

Oregon WIC Training Nutrition Risk Module



Oregon
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Authority



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- Information About Medical Conditions

1-1 Introduction to Nutrition Risks

Prior to completing this module, read CPA Guide Chapter 4-1.

Overview

WIC participants must have a nutrition need or risk to qualify for WIC services. WIC's goal is to use these services to provide nutrition education, nutritious foods, breastfeeding support and community referrals to address participant risks and help improve their health outcomes.

WIC serves participants at an important period of growth and development in their lives that has the potential to shape long term health practices and health outcomes.

Nutrition risks are key to personalizing WIC services to meet individual needs. Each participant has a certification appointment to identify their individual nutrition risks. Many times, more than one risk will be identified. These risks are the basis for the individualized services that WIC offers.

In the WIC clinic, nutrition risks are used to:

- Certify that participants are eligible for WIC
- Focus participants' nutrition education on their needs
- Identify which WIC foods best meet the participants' needs
- Determine the participants' risk level
- Identify appropriate referrals for each participant

What are nutrition risks?

A **nutrition risk** is a health problem, medical condition, diet deficiency or other issue that can affect the health and nutrition status of a participant.

Nutrition risk criteria are standardized throughout the United States. The federal WIC office at USDA requires that every WIC program uses the same risks with the same risk numbers and the same risk criteria. Risks are researched and recommended

by a national group of health professionals. This group provides annual updates that are implemented nationally.

Over 100 different risks have been identified by USDA. This training module will describe each in detail.

Risks can be classified into five groups:

- A = Anthropometrics
- B = Biochemical
- C = Clinical/Medical
- D = Dietary
- E = Environmental

Risk Group:	Description:	Risks related to:
Anthropometric 100's	Based on measurement of physical size	Height Weight Head Circumference Rate of growth or prenatal weight gain
Biochemical 200's	Based on blood tests	Anemia Blood lead level
Clinical 300's	Based on health history and current health status	Chronic illnesses Birth problems Genetic conditions
Dietary 400's	Based on feeding behaviors and daily intake	Inappropriate nutrition practices
Environmental 500 to 900's	Based on social and safety factors that influence nutrition	Smoking Substance use Foster care Domestic violence

How are risks assigned?

Each participant is assigned nutrition risks during the certification appointment. These nutrition risks are selected based on a complete assessment of the participant's medical data and health information. The data system is used to record this information and to document the risk factors for each participant.

Risk factors can be automatically generated by the data system based on information entered by the certifier or manually selected by the certifier.

1. Data system assigned

- Risks are automatically selected based on information entered on the medical data screen or on the questionnaires.
- It is very important for the certifier to enter information correctly so that risks will be accurately assigned.
- Certifiers must always check the data system assigned risks to confirm accurate assignment.

Examples of data system assigned risks:

- The certifier enters the height and weight of a participant in the data system. The data system calculates that the individual is underweight and displays the underweight risk factor.
- The certifier enters a hemoglobin value in the data system. The data system identifies the value is below recommended levels and displays the low hemoglobin risk.

2. Certifier assigned

- Risks are manually selected in the data system by the certifier based on information learned during the certification.
- Risks are often certifier selected during completion of the health history and diet assessment questionnaires.

Examples of certifier assigned risks:

- During completion of the health history, a woman reports that she has been diagnosed with a medical condition. The certifier selects the risk for that medical condition from the risk list in the data system then adds any required documentation for that risk in the participant's record.
- During the diet assessment, a mother tells the certifier that her child has been diagnosed with food allergies. The certifier discusses the specific allergies with the mother then selects the appropriate risks in the data system and documents the specific food allergies in the participant's record.

After all risks have been assigned, the certifier must do a final review to make sure all risks were correctly selected. Risks can be added or removed as needed.

What information is used to assign risks?

The information used to complete an assessment of nutrition risk comes from several places:

1. **Information collected by WIC staff**

WIC staff collects the information needed to assign the risk as part of the certification process.

Example:

- WIC staff weigh and measure participants. This provides the information needed to assign anthropometric risk factors.

2. Historical data

- For participants who are being recertified, WIC has information from previous certifications.

Example:

- The data system keeps track of an infant's growth over several visits to WIC. This information is used to determine if the infant is growing at the correct rate for their age.

3. Information from a health care provider

- WIC participants might bring medical history information from their health care provider which could be used to assign a risk.

Example:

- An infant has medical documentation for a special formula which also lists information about the infant's medical diagnosis. This information is then used to enter a clinical risk.

4. Self-reported by participant

- WIC allows participants to self-report that their doctor has diagnosed them with a health condition.
- It is important to determine that a doctor has diagnosed a health condition, not that the individual just believes that the condition exists.
- It is **not** required to have a note from the doctor stating the diagnosis.
- Specific questions to ask the participant when they self-report a health condition include:
 - Are you seeing a doctor for the condition?
 - How long have you had this condition?
 - What type of medication are you taking for the condition?

Has your doctor prescribed a special diet for this condition?

Example:

Here is an example of how the certifier can find out more information about a self-reported medical condition:

Joleena is at WIC to be enrolled for her pregnancy. This is part of her conversation with the certifier during the certification.

- **Certifier:** Do you have any medical or health problems?
- **Joleena:** Yes, I have high blood pressure.
- **Certifier:** I see, what can you tell me about your high blood pressure?
- **Joleena:** Last week I used the machine at Walgreen's and it said my blood pressure was high.
- **Certifier:** When was the last time you met with your doctor?
- **Joleena:** I haven't seen the doctor in about a month.
- **Certifier:** When is your next appointment with the doctor?
- **Joleena:** Tomorrow.
- **Certifier:** It is important to have this concern verified by your doctor. Please let us know if your doctor says that your blood pressure is too high.
- **Joleena:** OK.
- **Certifier:** Do you have any other health or medical problems?
- **Joleena:** No.

Result: Although Joleena was enrolled on WIC with other risks, she would not qualify for the hypertension risk because hypertension had not been diagnosed by a health care provider.

However, if Joleena had said: "My doctor said at my last appointment that I have high blood pressure," the certifier would have documented the diagnosis in her record and assigned the hypertension risk.

Resources



As you learn about the nutrition risks, there are several resources at the end of the module that may be helpful.

- [*More Information about Medical Conditions*](#) – This resource can be used to learn more about some health and medical conditions.
- [*Job Aid: Risk Summary*](#) – This job aid gives an overview of all risks including the risk number and name, risk level, risk category, documentation needed and how it is assigned.
- [*Job Aid: Disease Names and Risk*](#) – This job aid connects specific medical conditions with their appropriate risk number.
- [*Job Aid: List of Risk Numbers and Names*](#) – This job aid lists the risk by name and number in risk groups.

Additional resources can be found in the [Oregon WIC Policy Manual](#):

- [*WIC Policy 675 – Risk Criteria Codes and Descriptions*](#) – This policy gives a complete list of the nutrition risks and the criteria for assigning each risk.
- [*WIC Policy 661 – Appropriate Counseling for Risk Levels*](#) – This policy provides a list of medium and high risks and describes counseling provided for different risk levels.

To learn more about how WIC services improve participant health outcomes, see additional information on the [USDA Website](#).

Summary

Assigning appropriate nutrition risks is a key to tailoring WIC's services to individual participants. A full assessment of the participant's health and nutrition status gives a complete picture of their nutrition needs. When all risks are identified, nutrition education can be focused in ways that will best assist the participant in improving their health and achieving desired health outcomes.

Learning activity

1. What are the five groups of nutrition risks?
2. What are the two ways risks are assigned?
3. What information is used to assign risks?
4. What type of information requires careful questioning by the certifier?
5. Is it possible that one participant would have more than one risk?
Why or why not?
6. Who must confirm that all correct risks have been assigned?



1-2 Risk Information Sheets

Overview

Risk information sheets contain a description of each risk and the criteria that must be followed for assignment of that risk to a participant. Risk information sheets for all USDA approved risks are included in this **Nutrition Risk** module.

The **Nutrition Risk** module is divided into chapters by participant category. Each chapter includes links to the risk information sheets for each of the nutrition risks specific to that category of WIC participant. Read each information sheet for that category then complete the learning activity.

Risk sheet description

Here is the template for the risk information sheet with a description of each field:

Risk number – Risk name

Risk description

The criteria that must be present for the risk to be assigned.

Reason for risk

A brief overview of why the condition is a nutrition risk.

Category	Indicates the group or groups of participants that this risk applies to: Women, Pregnant Women, Postpartum Women, Infants, Children, All
Risk level	Identifies the risk level that will be assigned by the data system for this risk: Low, Medium, High

At risk if:	Specifies the required criteria for assigning this risk
Not at risk if:	Clarifies situations where this risk would not be applicable
How is risk assigned?	Indicates if this risk is certifier selected or data system assigned
Additional documentation	Identifies information that must be documented in the data system when this risk is assigned. This includes the mandatory referral of high risk participants to the RD. Required documentation for high risk participants includes a high risk care plan that is completed by the RD.

Risk 347 - Cancer

Risk description

Cancer has been diagnosed by a health care provider. This diagnosis can be self-reported. The current condition or treatment must be severe enough to affect nutrition status.

Reason for risk

Individuals with cancer are at significant health risk and may be at increased nutrition risk depending on the type and stage of the disease and the progression or type of treatment.

Category	All
Risk level	High
At risk if:	Health care provider diagnosed cancer OR Participant is being treated for cancer such as with radiation or chemotherapy
Not at risk if:	Cancer has not been diagnosed by a health care provider OR Cancer treatment has ended and the participant is in remission
How is risk assigned?	Certifier selected from risk list in the data system.
Additional documentation	Document the specific type of cancer or treatment in the data system. Referral to the RD is required.

Summary

The Nutrition Risk module contains risk information sheets for each WIC risk. Risk information sheets provide important guidance as to when and how a risk should be assigned to a participant. Greater familiarity with the risks will make it easier to assign risks quickly and accurately.

Learning Activity

Refer to the sample risk information sheet above:



1. What category would a participant need to be in to qualify for this risk?
2. What criteria needs to be present for this risk to be assigned?
3. What, if any, special documentation needs to be included in the data system?