411.6, & 411.11
2. What additional documentation did you enter for his risks?
- ◆ Risk 411.1 – the specific substitute offered
 - ◆ Risk 411.4 – the specific inappropriate feeding practice
 - ◆ Risk 411.6 – the specific issue with formula dilution
 - ◆ Risk 411.11 – none
3. Did you make any referrals?
- ◆ Risk 411.1 – no
 - ◆ Risk 411.4 – no
 - ◆ Risk 411.6 – no
 - ◆ Risk 411.11 – yes, referral to a dental health professional

Review Activity – Chapter 5

Guidance for Training Supervisor

1. This *Review Activity* requires the Training Supervisor to meet with the student.
2. During the meeting:
 - ◆ Discuss the *Review Activity* questions.
 - ◆ Talk about how the student did on the *Practice Activity* and *Case Study* in the lesson in Chapter 5.
 - ◆ Review the student's answers to the written *Practice Activity* and *Case Studies E* and *F*.
 - ◆ Ask the student if he or she has any questions.
3. Document when the student has met the objectives for Chapter 5 on the *Competency Achievement Checklist*.

WIC policies

675 – Risk Criteria Codes and Descriptions

Practice activity and skill check answers

NOTE

Answers are given only when there is a specific, objective answer. The answer key will state “subjective” if there is not an objective answer.

Lesson 5-1: Presumed Dietary Eligibility Risks

Practice Activity (page 164)

1. Review the Job Aid entitled: *Completing a Diet Assessment for Pregnant Women*. Of the five steps to cover while completing a diet assessment, during what step would you potentially assign Risk 401 to a woman?
 - ◆ Step 3
2. What information, if anything, should be documented if you assign the following risk?

Risk	Documentation
401 – Presumed Dietary Eligibility for Women and Children (ages 2 to 5 years)	None
428 – Presumed Dietary Eligibility for Infants and Children (ages 4 to 23 months)	None

3. No
4. No – under the age of 4 months
5. No
6. No
7. Yes – Risk 401

Case Study E (pg. 233)

1. What dietary risk(s) did you assign?
 - ◆ Risk 428
2. What additional documentation did you enter for her risks?
 - ◆ None
3. Did you make any referrals?
 - ◆ No

Case Study F (pg. 234)

1. What dietary risk(s) did you assign?
 - ◆ Risk 401
2. What additional documentation did you enter for her risks?
 - ◆ None
3. Did you make any referrals?
 - ◆ No

Answers – Posttest

This is the scoring guide for the *Posttest*. Total possible – 88 points

1. What are the five steps of a diet assessment? (5 points)
 - ◆ **Step ①** Ask the participant about their feeding behaviors.
 - ◆ **Step ②** Use probing questions to find out more information.
 - ◆ **Step ③** Assign dietary risks in TWIST (if appropriate).
 - ◆ **Step ④** Use critical thinking to review all information to ensure risks are appropriately assigned.
 - ◆ **Step ⑤** Correctly document in TWIST.

2. List the three reasons to do a diet assessment? (3 points)
 - ◆ To collect data
 - ◆ To identify risks
 - ◆ To guide nutrition education and food package assignment

3. What are the four basic components to critical thinking? (4 points)
 - ◆ Collect all pertinent information from the participant.
 - ◆ Clarify or gather additional details.
 - ◆ Analyze and evaluate all the information you have collected.
 - ◆ Determine the best course of action.

4. Give a situation where using critical thinking is necessary. (1 point)

(A variety of different situations can be selected as a correct answer, including: deciding when to make a referral to the RD for a diet risk; deciding when to assign a risk; deciding if the diet assessment is complete; deciding what probing questions to ask.)

5. Where are all the places in TWIST that dietary risks can be assigned? (3 points)
 - ◆ Diet Assessment-Questionnaire tab
 - ◆ Diet Assessment-Risk Factors tab
 - ◆ NE Plan-Risk/Interventions tab

6. Where would you document any additional information about the dietary risks you assign? (1 point)
(Depending on your local agency procedure, the answer will be either in the notes field on the questionnaire or in progress notes.)

7. What are the three topic areas relating to feeding behaviors to be addressed in every diet assessment? (3 points)
 - ◆ Attitudes
 - ◆ Actions
 - ◆ Supplementation

8. What type of questions are most effective in getting information from the participant? (1 point)
 - ◆ Open ended questions or
 - ◆ Probing questions

9. What are the two risks that can be assigned if a participant has no other nutrition risk assigned? (2 points)
 - ◆ 401 – Presumed Dietary Eligibility for Women and Children (ages 2 to 5 years)
 - ◆ 428 – Presumed Dietary Eligibility for Infants and Children (ages 4 to 23 months)

Use the information about each participant to answer the questions.

Note to Training Supervisor!

- In the following scenarios, students are asked to identify referrals needed and any additional probing questions they might ask. Since referrals will vary from agency to agency, you will need to evaluate if a student's referrals make sense given your agency's procedure and staffing.
- Evaluate the probing questions based on what seems logical. These questions help you evaluate the student and should not be included in the scoring of the *Posttest*.
- Wording of documentation points does not need to be exact, as long as the concept is captured. The documentation answers identified are the minimum, based on requirements identified on the *Risk Info Sheets*. Blank can be considered correct for "None."
- Give one point for each correct risk or documentation item written.

10. Janet (3 points)

- ◆ She is a breastfeeding woman.
- ◆ She does not take any vitamin or mineral supplements.
- ◆ She is on the Atkins Diet for weight loss and is restricting carbs.

What dietary risks would be assigned?	Risks: 427.2, 427.4
What additional documentation would be entered?	Atkins Diet, restricted carbs.
What referrals are needed?	
What additional questions might you ask?	

11. Brant (7 points)

- ◆ He is a 3-year-old child.
- ◆ He is always thirsty, so his mom gives him a training cup with watered down Kool-Aid to carry with him.
- ◆ He gets fluoride tablets and a vitamin D supplement daily.
- ◆ He eats very little solid food each day.
- ◆ He gets no other dietary supplements.

What dietary risks would be assigned?	Risks: 425.2, 425.3, 425.4, 425.6
What additional documentation would be entered?	Eating very little solid food each day Drinking large amounts of Kool-Aid Carrying training cup
What referrals are needed?	
What additional questions might you ask?	

12. Lauren (7 points)

- ◆ She is a 2-month-old infant who is breastfeeding and being supplemented with a bottle.
- ◆ She is breastfed 3 times each day and gets 3 six-ounce bottles of soymilk.
- ◆ Her mother adds some cereal and traditional herbs to the soymilk.
- ◆ The water where she lives is not fluoridated and she does not get any other dietary supplements.

What dietary risks would be assigned?	Risks: 411.1, 411.2, 411.3, 411.10
What additional documentation would be entered?	Using soymilk to supplement breastfeeding instead of infant formula Adding traditional herbs to soymilk Adding cereal to bottle
What referrals are needed?	
What additional questions might you ask?	

13. Grace (2 points)

- ◆ She is a healthy 4 year old.
- ◆ She does not use a bottle, eats well, and gets a fluoride and vitamin D supplement.
- ◆ The assessment is complete. No nutrition risks have been identified.

What dietary risks would be assigned?	Risks: 401
What additional documentation would be entered?	None
What referrals are needed?	
What additional questions might you ask?	

14. Olivia (6 points)

- ◆ She is 13 months old.
- ◆ Her parents give her 1 quart of vitamin D fortified 2% milk every day, the same as the rest of the family.
- ◆ She gets fluoridated water.
- ◆ She drinks her milk from a bottle at bedtime and naptime.
- ◆ Her mother feeds her smoothly pureed table food.

What dietary risks would be assigned?	Risks: 425.1, 425.3, 425.4
What additional documentation would be entered?	Getting 2% milk Drinking bottle at bedtime and naptime Mother is feeding only pureed food, even though over a year old
What referrals are needed?	
What additional questions might you ask?	

15. Jolene (3 points)

- ◆ She is a woman in her 4th month of pregnancy.
- ◆ She is not taking any vitamin or mineral supplements.
- ◆ She gets her milk from a neighbor who owns a cow and shares the raw milk with her.

What dietary risks would be assigned?	Risks: 427.4, 427.5
What additional documentation would be entered?	Drinking unpasteurized milk
What referrals are needed?	
What additional questions might you ask?	

16. Nyla (2 points)

- ◆ She is 5 ½ months old.
- ◆ She is exclusively breastfed and nurses 4 times each day.
- ◆ She gets a Vitamin D supplement and the water where she lives is not fluoridated.

What dietary risks would be assigned?	Risks: 411.7
What additional documentation would be entered?	None
What referrals are needed?	
What additional questions might you ask?	

17. Eli (5 points)

- ◆ He is a 3-month-old, formula fed infant.
- ◆ His mom gives him 6 bottles of Similac Advance powder that she mixes 2 scoops to 8 ounces of water.
- ◆ His mom adds 2 tablespoons of cereal to the bottle for thickening.
- ◆ They have fluoridated water.

What dietary risks would be assigned?	Risks: 411.2, 411.3, 411.6
What additional documentation would be entered?	Mixing 2 scoops of powder formula to 8 ounces of water Adding cereal to bottle
What referrals are needed?	
What additional questions might you ask?	

18. Stella (8 points)

- ◆ She is a 10-month-old formula fed infant.
- ◆ Her mom cannot afford much formula, so is limiting formula to 16 ounces per day.
- ◆ The rest of the day she gets tea sweetened with honey in the bottle.
- ◆ They do not have fluoridated water and they can't afford fluoride drops.

What dietary risks would be assigned?	Risks: 411.2, 411.3, 411.5, 411.8, 411.11
What additional documentation would be entered?	Drinking sweetened tea from bottle Honey added to liquid Formula limited to 16 ounces per day, inadequate
What referrals are needed?	
What additional questions might you ask?	

19. Juanita (6 points)

- ◆ She is an 8-month-old, formula-fed infant.
- ◆ She drinks Similac Advance concentrate, diluted 1:1 with fluoridated water.
- ◆ She drinks 40 ounces of formula per day.
- ◆ Her mom leaves a bottle in her bed at night so she can get it when she wants it.
- ◆ She sits in her high chair and reaches for mom’s food.
- ◆ Her mom has not started her on any food other than a little bit of infant cereal she gets once a day.

What dietary risks would be assigned?	Risks: 411.2, 411.4, 411.9
What additional documentation would be entered?	Leaving bottle in bed Has not started any solid food other than cereal despite developmental readiness. Bottle left un-refrigerated all night.
What referrals are needed?	
What additional questions might you ask?	

20. Erica (5 points)

- ◆ She is a non-breastfeeding postpartum woman.
- ◆ She is taking triple the dose of iron prescribed by her doctor because she is so tired all the time.
- ◆ She is also eating ashes, because she heard they have iron in them.
- ◆ She is not taking any other supplements.

What dietary risks would be assigned?	Risks: 427.1, 427.3, 427.4
What additional documentation would be entered?	Taking triple dose of iron Eating ashes
What referrals are needed?	
What additional questions might you ask?	

21. Alaina (2 points)

- ◆ She is a postpartum, non-breastfeeding woman.
- ◆ She is healthy, eats well, and takes a vitamin supplement with folic acid and iodine.
- ◆ She does not have any nutrition risk identified.

What dietary risks would be assigned?	Risks: 401
What additional documentation would be entered?	None
What referrals are needed?	
What additional questions might you ask?	

22. Nghi (5 points)

- ◆ She is a 2-year-old girl.
- ◆ Her mom gives her traditional Chinese herbs every day to keep her from getting sick.
- ◆ She does not take any vitamin or mineral supplements, nor does she get fluoridated water.
- ◆ One of her favorite vegetables is raw bean sprouts.

What dietary risks would be assigned?	Risks: 425.5, 425.7, 425.8
What additional documentation would be entered?	Eating raw bean sprouts Takes traditional Chinese herbs daily
What referrals are needed?	
What additional questions might you ask?	

23. Samir (2 points)

- ◆ He is a 15-month-old boy.
- ◆ He is healthy, nurses 3 times each day, and eats most table foods.
- ◆ He takes a fluoride and vitamin D supplement daily.
- ◆ He has no identified nutrition risk.

What dietary risks would be assigned?	Risks: 428
What additional documentation would be entered?	None
What referrals are needed?	
What additional questions might you ask?	

24. Pri (2 points)

- ◆ She is a healthy 3 month old whose mother was not on WIC and had a healthy pregnancy.
- ◆ Try as you might, you cannot find a nutrition risk for Pri.
- ◆ The only risk that has been identified for Pri's mother is *Presumed Dietary Eligibility*.

What dietary risks would be assigned?	Risks: No Risk – not eligible
What additional documentation would be entered?	None
What referrals are needed?	
What additional questions might you ask?	

Total possible points on the posttest = 88

Passing score (90% score) = 79 points or higher

Competency Achievement Checklist Dietary Risk Module

MASTER COPY – *make copies before using*

Staff (Student) Name:

Local Agency:

Training Supervisor: Evaluate student competency and achievement of the learning objectives at each checkpoint in the following table.

At this checkpoint:	Evaluate this:	Competency Achievement Date	Initials
Chapter 1 Review Activity	Student has achieved the appropriate learning objectives in Chapter 1.		
	Student is able to explain the purpose and basic steps of completing a diet assessment.		
Chapter 2 Review Activity	Student has achieved the appropriate learning objectives in Chapter 2		
	Student is able to perform a diet assessment for a woman participant.		
Chapter 3 Review Activity	Student has achieved the appropriate learning objectives in Chapter 3		

At this checkpoint:	Evaluate this:	Competency Achievement Date	Initials
	Student is able to perform a diet assessment for a child participant.		
Chapter 4 Review Activity	Student has achieved the appropriate learning objectives in Chapter 4		
	Student is able to perform a diet assessment for an infant participant.		
Chapter 5 Review Activity	Student has achieved the appropriate learning objectives in Chapter 5		
	Student is able to correctly assign presumed dietary eligibility risks.		
Posttest	Student has achieved a score of 90% or better.		

I verify that _____ has achieved the learning objectives of the *Dietary Risk Module* and is competent to perform diet assessments and assign dietary risks. The student meets the criteria set by the state to receive a certificate of completion for this module.

Signed _____ Date _____

Upon completion of this form:

File the form in the appropriate personnel file in accordance with WIC Policy 440.

Enter the module completion date information in TWIST.

Module Objectives

The following list outlines all of the objectives that are covered throughout the lessons in the module.

Chapter 1

1-1: Introduction to Dietary Risk

After completing this lesson, staff will be able to:

1. State the main purposes of a diet assessment.
2. Define dietary risks.
3. Describe dietary risks as they relate to all nutrition risks.

1-2: The CPA's Role

After completing this lesson, staff will be able to:

4. Correctly assign risks using both objective and subjective information from the participant.
5. Correctly document dietary risk.
6. Identify situations that necessitate making referrals as appropriate.

1-3: Gathering Information from the Participant

After completing this lesson, staff will be able to:

7. Use open-ended questions and probing questions to gather information from the participant.
8. Use the appropriate diet assessment tools.

1-4: Variations in Diet

After completing this lesson, staff will be able to:

9. Identify the different considerations that impact risk assignment.

1-5: A "Complete" Diet Assessment

After completing this lesson, staff will be able to:

10. Define a "complete diet assessment".

Chapter 2

2-1: Women's Dietary Risks

After completing this lesson, staff will be able to:

11. Determine a woman's dietary risk, based on a complete diet assessment.
12. Identify 5 inappropriate nutrition practices of women.
13. List probing questions to clarify information specific to women's dietary risks.

Chapter 3

3-1: Children's Dietary Risks

After completing this lesson, staff will be able to:

14. Determine a child's dietary risk, based on a complete diet assessment.
15. Identify 9 inappropriate nutrition practices of children.
16. List probing questions to clarify information specific to children's dietary risks.

Chapter 4

4-1: Infant's Dietary Risks

After completing this lesson, staff will be able to:

17. Determine an infant's dietary risk, based on a complete diet assessment.
18. Identify 11 inappropriate nutrition practices of infants.

19. List probing questions to clarify information specific to infant's dietary risks.

Chapter 5

5-1: Presumed Dietary Eligibility Risks

After completing this lesson, staff will be able to:

20. Determine the criteria that would allow assignment of the presumed dietary eligibility risks.
21. Identify 2 presumed dietary eligibility risks.

References

Websites for additional information

Inappropriate Use of Dietary Supplements

<http://www.marchofdimes.org>

<http://dietary-supplements.info.nih.gov>

<http://www.fda.gov/food/dietarysupplements>

<http://abc.herbalgram.org>

Very Low Calorie or Nutrient Diet

<http://www.eatright.org>

<http://www.nimh.nih.gov>

<http://fnic.nal.usda.gov/lifecycle-nutrition/vegetarian-nutrition>

Pica

<http://www.nlm.nih.gov/medlineplus/ency/article/001538.htm>

Inadequate Supplementation

<http://www.cdc.gov>

<http://www.aap.org>

<http://www.iom.edu>

<http://public.health.oregon.gov/PreventionWellness/oralhealth>

Food Safety

www.cdc.gov/foodsafety

www.cdc.gov/listeria

www.foodsafety.gov

www.fightbac.org

www.foodinsight.org