Nutrition Risk Factors: Basics

This module applies to the following security roles:
RN/RD

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This module requires use of the computer and internet, but not the KWIC Training Environment
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Nutritional Risk Factors

Objectives
Upon completion of this activity, the employee will be able to describe key components for determination of Kansas Nutritional Risk Factors.

Glossary

*Competent Professional Authority (CPA)* - Local Agency personnel authorized to determine nutritional risk and prescribe supplemental foods. A CPA may be a licensed physician, licensed dietitian, registered nurse, or registered physician’s assistant.

Resources

This module is not very long, but there is a lot of on-line material to review related to Nutritional Risk Factors. Try to review the material on-line instead of printing everything out. Talk to your supervisor about printing certain things you might want. For example, other staff may have already printed the Diet Questionnaire Guidance for each computer workstation. All of these materials are found on the Kansas WIC website at [www.kansaswic.org](http://www.kansaswic.org).

Note: This module addresses aspects of nutrition risk factors that apply to all client categories. As part of your Level 2 training, you will complete the *Nutrition Risk Factors: Level 2* training module. That module includes information related to specific client categories and case studies.

Read this policy from the PPM: [CRT: 07.00.00 – Nutrition Eligibility](#)

Review the following policies from the PPM:
- [CRT: 07.01.00 - Anthropometric Risk](#)
- [CRT: 07.02.00 – Hematological Risk](#)
- [CRT: 07.02.01 – Anemia](#)
- [CRT: 07.02.02 – Blood Lead](#)
- [CRT: 07.03.00 - Dietary Risk](#)
- [CRT: 07.04.00 - Other Risk](#)

Review the Diet Questionnaires and related Guidance (See the *Diet Questionnaires and Guidance* page of the Kansas WIC web site.)
- Young Infant Diet Questionnaire
- Toddler Diet Questionnaire
- Child Diet Questionnaire
- Prenatal Diet Questionnaire
- Postpartum Diet Questionnaire

Review the *Nutritional Risk Factor Manual* for each category. It is a good idea to have this webpage bookmarked at the computer workstation you use for certification.

Glance over the *Nutrition Management Guidelines* to familiarize yourself with the content.
Nutritional Risk

To be eligible for the Kansas WIC Program, an applicant must live in Kansas, have a limited income, and be at nutrition risk. The Nutrition Risk Factor Manuals provide the definition for each condition considered a nutrition risk. Each WIC client category has a separate Nutrition Risk Factor Manual.

The WIC Priority System

Risk Factors provide the basis for WIC's seven-level priority system. The WIC priority system is used to target interventions and for reporting purposes. Priorities are automatically assigned by KWIC after risk factors are assigned. Priorities are displayed in the lower right of the Client Header.

Assessment

Nutrition Risk is determined by a Competent Professional Authority (CPA) based on findings from a Nutrition/Medical Assessment. At a minimum, the KS WIC Program requires an assessment of nutrition and medical status at each certification, mid-certification and subsequent certification. For a detailed list of all the required certification components by client category, refer to the category specific Nutrition Management Guidelines.

Nutritional Risk may also be assessed during a secondary nutrition education contact. Previously assigned risk factors may not be removed during a secondary nutrition education contact, but newly identified risks should be assigned.

Diet Assessment

The Kansas WIC Program uses diet questionnaires to assess the dietary/feeding practices of WIC applicants to enable WIC Staff to assign applicable risk factors and determine appropriate referrals, counseling and food package tailoring needs. All WIC applicants should complete an age and categorically appropriate Diet Questionnaire, which the CPA then evaluates. Information on using the specific questionnaires is discussed in the Activity for the appropriate category is this module. WIC Staff Guidance Documents have been developed for each of the diet questionnaires.

Assumed Risk Factors

Research has shown that nearly all US women and children could be considered to be at dietary risk and may benefit from WIC’s services. In addition, most diet assessment tools are not
sufficiently accurate to identify all potential dietary risks. Therefore two there are risk factors that assume WIC eligibility due to dietary risk. The assumed risks may only be assigned to income and residentially eligible clients and after no other risk factors were identified during the complete WIC nutrition assessment.

The risk factor, “Assumed Risk for Women & Children over 2 years” assumes that pregnant women, breastfeeding women, postpartum women and children two years of age and older are consuming fewer than the recommended number of servings from one or more of the basic food groups (grains, fruits, vegetables, milk products, and meat or beans) based on an individual’s estimated energy needs.

The risk factor, “Assumed Risk for Infants & Children between 4 and 24 months” assumes that infants between 4 to 12 months of age and children from 12 through 23 months of age are at risk due to inappropriate complementary feeding. There is not an assumed risk factor for infants under 4 months of age.

**Autocalculated Risk Factors**

Some risk factors are assessed and automatically assigned by the KWIC system. These risk factors are indicated with a computer mouse symbol (cko) in the Nutrition Risk Factor Manuals and are included at the end of the list of Available Risk Factors on the Assign Risk Factors window in KWIC.

**Other Risk Factors**

The remaining risk factors are assigned by the CPA after comparing the findings from the assessment and interview to the definition for each risk factor. All applicable risk factors should be assigned. To facilitate risk assessment, if possible, an infant should be certified at the same time as the mother.

**Documentation**

The WIC record must document that the client meets the criteria for each risk factor assigned. The best location to document this information will vary depending on the risk criteria. For example, it is appropriate to document Homelessness on the demographics tab, while Pica should be documented as a risk note, or on the Nutrition Education - Client Goals or Notes windows.

**Medical Conditions**

Certain medical conditions require documentation that the condition was diagnosed by a medical professional. Each categorical risk factor manual contains a Table 3 – Risk Factors requiring documentation of Physician Diagnosis listing the specific risk factors. The diagnosis may be self reported by the applicant or parent/caregiver. This is documented by checking the “Risk Assigned Based on MD Diagnosis” box on the Assign Risk Factors window in KWIC.
Self-reporting of a diagnosis by a medical professional should not be confused with self-diagnosis, where a person simply claims to have or have had a medical condition, without any reference to professional diagnosis. Self-reported medical diagnosis should prompt the CPA to validate the presence of the condition by asking more pointed questions related to the self-reported diagnosis, such as:

1. Is the condition being managed by a medical professional?
2. What is the name and contact information for that medical professional? (To allow communication and verification if necessary).
3. Is the condition being controlled by diet or medication?
4. What type of medication has been prescribed?

Documentation of risk factors for a history of certain medical conditions should be treated in the same manner as for current conditions.

A referral diagnosis from a physician or other health care professional working under physician’s orders that documents a medical condition can be assumed to meet the definition in the risk factor. For example, a physician’s referral diagnosis for Failure to Thrive could be used at face value by WIC staff to assign the risk factor without further review or validation of the definition of Failure to Thrive. Keep in mind that the acceptability of referral data from physicians and other health care professions does not eliminate the need to document the anthropometric and biochemical assessment data in each client’s record.

When determined appropriate, a consent form for release of confidential information may be completed and signed by the applicant or parent/caregiver in order to allow collection of pertinent medical or diet information to support the nutrition risk determination, and to assist the WIC CPA in developing the client’s nutrition care plan.

**Drug Nutrient Interactions**

The documentation for assigning the risk factor “Drug Nutrient Interactions” should include the name of prescription or over-the-counter medication used by the applicant and the nutrient interaction. For knowledgeable information on the relationship of a drug to a person’s nutrition status, it is important to refer to a current drug reference such as the text *Food-Medication Interactions*, a *Physician’s Desk Reference* (PDR), or drug inserts.

**Transfer of Certification**

This risk factor is automatically assigned when the client’s WIC eligibility is determined using the Transfer from - Out of State/Program function. The “Transfer of Certification” risk factor cannot be assigned by the local CPA.
High Risk Conditions

Some risk factors are considered high risk by the SA. These risk factors are indicated with a check mark (✓) and listed in Table 2 – High Risk Factors of each Nutrition Risk Factor Manual and appear in pink typeface on the Assign Risk Factors window in the KWIC system. WIC clients assigned certain risk factors are considered high risk. High risk clients are indicated by a red HR in the lower right hand corner of the Client Header.

Progress Check

Mark the statements T for True or F for False.

1. It is not necessary to document medical data obtained from health care providers outside the WIC agency in the WIC record.
   - T

2. A nutrition/medical risk assessment is used to determine nutrition risk.
   - T

3. The system will automatically assign all risk factors.
   - F

4. The risk factor Assumed Risk for Women & Children over 2 years, can be assigned to a pregnant women who also has the risk factor Homelessness to raise her priority.
   - T
Appendix A – Answers to Progress Checks

Progress Check #1

False 1. The WIC record must document that the client meets the criteria for each assigned Risk factor. The documentation should include a note indicating the data source.

True 2. A nutrition/medical risk assessment is used to determine nutrition risk.

False 3. The system will only automatically assign certain risk factors.

False 4. The assumed risk factors can be only be assigned after no other risk factors were identified during the complete WIC nutrition assessment.

The End