

# Health and Nutrition Assessment Handbook

## Nutrition Assessment

### Overview

To maximize the effectiveness of the WIC Program, the nutrition services provided must reflect current scientific knowledge and contemporary public health issues. Recognizing this need, the Food and Nutrition Services (FNS) developed the process of Revitalizing Quality Nutrition Services (RQNS), with the goal of continually improving program services. RQNS initiatives include:

- The WIC nutrition risk criteria policy ensures that all criteria are science-based; and
- The [WIC Nutrition Services Standards \(NSS\)](#) which are designed to improve the quality and delivery of WIC services.

Value Enhanced Nutrition assessment (VENA) is the latest initiative under the umbrella of RQNS. VENA builds on the information provided in the WIC nutrition risk policy and the NSS.

**VENA Guidance Document**

[Complete Document](#) [PDF - 185 pages]

### Nutrition Assessment Questions

The Missouri WIC Nutrition Program uses standardized questions when program eligibility is determined at certifications and as part of the mid-certification health assessment. The questions are specific to client category, age, and feeding status. These questions support WIC staff in conducting a complete nutrition assessment, determine WIC risk eligibility and start a dialogue with the client about what she or he wants and needs related to nutrition and health.

### VENA Skills Checklist

VENA Skills Checklist for Effective Assessment and Counseling						
Skills Checklist						
Rate counselor on a scale of 1 to 5 on how well each skill was performed.						
1 = Needs significant practice, 5 = Excellent, keep up the great work!						
Skill	1	2	3	4	5	Comments
<b>Establishing rapport</b>						
Introduced self to client, made sure client comfortable, knew some basics about the client, informed client of the process.						
Displayed understanding for the other culture.						
Ensured privacy (hand cover, no, closed door, moved to private location).						
Offered help when needed (carrying diaper bag, toys for children, etc.)						
Used appropriate non-verbal communication (nodding head, eye contact, avoiding crossed arms, etc.)						
Used respectful language.						
Focused on client when interpreter is used.						
<b>Completing the Assessment</b>						
Reviewed client's past Care Plan, risks, and, if recertificant Update, secondary education (scheduled and received).						
Reviewed results of Anthropometric and Blood screening and health history.						
Asked open-ended and "umbrella" questions for Health and Diet tabs.						
Asked probing questions to clarify responses.						
Provided opportunity for client to ask questions.						
Entered responses for all questions in Health & Diet tab; if absolutely not possible, all risk-related questions (those with 1) and as many others as possible.						
Review all risks to determine interrelationships of risks and root causes(s).						
Documented additional assessment information as appropriate.						
Positive approach based on desired health goal rather than deficiencies.						
<b>Identifying and Exploring Concerns</b>						
Asked open-ended questions to explore client's concerns related to eating/feeding practices.						
Listened actively and allowed for silence.						
Validated client's concerns.						
Referred client outside resources when needed (e.g., social work, food pantry).						
Identified and acknowledged client's strengths/positive behaviors.						
Maintained focus on desired health outcome, healthy practices, active family.						
Helped client explore feelings and attitudes about their concerns.						
Tried to lead discussion based on nutrition assessment data and desired health outcome(s).						
Assessed the client's readiness to change.						
Worked with client to identify problem behaviors and ideas for change.						
Provided a limited number of tailored messages based on client's age, gender, culture, and feedback.						
<b>Setting Goals</b>						
Summarized the conversation.						
Helped client set goal(s) that is specific and realistic for the family's lifestyle.						
Documented behavioral objective(s) in RQNS Care Plan for follow up.						
Scheduled and documented secondary nutrition that will assist the client with meeting the goal(s).						
<b>Revisiting a Behavior Note</b>						
Restated the goal and checked for understanding.						
Expressed appreciation for client's time.						
Was enthusiastic about following up next time.						

Adapted from Texas WIC

This [skills checklist](#) developed by Washington WIC Program can be used by the CPA/nutritionist to rate themselves on a scale of 1 to 5 on how well each skill was performed. 1 = I need significant practice. 5 = Excellent, I'll keep up the great work!