



IDAHO DEPARTMENT OF HEALTH & WELFARE
DIVISION OF PUBLIC HEALTH

Idaho WIC Training

Activities



Table of Contents

Directions	1
CPA Checklist	3
Overview	5
Eligibility	6
Anthropometrics	10
Hematology	13
Health & Nutrition Assessment	15
PCE	19
Referrals	20
Food Packages	22
Issuing WIC Checks	23
Basic Nutrition	25
Care Plans	31
Breastfeeding Nutrition	34
Customer Service & Communication	37
Prenatal Nutrition	45
Postpartum Nutrition	49
Baby Behaviors	54
Child Nutrition	55

Learner Directions

Introduction

- This document instructs the *Learner* on how to utilize the Training Manual, also known as Guidebooks.
- Each training course and/or topic has a set of guidebooks:
 - A *Learner* guidebook (includes Learner process, information and activities)

How to Get Started

Locate and familiarize yourself with the training resources on the WIC website:

- The materials should **not** be printed, but accessed electronically.
- All guidebooks are on the ID WIC website in the following locations:
 - Learner's guidebooks are located in the *Training* section under *Staff*.
- Each *Learner* guidebook contains the following:
 - Description of what the employee will learn (objectives).
 - Instruction level identifying any prerequisite for the course.
 - List of items needed for the course and activities.
 - Recommended time to allow for completing the guidebook course and activities.
 - Information and Learner's steps for completing the course/guidebook.
 - Practice activities to assess understanding/application of the information learned (located in your Learner Workbook).
 - As needed, each activity identifies a specific slide(s) in the course in which the Learner can find the information necessary to complete the activity.
- The Learner guidebook specifies when the Learner needs to complete an online course pre-test and post-test. No minimum score is required for a pre-test. A score of 70% or higher is required to pass a post-test. Post-tests are considered 'open book' and learners may refer to notes, the course, and course companion manual (if one exists). If needed, courses and post-tests may be repeated to achieve a passing score.



Activities are identified by this symbol



Discussion guidance (items to discuss with your trainer) are identified by this symbol

Locate the Learners *Activities Workbook*:

- You will need a copy of the *Activities Workbook*. This is the only document that may be printed.
- This document includes the following to assist the Learner:
 - Directions
 - Checklist
 - Activities

- The checklist allows you to record your progress of completion as well as provide guidance on timeframes and order of completion.
- ***The checklist must be maintained in your training records for audit purposes.***

Things to Remember

- Obtain a copy of the *Activities Workbook* (either electronic or printed copy).
- You are encouraged to take notes.
- You are encouraged to ask trainer(s) if you need help or have questions about the course/topic information.
- You may be instructed during or following an activity to have a discussion with the Trainer, or to have the Trainer help you locate an item needed for an activity.

Steps to Complete Courses, Modules, and Activities

- ✓ Read through the courses, modules and guidebooks (for online courses complete the online pre-test before progressing through the course and the post-test after completing the course).
- ✓ Complete all practice activities.
- ✓ As directed by your Trainer and guidebooks, meet with your Trainer to discuss the information.

Steps to Complete Quick Reference Cards (QRC's)

- ✓ Ask your Trainer for your HWC number (WISPr user login) and temporary password to WISPr.
- ✓ Ensure QRC's are completed in the Training (UAT) environment.
- ✓ Ask your Trainer if you have any questions.
- ✓ To locate the QRC's, go to the WIC website under the *Training* section.

Checklist for Training a New Competent Professional Authority (CPA)

Staff Name: _____ Start Date: _____

The following checklist indicates the required training for a CPA. It is recommended to complete the following training in the order provided and by the timeframe specified below. Once completed, record the date and have your trainer initial next to the date confirming its completion.

Type of Training Resource	Online Course and/or Guidebook Title	Timeframe to Complete Training	Hours	Recommendations (See Policy For Requirements)	Date Complete & Trainer Initials
Phase I:					
Guidebook	Overview	1 week	2	Complete prior to other courses	
Guidebook	Eligibility	1 month	3-5		
Online Course & Guidebook	Anthropometrics	1 month	4-6	Complete prior to taking measurements	
Guidebook	Hematology	1 month	3-5	Complete prior to doing lab work	
Guidebook	Health and Nutrition Assessment	1 month			
Online Course & Guidebook	PCE	1 months	20-30	Complete modules 1-9 from this course	
Guidebook	Referrals	3 months	2-3		
Guidebook	Food Packages	3 months	2-4		
Guidebook	Issuing WIC Checks	3 months	2-4		
Online Course & Guidebook	Basic Nutrition	3 months	4-6		
Guidebook	Care Plans	3 months	3-5		
Online Course & Guidebook	Breastfeeding Nutrition	6 months	4-7		
Online Course & Guidebook	Customer Service/Communication	6 months	3-6		
WISPr QRC	Add a Family/Participant (2 QRC's total)	6 months	N/A	Complete QRC's after Guidebooks and Courses	
WISPr QRC	Certification (New Participant) (6 QRC's total)	6 months	N/A		
WISPr QRC	Certification (Existing Participant) (6 QRC's total)	6 months	N/A		

WISPr QRC	Health Assessment (5 QRC's total)	6 months	N/A		
WISPr QRC	Assign Food Packages (5 QRC's total)	6 months	N/A		
WISPr QRC	Check Printing/Voiding Checks (3 QRC's total)	6 months	N/A		
WISPr QRC	Health Screen (3 QRC's total)	6 months	N/A		
WISPr QRC	VOC/Transfer Families and Participants (5 QRC's total)	6 months	N/A		
WISPr QRC	Miscellaneous Functions (6 QRC's total)	6 months	N/A		
WISPr QRC	Breastfeeding (2 QRC's for CPA's, 1 for Peer Counselors)	6 months	N/A		
WISPr QRC	WISPr QRC scenarios (8 QRC's total)	6 months	N/A		
Phase II:					
Online Course & Guidebook	Prenatal Nutrition	6-12 months	4-7		
Online Course & Guidebook	Postpartum Nutrition	6-12 months	3-4		
Online Course & Guidebook	Baby Behaviors	6-12 months	4-6		
Online Course & Guidebook	Child Nutrition	6-12 months	3-6		

Notes:

- Phase I is required training to be completed within the first 6 months.
- Phase II offers additional, specialized training and must be completed within the first year.
- The hours listed to complete the course include the time it may take to complete the online course, guidebook and related activities. Not all topics have a guidebook and online course. See *type*.
- The QRC's identify how many total documents are within each section/folder in order to complete it.
- All LMS materials such as Guidebooks, Activities Workbook, QRCs, and supplemental documents, etc. can be found on the Idaho WIC website under the *Training* section.

OVERVIEW

Module 1: Residency, Category, and Identity



Ask your Trainer how many WIC participants are seen in the clinic where you will be working.

Occasionally, applicants may live in another state but they use Idaho health care agencies or receive WIC benefits from Idaho. Ask your Trainer if this situation occurs in your agency.

Ask your Trainer where your agency operates WIC clinics.

Activity 1:

Idaho Authorized Food Lists

Locate a copy of the current food list. Ask your Trainer for a sample of WIC checks. Using the food list and the checks, create a grocery list of what you would buy with your WIC checks if you were a WIC participant. If you have questions about your checks or food list, ask your Trainer.

Medical Documentation Form

Locate a copy of the current Medical Documentation form. Review the form. Ask your Trainer for examples of the most common reasons for using this form, whom you would ask for help when this form is needed, and any other questions that you have.

Rights, Responsibilities and Consent Form

Locate a copy of the current Rights, Responsibilities and Consent Form. Review the form. Ask your trainer the importance of this form, the three required statements when reviewing the form with participants, and any other questions that you have.

Activity 2: WIC provides information about the program to agencies and businesses in the community that refer people to WIC. This information, often called a trigger card, provides basic information about WIC. It is available in both English and Spanish. Locate where copies of trigger cards are kept in your clinic. Review the trigger card. Practice how you would use the trigger card to explain WIC to a person who walks into the clinic asking for information about the program. This would mainly be used for someone who is not familiar with WIC.

Module 2: Application Process



Ask your local agency Coordinator or Trainer how the process to sign up for WIC works in your clinic(s).

ELIGIBILITY

Module 1: Residency, Category, and Identity

Activity 1: Log on to the Idaho WIC website at www.wic.dhw.idaho.gov. Locate and click on Clinic Staff, and click on Policy Manual. Click on Chapter 4 - Eligibility and Certification.

1. Locate and list the types of residency and identification that are acceptable according to the policy manual.
2. What are two reasons why a person would not be eligible for WIC?
3. What is the definition of a Responsible Adult?



Ask your Trainer where to locate the income guidelines in the policy manual and on the What is WIC? trigger card.

Look at a household of 3. How much money can this household make and still qualify for WIC? Look up your gross income in the chart based on your household size. Do you qualify for WIC? What if you had 8 people in your household?

Local agency Coordinators may develop local procedures as needed for maintaining files. Ask your Trainer for your agency's procedures for foster children.

Module 2: Income Eligibility

Activity 2:

1. Determine the household size:
 - Penny is pregnant and applying for WIC. She lives with her two other children. Her household size is _____.
 - Jason and his girlfriend Marissa are applying for WIC. They live together and Marissa is pregnant. Their household size is _____.
 - Notus is applying for WIC. He and his daughter share a house with another family of three. Notus pays rent and utilities and all his own household expenses. His household size is _____.
2. List the programs that cause a WIC applicant to be automatically income eligible.

3. Income is the amount of money received from all sources before paying taxes (gross income). Which of the following sources of income are included when figuring gross monthly income for the WIC program?

- Child support payments received
- Student financial aid
- Hourly wages
- Military housing allowance
- Welfare assistance
- Social Security
- Unemployment benefits
- Retirement pensions
- Lottery winnings
- SNAP benefits
- VITA volunteer stipend
- Medical bill reimbursement payment

4. Mark the following statements True (T) or False (F). If false, correct the statement to make it true.

T or F: Migrant farm workers are individuals who work primarily in agriculture, have done this work within the last 24 months, and have a temporary home while working in agriculture.

T or F: WIC foods are shared by everyone living in a homeless shelter.

T or F: Income is the last thing to check during certification.

T or F: WIC benefits are counted as income for other assistance programs.

Activity 3: Use the table with the WIC Income Guidelines on the WISPr homepage to calculate the following income examples.

Weekly Income

Weekly income can be the same amount each week or can vary from week to week. A year has 52 weeks.

If the pay frequency is:	AND the amount is:	DO this:	To Annualize:^
Weekly	Always the same	Compare to the IEGs	Multiply one check by 52.
	Different	*Add 4 checks together and divide by 4, then compare to IEGs	Add 4 checks together and multiply by 13.

Examples

Tina Kirk receives \$125 each week. Ms. Kirk’s weekly income should be compared to the Income Eligibility Guidelines for weekly income.

Gabriela Blanco works part-time as a house cleaner.

- Week 1: \$120
- Week 2: \$100
- Week 3: \$147
- Week 4: \$189

$\$556/4 = \139 . In WISPr, select weekly and enter \$139 which is the total of the four weekly earnings divided by 4. Compare to the weekly Income Guidelines interval.

Income Paid Every Two Weeks

If income is collected every two weeks and the amount is the same each paycheck, then compare the value to the bi-weekly Income Guidelines.

If income is collected twice a month (e.g., paid on 15th and 30th) and is the same amount each time, compare to the Income Guidelines. If income is collected twice a month, but of differing amounts, average the incomes and compare to the semi-monthly Income Guidelines interval.

If the pay frequency is:	AND the amount is:	DO this:	To Annualize: ^
Every 2 weeks	Always the same	Compare to the IEGs	Multiply check by 26.
	Different	*Add 2 checks together and divide by 2, then compare to the IEGs.	Add 2 checks together and multiply by 13.
Twice each month	Always the same	Compare to the IEGs	Multiply check by 24.
	Different	*Add 2 checks together and divide by 2, then compare to the IEGs.	Add 2 checks together and multiply by 12.

Activity 4: Convert the following incomes to annual incomes.

1. \$119 per week = \$_____ annual
2. \$120 (week 1), \$159 (week 2), \$160 (week 3), \$125 (week 4) = \$_____ annual
3. \$539 every two weeks = \$_____ annual
4. \$550 (1st of the month), \$624 (15th of the month) = \$_____ annual

Activity 5: Knowing what it is like to apply and certify for the WIC program will help you provide better service to participants. Arrange with your Trainer to pretend to apply for the program as a pregnant woman. You will go through an entire certification appointment, including filling out forms, blood work, and education. An experienced staff person will certify you. Understanding what it is like to be a WIC participant can help you make WIC work as a staff member. (If you are now or have been a WIC participant, you do not need to do this exercise.)

You have learned about determining eligibility for category, residency and income. In future modules, you will learn about the following topics so that you can complete a certification:

- Hematologic
- Anthropometrics
- Nutrition Assessment
- Assigning Nutrition Risk
- Referrals
- Assigning Food Package
- Check Issuance
- Documentation



It is possible that a VOC transfer may forget proof of identification and residency. Ask your Trainer where to locate the VOC Missing Proofs, 1st and 2nd Contact document on the Idaho WIC webpage.

A copy of the Letter of Ineligibility can be found in the Idaho WIC website. Ask your Trainer how to locate the Letter of Ineligibility.

Activity 6:

1 Mark the following statements True (T) or False (F). If false, correct the statement to make it true.

T or F: Migrant families are not given a VOC unless they ask for one.

T or F: A child who has turned 5 years old is ineligible for the WIC program.

T or F: Individuals who transfer from a WIC program in another state are treated as new applicants.

2. Fill in the blanks.

Review the _____ document for the participant’s name, the date the participant was certified, and the date that certification expired. If any of this information is missing, the _____ is not valid.

Check the _____ date. If it has expired, treat the transfer as a new applicant. If the certification has not expired:

Review proof of _____ and _____.

_____ the Participant Rights, Responsibilities and Consent. and _____ the participant about WIC in Idaho, especially how to use WIC checks.

Issue _____ and _____, and provide nutrition education and referrals as needed.

ANTHROPOMETRICS

Module 1: Anthropometric Measurements

Activity 1: With your Trainer, correctly demonstrate the accurate and precise techniques for measuring recumbent length and weight for an infant.



- a. With your Trainer, review the type of infant scale you will use in your clinic.
- b. Describe the difference between accuracy and precision in measuring.
- c. Describe when recumbent length is still used with children up to 36 months old.

Activity 2: With your Trainer, correctly demonstrate the accurate and precise techniques for measuring weight and height for an adult.

Activity 3: With your Trainer, correctly demonstrate the accurate and precise techniques for measuring weight and height for children ≥ 2 years old.



- a. At what age do you begin measuring a child's height in the standing position?
- b. Review with your Trainer the type of scale you will use to weigh children/adults in your clinic.
- c. For weight, what is the unit of measurement which appears on the child/adult scale in your clinic?
- d. Does the WIC computer system auto-default to recumbent length for children 36 months and younger?
- e. For the child/adult stadiometer, what is the unit of measurement you will enter into the WIC computer system for height?

Activity 4: Instructions: Name as many common errors as possible in measuring weight for infants, children, and adults.



Take a precise and accurate weight measurement of a child or woman. Document this number. Next, using the same child or woman, weigh the person with their shoes and outer clothes (if applicable) on. Document this number. Compare the numerical difference between the first and second weight measurements.

Take a precise and accurate weight measurement of a child or woman. Document this number. Next, using the same child or woman, weigh the person as they stand towards the edge of the scale rather than in the center of the scale. Document this number. Compare the numerical difference between the first and second weight measurements.

How can the difference between an accurate and an inaccurate weight measurement potentially affect WIC data in the computer system?

Activity 5: Instructions: Name as many common errors as possible in measuring recumbent length.



Show the Trainer the correct place to read the measurement on the recumbent length board.

Take a precise and accurate recumbent length measurement of an infant. Document this number. Next, using the same infant, measure the length using only one leg for the measurement. Document this number. Next, using the same infant, measure the length with the infant's toes pointed. Document this number. Compare the numerical differences between the first, second, and third recumbent length measurements.

How can the difference between an accurate and an inaccurate measurement potentially affect WIC data in the computer system?

Activity 6: Instructions: Name as many common errors as possible in measuring height for children and adults.



Take a precise and accurate height measurement of a child or woman. Document this number. Next, using the same child or woman, have the child or woman drop their head downward so their chin is near their chest. Measure this height and document this number. Compare the numerical difference between the first and second height measurements.

How can the difference between an accurate and an inaccurate measurement potentially affect WIC data in the computer system?

Module 2: Defining Body Mass Index & How to Interpret Growth Charts

Activity 7: Instructions: Review information for three child growth charts below.

1. For each child, determine if the growth pattern indicates **normal height growth, short stature, tall height growth, normal weight, underweight, or overweight**.
2. For each child, practice having a conversation with the child's responsible adult to discuss the findings of the weight and height assessment. Please be sensitive to the feelings of the child and responsible adult
 - a. A 3 y.o. male charted as 94 percentile height-for-age.
His weight-for-height charted at 97 percentile weight-for-height.
 - b. A 2 y.o. female charted as 55 percentile height-for-age.
Her weight-for-height charted at 9 percentile weight-for-height.
 - c. A 4 y.o. female charted at 10 percentile height-for-age.
Her weight-for-height charted at 90 percentile weight-for-height.

Activity 8: Instructions: Review the weight and weight gain data for two pregnant women. Answer the questions and graph the data on the appropriate prenatal weight gain chart available in your clinic; charts may be printed from the online Idaho WIC Program Policy Manual, Computer Down Kit.

1. Marci is 16 weeks gestation with a singleton pregnancy. Her pre-pregnancy height is 5'2" and pre-pregnancy weight is 150 pounds, which is a pre-pregnancy BMI of 27.4. Her weight at 12 weeks gestation was 153 pounds. Her current weight is 155 pounds.
 - a. What is Marci's pre-pregnancy weight status based off her BMI? (Module 2, Slide 12)
 - b. How much total weight is recommended for Marci to gain throughout her pregnancy based upon her pre-pregnancy BMI? (Module 2, Slide 12)
 - c. How many weeks does Marci have left if she delivers a full-term baby? (Module 2, slide 16)
 - d. Choose the appropriate prenatal weight gain chart and graph Marci's weight progress.

2. Natasha is 30 weeks gestation with a singleton pregnancy. Her pre-pregnancy height is 5'8" and pre-pregnancy weight is 157 pounds, which is a pre-pregnancy BMI of 23.9. Her weight at 20 weeks gestation was 164 pounds. Her weight at 25 weeks gestation was 169 pounds. Her current weight is 173 pounds.
 - a. What is Natasha's pre-pregnancy weight status based off her BMI? (Module 2, Slide 12)
 - b. How much total weight is recommended for Natasha to gain throughout her pregnancy based upon her pre-pregnancy BMI? (Module 2, Slide 12)
 - c. How many weeks does Natasha have left if she delivers a full-term baby? (Module 2, slide 16)
 - d. Choose the appropriate prenatal weight gain chart and graph Natasha's weight progress.

HEMATOLOGY

Module 1: Hematological Testing Procedures



Ask your Trainer where to locate the Hgb Collection Reference document on the WIC website under the training section.

Check with your Trainer regarding its cleaning and calibration requirements

Ask your Trainer and other staff what they do to keep children calm.

Discuss with your Trainer how you will assess a need to 'retest'.

Activity 1:

Part A: Answer the following statements as (T) true or (F) false. If they are false, make them true.

T or F: If not enough blood flows to fill cuvette, it is okay to “milk” or squeeze the finger to encourage flow.

T or F: The first drop after puncture should be wiped off with a clean tissue.

T or F: The finger (or toe) should be wiped clean with a cotton ball wet with alcohol and punctured immediately.

T or F: Air bubbles in the blood sample will not affect results.

T or F: If a WIC client has low hemoglobin, the client is certainly anemic.

T or F: Used lancets are discarded in the trash can.

Part B: Answer the following questions.

1. The hemoglobin test is taken in WIC: (circle as many as apply)
 - a. as a standard part of certifying applicants
 - b. to determine blood loss
 - c. to screen for diabetes
2. Beverly Thomas, 22 years old, is breastfeeding her newborn and is in for her six week certification visit. You read in her chart that staff had a difficult time getting enough blood for a test at her initial certification visit. List at least two things you can do to try to obtain sufficient blood this time.
3. List four reasons for an inaccurate hemoglobin value resulting in error.



Ask your Trainer where to find the altitude information for the clinic(s) you will be working in.

Module 2: Understanding Values

Activity 2: The following criteria are used to determine if an applicant is at nutritional risk. Fill in the following blank spaces indicating levels used to define low hemoglobin or low hematocrit. You will find the values based on your agency in the *Idaho WIC Policy Manual Nutrition Risk Criteria for Risk 201: Low Hematocrit/Low Hemoglobin*, under the *Hemoglobin and Hematocrit Baseline Values* tables.

Pregnant Women:

Hematocrit

1st Trimester: less than ____%

2nd Trimester: less than ____%

3rd Trimester: less than ____%

Hemoglobin

1st Trimester: less than ____ %grams (gms)/100 milliliters (mls)

2nd Trimester: less than ____ %gms/100mls

3rd Trimester: less than ____ %gms/100mls

Breastfeeding Women:

Hematocrit: less than ____%

Hemoglobin: less than ____ %gms/100mls

Postpartum Women:

Hematocrit: less than ____%

Hemoglobin: less than ____ %gms/100mls

Infants:

Hematocrit: less than ____%

Hemoglobin: less than ____ %gms/100mls

Children:

Hematocrit

Up to age 2 years: less than ____%

2 years to 5 years: less than ____%

Hemoglobin

Up to age 2 years: less than ____%gms/100mls

2 years to 5 years: less than ____%gms/100mls

Activity 3:

Part A: Mark the following statements as (T) true or (F) false. If they are false, make them true.

T or F: The hemoglobin or hematocrit test is also used to detect low blood sugar.

T or F: Iron is a part of hemoglobin, a molecule in red blood cells that carries oxygen.

T or F: Clients with low hemoglobin (but > 10) should receive nutrition education and be scheduled for a repeat test six months later.

T or F: Clients with very low values or whose low values fail to improve should be referred to the R.D.

Part B: Write in the answer.

1. List those WIC applicants for whom a hemoglobin or hematocrit test is not performed:
2. When is it acceptable to use a hemoglobin or hematocrit test taken at a physician's office (instead of doing another one in the WIC office)?

HEALTH & NUTRITION ASSESSMENT

Module 1: Nutrition Assessment Interview Overview

Ask your Trainer to help you **locate**:

- **Nutrition Assessment Interview for each participant category** in WISPr (view existing participants). Briefly review the interview questions and responses, this will help you become familiar with what a completed assessment looks like (you'll be reviewing the questions in more detail with Module 2).
- The **Idaho WIC Policy Manual** on the Idaho WIC website, then locate the **Nutrition Assessment computer down forms** (in the Idaho WIC Policy Manual) for each participant category (infant, child, prenatal, and postpartum). As the title indicates, these are forms that may be printed and used when the WISPr computer system is temporarily 'down' and not accessible.

1. How might you use information from a nutrition assessment interview to help a WIC participant?

Module 2: Understanding Nutrition Assessment Interview

Activity 2:

Go to the Idaho WIC website and locate the online Idaho WIC Policy Manual, Nutrition Risk Criteria (NRC). Open the NRC section and open the navigation pane buttons (ask your Trainer for assistance as needed). The definition section of each NRC tells you what is required for that nutrition risk to be used during certification or a health screen appointment. Review each NRC definition and complete the following table:

What NRC would be assigned for the following certification scenarios?	
<i>Scenario:</i>	<i>NRC:</i>
Baby weighing 5 pounds 6 ounces at birth	
Postpartum woman who had gestational diabetes during her last pregnancy	
Woman who is 3 months pregnant and hasn't been to a doctor yet	
Child whose doctor diagnosed a peanut allergy	
Baby lives with an aunt who smokes at home	
Breastfeeding woman who was recently diagnosed with a breast infection (mastitis)	
Child whose dentist diagnosed two cavities	
Postpartum woman taking prescription pain medication (for pain management) which decreased her appetite resulting in	

weight loss	
Pregnant woman who has been nauseated and has not gained any weight during her pregnancy	
Baby born at 36 weeks gestation	
Postpartum woman whose baby was stillbirth at delivery	
Child who was born with cerebral palsy (diagnosed by a doctor)	
Breastfeeding woman with no nutrition risk herself, but her baby has an identified NRC	
Child whose parents work as farm laborers and move to different crop areas based on the season	
Pregnant woman who craves and eats paint chips	
Baby has a daily afternoon nap with a bottle full of juice	

Activity 3:

Think about the Assessment Interview questions you reviewed in this module and answer the questions below:

1. Goran, who is 3 years old, is here with his mom. His mom has reviewed the Lifestyle Assessment Interview questions with you and wants to know why she needs to tell you how many hours her child watches TV during a typical day? What would you say to her?
2. What questions are asked on the infant Assessment Interview that help you determine if a baby is at risk for Baby Bottle Tooth Decay?
3. Nora is pregnant. She indicates that she smokes. Why is smoking a concern during pregnancy?
4. What question in the Assessment Interview can help you determine if the participant has something specific they want to discuss today?
3. Why is it helpful to know how a parent feels about their child's growth?
4. Why is it important to identify what medical conditions a person has?

Module 3: Understanding the Nutrition Health Assessment

Activity 4:

Think about the Assessment Interview questions you reviewed in this module and answer the questions below:

1. Why is it important to know if a woman is breastfeeding more than one baby?
2. Why do you think WIC screens immunizations during the first two years of life?
3. What might you do or say if a woman tells you her baby died at birth?

Module 4: Using Critical Thinking

Activity 5:

Observe a certification appointment and answer the following questions:

1. *Critical thinking* can be defined as using one's thoughts to:
 - ___ checking for accuracy
 - ___ day-dreaming, looking out the window
 - ___ recognizing information that is important to WIC
 - ___ being too busy to pay any attention to what the participant is saying
 - ___ evaluating a participant's progress towards a goal
 - ___ considering the participant's viewpoint
 - ___ using all relevant information to determine a realistic nutrition education plan
3. *Critical thinking* is important to use during WIC appointments because it allows staff to:

Have your Trainer help you locate additional resources in the training section of the Idaho WIC website:

- **ABCDE Assessment Tool:** a quick reference tool that identifies how NRC are organized by number grouping and concept (anthropometric, biochemical, clinical/health/medical, diet/nutrition, environmental). Look for this resource in the training section of the Idaho WIC website.
- Coming soon: **VENA Nutrition Counseling Tool** which provides an overview of the assessment process related to nutrition education counseling.

PCE

All Activities are located at <https://id.train.org/DesktopShell.aspx> under the WIC PCE course. Activities can be found under the **Resources** button once you launch each individual online module (found on the lower left corner). There are 9 modules total, each with activities.

REFERRALS

Module 1: Referrals to Health and Social Services



Ask your Trainer about immunization training, resources and referrals in your clinic.

Activity 1: You have learned that some referrals are required, such as Medicaid/CHIP, SNAP, SA, TANF/TAFI and immunizations, while others may be needed based on the participant's responses during the nutrition/health assessment such as the food bank or family planning services. Some referrals such as SA may be a more challenging referral for staff. When a caretaker, participant or responsible adult has reported "no" to the nutrition/health assessment questions on alcohol, tobacco or street drug use indicating that they do not need a substance abuse referral, staff must still provide the referral.

Below are some sample talking points on how you could provide the SA referral in these circumstances.

"I know that you may not need this referral based on your answers to the questions, but we are required to give this referral to all WIC participants. Maybe there is someone you know among your friends and family that might find this useful."

"Here is substance abuse information if you, a friend or family member knows of someone who could benefit from the resource."

In some circumstances, a participant may answer "yes" to one of the questions such as smoking in general or during pregnancy. Below are some sample talking points on you could provide the SA referral in these circumstances.

"Making changes can be challenging, we want you to have all the information to support you if you decide to reduce or quit smoking. If you are interested, here is more information."

"As a mother, we know you want to provide the healthiest environment for your baby, setting a goal to stop or reduce smoking can help. If you are interested in making that change there are options based on your goals, which you can explore if desired with this contact information."

What are some talking points you could use to provide referrals? Practice what you would say to a newly pregnant participant with the three referrals listed below.

1. Substance Abuse (practice your answers for both participants answering "yes" and "no" for alcohol, tobacco, or street drug use)
2. TANF/TAFI
3. Medicaid

FOOD PACKAGES

Module 1: WIC Food Packages

Activity 1:

1. List the seven main food packages.
2. Name two options that women and children can choose in a food package.
3. Name two choices that a homeless participant can choose in a food package.



Review tips for shopping with WIC foods.

Module 2: Authorized Food List

Activity 2: Locate a copy of the Idaho Authorized Food List. Locate some sample WIC checks. Using the sample WIC checks and the food list, make a shopping list of the items you would purchase at the store.

Activity 3: Obtain a copy of the Medical Documentation Form. This can be found on the Idaho WIC website under Health Care Professionals – Forms. Review this form. Discuss with your Trainer the common reasons for using this form and the procedure in your clinic.

ISSUING WIC CHECKS

Module 1: Check Register

Activity 1: Ask your Trainer to observe two participants being issued WIC checks. Answer the following questions during your observation:

1. Did the participant review their checks before they signed the check register?
2. Did the participant have any questions about their checks or food package? If yes, what were they?

Activity 2: Log on to the Idaho WIC website and refer to the Idaho WIC Policy Manual, Chapter 7 Section C.

Review the following special situations:

- Mailing WIC Checks and Cash Value Vouchers
 - Review Guidelines, Limitations, and Procedures
 - Ask your Trainer in what circumstances are checks mailed to participants
- Voiding WIC Checks and Cash Value Vouchers
 - Review Reasons and Procedures

Module 2: WIC Identification Folder

Activity 3: Locate a WIC ID Folder. Refer to the steps for filling out a folder then practice filling one out using a false name and WIC ID number. Ask your Trainer if you have any questions about this process. If possible, observe a WIC staff person filling out a WIC ID folder for a participant.

Module 3: Issuing WIC Checks and Cash Value Vouchers

Activity 4: At this time, view the DVD *Shopping with WIC Checks*. After you have watched the DVD, make arrangements with your Trainer to observe staff that are:

- Identifying and planning food packages with new participants.
- Issuing WIC checks/CVVs, issuing WIC ID Folders, and explaining how to shop with WIC checks/CVVs.
- Ask your Trainer whether classes on shopping with WIC checks/CVVs and using WIC foods are offered in your clinic. Make plans to attend one of the classes, if available.
- List five (5) tips on shopping with WIC checks/CVVs for a new participant.

Activity 5: Please mark the following questions (T) true or (F) false. Correct any false statements and make them true.

T or F Lost or stolen WIC checks/CVVs are always replaced.

T or F Unclaimed WIC checks/CVVs must be voided within one week of the print date, but no later than the last day of the month.

Activity 6 (Optional): Shopping with WIC Checks and Cash Value Vouchers

Compliance buys are one way vendors are monitored to be sure they are following the regulations of the WIC Program. Ask your coordinator when compliance buys will happen in your area. Ask to participate in a compliance buy. Experiencing what it is like to shop with WIC checks/CVVs makes it easier to explain to new participants how to shop with them.

BASIC NUTRITION

Module 1: Intro To Nutrition

Activity 1: Identify the main type of fat found in each food source including saturated, monounsaturated, polyunsaturated, or trans-fat (*Refer to Module 1, Slides 29, 30, 31, and 32*).

Food Source	Type of Fat (s)
<i>Ex. Olives</i>	<i>Ex. Monounsaturated</i>
Whole Milk and Cheese	
Stick Margarine	
Fried foods such as French fries	
Canola oil	
Walnuts	
Beef and Pork (certain cuts)	
Fatty Seafood (ie: salmon and tuna)	
Avocado	
Butter and cream	
Peanut Butter (non-hydrogenated type)	
Baked goods such as cookies and crackers	
Soybeans	

1. When talking to a WIC participant, what are some suggestions for beginning a conversation about dietary fat intake?
2. What can a WIC participant do to keep fat in the diet at an acceptable level (*Refer to Module 1, Slide 33*)?

Activity 2: Create a sample Breakfast and Lunch meal for a 3-4 year old. Both meals shall be well-balanced and include at least one fiber containing food and at least one protein containing food (*Refer to Module 1, Slides 24, 25, 26, 27, and 39*).

Ex. Lunch	<p>Turkey/Cheese Quesadilla: 1 slice turkey breast, 1 slice cheese, 2 small whole wheat tortillas (6" diameter), 1/4 cup chopped tomatoes.</p> <p>Carrots Sticks with Dip: 1/2 cup carrot sticks and Tbsp. low fat ranch dip.</p> <p>Drink: 1 cup of low-fat milk or ½ cup juice.</p>
Breakfast	
Lunch	

1. What does “well-balanced” mean to you?

2. Why is it important to include fiber in the diet regularly (*Refer to Module 1, Slide 24 and 26*)?

3. Why is it important to include protein in the diet regularly (*Refer to Module 1, Slide 38*)?

Activity 3: Analyze the eating pattern for a pregnant WIC participant. In the checkbox, identify whether each food item contains Vitamin C, Vitamin A, Folic Acid, or none of the three. Some food items have *more than one* or *no* answers (Refer to Module 1, Slides 49, 50, 52, and 53).

Meal	Foods Eaten	Vitamin C	Vitamin A	Folic Acid
Ex. 7:30am	<i>Oatmeal prepared with skim milk</i>		<i>x (milk)</i>	<i>x (oatmeal)</i>
	<i>1 Egg</i>		<i>x</i>	
	<i>Orange slices</i>	<i>x</i>		
10:00am	1 slice Whole Wheat bread			
	1 Tbsp. Peanut butter			
	½ c. Mango			
	Water			
12:00pm	Turkey sandwich made with: Whole wheat bread			
	Turkey			
	Cheddar cheese			
	Spinach leaves			
	1 c. Yogurt			
	1 c. Strawberries			
	Water			
3:30pm	Handful of Almonds			
	1 c. Skim Milk			
6:30pm	2 Corn Tortillas			
	Pinto Beans			
	Shredded Chicken			
	Sautéed Green and Red Peppers			
	Brown Rice			
	Water			

1. What are the benefits of including Vitamin A in your diet (Refer to Module 1, Slide 49)?
2. What are the benefits of including Vitamin C in your diet (Refer to Module 1, Slide 50)?
3. What are the benefits of including Folic Acid in your diet (Refer to Module 1, Slide 52)?

Activity 4: In the table below, list at least three foods rich in each nutrient. Avoid listing foods already reviewed in Activity 3 (Refer to Module 1, Slides 39, 49, 50, 68, and 72).

Protein	Calcium	Iron	Vitamin A	Vitamin C
<i>Ex. Eggs</i>	<i>Ex. Soy milk</i>	<i>Ex. Swiss chard</i>	<i>Ex. Apricot</i>	<i>Ex. Kiwi</i>

Activity 5: Review the *Mock Scenario* and answer the following questions.

Mock Scenario: You are certifying a 3 year old male. After talking with the child’s care taker or responsible adult, you are able to complete the child’s WIC nutrition assessment utilizing the WIC computer system.

ANTHROPOMETRIC: Weight and height are within healthy limits

BIOCHEMICAL: Hemoglobin: 9.9 g/dL (healthy range for 2-5 years old at that elevation: 11.1 – 16.0 g/dL)

CLINICAL: N/A

DIETARY: Mom describes her child as a picky eater. He dislikes chicken, red meat, beans, and eggs, and if mom tries feeding him meat, he spits it out. His favorite foods include potatoes, vegetable soup, WIC cold cereal, and cheese. Fruits and vegetables he eats include watermelon, banana, grapes, mango, corn, carrots, potatoes, and green peas. Mom states he eats sweets, such as cookies, sweet bread, and sweetened cereals and they eat fast food 2x per week. He reportedly drinks 32 ounces of 1% milk per day, and also reports drinking juice, fresca, kool-aid, gatorade, and soda. She tells you he drinks 8 ounces of water per day.

ENVIRONMENTAL/OTHER FACTORS: No medications or vitamins/minerals reported

1. What iron containing foods does this child eat? (Refer to Module 1, Slides 72 and 73).
2. What factors put this child at risk for iron deficiency? (Refer to Module 1, Slide 74 and 75).
3. What are two possible topics you could discuss with the child’s care taker or responsible adult for increasing iron intake? (Refer to Module 1, Slides 72, 73, 74, and 75).
4. What is the relationship between calcium intake and iron absorption? (Refer to Module 1, Slide 75).

Module 2: Guidelines and Standards

NOTE: Access to the website www.choosemyplate.gov is required in order to complete **Activity #6**.

Activity 6: ChooseMyPlate.gov Scavenger Hunt

Navigate to the website, <http://www.choosemyplate.gov> to find the answers to the following questions. This website is a resource you may bookmark on your computer to share with participants later.

1. Name three tips for eating healthy on a budget.
2. Name three tips for helping picky eaters try new foods (preschoolers section).
3. What foods are examples of whole grains?
4. What are three tips for parents to cut back on their child's sweet treats?
5. What is the recommended intake for vegetables for a preschooler?

Module 3: Special Considerations

Activity 7: Review the *Mock Scenario* and answer the following questions.

Mock Scenario: You are certifying a postpartum WIC participant. After greeting the participant, you are able to complete her WIC nutrition assessment using the WIC computer system (WISPr).

ANTHROPOMETRIC:

Current Weight: 158 pounds

Pre-pregnancy weight: 128 pounds

Height: 5'5"

BMI: 28.4

The participant says she is interested in losing weight and would like to lose 30 pounds.

BIOCHEMICAL: N/A

CLINICAL: The participant recently went to the dentist and had two cavities repaired. She takes prenatal vitamins.

DIETARY: The participant drinks 16 ounces of juice per day, soda 2x per week, and kool-aid occasionally. She tells you she drinks about 16 ounces of water per day. She states she craves sweets and reports eating sweets every day, particularly cookies and pastries. She reports eating fast food 3x per week.

She states that she does not eat enough vegetables, and she does like to eat bananas, melon, apples, carrots, and potatoes. She purchases white bread.

ENVIRONMENTAL/OTHER FACTORS: N/A

1. After offering various education topics, you discover the participant is interested in energy balance and calories. What can you tell the participant about these topics? (*Refer to Module 3, Slide 11*).

2. What is the participant's current BMI weight status? (*Refer to Module 3, Slide 7*).

3. If the WIC participant asks for suggestions to promote weight loss, what are some possible responses? (*Refer to Module 3, Slides 9 and 12*).

CARE PLAN

Module 1: Care Plan Introduction

Activity 1: Consider the following situations. Why wouldn't you write a care plan? Discuss with a coworker or your Trainer.

- Provide nutrition counseling about weight gain
- Issue checks and explain a change to the food list
- Complete a certification or a health screen
- Talk on the phone about breastfeeding concerns
- Issue a single user electric breast pump
- Give instructions on the phone about how to get an authorized signer
- Provide an individual appointment (between certifications) counting as a nutrition education contact.
- Check infant hemoglobin in between education/certification appointments.

Module 2: Components

Activity 2:

Match the bolded words in the *Example Care Plan* with the type of information recommended for the care plan section under *What Belongs in a Care Plan* within Module 2.

Write and/or discuss why the information would be included in the care plan and why it is included in the section it is.

As you review the care plan, notice how information may be worded for a participant who is receiving an individual nutrition education after certification, but prior to health screen.

Example Care Plan

Care Plan	Staff:	Clinic:
-----------	--------	---------

Care Plan Type:

Subjective:

4/7/2015 Previous Goals: Offer at least 1 vegetable serving every day

Mom's **concerned** Joe's never liked vegetables. **Since last appointment**, she's offered vegetables 1 or 2 times a day and used WIC ideas like serving vegetables with melted cheese. Joe only tastes it if he's very hungry. He likes carrots now. Mom **wants** to plant a vegetable garden with free seeds she got from food bank.

Objective:

Age: 3 y 8 m
Bloodwork Date: 4/7/2015
Hemoglobin: 13
Anthropometrics Date: 4/7/2015
Height: 40 in
Weight: 35 lbs
BMI: 15.4

Assessment:

Certification Risks:
Risk 401: Failure to Meet Dietary Guidelines For Americans

Picky about vegetables; **growing well**. Mom **ready for change**.

Handouts:

- 1:
- 2:
- 3:

Goals:

- 1:
- 2:

Counseling / Plan:

Praised progress in offering vegetables daily. **Discussed:** growing a vegetable garden can help Joe learn to like vegetables; ideas to minimize picky eating behavior. **Scheduled** for Kids in the Kitchen Class 10 June 2015.

Activity 3: Review some care plans written by others. You may use samples at the end of this guidebook, the care plan appendix, or ones found in WISPr. Consider the following questions:

1. What, if anything, is missing?
2. How does the care plan give you a picture of the needs and goals of the participant?
3. How does the care plan help you understand what occurred at the appointment?
4. How does the care plan help you know what to discuss at the next appointment?
5. How does the information relate to the responsible adult's concerns, interests, and/or the nutrition risks?
6. What can you learn about writing care plans from reviewing these care plans?

Activity 4: Have a Trainer or coworker review some care plans you have written for participants. Have them consider the following and provide feedback:

1. What, if anything, is missing?
2. How does the care plan give you a picture of the needs and goals of the participant?
3. How does the care plan help you understand what occurred at the appointment?
4. How does the care plan help you know what to discuss at the next appointment?
5. How does the information relate to the responsible adult's concerns, interests, and/or the nutrition risks?

Activity 5: This activity provides you with the opportunity to sit in on an appointment, and then develop a care plan based on what you observed.

1. Schedule an appointment to observe.
2. Prior to observing the appointment, review the most recent care plan for the participant.
3. Print a blank care plan to write on while in the observation.
4. As you observe, make notes as to what you might include in the care plan.
5. Go into WISPr UAT and type a care plan for the participant based on your notes.
6. Compare your care plan with the care plan written by the staff member completing the appointment and consider questions such as the following:
 - a. Are there any differences in the focus of the care plan? If so, what are they?
 - b. How does the phrasing vary?
7. What ideas can you gather for phrasing information concisely?
8. What details from the appointment are relevant to the care of the participant?

BREASTFEEDING NUTRITION

Module 1, 2 & 3

Activity 1: With your Trainer:

1. Discuss a new employee's role in breastfeeding promotion and support.
2. What breastfeeding services are available for WIC participants in your *local agency*?
(Module 3, page 4)
3. Which breastfeeding services are available for WIC participants in your *community*?
(Module 3, page 5 – the Family Health Hotline and website are not resources for Idaho participants). Visit the breastfeeding page of the Idaho WIC website to find breastfeeding resources in your community.
4. Discuss which breastfeeding supplies are provided by your *local agency* for WIC participants.
(Module 3, page 4)

Activity 2: With your Trainer:

Instructions: A postpartum participant is in the office for her certification and she states she is breastfeeding. Practice asking probing questions to assist in gathering more information about breastfeeding. The purpose of a probing question is to gain more insight about a situation, and the intent is to solve real problems. What are questions you can ask the postpartum participant to determine whether breastfeeding is going well? What are questions you can ask to identify possible breastfeeding concerns?

Activity 3: Four roles typically found in a WIC Local Agency and/or clinic.

- WIC employee *without* advanced breastfeeding training
- Certified Breastfeeding Consultant or Educator (WIC employee *with* completion of at least 35 hours of formal breastfeeding education)
- Breastfeeding Peer Counselor
- International Board Certified Lactation Consultant (IBCLC)

Instructions: Learn to recognize a WIC employee's Scope of Practice when providing breastfeeding education to WIC participants. Review the following breastfeeding scenarios. Identify which of the four roles listed above are trained to handle each scenario. Each scenario may have more than one answer.

1. Mom thinks she needs to pump, even though she is not going back to work and breastfeeding is going well. Discuss what makes her think she needs to pump, and the advantages and possible disadvantages of pumping.

2. Mom has a two week old baby who is has not re-gained to his birth weight. The baby has had one poopy diaper in the past 24 hours and is nursing 15 times per day. Mom has nipple damage.
3. Mom wants to supplement with formula because she thinks it is the best of both worlds. Who should discuss with mom her perspective of the situation, the benefits of breastfeeding, and her support system?"
4. Mom of a newborn pumps two ounces of breast milk and thinks she has low milk supply. She would like help assessing whether or not her milk supply may be low.
5. A breastfeeding mom is two months postpartum and interested in joining a breastfeeding support group. Who can provide mom with information about breastfeeding support groups offered by your local agency and community.
6. Mom of a six week old thinks she is losing her milk supply since baby is constantly feeding. Who will help determine what factors make mom think she is losing her milk supply?
7. Mom is two months postpartum. She is complaining of the following symptoms: hard breast, skin shiny on the breast, breast larger than normal, breast warm to the touch, and breast pain. The symptoms appeared for the first time this morning, and her baby slept seven hours without nursing last night for the first time. Who can discuss how to treat and prevent engorgement?
8. The mother is 12 days postpartum. She explains her baby consistently refuses to nurse on the left breast. She also complains the left breast is hard, larger than normal, and she has breast pain.
9. Mom says her baby is growing well and eating 10 times per day, however, she is concerned baby often has trouble swallowing all the milk released and seems to choke and cough while feeding. She would like you to observe a feeding so you can better assess the situation.
10. A pregnant WIC participant is in your office and contemplating whether or not she would like to breastfeed. Who will share the benefits of breastfeeding to both mom and baby?



Identify the employees in your clinic and/or local agency with the IBCLC credential.

Identify the employees in your clinic and/or local agency who have successfully completed at least 35 hours of breastfeeding education (Certified Lactation Educators or Counselors).

If applicable, identify the breastfeeding peer counselors in your clinic and/or local agency.

If applicable in your agency, what are the responsibilities of the breastfeeding peer counselor?

Activity 4: True or False. Test your breastfeeding IQ regarding mother's nutrition and breastfeeding. (Module 4, Slide 19, 21 and Module 5 Video)

T or F: If a breastfeeding woman's diet is not perfect, the milk will still be good for her baby.

T or F: A breastfeeding woman should eat or avoid eating certain foods.

T or F: A breastfeeding woman needs to eat more than usual to make enough milk.

T or F: It is okay for a woman to lose weight while breastfeeding.

T or F: It is acceptable for a breastfeeding woman to drink caffeinated drinks.

T or F: A guideline for hydration while breastfeeding is to "drink to thirst."

T or F: If a breastfeeding woman eats garlic, broccoli, cabbage, or spicy foods, it can give the baby gas.

T or F: Certain foods will increase milk production.

T or F: If a breastfeeding woman suspects a food is affecting her baby, try avoiding it.

T or F: If a breastfeeding woman is a vegetarian, she needs to eat foods with vitamin B₁₂ (such as eggs or dairy), eat foods with vitamin B₁₂ added, or take a vitamin B₁₂ supplement.

CUSTOMER SERVICE & COMMUNICATION

Module 1: Rapport Building & Communication Skills

Activity 1: Rapport Building and Communication Skills

1. Arrange with your Trainer to observe one or more of the situations below to assess how your co-workers communicate with participants. You may watch them:

- Greet participants as they arrive at the site
- Determine eligibility
- Complete an assessment
- Counsel or teach class
- Hand out WIC checks/CVV's

2. Make sure the co-worker explains to the participant that you are observing the session for training purposes.

3. Write down your observations. Note anything that seems to help communication.

4. Discuss your observations with your Trainer.

Situation:

Observations:

(Note attitude, actions, talking, listening, appearance, and setting)

Greeting participants

Determining Eligibility

Completing an assessment

Counseling

Teaching a class

Handing out WIC checks/CVV's

Activity 2:

1. Mark the following as **(T) true or (F) false**:

- Communication is the giving and receiving of information.
- Good communication can help WIC staff work as a team.
- Good communication is not necessary for good customer service.
- Our attitude and our appearance are not part of how we communicate.
- Avoiding judgmental responses is important to good communication.
- Maintaining privacy is not important to good communication.

2. Put a check mark before any of the items that would help to **improve communication**:

- Leaning forward in chair, nodding, and smiling
- Listening carefully
- Identifying the speaker's feelings
- Sitting with folded arms
- Chewing gum while talking
- Starting the session on time

3. Mark the following behaviors as **"P" for having a positive effect** on communication or **"N" for having a negative effect** on communication:

- Correcting others
- Interrupting
- Being flexible
- Showing respect
- Being polite
- Listening carefully

4. **Match the statement** that you should avoid with its alternative, more positive statement:

- | | |
|---|---|
| <input type="checkbox"/> "You didn't do this right!" | A. "I'm not sure I understand. Please explain more." |
| <input type="checkbox"/> "You aren't making any sense!" | B. "If you were to exercise more often, what type of activity could you picture yourself doing?" |
| <input type="checkbox"/> "You should exercise more." | C. "Please feel free to have a seat while you are waiting." |
| <input type="checkbox"/> "Sit here!" | D. "There are a few items here that need to be changed." |

Module 2: Cultural Competency

Activity 3:

Cultural Competency

It is important that you become familiar with the variety of cultures served by your WIC agency. Being aware of the diverse needs of participants will help you to provide more effective services.

Instructions:

1. Choose 2 cultures your WIC agency serves. Keep in mind that culture is not just ethnicity. For example, you may choose teenagers or new immigrants if your agency serves these cultures.
2. Complete the chart for each cultural group. Try to talk to someone from each of these cultures. You may also want to talk with coworkers, friends, or family members for information.
3. Remember the information you gather will be true for some but not all participants of the cultural group. The information will help guide you, but you should always treat each participant as an individual (avoid stereotypes or assumptions).

Name of culture:

Cultural beliefs and viewpoints:

1. Foods/nutrition/diet:

2. Pregnancy:

3. Breastfeeding or bottle feeding:

4. Parenting, discipline:

5. Family planning:

6. Health care:

7. Value order of career, time with family, time with friends, personal time:

8. Other important information about this culture:

Activity 4: Communicating with People Who's Language Is Different than Yours

Instructions

This activity will help you understand how your agency handles non-English or limited English speaking participants.

1. Interview your Trainer. Ask her/him to explain how your agency handles non-English or limited English speakers.
2. After you have learned about your agency's procedures, try to observe:
 - a. co-worker counseling a **non-English** speaking participant
 - b. co-worker counseling a **limited English** speaking participant
3. Note your agency's procedures and any tips for communicating with non-English speaking or limited English speaking participants on the form.

Procedure for Communicating with:	
Non-English Speaking Participants	Limited English Speaking Participants
Tips for Communicating with:	
Non-English Speaking Participant	Limited English Speaking Participant

Activity 5: Mark the following as **(T) true** or **(F) false**:

_____ Culture is the shared values, beliefs, views, traditions, norms, customs, arts, folklore, history, and institutions of a group of people.

_____ Culture does not include our ethnicity.

_____ A participant may relate more with her religious background than her ethnic background.

_____ Pregnant teens are a culture served by WIC.

_____ A person may identify with many cultures.

_____ Humor is the same in all cultures.

_____ Culture helps people understand their world.

_____ Showing emotions such as crying is an acceptable behavior in all cultures.

_____ You can assume that all generations of a culture have the same beliefs and values.

_____ When communicating with someone who speaks a different language than you, try to speak slowly, clearly, and focus on the main points.

_____ All cultures agree that “time is money”.

Module 3: Customer Service

Activity 6: Learning Activity: Customer Service

Below are descriptions of 3 situations involving challenging participants. For each situation identify the approach you would take to communicate and provide good customer service to the participant.

Practice your approaches by role playing with your Trainer (your Trainer will pretend to be the participant and you will be the WIC staff person).

- a. A participant comes into the WIC clinic angry. You are the first person she sees. She starts to yell and curse at you. You are unclear as to why she is upset. What do you say to her?
- b. A participant has missed her 3:00 PM appointment. She phones at 4:55 PM and seems very upset. She tells you she needs to be seen today. The site closes at 5:00 PM. What do you say to her?
- c. You are counseling a participant about breastfeeding. She does not trust anything you say. She constantly questions you and rolls her eyes at you. You are not sure she is getting anything out of the session. What do you say to her?

Activity 7: Customer Service

1. Put a check mark before any of the items that **would help** (and not hurt) your communication with someone who is upset:

- constantly interrupting her/him
- sighing in disgust
- referring to the person by name
- acting annoyed
- listening carefully to what s/he says
- staying calm
- dealing with the person's feelings first and then the problem
- being polite
- telling the participant you don't care how they feel
- hanging up the phone (or closing the door) so you don't have to talk with the person who is upset
- asking open-ended questions to find out more information
- offering possible solutions or alternative options

PRENATAL NUTRITION

Module 1: Introduction to Prenatal Nutrition

Activity 1: Mock Scenario: You are certifying a pregnant participant who is 15 weeks gestation. You ask her about activities she has been doing while pregnant and she tells you she walks and rides her horse.

1. What are the American Congress of Obstetricians and Gynecologists recommendations for daily exercise?
2. What does the American Congress of Obstetricians and Gynecologists recommend as examples of appropriate types of exercises while pregnant?
3. How do you respond to the participant about the exercise she currently does?

Module 2: Changes to a Woman's Body

No activities for this Module.

Module 3: Medical Risks and Special Circumstances

Activity 2: Prenatal Nutrition Concerns

Instructions:

1. Describe known risks for consuming illegal drugs during pregnancy.
2. What are ways to avoid contracting the parasite that causes toxoplasmosis?
3. Why is Mercury harmful to the unborn fetus?
4. What are common lead sources?
5. What is pica?
6. If a pregnant woman has pica, what is the treatment?
7. Give three examples of pregnancy-related concerns with a greater impact during the teenage years.
8. Why do women with closely spaced pregnancies have added risks?

Activity 3: Instructions: Identify and discuss WIC’s role in handling domestic violence situations.

1. Find out from your Trainer what domestic violence resources are available for WIC participants (i.e.: shelters, safe homes, counseling services, domestic violence advocacy organizations, hotline number, etc.)?
2. Find out from your Trainer what is your Local Agency’s policy and procedure for domestic violence?
3. The safety of the participant must be the first priority. What are suggestions of what to say or ask if the participant informs you she is in an abusive situation?
4. What are some possible responses when a participant informs you she is in an abusive situation yet declines referral information?

Activity 4: Mock Scenario: A pregnant woman, Andrea, comes into your WIC clinic for her health check appointment. You find out the following information about her:

Age: 30 years old

Height: 5’6”

Pre-pregnancy weight: 175 pounds

Weight at 8 weeks gestation: 177 pounds

Weight at 20 weeks gestation: 189 pounds

Weight at 28 weeks gestation: 198 pounds

She is 28 weeks gestation (pregnant) today

Pre-pregnancy BMI: 28.2

Current weight: 198 pounds

Hgb: 10.1 g/dl, non-smoker

Andrea tells you:

- Does not eat vegetables
- Eats out 5x/week, and typically orders fried foods
- Drinks 1 cup milk/day and no other dairy products
- No prenatal vitamin or other vitamin supplement



Before answering the questions below, have your Trainer show you where the Nutrition Risk Criteria are located in the online Idaho WIC Policy Manual.

Assessment:

1. Refer to the information below and determine if Andrea’s pre-pregnancy Body Mass Index (BMI) is considered: underweight, normal weight, overweight, or obese:

<u>Weight Classification</u>	<u>Definition (BMI)</u>
Underweight	< 18.5
Normal Weight	18.5 to 24.9
Overweight	25.0 to 29.9
Obese	≥30.0

2. What is the amount of weight gain thus far during this pregnancy?



Before answering the questions below, ask your Trainer to help you locate a Prenatal Weight Gain Chart in the online Idaho WIC Policy Manual, Computer-Down Kit section and help you plot Andrea's weight gain.

3. What are her *anthropometric* (weight related) nutrition risk criteria? (Refer to the online Idaho WIC Policy Manual, Nutrition Risk Criteria section).

4. What is her *biochemical* (hemoglobin or hematocrit related) nutrition risk criterion? (refer to the online Idaho WIC Policy Manual; Nutrition Risk Criteria section)

5. What potential maternal complications is Andrea at an increased risk for if she gains too much weight during this pregnancy?

6. What is Andrea's *dietary* (food related) nutrition risk criterion? (refer to the online Idaho WIC Policy Manual; Nutrition Risk Criteria section)

7. After conducting a thorough assessment on Andrea, what are six suitable nutrition education topics you can offer Andrea to choose from as a focus of her appointment?

8. Locate in your clinic which nutrition education handout(s) contain pregnancy-related messages you can offer to discuss with Andrea?

POSTPARTUM NUTRITION

Module 1: Postpartum Nutrition and Weight

Activity 1: Instructions: Match key nutrients for postpartum health with the food sources containing that key nutrient. Next, create a meal that includes foods which contain these four key nutrients.
(Module 1, Slides 6, 7, 9 and 12)

Key Nutrients

Folic Acid _____

Calcium _____

Iron _____

Protein _____

Food Sources

- a. Legumes, leafy greens, orange juice, asparagus, fortified cereals and breads
- b. eggs, beef, chicken, pork, fish, beans, lentils, nuts, tofu, milk, yogurt, cheese
- c. milk, yogurt, cheese
- d. beef, chicken, pork, fish, dried beans, tofu, fortified cereals

My Meal

My Meal	
Food	Key Nutrient(s)

Activity 2: Salina is a new mother who is 6 weeks postpartum. She is 5 feet 4 inches tall and currently weighs 174 pounds. Salina tells you she hopes to lose the weight she gained during her pregnancy and, over time, reach a healthy weight. Salina has been very focused on her new infant and is now ready to focus on herself and change some of her current eating habits.

Based on this scenario, *check* (✓) each of the remarks below that would be an appropriate reply when talking with this participant. Please explain why each statement is or is not appropriate.

1. _____ “This BMI table shows you’re going to have to lose at least 30 pounds to get to a healthy weight, and even more would be better.”
2. _____ “Now that you’ve had the baby, this is a great time to start making some changes in your eating habits and your activity level. Tell me more about what you’ve already done to change some of your eating habits, if anything.”
3. _____ “Look at this great diet I found in a magazine yesterday. It said you could lose up to 5 pounds per week.”
4. _____ “When I had my baby I lost all the extra weight by 6 months. I bet you could do that too.”
5. _____ “I heard you say you would like to improve your weight. It’s great you’re ready to make a change. It’s going to take some time for your body to adjust and lose the extra weight.”
6. _____ “What have you heard about healthy ways to lose weight?”

Activity 3: Reflective Listening Activity

Instructions: Review the “Key Points” below about reflective listening. Next, read statements made by postpartum women about nutrition and physical activity. Practice forming **reflective listening statements** for each statement.

Key Points about Reflective Listening:

A reflection is a brief response that lets the speaker know you’ve been listening. It is not a question. Reflecting helps you check your understanding of what is being said and is also a way to show you understand.

To form effective reflective listening statements, ask yourself:

- What do you think she means?
- Why might this be important to her?
- What might she be feeling about this?
- What might this really mean to her?
- What might she be trying to say that isn’t coming out?
- What else might this mean?

Examples of how to begin your reflective listening statement:

- “So you...”
- “You are...”
- “You think...”
- “You don’t think...”
- “You feel...”
- “It sounds like...”
- “It seems that...”
- “What you’re saying is...”
- “You’re wondering if...”

- “In other words...”
- “It looks like...”
- “I feel as though...”

For more information about reflective listening, revisit the LMS course, WIC PCE – Module 4 of 9 – O.A.R.S.

Postpartum woman:	Your reflective listening response:
I enjoy going to aerobics classes, but I can't afford to join a gym right now.	
I like to walk, but I don't always feel safe walking alone in my neighborhood.	
I have never exercised. I just don't like things like jogging, swimming, or aerobics.	
I want to lose weight, but with a 6 month old, it is hard to find time to exercise.	
I'm hungry but I can't always find time to eat.	
I feel so busy since having the baby, and I don't have much of an appetite. I'm exhausted and wish I could sleep more	

Activity 4: Mock Scenario: You are certifying a postpartum mom. During your assessment you ask her to discuss her biggest concerns and she identifies “my weight” and “exercising.” She says she is already working on her diet, and exercise is where she struggles. *She states...* I enjoy going to aerobics classes, but I can't afford to join a gym right now.

WIC staff reflects: So it sounds like you would take more aerobic classes if it was more affordable.

WIC participant responds: Yes, I would like to lose weight and I always feel better after I exercise.

1. Based on this brief conversation, does this WIC participant seem to understand the advantage of change? Why or why not? (WIC PCE – Module 1 of 9 – What Motivates People to Change)
2. What Stage of Change is this WIC participant in? (WIC PCE – Module 1 of 9 – What Motivates People to Change)
3. You're finished with the assessment. You are hoping to move the participant from the contemplation stage to the preparation stage. What can you say or ask the participant to encourage her to start talking about behavior change? (WIC PCE – Module 1 of 9 – What Motivates People to Change)

WIC staff asks: How important would you say it is for you to find a solution for incorporating affordable exercise into your life? On a scale of 1 to 10, where 1 is not at all important and 10 is extremely important, where would you say you are?

WIC participant responds: Losing this baby weight and feeling good are very important to me. I would say I am an 8.

WIC staff responds: That's great! I can tell exercise is very important to you.

Techniques to Introduce Education to the WIC participant

Option #1: WIC staff asks participant to identify their own ideas for change.

- What are examples of questions you can ask the participant to begin a conversation about potential solutions? Hint: Ask questions in a way which allow the participant to come up with her own ideas. Keep in mind; you're still hoping to move her from contemplation to preparation.

Option #2: WIC staff asks the participant for permission to share information.

- How could you bring up a suggestion for a mom who doesn't have any ideas? Hint: remember to ask permission before sharing.

Option #3: WIC staff presents a "list" of possible topics for the participant to choose from (such as with a circle chart format).

1. What are three suitable topics related to physical activity you can offer to talk about with the participant in order to narrow down the focus of the appointment? (WIC PCE – Module 6 of 9 – Moving from Assessment to Counseling)
2. If necessary, what are options for nutrition education material you might introduce to the WIC participant?
3. Before offering information, such as the nutrition education material, is it necessary to ask the WIC participant for permission to show her the material? Why or why not?
4. Now take a moment to write down how you might ask permission to share information.

WIC staff asks: I have a handout you might find helpful. Would you like to look at it together?

WIC participant responds: Sure.

WIC staff and WIC participant review one to two key points of the handout together.

1. What might the staff person say to the participant after reviewing the handout? Choose the best answer(s).
 - Which of these ideas can you see working for you?
 - How do you feel about using one of these suggestions right now?
 - Can you see how many options you have now?
 - If you decide to include activities like these into your daily life, what would need to change?

2. Last but not least, use the participant’s response in question “1” to set a goal with the participant. Write a closing statement that includes a brief summary of the visit. Include:
 - Participant’s identified goal(s) (make one up)
 - Expression of appreciation
 - Expression of confidence and hope

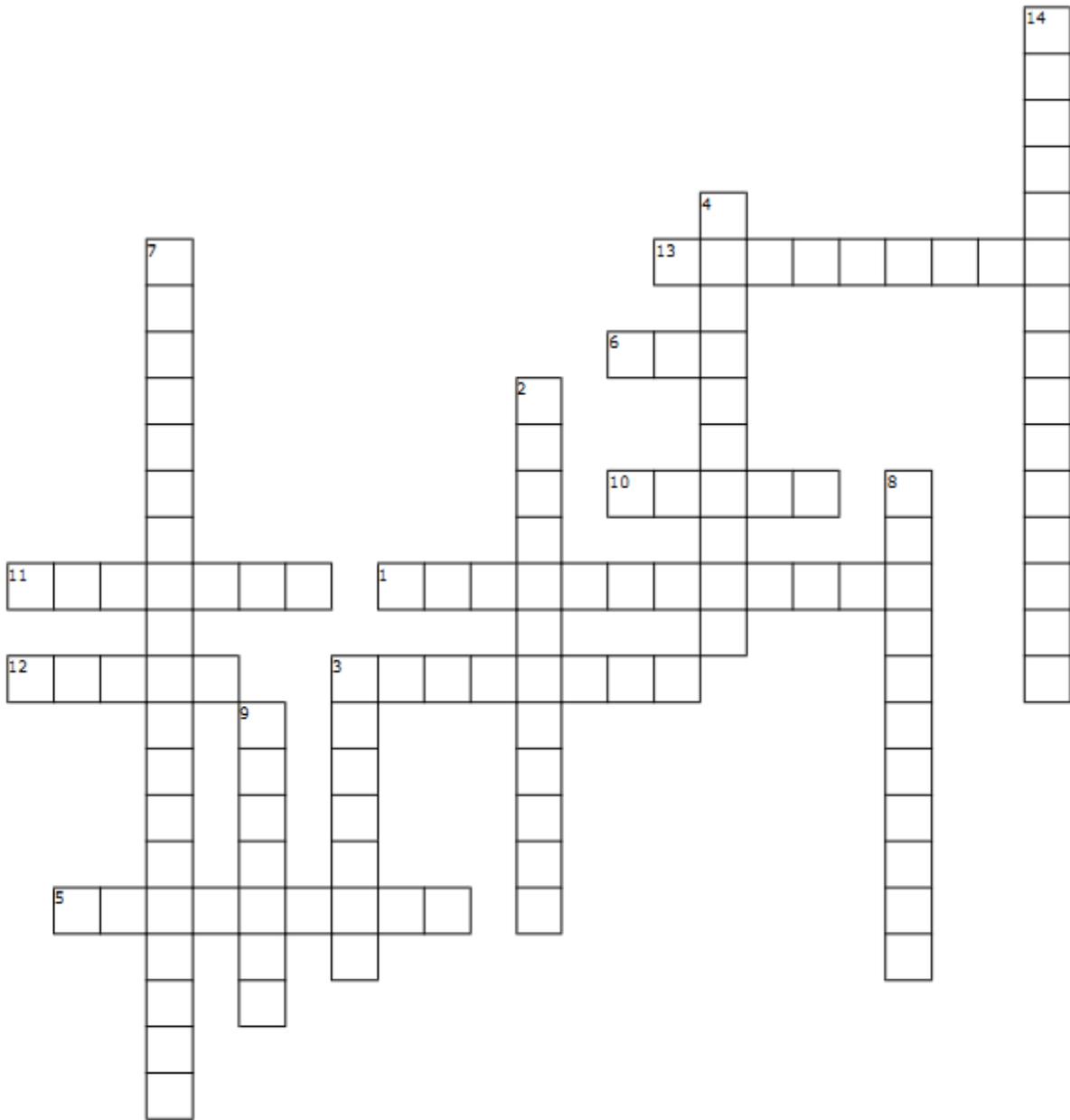
Activity 5: Cross Word Puzzle

ACROSS:

1. A long term health risk associated with a woman being overweight or obese. (Module 1, page 17)
3. What is the substance found in coffee, and some sodas and teas that transfer through breast milk to the infant? (Module 2, page 6)
5. Mood swings, crying easily and for no reason, and uncertainty about caring for a new baby are three symptoms of this postpartum medical issue. (Module 2, page 14)
6. Postpartum women are recommended to decrease this “greasy” ingredient in foods to help return to a healthy weight. (Module 1, page 14)
10. Overweight and obese women experience more infertility and are at an increased risk of having a baby with _____ defects. (Module 1, page 17)
11. If a breastfed baby is experiencing a weak suck, irritability, excess drowsiness, weakness, and decreased linear growth, what substance in the mother’s breast milk might be causing this? (Module 2, page 10)
12. Postpartum women are recommended to decrease this “simple” ingredient in foods to help return to a healthy weight. (Module 1, page 14)
13. What vitamin is important for all postpartum women to take to help prevent up to 70% of neural tube defects? (Module 1, page 6)

DOWN:

2. Another name for high blood pressure, and a long term health risk associated with a woman being overweight or obese. (Module 1, page 17)
3. Women ages 19 and older need 1000 milligrams per day of this mineral important for bone health. (Module 1, page 7)
4. Regarding oral health, parents should avoid sharing this cleaning tool with their child. (Module 2, page 7)
7. This medical issue refers to high blood sugar levels which develop during pregnancy. (Module 2, page 12)
8. Stretching your muscles improves this and is a benefit to incorporating physical activity into a postpartum woman’s life. (Module 2, page 4)
9. Incorporating physical activity into a postpartum woman’s life improves this type of fitness. (Module 2, page 4)
14. An infant exposed to this is at an increased risk of Sudden Infant Death Syndrome (SIDS), ear infections, and respiratory illnesses. (Module 2, page 8)



BABY BEHAVIORS

Coming soon ...

CHILD NUTRITION

Module 1: Introduction to Child Nutrition

Activity 1: Brainstorming is a great counseling tool when a WIC participant shows interest in a topic. Brainstorming may help WIC participants think differently and more creatively and help participants develop possibilities for a better future. Brainstorming is a way to accomplish goals by generating lots of new ideas and solutions.

During a brainstorming session, probing is used to encourage participants to engage in the discussion and share more information. Examples include: “uh-huh, go on, yes, I see, tell me more, what else, keep going, mm-hmm, and nodding your head in agreement.” During brainstorming, encourage participants to generate as many ideas as possible and then allow the participant to determine which idea(s) is the best solution.

1. The parents of a WIC child ask you about physical activity. What do you tell them about the Dietary Guideline’s recommendations for physical activity for children? (Module 1, Slide 18)
2. With your Trainer and/or other learners, practice brainstorming *outdoor* physical activity ideas for children for when the outdoor weather is comfortable.
3. With your Trainer and/or other learners, practice brainstorming *indoor* physical activity ideas for children.
4. What handout(s) related to physical activity are available in your WIC agency?

Module 2: Beyond Basics

Activity 2: Instructions: Meet with your Trainer and other learner(s) if there are others training at the same time. Discuss causes of tooth decay and dental habits to prevent tooth decay for babies and children. For additional information about children’s oral health, refer to the American Academy of Pediatrics website: www.healthychildren.org. Once on the website, click on the “Healthy Living” tab along the top of the website and scroll down to the “Oral Health” option. On this web page, you will find numerous Oral Health Articles from which you will learn more information about oral health for infants and children. This information is invaluable for talking about and teaching to your WIC participants.

1. How do plaque and sugar lead to tooth decay?
2. What are some ways to reduce the amount of sugar that comes in contact with an infant or child’s teeth?
3. What ideas do you have for helping a baby/child wean from a bottle to a cup?

Activity 3: Mock Scenario: A mom, Lisa, is in your office for a nutrition education appointment for her 3 year old. Lisa is interested in snack ideas to feed her child.

1. What is the purpose of eating snacks? (Module 1, Slide 13)
2. With your Trainer and other learner(s), practice brainstorming healthy snack options.
3. What handout(s) with snack ideas are available in your WIC agency?

Activity 4: Where can WIC staff make a big difference? By educating parents/caretakers on the hazards of soft drinks and other sweetened beverages. Scientific evidence concludes that drinking soda and other sugar-sweetened beverages increases a person's risk of being overweight or obese.

Mock Scenario: Sarah has brought her 3 year old daughter, Lily, into the WIC clinic for a certification appointment. Sarah tells you Lily eats about 3 meals per day and snacks in between meals. Lily reportedly drinks 12 ounces of 1% milk per day and 16 ounces of apple juice per day. Sarah says Lily also drinks Capri Sun and Kool-aid daily. From a staff perspective, a red flag has been raised based on the reported quantity of sweetened beverages Lily drinks daily.

Here is information about the sweetened beverages Lily consumes *every day*:

- 16 ounces of apple juice: 120 calories per 8 ounce serving
- 1 Original Capri Sun: 60 calories per pouch
- 1 pouch of Kool-aid Jammer: 90 calories per pouch

1. How many calories per day does Lily drink from sweetened beverages?
2. If Lily continues to drink this number of calories every day for one week, how many calories per week does she consume?

Note: It takes 3500 extra calories per week to gain one pound of body weight. At this rate, Lily is gaining 0.78 pounds per week, or about $\frac{3}{4}$ pound, simply from drinking sweetened beverages (2730 calories /3500 calories).

3. What are the recommendations for daily juice intake for children six years old and younger? (Module 2, Slide 4)

Note: 4 oz. of apple juice contains the same number of calories as one small apple. If Lily drinks 16 oz. of apple juice, this is equivalent in calories to eating 4 small apples! Here are additional benefits to eating the whole fruit versus juice: More fiber, more antioxidants, more phytochemicals, **biting and chewing an apple stimulate the production of saliva** in your mouth, reducing tooth decay by lowering the levels of bacteria.

4. What are the Dietary Guidelines recommendations of fluid intake for children? (Module 2, Slide 2)

5. To learn more about calories and sugar in various sweetened beverages, review Table 1, “Drink Comparison Chart.” Calculate the number of teaspoons of sugar Lily consumes *every day* from sweetened beverages.

16 oz. Treetop apple juice:

1 Original Capri Sun:

1 pouch of Kool-aid Jammer:

Daily *total* for teaspoons of sugar:

6. If Lily eliminated her intake of the capri sun and kool-aid, and decreased her apple juice intake to 4 ounces per day, how many teaspoons of sugar would she consume every day from sweetened beverages?

Activity 5: WIC employees have an opportunity to create an environment where parents feel safe disclosing the struggles they may be having with feeding or with their child’s eating, and where families can receive developmentally appropriate information and support to help them provide both love and structure for their young child.

This activity focuses on Ellyn Satter’s Division of Responsibility in Feeding (Module 2, Slide 7 and 8).

1. What is your initial reaction to the ideas presented in Ellyn Satter’s Division of Responsibility in Feeding?
2. What are the parent’s four responsibilities in the feeding relationship?
3. What are the child’s two responsibilities in the feeding relationship?
4. How might Ellyn Satter’s Division of Responsibility in Feeding apply in the WIC setting?
5. Ask your Trainer which nutrition education handout(s) in your WIC agency might be helpful to use when counseling a WIC participant about Division of Responsibility in Feeding. Locate the handout(s) and use a highlighter to highlight the sections you think relate to the concept of Division of Responsibility in Feeding.

