

ITCA WIC Program Staff Observation Form

Reviewer:

Date:

Agency/Clinic:

WIC Staff:

Type of Appointment:

Client Category:

Client ID:

ITEM	√ / i / -	COMMENTS
Opening the Conversation		
• Greets client and establishes rapport.		
• Sets the agenda (what will happen during appt. and time it will take)		
• Asks permission		
• If new certification, staff asked if client was on WIC before		
Hemoglobin		
Masimo		
• Pediatric tester used or finger sized measured		
• Non-dominant hand and either ring or middle finger (thumb can be used for small children) is used		
• Gauge is right side up		
• Arm is at or near heart level and cable runs on top of hand		
• Client is instructed to remain still		
HemoCue		
• Hands gloved prior to test and removing cuvette from container		
• Fingertip wiped with alcohol and allowed to dry		
• Tester chose either middle or ring finger (with no ring)		
• Tester punctured on the side of tip of finger		
• Blood sample was collected without roughly squeezing /milking finger		
• Tester wiped away the first 2-3 drops of blood		
• Tester allowed the drop of blood to become big enough to fill the cuvette, which was inserted into the drop of blood and filled in one continuous process		
• Tester wiped off excess blood from cuvette and checked for air bubble		
• Cuvette and lancet were discarded in a bio-hazard container		
• Hands were washed or sanitizing gel used after testing		
• Area is cleaned after client or paper towel was placed under supplies		
• Hemoglobin results were correctly recorded in computer.		
• Hemoglobin was taken at the appropriate time		
Weight		
• Zero Scale (with or without paper)		
• Removed clothing, outer clothing, shoes, in dry diaper etc.		
• Center of scale		
• Measurement recorded on paper and in computer correctly and to the nearest ounce		
• Used paper and changed between clients (infants only)		

* √ = Complete, done correctly - = Missing

i = incorrectly done

NA = Not applicable

ITEM	√ / i / -	COMMENTS
Height/Length		
Height		
• Positioned properly (shoes or hair clips/braids removed, knees straight, 2 people measured for children)		
• Measurement taken to closest 1/8"		
• Measurement recorded correctly on paper & in computer		
Length		
• Positioned properly (shoes or hair clips/braids removed, both legs grasped and straightened, head against head piece, 2 people measured)		
• Measurement taken to closest 1/8"		
• Measurement recorded correctly on paper & in computer		
• Paper used on recumbent board and changed between clients		
Qualifications		
Data Verification		
• Client name and date of birth is verified		
Ethnicity/Race		
• Tribal Affiliation/Ethnic origin Documented (Client self declares, staff asks, or assess visually)		
Income		
• Determined income correctly		
• Documented correctly (source, amount and proof or self-declare form)		
Residency		
• Updated phone number, address, etc.		
• Matched addresses on demographics with proof		
• Documented correctly		
Identification		
• Verified For Client		
• Verified for Caregiver		
• Documented Correctly		
Information about mom		
• Information about mom is correctly documented		
Growth Grids		
• Showed appropriate growth grids to the caregiver		
• Explained growth grids or pregnancy weight grid correctly		
Health Interview		
PG / BF / PP		
• Education and vitamin questions were asked and information recorded correctly		
• Diabetes and hypertension questions asked and answers recorded		
• Pregnancy and/or Delivery information was asked and information recorded correctly		
• ATOD questions were asked and information recorded correctly		

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Infant / Child		
<ul style="list-style-type: none"> • Infant feeding/Breastfeeding questions were asked and information recorded correctly 		
<ul style="list-style-type: none"> • Household Smoking and TV/Video Viewing questions were asked and information recorded correctly 		
Risks		
<ul style="list-style-type: none"> • All risks were identified 		
<ul style="list-style-type: none"> • Documented notes for risks with multiple definitions 		
<ul style="list-style-type: none"> • MD Diagnosed check box selected 		
<ul style="list-style-type: none"> • Nutrition Assessment Questionnaire used to individualize the nutrition assessment and identify risks 		
<ul style="list-style-type: none"> • Referred to Nutrition Risk Factors Manual when unsure of risk 		
<ul style="list-style-type: none"> • Documented in Notes non-risk related pertinent information 		
<ul style="list-style-type: none"> • Used critical thinking skills to ask follow-up questions and assess information provided 		
<ul style="list-style-type: none"> • Questions were non-leading and an effective balance of open-ended and closed-ended questions was used. 		
Referrals		
<ul style="list-style-type: none"> • All mandatory referrals were made, if appropriate 		
<ul style="list-style-type: none"> • Service documented correctly as Has, Referred, Applied or Not Applicable 		
<ul style="list-style-type: none"> • Any additional referrals needed by client were made and documented. 		
<ul style="list-style-type: none"> • Previous referrals to programs and services made at a previous visits were followed up on 		
Basic Contact		
<ul style="list-style-type: none"> • Caregiver read the Rules & Regulations or CNW reviewed /discussed them with the caregiver and signed by caregiver 		
<ul style="list-style-type: none"> • Staff informed client of the programs that WIC shares information with 		
<ul style="list-style-type: none"> • Voter registration was offered/discussed 		
<ul style="list-style-type: none"> • Substance Abuse education provided (new certifications only) 		
Food Package Assignment		
<ul style="list-style-type: none"> • Assigned appropriate food package 		
<ul style="list-style-type: none"> • Tailored food package appropriately (including formula amt's) 		
Flowsheet		
<ul style="list-style-type: none"> • Flow sheet correctly completed 		
Appointment		
<ul style="list-style-type: none"> • Appropriate appointment given to client 		
<ul style="list-style-type: none"> • Documented or printed what client needed to bring at next appt. 		
<ul style="list-style-type: none"> • Appointment was written in ID folder or appointment notice was given to client 		
<ul style="list-style-type: none"> • High risk clients were referred to RD 		
<ul style="list-style-type: none"> • Client's eligibility for tri-monthly or bi-monthly issuance verified before printing checks 		
<ul style="list-style-type: none"> • ID folder given to client and explained (as applicable) 		

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ITEM	√ / i / -	COMMENTS
Check Education		
Check Education (New Certifications)		
• WIC foods		
• WIC vendors		
• How to use the CVV		
• Paying over including using SNAP benefits if appropriate		
• Separate WIC foods by check from other foods at grocery store		
• Inform cashier you are using WIC checks. Present checks and ID folder to cashier		
• Verify amount and date of use recorded on check and countersign the check after the amount and date are correctly filled out		
• Use check after first date to use and before late date to use		
• Inform clinic if there are any problems with store		
• No exchanges for cash, non-authorized food item, or credit		
• Client was given the opportunity to ask questions		
Check Education (Recertifications)		
• Asked if client has a WIC food list		
• Asked if client has a WIC vendor list		
• Asked if client has any questions/problems using WIC checks		
Check Printing or Separation of Duties		
• Recorded any reported problems or complaints and obtained adequate information		
• Other staff person issued checks (if available)		
• Client signed for checks		
• ID Folder dividers or envelopes used and explained		
• Extra check stock paper was shredded or marked void		
Civil Rights		
• Staff provided services in a non-discriminatory manner		
General		
• Uses appropriate techniques to establish a relationship and begin a conversation		
• Practices active listening and responds to non-verbal cues		
• Collects information without interrupting or correcting the client.		
• Ensures understanding by clarifying or asking questions as necessary.		
• Uses an effective balance of open-ended and closed-ended questions		
• Asks questions in a non-judgmental and non-leading manner		
• Provides positive reinforcement for healthy behaviors		

ITEM	√/I/-	COMMENTS
Questions for Staff		
<ul style="list-style-type: none"> • What would you do if you took a measurement on a client that is 2 inches shorter than the previous measurement? 		
<ul style="list-style-type: none"> • If a caregiver told you that her refrigerator was broken, where would that be documented? 		
<ul style="list-style-type: none"> • Imagine I am a new client. Explain how I would use my WIC benefits. (Check education, vendor list, food list) 		
<ul style="list-style-type: none"> • What education is mandatory at all new certifications? (Substance abuse education) Explain it to me. 		
<ul style="list-style-type: none"> • What is the procedure for issuing soy milk? 		
<ul style="list-style-type: none"> • A client tells you a store was out of WIC cereals, what would you do or say? 		
<ul style="list-style-type: none"> • What would you do if one of your relatives were on WIC? 		
<ul style="list-style-type: none"> • What is needed before you void and replace food instruments? • In what situation can you void and replace a check and some checks for the month have already been used? 		

Nutrition/Breastfeeding Education Observation

ITEM	√/1/-	COMMENTS
Individual:		
• Nutrition assessment completed prior to providing education (risks assigned, assessed infor/concerns/comments by client)		
• Previously provided nutrition education reviewed		
• Nutrition education addressed the highest risk(s) and/or considered client interest or concerns (Mandatory Topics: Exit Counseling, Finger Foods, Breastfeeding)		
• Used tools such as cups and BF tools		
• Used tools to generate topic (wands, circle charts, sort cards, facial expression cards, etc.)		
• Topic entered:		
• Topic discussed:		
• Handout was used appropriately (reinforced or guided education)		
• Handout related to education provided		
• Handout entered:		
• Topic(s) and handout(s) were accurately documented		
• Goal related to education provided		
• Goal is clear and appropriate		
• Goal reflects desired health outcome		
• Client involved in making nutrition goal		
• Goal entered:		
• Ways to Meet Goal:		
• Ways to meet goal reflect goal and education provided		
• Ways to meet goal are measurable		
• Goal and ways to meet goal were accurately documented		
• Education provided was interactive and staff elicited current diet/behavior practices from client		
• Information provided to client was accurate		
• Client received an adequate amount of information, guidance or suggestions to make a behavior change		
• Education provided was appropriate for client based on socioeconomic status, current living situation, education and ability to make changes		
• Staff provided positive reinforcement for positive health behaviors currently used by client		
• Staff provided support and encouragement for client to change behavior/breastfeed		
• Staff assisted a breastfeeding mother, addressing questions or concerns appropriately		
• Number of education topics was appropriate and learner was not overwhelmed with information.		# topics:
• Length of session (no score)		# minutes:
• Client offered a breastpump, if applicable		

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