#### NUTRITION RISKS TRAINING

Iowa WIC Program

August 2024







#### Nutrition Risk in WIC





- Requiring nutrition risk as an eligibility criterion is a unique feature of WIC. In addition to meeting categorical, income, and residency requirements, each WIC applicant must be determined to be at nutrition risk on the basis of a medical or nutrition assessment by a physician, nutritionist, dietitian, nurse, or some other competent professional authority (CPA).
- For nearly 25 years after the WIC program was established, Federal policy permitted WIC state agencies to develop criteria, within broad Federal parameters, for use in their local programs to determine program eligibility.





- In 1989, the Child Nutrition and WIC Reauthorization Act (PL 101-147)
  mandated that the Department of Agriculture (USDA) conduct a review
  of risk criteria and the priority system used by all states.
  - The purpose of this review was to ensure that WIC benefits were being provided to those most in need of them, in the event that funds were not available to serve all eligible program applicants.



- Go to the Iowa WIC web portal and read the following policies located under the Certification, Eligibility and Coordination of Services functional area.
  - Nutrition Risk Requirements
  - Nutrition Risk Priorities





 As a result of the variation in nutrition risk criteria they found among state agencies, the USDA awarded a grant in 1993 to the National Academy of Sciences' Institute of Medicine (IOM), now called the National Academy of Sciences, Engineering and Medicine (NASEM), to undertake a comprehensive, independent review of the criteria in use by WIC state agencies at that time.





• In 1996, after the release of the IOM Nutrition Risk Report, FNS and the National WIC Association (NWA), known at that time as the National Association of WIC Directors, established a collaborative partnership to address the issues and recommendations in the Report, and to develop an action plan to achieve greater consistency among WIC state agencies in the use and application of sound and appropriate nutrition risk criteria. The Risk Identification and Selection Collaborative (RISC) was created to manage the transition from this initial effort to an ongoing review process.





- RISC is charged with revising currently allowed risk criteria and adding new WIC nutrition risk criteria. Such criteria must be based on sound science, practical for WIC application, and nutritionally linked or related to the nutrition services provided by WIC.
- RISC also periodically reviews allowed criteria to identify risks that should be deleted because they are no longer supported by current science and research; or represent conditions that cannot be mitigated, controlled, or eliminated as a result of receiving WIC nutrition services (food packages, referrals, nutrition education/counseling, and/or breastfeeding promotion and support).





#### Nutrition Risk in WIC





- Federal regulations define nutrition risks in WIC as
  - (a) detrimental or abnormal nutritional conditions detectable by biochemical or anthropometric measures,
  - (b) other documented nutritionally related medical conditions,
  - (c) dietary deficiencies that impair or endanger health, or
  - (d) conditions that predispose persons to inadequate nutritional patterns or nutritionally related medical conditions.
- Nutrition risks are divided into the following categories:
  - Anthropometric
  - Biochemical
  - Dietary
  - Medical
  - Other





- The full nutrition risk definitions, as defined by the RISC can be found on the Iowa WIC web portal under Resources and then in the Current Nutrition Risks section:
  - Go to the web portal and explore the full definitions and their layout.
- Our Nutrition Risk Definitions policy provides the abbreviated definitions for the risk criteria used by Iowa WIC. It also lists the USDA risk number assigned to it and the priority assignments and participant categories covered by each risk. In some cases, you will also see an alpha character with the USDA number. This character has been added to facilitate state reporting of specific risks.





- Go to the Iowa WIC web portal and read the following policy located under the Certification, Eligibility and Coordination of Services functional area.
  - Nutrition Risk Definitions





- During a certification, a CPA collects information to help assign risk codes. Some information will come from the conversation with the participant and may include their answers to both open-ended and closed-ended questions. Other information will come from observation, like the participant's weight, height, and blood test.
- During a health update, a CPA will update the risk codes based upon new information collected.
  - A new risk determination record will be done.
  - Risk codes assigned at the certification will be maintained (even if they appear to be resolved).
  - New risks uncovered will be assigned.





- Comments from the participant are considered "subjective". Things
  you observe are considered "objective" and are true to the best of your
  knowledge.
- Both objective and subjective information should be considered when deciding what risk code to assign to a participant.
  - Take a moment to consider all the information you have gathered and make sure that what you hear matches what you observed.
     For example, if a pregnant woman says she feels great and is eating well, but she has lost a lot of weight, you will need to dig deeper to figure out what is going on.





- Go to the Iowa WIC web portal and read the following policy located under the Certification, Eligibility and Coordination of Services functional area.
  - Nutrition and Health Assessment





- Some nutrition risk criteria, specified in the definition of each criterion, as appropriate, allow an applicant or caregiver to tell the CPA at the local WIC office (self-report) that the applicant has a condition that was diagnosed by a physician.
- Self-reporting of a diagnosis by a physician or other recognized medical authority should not be confused with self-diagnosis, where a person simply claims to have or has had a medical condition, without any reference to professional diagnosis of that condition.





- A self-reported medical diagnosis should prompt the CPA to validate the presence of the condition by asking more probing questions related to the self-reported professional diagnosis, such as:
  - Whether the condition is being managed by a medical professional;
  - The name and contact information for that medical professional (to allow communication and verification if necessary);
  - Whether it is being controlled by diet, medication, or other therapy; and
  - What types of medications, if any have been prescribed, are being taken to address the condition.





 Self-reporting for "History of..." conditions should be treated in the same manner as self-reporting for current conditions requiring a physician's diagnosis, i.e., the applicant may report to the CPA that s/he was diagnosed by a physician with a given condition at some point in the past. As with current conditions, self-diagnosis of a past condition should never be confused with self reporting.





#### Nutrition Risk in WIC

Resources for Staff





#### Resources for Staff

- In addition to our policies related to nutrition risk, the Iowa WIC Program has developed additional resources for WIC staff to refer to. These include:
  - Level One Nutrition Risk Factors Module
    - A module created for new staff to build common knowledge but because it is in pdf form, it is always accessible to staff as a reference resource to go back to.
  - Risks for Consideration
    - A tool for staff that lists nutrition risks for consideration for each panel of the Focus record according to participant type. This is not necessarily where the risk will get assigned but where things maybe discussed that should trigger the CPA to be thinking about possible risks and how to tailor their education and referrals accordingly.





