

## Certification Health Assessments

- I. Certification (cert) health assessments are required at the time of certification. See the “Presence at Certification” policy for additional information regarding physical presence vs. remote options. The cert health assessment must consist of:
  - a. Anthropometrics recorded and assessed (see “Anthro and Biochemical Procedures” policy)
  - b. Bloodwork recorded and assessed (see “Anthro and Biochemical Procedures” policy)
  - c. Lead screening when required (see “Health Care Referrals” policy)
  - d. Nutrition Interview
    - i. The first question that needs to be asked is: Who is your health care provider? The data field entry for the answer to this question must be a health care provider name or the name of a health/community clinic. If the participant does not know the names of either the health care provider or clinic, then you must check the ‘No Health Care Provider’ box. Ask for this information at the next certification appointment if this box is checked.
    - ii. All prompt questions emboldened in the Nutrition Interview must be asked during the cert health assessment. Prompts that are not emboldened are meant to support the cert health assessment and can be used as determined by the CPA.
  - e. Determination of nutrition risk(s)
    - i. Most nutrition risks are auto populated based on the questions answered in the Nutrition Interview; however, some nutrition risks require manual assignment or manual assignment of high-risk status. See the “Nutrition Risk Manual” policy for more guidance.
    - ii. The five categories of nutrition risk include: Anthropometric, Biochemical, Clinical/Health/Medical, Nutrition Practice, and Other.
  - f. Nutrition education
    - i. See ‘Core Contact’ below.
    - ii. See the “Breastfeeding Counseling” policy for education topics that are required when certifying pregnant and postpartum women who are breastfeeding.
    - iii. Nutrition education should be based upon the participant’s assigned nutrition risks, their highest priority needs and their interests/requests. See the “Nutrition Education” policy and training modules for more guidance.

- g. Referrals, as needed
  - i. Referral to a peer counselor is required for pregnant and postpartum women who are breastfeeding.
- h. Assign food package
  - i. See the “Nutrition and Food Package Counseling” and “Food Package” policies for more guidance.
- i. Issue food benefits to the participant’s account.

## II. Core Contact

- a. Core contact information must be presented to all WIC participants and parent/guardians at the initial certification. Information may be presented via the orientation video, the Rights & Responsibilities document, and/or verbally from WIC staff.
- b. Core contact information includes:
  - i. A brief explanation of the VENA-based WIC Program. This explanation should include a summary of the following information:
    1. WIC as a supplemental food program. The food provided by the WIC Program is supplemental and is not intended to provide all of the participant’s daily food requirements.
    2. The purpose of the WIC Program is to provide nutritional support (i.e., education and strategies) for a healthy diet, supplemental foods, referrals, and breastfeeding promotion and support during critical times of growth and development to improve health and achieve positive health outcomes.
    3. The health assessment process is necessary to identify nutrition needs (e.g., medical conditions, dietary practices) and interests so WIC can provide benefits and education that are responsive to the participant’s wants and needs.
    4. The relationship between WIC staff and the participant is a partnership – with an open dialogue and two-way communication – working to achieve positive health outcomes.
    5. WIC food benefits are provided to promote and support the nutritional well-being of the participant and help meet the recommended intake of important nutrients or foods.
    6. The nutritional value of the specific supplemental foods per category. (i.e., Vitamin D, calcium, fiber, protein, etc.)

- 7. The importance of supplemental foods being consumed by the WIC participant they are issued for.
- 8. Each participant must reapply at the end of the certification period and be reassessed for WIC Program eligibility.
- ii. The nature of the WIC priority system and the priority designation for the individual must be explained only if the local agency is not serving all priorities
- iii. How to use the e-WIC card.
- iv. The importance of health care.

- c. New applicants must view the WIC orientation video in the most appropriate language for them before or during the initial certification visit.

III. VENA (Value Enhanced Nutrition Assessment)

- a. The process of a quality WIC health assessment includes the comprehensive collection of relevant and accurate nutrition information that is necessary to deliver meaningful nutrition services to WIC participants.
- b. The VENA process should be followed when conducting all health assessments. This process includes the following steps:
  - i. Collect relevant information
  - ii. Clarify and synthesize collected information
  - iii. Identify the pertinent and appropriate risks and other related issues.
  - iv. Identify solutions and set goals.
  - v. Document the assessment.
  - vi. Follow-up on previous assessments, as appropriate.
- c. See the VENA Training Module for more details regarding the VENA process.

IV. Refer to policies in the “Certification” functional area for more information regarding Certifications/Certification Appointments.