

New Hampshire WIC Policy & Procedure Manual

Chapter Number 2. NUTRITION & BREASTFEEDING SERVICES

A. Nutrition Education

Nutrition Services Documentation

Purpose To document, manage, and evaluate nutrition services delivered at the WIC clinics. Appropriate documentation assures quality, integrity, and facilitates continuity of care.

Policy Documentation of all services provided by the NH WIC Program shall be recorded in the participant's StarLINC record within 48 hours. The screens shall be an accurate reflection of what occurred at that WIC appointment.

Quality documentation helps to facilitate meaningful nutrition services and to ensure continuity of care for WIC families and participants. Quality documentation improves program integrity and coordination with the healthcare community. It builds on VENA, the WIC Nutrition Services Standards, and WIC Nutrition Education Guidance. Documentation ensures:

Quality of nutrition services provided by identifying risks and participant concerns, facilitating follow-up, and continuity of care, and

Integrity of the WIC Program through documentation of nutrition services data used for eligibility determination and national and/or state reporting systems and WIC Participant Characteristics reporting.

5 Key Elements of Effective and Efficient Documentation:

1. Consistent--establishes standards and protocols to which all staff shall adhere;
2. Clear--easily understood by other WIC staff using consistent documentation abbreviations;
3. Organized--follows an established order and minimizes duplication;
4. Complete--creates a picture of the participant, describes or lists the services provided over time, and outlines a plan for future services; and
5. Concise--contains minimum extraneous information.

The optimal outcome of quality documentation is to create a complete picture of the participant's visit and to enable staff to build and pick-up where the last appointment ended. If it is not documented, it did not occur.

Authority USDA Nutrition Service Standards Standard 14 Nutrition Services Education
WIC Policy Memo #2008-4

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Procedure

Requirements of complete nutrition services documentation shall include:

1. Assessment information: anthropometric, hematology, immunization screening for infants/children up to 2 years of age, and medical documentation provided.
2. A summary of diet history and interview including identification of pertinent information obtained using VENA tools/techniques, the Getting to the Heart of the Matter (GTHM) tools/techniques, the Dietary Assessment-Women/Infants/Child tools or the WIC Tell Us About You/Your child-baby health forms.
3. All risk codes identified through the assessment process. Certification based on the presumed risk codes 401 or 428 shall include documentation of "ruled out INP" (Inappropriate Nutrition Practices) in the RC note field.
4. WIC category and priority level.
5. Food package assigned, to include rationale for tailoring, and where applicable, the qualifying medical reason for special formulas or foods requiring medical documentation.
6. Nutrition and breastfeeding education documented in the participant's record in the Nutrition Education Goals. This would include nutrition education topics and handouts provided.
7. Referrals provided.
8. Follow-up activity-what is the plan or goal as stated by the participant and/or what concerns the nutritionist/CPA would like to follow-up on.
9. Individual care plan for high priority and professional discretion high priority (PDHR). Where applicable any additional indicators selected by the local agency as high priority.
10. Data and information provided from outside of the WIC Program shall be noted as such.
11. As new information is obtained this shall be updated on the appropriate StarLINC screens i.e. active enrollment in Medicaid, new measurements, updates to health interview as appropriate, and updated medical conditions and associated risk code assignment.

Documentation of nutrition education contacts are to be completed in the StarLINC Nutrition Education screens as follows:

The StarLINC "Nutrition Education Goal" screen has the following components: the selected "Client Goal", the "Ways to Meet Goal" and the "Comments" section. The selected client goal and ways to meet goal are posted and visible to the participant on their WIC Client Portal page. Staff shall select the client goal from the drop down picklist that best represents the topic area from the appointment. Staff shall

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document the agreed upon goals or if no goal was established in the ways to meet goal note field. Staff shall document all assessment information, special formula notes, concerns etc. in the Comments Section.

- Initial certification and mid-certification documentation shall be in the nutrition education goal, nutrition topic and nutrition education handout screens.
- Follow-up Nutrition (FUN low priority) appointments shall be recorded in the participant's StarLINC record. At a minimum, both the nutrition education topic and handout(s) provided shall be entered into the participant's record. Document if handouts were declined. Staff shall offer all participants the opportunity to talk with a nutritionist when FUN appointments are provided by a paraprofessional.

See Chapter 2A related policy Nutrition Education—Alternative Modes for further guidance.

- Follow-up Nutrition (FUN-high priority or PDHR) appointments shall be completed by a nutritionist/CPA for their FUN-HP/PDHR appointment. The nutritionist/CPA shall update health interview as appropriate, risk criteria, anthropometrics and hematological measurements when appropriate. Document follow-up to care plan that was established and goals set at the last appointment. Update the nutrition education topics, handouts and summary of appointment in the Nutrition Education Goals section.

See Chapter 8 Section on Certification, High Priority WIC Participants for further guidance.

- Extended certifications have an extended certification period of one year. Participants with extended certification shall have quarterly contacts however such contacts do not necessarily need to take place in each quarter of the certification period. Provision of the contact is to be documented as a standard FUN contact except high priority or PDHR participants require a follow-up appointment by a qualified nutritionist/CPA and appropriate documentation as describe above. All infants, children and breastfeeding women shall have a mid-certification completed with appropriate documentation.

All Breastfeeding women shall have quarterly contacts to assess and document the woman's breastfeeding status.

See Chapter 2A related policy Nutrition Education—Alternative Modes for further guidance and Chapter 8 related policies on Certification and Mid-certification for further guidance.

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- Exception** When group nutrition education is provided, documentation of a FUN low priority contact and attendance may be kept in a central file, with the date, topic, and names of class attendees.
- Best Practice** Local agency shall document immediately in StarLINC on the day nutrition services are provided.