

Topic 10:

Coordinating Assessment and Education



When a man comes to me for advice, I find out the kind of advice he wants, and I give it to him.

– Henry Wheeler Shaw, a.k.a. Josh Billings



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Key Messages for Champions

A main goal of WIC nutrition education is to help participants adopt healthy nutrition-related behaviors. The assessment process is the first step in WIC nutrition services and lays the groundwork for nutrition education, referrals, and food package tailoring. Obtaining a complete assessment before providing information or advice allows WIC staff members to provide individualized discussions and prioritize areas of interest. This module will explore the advantages of completing a full assessment before providing education and introduce strategies to focus the discussion.

The purpose of assessment

The assessment can be thought of as the information gathering phase. During the assessment, pertinent information is collected such as anthropometrics, diet and health history, and participant health goals. During this process, C.A.R.E.S skills such as reflective listening, questions and affirmations help the participant open up and engage in the discussion. The assessment process provides an overall picture of what the participant may need and helps identify important topics.

The “ask-teach” style

During the assessment process, the participant may ask a question, mention a nutritional risk, or bring up a concern. It is natural for WIC staff to want to immediately step in and provide information or guidance. In this “ask-teach” style, the WIC staff member will stop after each question or behavioral risk identified and provide information. At the end of the WIC visit, a small amount of information is provided on several topics that arise during the assessment.

Drawbacks of the “ask-teach” style

Although the “ask-teach” style of WIC nutrition counseling may feel more natural in some cases, there are several reasons why this model may not be as effective as delaying the nutrition education discussion and focusing on a few priority areas . Some drawbacks of this style may include:

- Providing nutrition education directly after identifying a risk factor may come across as criticism. The participant may feel judged. As a result, they may be less willing to share openly and honestly about their nutrition habits and goals.
- Spending small amounts of time on many topics prevents the WIC staff member from delving deeply into any particular topic. It may also be difficult for the participant to retain and use information on many topics.
- Providing nutrition education before collecting all the facts may lead the staff member to provide advice that is inappropriate for the participant’s situation.

Moving towards a “prioritizing” style

By waiting to provide education, we are able to get a complete picture of the participant’s nutritional status and tailor the discussion to their particular concerns and interests. Focusing on information the

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participant is most ready to discuss will lead to more effective discussions. Some advantages of completing a full assessment before providing nutrition education include:

- **Saving time:** this strategy helps you save time by focusing on only the highest priority items.
- **Reducing resistance:** separating the advice or information from the assessment process will prevent it from coming across as criticism.
- **Encouraging deeper conversation:** By discussing only one or two topics, more time can be devoted to each discussion. The more time the participant spends discussing a positive behavior change, the more likely they are to follow through and act on it.
- **Helping information retention:** By focusing on a smaller number of topics, participants will be less overwhelmed by the information and will leave with what is most helpful for them.

Critical thinking is also important for clerical staff. Obtaining a complete picture of financial status, living situation, and other factors helps staff provide appropriate explanations and referrals. With every interaction, the discussion will be more effective if the majority of information is collected first.

Federal guidelines

Staff members may feel the responsibility to cover every risk identified during the nutrition assessment. Although all identified risks should be noted in participants' record, it is not necessary and often not helpful to participants to focus on every risk factor. Federal WIC guidance includes this statement "Covering all topics at once could result in information overload or "dumping" and may not be effective. Identified nutrition risks should be prioritized and the number of topics addressed should be based on the assessment of the participant's nutritional needs, individual situation, and readiness to learn and/or stage of change."

Where to focus

During the assessment, listen for areas that may be important such as:

- Any talk that indicates the participant may want to make a change.
- Any risk factors or areas you are concerned about.
- Areas where the participant asks questions or shows interest.

For these areas, it may be necessary to elaborate and ask more questions to determine if this is an area to focus the nutrition education discussion.

Individualizing sessions

Although in general it is most effective to streamline the assessment process and hold the nutrition education discussion, every WIC encounter will be different and require flexibility. One strategy is to provide some information and hold the bulk of the conversation for later. For example, if a mother asks if cereal is the best food to introduce to her baby, the WIC staff member may respond with "Yes, most mothers do start their babies on rice cereal which is what WIC recommends. If you like, I can

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finish up the assessment questions and we can review the recommended schedule of when and how to add certain foods.”

Explaining the assessment process

One strategy to help participants feel comfortable is to explain what to expect during the nutrition assessment and education process. This will reduce anxiety and allow the participants to share more targeted information. If participants know up front that you are interested in positive health changes they may want to make, they will be more likely to share their hopes and goals around eating and health. An example of an explanation would include:

- “I am going to start by asking you several questions about your health, diet, and ask you about any health goals or healthy habits you would like to add. Then we will pick what is most important and talk about that in a little more detail. Does that sound ok?”

Providing an explanation of the process at the front desk will also make the participant feel more at ease throughout the entire visit. An example of an explanation would include:

- “I’m going to ask you some questions about your income, review your ID and other papers, and add some information into the computer. After that, we will be taking your height and weight and you’ll talk with the nutrition staff about your health and eating. At the end we’ll provide you with food benefits and explain how to use them. Do you have any questions?”

Responses to avoid premature focus

A participant may ask a direct question or share a concern early in the session, before the assessment is complete. For example, a postpartum woman getting on the scale might say “I wish I could lose this baby weight”. This is an indicator her interest and what may likely be the focus of the behavior change conversation. It is tempting to immediately start sharing weight loss strategies. However, completing the full assessment first will allow you to collect more information about her current eating habits and past weight loss efforts to help target the information and strategies you share.

The goal is to reassure the participant that their issue is important and will be addressed after the assessment is complete. If the participant asks a direct question or shares a concern during the assessment process, acknowledge it, make a note on a piece of paper, assessment form or circle chart, and assure the participant you will get back to it. Ask permission to continue with the assessment. Examples of responses to help avoid premature focus include:

- “That’s a common question. I have some information about that I can share with you. I will make a note of that. Is it ok if I finish up the questions and then we can look at that information together?”
- “That sounds like an important area to focus. I am going to write that down and together we can brainstorm some ideas and strategies as soon as I finish these health and diet questions. Does that sound like a good plan?”

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Moving from assessment to education: agenda setting

By the end of the assessment, you have an overall idea of the participant's diet and their priority areas. By writing down things as they come up, it will be easy to go back and cover these things during nutrition education. Setting the agenda with the participant provides a focus for the rest of the visit. Summarize the assessment by referring back to the notes. If several topics were noted, review the topics with the participant to assess which area they are most interested in discussing. After the agenda is set, continue by asking the participant for their ideas or strategies or for what they have heard about the topic. Offer information and strategies as needed.

Circle Charts

Circle Charts are valuable tools to track important areas mentioned during the assessment. They support a smooth transition to nutrition education.

Empty Circle charts: As topics come up during the assessment, write them in the circles. Topics might include questions, change talk, nutritional risks or anticipatory guidance. Risks can be noted as general topics for discussion such as "kids and juice." After the assessment, return to the topics and discuss. If several topics are listed, ask the participant which are most important. An example:

- "You mentioned that her picky eating and the fact that you are worried about her nutrition. You also mentioned that you want to wean her from the bottle but are a little nervous about losing the nutrients in the milk? What do you think is most important for us to discuss first."

Prefilled circle charts: Prefilled circle charts are helpful when the assessment did not reveal any particular areas of focus. They help the participants focus and choose what topic is most important to them. Introducing the pre-filled circle chart may sound like:

- "Here are some areas where some families make changes such as eating more fruits and vegetables, healthier snacking or being more active. Are any of these issues for your family?"

If participants do not have any concerns, pre-filled circle charts can be used to ask, "which of these is going well for you."

Sharing your concerns

It is important for staff to use their professional judgment when sharing information. It is fine to cover areas you feel are important. Starting with the participants own interests will increase their willingness to listen to your concerns. A possible example of sharing a concern would include:

- "You mentioned weight loss as a goal for you so I want to discuss that. Would it also be ok if I shared some strategies to increase iron rich foods in your diet to help with your iron levels?"

It is up to the staff member to decide what they feel is important to share. They may be concerned that the participant is choosing an area to focus that is less important for their overall health than something else. However, if a participant makes progress in one area, they may begin to have success in that area which may lead to progress in other areas.

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Activity 1: Explaining the process and responses to avoid premature focus

Introduction:

- Explain to staff that this exercise is about ways to delay providing the bulk of nutrition information until after the nutrition assessment is complete.
- Ask staff to share some of the reasons why it is important to collect the majority of the assessment information before sharing information or strategies.
 - Possible answers might include: it save time by only focusing on the highest priority items; they don't feel judged by correcting misinformation as soon as it is mentioned; focused Information at the end of the session will be easier to remember than education provided after each statement or question.
- Share information from *Key Messages for Champions* as necessary.
- Share that two strategies for delaying nutrition education discussions until the assessment is complete include explain the purpose of the assessment and using phrases to assure the participant that their concerns or issues will be discussed after the assessment.

Part 1: Explaining the assessment process

- Explain to staff they will first practice crafting their own explanation of the assessment process.
- Asks staff some reasons why explaining the process is so important.
 - Possible answers might include: participants will be less anxious; participants may share more thorough information if they know what we are looking for; participants will know that we will come back to discuss important topics at the end of the assessment; the process will not feel like an interrogation if they know what to expect.
- Explain that the introduction provided by clerical staff may differ from the explanation for the nutrition staff but for both roles it is important to describe what will happen during the visit.
- Ask staff to work in pairs or groups of three. Ask clerical staff to work together as their explanation of the process may differ from the nutrition staff.
- Have each group craft an introduction to the assessment process that feels comfortable for them. Offer some examples below.
- Some possible examples:
 - Nutrition: "I am going to start by asking you several questions about your health, diet, and ask you about any health goals or healthy habits you would like to add. Then we will pick what is most important and talk about that in a little more detail. Does that sound ok?"
 - Nutrition: "I am going to start by asking you some questions about your child's eating and health. I will write down any possible focus areas or any major questions that come up and then we will discuss those."
 - Clerical: "I am going to ask you some questions about your sources of income, review your ID and other papers, and add some information into the computer. After that, we

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will be collecting your height and weight and you will talk with the nutrition staff about your health and eating. At the end we will provide you with the food benefits and explain how to use them. Do you have any questions about the process?"

- Allow each group time to formulate one or two responses. Ask for volunteers to share their responses with the larger group.

Part 2: Responses to avoid premature focus

- Share with staff that often a participant will bring up a direct question or area of concern early in the session. It is important to ensure that the participant's concern is acknowledged but it is also important to complete the full assessment to ensure you have all the information you need to provide the most tailored and effective information or strategies.
- Share the three steps below for responding to issues during the assessment to avoid premature focus.
 - 1) Acknowledge the question or topic. Examples include:
 - "That is a great question"
 - "That sounds like an important topic for us to discuss"
 - 2) Make a note of it and assure the person that you will return to it. An example would include:
 - "I am going to write that down, so we can cover that as soon as we are done with these questions."
 - 3) Ask permission to continue with the assessment. An example would include:
 - Is it ok if I just run through the rest of these questions before we get to that.
- Putting the steps together, an example of a complete statement might be:
 - "That sounds like an important area to focus. I am going to write that down and together we can brainstorm some ideas and strategies as soon as I finish these health and diet questions. Does that sound like a good plan?"
- Ask staff to work in pairs to formulate responses they could use with their participants to delay providing nutrition education until the assessment is complete.
- Give the nutrition staff and clerical staff the two scenarios below and ask them how they would respond to the participant. Allow each group time to formulate one or two responses. Ask for volunteers to share their responses with the larger group.
 - *Nutrition scenario:* You have just finished talking the participant's hemoglobin and the iron count is low. The participant asks what they can do to bring it up.
 - *Clerical scenario:* You are completing income and residency eligibility and the participant says "I am not breastfeeding as much so I will need more formula."
- Allow each group time to formulate one or two responses. Ask for volunteers to share their responses with the larger group.
- Ask staff if they feel these statements will help them avoid providing nutrition education during the assessment process.
- Summarize the discussion.

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Activity 2: What don't you know?

Introduction:

- Explain to staff that this exercise is about identifying possible problems with providing nutrition education without completing a full assessment.
- Ask staff what could be the disadvantages of providing education to a participant before completing the full assessment.
 - Possible answers include: participants may feel judged; participants may not give truthful answers; you may give advice and find out later that the advice does not fit the situation; time is spent addressing many topics which prevents delving deeply into a particular topic.

Activity: What don't you know?

- Have staff members would in pairs or groups of three.
- Pass out the activity.
- Explain that each group will first read the statement from the participant. These statements occur at the beginning or middle of the assessment process. They will then read the response from the staff.
- Ask staff to discuss what information could come up later in the appointment that may change the way they provide the nutrition information.
- Have them write down their answers.
- After the groups have completed the activity, bring the group back together and ask for volunteers offer some possibilities about what information may come up later in the assessment process that may change the information they provide.
 - Note: there may be several answers for each.
- Possible responses
 - 1. The doctor told the parent to put cereal in the bottle; the baby has gastric reflux.
 - 2. She has a medical condition that prevents breastfeeding; she has tried breastfeeding in the past and has had difficulties; she knows it is the best nutrition but has concerns about going right back to work and how she will feed the baby.
 - 3. The child may have been sick recently; the parent might be worried that he is not eating the right things.
- Ask staff how this activity relates to their work with participants.
- Summarize and close the conversation.

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What don't you know? Providing nutrition education too early

- Read the following participant statements below from the assessment process and the responses from WIC staff who provide nutrition education.
- Note down possible things that could come up later in the discussion that would impact the advice provided by the WIC staff.

1.

Participant Statement: When I make the formula, I have been putting in a little infant cereal.

Staff Statement: WIC recommends against putting cereal in the bottle. For safety and nutritional reasons we recommend waiting until the baby is 6 months old and feeding infant cereal with a spoon.

What you might not know – possibilities

2.

Participant Statement: Breastfeeding is not for me.

Staff Statement: It is your choice, but we recommend breastfeeding because it is the best nutrition for the baby and it also has health benefits for you as well.

What you might not know – possibilities

3.

Participant Statement: I am a worried about his weight.

Staff Statement: Well, he is in the normal range for weight and height for his age group so there is no reason to worry.

What you might not know – possibilities

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Activity 3: Role-play -- completing the nutrition assessment before providing education

Note: This activity will take approximately 45-60 minutes.

Introduction:

- Prior to facilitating the role-play, complete two sample participant assessment forms with a few different issues: Examples may include issues such as
 - o Example 1: Prenatal woman who has had nausea and is having trouble remembering to take her prenatal vitamin and has experienced weight loss.
 - o Example 2: A 2 year-old child who is generally a good eater, takes a bottle of milk to bed, takes vitamins, and drinks several glasses of juice a day.
- Explain to staff that this exercise is about coordinating the assessment and education processes
- Ask staff to share some of the reasons to do a nutritional assessment.
 - o Possible answers might include: to find out their nutritional risks; to find out about their diet; to identify what questions they have; to identify areas they may want to make a healthy change; to get the big picture.
- Ask staff to share some of the reasons why it is important to collect the majority of the assessment information before sharing information or strategies.
 - o Possible answers might include: it save time by only focusing on the highest priority items; they don't feel judged by correcting misinformation as soon as it is mentioned; focused Information at the end of the session will be easier to remember than education provided after each statement or question.
- Ask staff for some examples of things they could say to participants to assure them that they will address their priority topics after the assessment process.
- Share that a good way to remember the important issues that come up during the assessment is to write them down.
- Explain that in this activity staff will work in pairs and each person will get the chance to practice completing an assessment, focusing on just a few topics and discussing those topics with the participant after the assessment is complete.
- Have the staff work in pairs and pass out the pre-filled assessment forms to each group.
- Share that the assessment form will give them some information about their character but they can make up the rest and add any other issues they would like (within reason).
- Write the following steps on a flip chart to help staff during the role plays.
 - o Explain the process (explain what will happen during the assessment and after).
 - o Review the assessment sheet.

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- o Ask questions to elaborate on the information provided and identify possible areas for discussion.
 - o Write down priority areas (in a circle chart or on a notepad) and wait to offer information.
 - o If questions or concerns are raised by the participant, use a response that assures the participant that you are noting the topic and will return to it as soon as you have collected all of your information.
 - o Summarize the topics noted during the assessment and consult with the participant about the most important areas to cover (set the agenda).
 - o Ask about the topic in further detail such as what the participant already knows, what they have tried, or what strategies they feel might work.
 - o Share some information or strategies if needed.
 - o Ask about next steps.
 - o Summarize and close the conversation.
- Allow staff approximately 10 minutes to role play the first encounter and then have staff members switch roles.
 - After staff members have the chance to practice, bring them back together and ask how it felt to delay the nutrition education conversation and what strategies they used to determine the priority areas.

Notes to champions: If not all staff are CPAs, decide the best way to complete the role-plays. For example, clerical staff may be the participant for both role-plays.

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Facilitated conversation topic: Coordinating Assessment and Education

- Let staff know this discussion will be about how to coordinate assessment and education.
- Ask staff what is the purpose of conducting a nutrition assessment.
 - Possible answers might include: to find out their nutritional risks; to find out about their diet; to identify what questions they have; to get the big picture.
- Share that the assessment process is useful to find out those topics that are most important for the participant and to uncover areas in which they most likely to make a change. The discussion today will focus on why it may be more effective not to offer nutrition education throughout the assessment process but to wait until after a complete assessment is complete.
- Ask staff what concerns they have about waiting until the assessment has been completed before offering information? [can have staff first discuss in pairs or groups of three]
 - Possible answers might include: If I don't answer the question, I may lose the participant's interest; it is a teachable moment; if I don't answer the question now, I may forget; it feels awkward to tell the participant to wait. I want to help now; I try to cover all the topics because it is good to "plant lots of seeds."
- Ask staff what could be the disadvantages of providing education to a participant before completing the full assessment.
 - Possible answers include: participants may feel judged; participants may not give truthful answers, you may give advice and find out later that the advice does not fit the situation; time is spent addressing many topics which prevents delving deeply into a particular topic.
- Ask staff to share some reasons why waiting to provide information until completing the assessment may be more effective.
 - Possible answers might include: it save time by only focusing on the highest priority items; they don't feel judged by correcting misinformation as soon as it is mentioned; "focused Information at the end of the session will be easier to remember than education provided after each statement or question.
- Share that often, early in the appointment before the assessment is complete, a participant may share a concern or ask a question that indicates where their focus and interest lies.
- Ask staff to share some strategies that may help to keep from educating before the full assessment is complete.
 - Possible answers include: writing the topics down; assuring the participant that you will return to them; explaining the process.
- Ask staff to share some statements that will let the participant that this area is important while assuring them that you will get back to it and asking permission to continue with the assessment? [Ask staff to first discuss in pairs or groups of three]
- Summarize the conversation.

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Sample Script

- The following excerpt is part of a WIC certification.
- Ask two staff to play the parts of the CPA or certifier and the WIC participant. Give them the script ahead of time to read through to prepare. Explain that they do not need to read the words in *[orange]*. Those are notes for the facilitator.
- Notes for the staff that will be acting out the parts are in *[blue]*.
- Explain that in this scenario, the counselor finds out the primary health goal for a postpartum woman early in the session before a complete assessment has been done.
- Ask the group to listen for and write down the following during the role play:
 - How does the CPA introduce the purpose of the assessment?
 - How does the CPA delay providing nutrition education until after the assessment process?
 - What words does the CPA use to transition from assessment to education?
- Read the scenario and then have the actors act out the sample script.
- After the role play, have staff share their feedback about the interaction:
 - How does the CPA explain the purpose of the assessment and education process?
 - How does the CPA delay providing nutrition education until after the session?
 - How does the CPA transition from assessment to education.
 - What would you have done differently?

Child Certification – Sample Script

Scenario: A new mom, Rosa is here for her WIC certification with her 5-week old daughter Isabella. The bloodwork and anthropometric assessment have been completed for both Rosa and Isabella. Rosa's bloodwork values are slightly low and she is currently 35 pounds over her pre-pregnancy weight. The CPA is looking over the nutrition assessment form and is starting the assessment conversation with the participant.

CPA: So, first, congratulations. She is beautiful. What is it like being a new mom? *[Open-ended question]*

Mom: It is wonderful, overwhelming. I love her so much. It is a lot of work and I am tired all the time but I love it.

CPA: That is wonderful. And how are you feeling physically?

Mom: Besides being tired, I am feeling ok. No problems. The birth was tough but there no complications.

CPA: The birth was hard. *[Reflective Listening]*

Mom: I had contractions for about 2 days and then I was in labor for almost 24 hours!

CPA: Wow, that is a marathon. You're a strong woman. *[Affirmation]*

Mom: Thanks. It was all worth it because she is healthy and happy.

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CPA: Well, let me tell you a little bit about what we are going to do today. First we will talk about your health and eating. Thank you for filling out this diet questionnaire. I am going to ask you some further questions to get a big picture of your overall nutrition and ask you about any health or eating goals for yourself or your family. Then we will talk about more about Isabella, her eating patterns, and any questions you might have about feeding her, now and in the future. Does that sound like a plan?

Mom: Fine. I should be easy. The only thing I want to do is get out of these sweatpants. *[Mom laughs] [Participant expresses an area for potential change]*

CPA: *[Laughing]* Tell me more about the sweatpants. *[Open-ended question to probe for more information]*

Mom: Well it is the only thing that fits me anymore. I would like to get back into my clothes someday and not have to buy new ones.

CPA: I see on the form here, that you circled that you feel you weigh too much now. *[Using a statement to probe a little further]*

Mom: Yes. I gained almost 50 pounds with the pregnancy. I know that is a lot. I want to get back down to where I was before.

CPA: I hear that from a lot of new moms. *[Normalizing]* So, weight loss is going to be a health goal for you.

Mom: Definitely.

CPA: That is a great health goal. *[Affirming]* I am going to write that down on my notepad here. If it is ok with you I will run through the rest of my questions and then we will talk more about what you can do to take steps towards your goal.

Mom: OK

CPA: So, I see there aren't any medical concerns for you or the baby.

Mom: No.

CPA: And your taking both the prenatal vitamins and iron.

Mom: Yes, the doctor said I need the iron pills to build up my blood.

CPA: That is good. Your hemoglobin levels, which help tell how much iron is in your blood, were a little low today. Low iron levels could add to your feeling of low energy too so it is great that you are taking these. *[Offers a little nutrition information as an affirmation]*. And you are using formula for feeding the baby.

Mom: Yes, making the bottles is work but breastfeeding was definitely not for me.

CPA: You made the feeding choice that works best for your life. *[Reflective Listening]*.

Mom: Yes.

CPA: And how would you rate your diet on scale of 1 to 10, where 10 is really great and 1 is not very good at all.

Mom: Well, I guess I would have to say a 6.

CPA: And why did you choose a 6.

Mom: Well, I don't eat too much. I don't think overeating is my problem. I've never been a huge eater.

CPA: So it is not the quantity of food that is the issue. *[Reflective Listening]*.

Mom: No, I think maybe it is what I am eating. I eat a lot of quick easy things. Things I can grab quickly. And my husband brings home fast food for me. I don't have time to make healthy things.

CPA: So for you to eat healthier, you would need healthy options that are quick and easy and would allow you to take care of the baby. *[Reflective listening]*

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Mom: Yes, definitely. It just seems like unhealthy things are easy and healthy things are hard.

CPA: I hear that same thing from other parents. *[Normalizing]* What types of foods do you think would bump your diet from a 6 to maybe an 8. *[Probing for more information]*

Mom: I guess more green things. More vegetables, fruits. Maybe cutting down on the soda.

CPA: Ok, I am going to write that down on my pad here as a possible option. How about activity. You circled currently none.

Mom: Right, well I can't really exercise yet with the baby and everything, but even when I was pregnant I wasn't doing much. I used to walk a lot a few years ago with the women from my office when I was working but now I am not working so I haven't kept it up.

CPA: It sounds like that was something you enjoyed. *[Reflective listening]* What did you like about it? *[Probing for more information]*

Mom: I felt better, had more energy. I miss it.

CPA: You might want to add walking back into your routine. *[Reflective listening]*

Mom: Definitely.

CPA: I am also going to write down walking. Just a couple more questions for you. Do you have a doctor's appointment scheduled for you?

Mom: Yes, next week.

CPA: Good. And I see you circled that you have been happy lately. Have you had any issues with feeling sad or depressed since the baby was born.

Mom: No, just normal hormones. I am happy most of the time.

CPA: Good. So we've talked about a lot of things. I am thinking that for you, losing a little of this baby weight is going to be your priority. Am I right? *[Asking for confirmation for agenda]*

Mom: Yes, definitely.

CPA: Have you ever lost weight in the past. *[Asking about past experiences]*

Mom: No. I never really had a problem before.

CPA: Ok. Well we've written down a couple of things. I wrote down more vegetables and fruit, but they would have to be something that could be quick and easy. I also wrote down less soda, and you mentioned the fast food. And I wrote down walking. Which of these things would you say is going to be the most important thing for you to do?

Mom: I think eat better, more fruits and vegetables. And the walking.

CPA: Ok. Fruits and vegetables and walking. So look into the future. How will you feel a year from now when you are eating lots of fruits and vegetables and walking more often and you are out of the sweatpants. *[laughs]* *[Looking over the fence to build importance]*

Mom: I think I will feel great. More energy. And I will be a role model for her when she gets older.

CPA: She will follow in your footsteps and eat the healthy things too. *[Reflective Listening]*

Mom: I hope so.

CPA: I know so. *[Expressing confidence]* So, what are some ways to get more vegetables and fruits into your diet?

Mom: Fruits might work. They are easy to eat if I have them in the house. So if I just buy them, I should eat more of them. But vegetables are hard. There is so much chopping. I don't know.

CPA: OK, good idea on the fruit. It is true that just having fruit around and visible helps people eat more. For the vegetables, can I offer you a couple of suggestions that I have heard from other mothers. *[Asking permission]*

Mom: Yes, please.

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CPA: Well some moms like to buy vegetables and cut them up and put them in the refrigerator or buy the baby carrots that are easy to eat. Other moms like the frozen vegetables because you can just heat them up quickly. Would any of those ideas work for you? *[Offering choices and checking back in]*

Mom: Well I can't see myself cutting up vegetables. I just know myself and with the baby it's hard. Maybe frozen vegetables would work and I like the baby carrots. I could also make better choices when I order out. They always have salads but I usually don't order them. That's an option.

CPA: That is a great idea. *[Affirming]* So, you are going to get salads with your meal when you order out and try the baby carrots and maybe some frozen vegetables along with fruit. Did I get it all?

[Summarizing]

Mom: Yes, and I will start walking soon with the baby.

CPA: Great. How many days a week would you like to walk? *[Making goal more specific]*

Mom: Every day.

CPA: What will you do on those days when it is too hot? *[Asking about potential barriers]*

Mom: Ok, most days. On days where I can't I will do something little -- like sit-ups.

CPA: Great plan. How confident are you that you can follow through with replacing some foods with a few more fruits and vegetables and walking several days a week. *[Gauging confidence]*

Mom: I am pretty confident. At least I am going to try and do what I can.

CPA: Excellent. Now we will check in on the baby quickly and then choose your food benefits, especially the fruit and vegetables which will help with your weight loss goal and foods like beans and cereal to help with the iron. We will also make your next appointment. Before we talk about Isabella, is there anything else we should talk about for you?

Mom: No. All set.

Stop here and ask the discussion questions above.

Nevada WIC C.A.R.E.S.

Observation Guide: Coordinating Assessment and Education

Option 1: Observe staff. Note areas where staff use skills to coordinate nutrition assessment and education effectively and areas for improvement.

Option 2: Have staff observe each other and use this form to note areas where they do well. Have them share specific feedback with each other about strengths they saw. Encourage sharing strategies.

C.A.R.E.S. Skills	Comments and examples
Explaining the assessment purpose and process	
Using statements to delay nutrition education while assuring the participant that the topic will be discussed later (Note what words or phrases were used)	
Setting the agenda: deciding where to prioritize	
Focusing on only a few priority areas	
Asking the participant for ideas and strategies before providing feedback	

Nevada WIC C.A.R.E.S.

Self Observation Guide: Coordinating Assessment and Education

- Each time you use techniques to complete the assessment before focusing on one or two priority areas, give yourself a star and write down what worked. Collecting successful strategies will help you use them in the future with other participants.
- Save this sheet to remind you of successful strategies and share them with your co-workers.

Successful strategies – give yourself a star!	Write down successful strategies to help engage participants.
	<ul style="list-style-type: none">• <i>While we were walking back to my office, one mom told me that she thinks her 4 year old son is eating too much food and is always hungry. I told her that was a concern I have heard from other mothers and asked her if it was ok if I ask her questions to find out more about his eating. She said ok and after the assessment we discussed some healthy low-calorie snacks that could replace some of the other snack foods he had been eating.</i>

Nevada WIC C.A.R.E.S.

Oregon WIC Listens – *Completing the Full Assessment before Providing Education*



Content:

There are many advantages to completing a full assessment before educating. These include:

- ❖ Efficient use of time by focusing on the highest priority issues
- ❖ Helpful to “correct” misinformation at the end of a session so it doesn’t come across as “criticism” during the conversation
- ❖ “Bundled information” is easier to remember than providing education after every statement or question

Often times during a certification, a participant will ask a direct question or provide a natural opening to provide education before the assessment is complete. This poses a challenge to the certifier, who may be immediately tempted to jump into educator mode. Of course we want to be sure that the participant knows they have been heard and not feel put off, but ideally we want to wait to educate until the full assessment is complete.

Below are several strategies that may be helpful for you to consider when completing a full assessment before educating.

Strategies:

Set the agenda:

- ❖ Let the participant know upfront that you be doing things a bit differently, i.e. “We are making a change in how we provide nutrition education so I’d like to start by asking a few questions.”

If asked a direct question:

- ❖ Acknowledge the question.
- ❖ Make a note on a circle chart, route slip, or other form and assure the participant that you will come back to it.
- ❖ Ask permission to finish with assessment.
- ❖ Redirect the question if it takes the conversation off track by summarizing and then returning to the focus of discussion.
- ❖ “Mary, that’s a really interesting question about your sister’s use of herbal supplements. That’s not my area of expertise, so if it’s OK with you, I’ll see if I can find a resource for you. In the meantime, could we talk a little more about your concerns with your daughter’s picky eating?”

Summarize and prioritize at the end of the assessment:

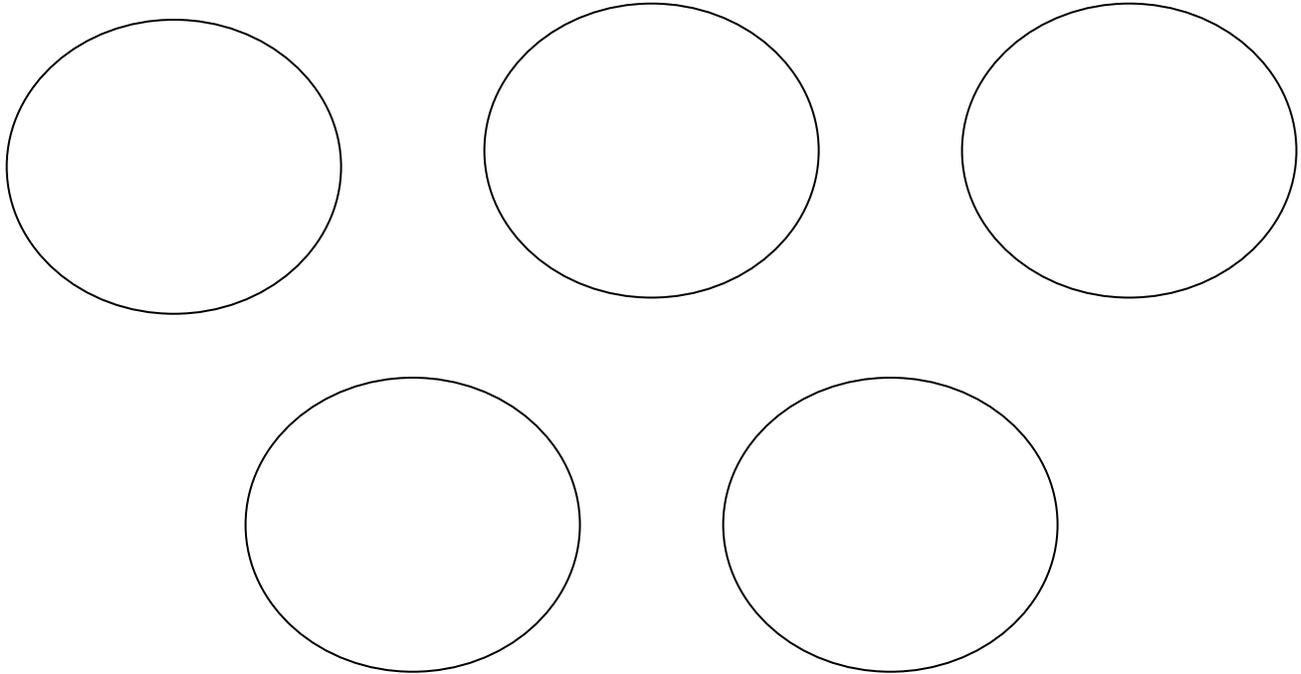
- ❖ Summarize the assessment by referring back to your notes
- ❖ Prioritize participant’s concerns
- ❖ Provide education on prioritized needs and answer participant’s questions
- ❖ If you don’t have the answer, let her know you will find the answer and get back to her
- ❖ Ask “Did I miss anything?” or “Did I get everything?”
- ❖ Identify next steps as appropriate

Remember ~ participant centered encounters provide **at least 50% of the talk time for the participant.**

Nevada WIC C.A.R.E.S.

Using the Circle Charts

Transitioning from Assessment to Counseling



Some possible statements:

“This chart shows some things we could discuss today. Based on our discussion, which one would you like to talk about?”

“We’ve talked about a lot today. In the time we have left, we could discuss one of the topics shown here on this chart. The blank circle is left open in case there is something you’d like to talk about this isn’t on here. Which one would you like to discuss with me?”

“Which of these, if any, are of most interest to you?”

To address high risk concerns, you can add:

“From my perspective (my professional point of view), this one would be the most important one to discuss.”

Nevada WIC C.A.R.E.S.

References / Resources

Books

- Kellogg, M. (2006). *Counseling Tips for Nutrition Therapists, Volume I & II*. Philadelphia, Kg Press.
- Rollnick, S. Miller, W. Butler, C. *Motivational Interviewing in Health Care*. New York, the Guilford Press.
- Rosengren, D. (2009). *Building Motivational Interviewing Skills: A practitioner workbook*. New York, the Guilford Press.

Websites

- Oregon WIC Listens
www.oregon.gov/DHS/ph/wic/docs/orwl/
- Washington State Nutrition Program: Completing Assessment Prior to discussing Nutrition Topics
<http://www.doh.wa.gov/portals/1/Documents/Pubs/960-210-AssessmentLeaderCopy.pdf>
- California WIC Program
<http://www.cdph.ca.gov/programs/wicworks/Pages/WIC-LocalAgencyResources.aspx>
- WIC Works Resource System
<http://wicworks.nal.usda.gov>