

Phone Contact / Nutrition Education**Policy No. NS- 200.11**

Effective date: October 2018

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Policy

Local agencies may provide nutrition education and breastfeeding support by telephone for the contacts described below.

- Primary nutrition education at initial certification when physical presence exemptions apply
- Primary nutrition education at recertification including infant mid-certifications, child half-certifications and woman mid-assessments
- Low-risk and high-risk secondary nutrition education contacts
- Breastfeeding support including Peer Counselor activities

Local agencies must ensure the [Participant Nutrition Education Standards, High Risk Secondary Nutrition Education Contact](#), and [Staff Eligible to Provide Nutrition Education](#) policies are maintained when providing nutrition education by telephone.

Confirmation of identity must be established before providing nutrition education by telephone. When the participant is unavailable, the designated alternate-proxy or proxy, as identified in the medical record, may receive nutrition education by telephone. See [Designation of an Alternate-Proxy](#) and [Designation of a Proxy Policies](#).

See [Mailing / Delivery of WIC Vouchers Policy](#) for additional guidance on eligible reasons to mail vouchers.

Purpose

To improve health status and achieve positive change in dietary and physical activity habits that emphasize the relationship between nutrition, physical activity, and health. To increase participant access to nutrition education.

Procedures

- I. At the initiation of a telephone contact, have the participant confirm their name.
- II. Request the participant to verify at least one additional identifier that can be confirmed from the medical record; such as,
 - A. Current mailing address
 - B. Date of birth
 - C. WIC ID number
 - D. Other verifiable information in the medical record

If the participant's identity cannot be confirmed, education cannot be provided over the telephone. Schedule an in-person appointment as needed for follow up.

- III. Educate alternate-proxy or proxy by the same process used for participants.

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- IV. Provide education only after the alternate-proxy or proxy has confirmed the participants current mailing address, date of birth, WIC ID number, or other verifiable information in the medical record
- V. Offer the participant(s) the opportunity to ask questions during and after the nutrition education contact.
- VI. Document the method used to provide the nutrition education (Nutrition Education Contact Type: P - Phone) in the electronic medical record. See [Participant Nutrition Education Standards Policy](#) and [High Risk Secondary Nutrition Education Contact Policy](#) for documentation requirements. Also see [Staff Eligible to Provide Nutrition Education](#).
- VII. Make appropriate referrals for services as needed to achieve participant goals (Reference [Policy NS-200.06 Participant Referrals to Other Agencies](#)). For example:
 - A. Group education class to learn more about WIC foods and planning healthy meals on a budget, infant feeding, or prenatal classes.
 - B. Refer to a Breastfeeding Peer Counselor or Designated Breastfeeding Expert (DBE) for additional follow-up if needed.

Authority

7 C.F.R. §§ 246.11 (a), (b), (d)(1), and (e)

WIC Nutrition Services Standards – Standard 7

WIC Nutrition Services Standards – Standard 8

Value Enhanced Nutrition Assessment (VENA)

Definitions/Supporting Information

Breastfeeding Peer Counselor: (BPC) – A WIC Breastfeeding Peer Counselor is a paraprofessional support person who gives basic breastfeeding information and encouragement to WIC pregnant and breastfeeding mothers.

Competent Professional Authority (CPA) – An individual on the local agency staff who is authorized to determine nutritional risk and prescribe supplemental foods. The following individuals may be authorized and trained to serve as a CPA: physicians, nutritionists (bachelor's or master's degree in Nutritional Sciences, Community Nutrition, Clinical Nutrition, Dietetics, Public Health Nutrition), registered dietitians, licensed dietitians, registered nurses, and physician assistants (certified by the National Committee on certification of Physicians

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Assistants or certified by the State medical certifying authority), or State or local medically trained health officials.

Designated Breastfeeding Expert (DBE) is an individual who is an expert with special experience or training in helping breastfeeding mothers and who provides breastfeeding expertise and care for more complex breastfeeding problems when WIC staff face situations outside of their scope of practice. (From Nutrition Services Standards, August 2013)

International Board Certified Lactation Consultants (IBCLC) – An IBCLC is a health care professional who specializes in the clinical management of breastfeeding. IBCLCs are certified by the International Board of Lactation Consultant Examiners under the direction of the US National Commission for Certifying Agencies. Certification is awarded upon completion of extensive clinical experience with breastfeeding mothers, educational credits in lactation, and a passing score on the lactation consultants' examination. IBCLCs must re-certify by acquiring continuing education recognition points over five years and must retake the certification examination after 10 years.

Low Risk Nutrition Education – General nutrition education provided to WIC participants not defined as high risk (as defined in the [Risk Criteria Handbook](#)).

Nutrition Assistant (NA) – An individual on the local agency staff who has been authorized to provide general nutrition education within a limited scope of practice. NA must only provide education that they have specifically been trained to provide. Lesson plans or evidence of training related to the content must be available for review by the State Agency for all low-risk nutrition education an NA provides.

Nutrition Education – A dynamic process delivered through individual or group sessions by which participants gain the understanding, skills, and motivation necessary to promote and protect their nutritional well-being through their food intake, physical activity, and behavioral choices. Nutrition education is focused on the participant's interests and designed based on ethnic, cultural, and geographic differences with consideration for language, education, environmental factors, and nutritional risks. Breastfeeding education is nutrition education. Nutrition education is a no-cost benefit available to all participants.

Primary Nutrition Education – Participant-centered nutrition education that is provided at certification, or a recertification visit.

Secondary Nutrition Education – Participant-centered nutrition education that is provided at any WIC follow-up visit between certifications including half-certification, mid-certification and mid-Assessment.

Value Enhanced Nutrition Assessment (VENA)/ Participant Centered Education (PCE) – A qualitative dietary assessment that promotes a participant-centered, positive approach to the

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nutrition assessment. The nutrition assessment is based on desired health outcomes rather than deficiency findings. This method allows for individualized counseling sessions.