

Nutrition Education

Table of Contents

NE-1: General Guidelines Education	2
1. General Guidelines (Effective: December 2024)	2
Addendum – Nutrition Practice Standard (NPS) – Nutrition Education	2
NE-2: Nutrition Education Goals	3
1. Nutrition Education Goals (Effective: December 2024)	3
NE-3: Nutrition Education Plan	4
1. Nutrition Education Plan (Effective: December 2024)	4
NE-4: Certification Education	5
1. Counseling Approach (Effective: December 2024)	5
Addendum – Nutrition Practice Standard (NPS) – Counseling Approach.....	5
2. WIC Program Explanation (WPE) (Effective: December 2024)	6
Addendum – Policy Practice Standard (PPS) WIC Program Explanation	6
NE-5: Secondary Nutrition Education	7
1. General Guidelines (Effective: December 2024)	7
Addendum – Illinois WIC Talk Template	8
2. Stay Healthy and Connected with WIC - Exit Counseling (Effective: December 2024)	9
Addendum – Stay Healthy and Connected with WIC During Pregnancy	9
Addendum – Stay Healthy and Connected with WIC After Delivery	9
3. Individual Nutrition Education (Effective: December 2024)	10
4. Internet Nutrition Education (Effective: December 2024)	11
5. Group Nutrition Education (Effective: December 2024)	12
Addendum –Nutrition Education MOU Template	12
6. Self-Study Modules (SSM) Nutrition Education (Effective: December 2024).....	13
NE-6 Category Specific Nutrition Education	14
1. Category Specific Nutrition Education (Effective: December 2024)	14
Addendum –NPS Growth in Children	15
NE-7: Education Materials	16
1. Teaching Aids (Effective: December 2024)	16
NE-8: Department Assistance	17
1. General Information (Effective: December 2024)	17
Addendum – State Nutrition Contacts	17

Nutrition Education

NE-1 General Guidelines

1. *General Guidelines (Effective: December 2024)*

- A. The goals of nutrition education and counseling, including breastfeeding promotion and support, are to emphasize the relationship between nutrition, physical activity, and health as well as assist in achieving a positive change in dietary and physical activity habits, resulting in improved nutritional status and the prevention of nutrition-related problems.
- B. Illinois WIC utilizes the Value Enhanced Nutrition Assessment (VENA) to provide a participant-centered, health outcome-based approach to the WIC visit. With VENA, staff can more easily identify and build upon participant strengths to assist them in improving their health and nutrition status. Through individualized nutrition services, WIC families are provided tailored food packages, customized nutrition education, guided goal setting, breastfeeding support, and referrals to additional resources or services.
- C. WIC does not provide medical nutrition therapy for complex medical conditions. The health care system is the provider of medical nutrition therapy as a treatment for diagnosed medical conditions. Refer to IL WIC PM AD 11.3 for the CPA's role in implementing individual care plans for high-risk participants.
- D. Nutrition education including breastfeeding promotion must be designed to be easily understood by participants, bear a practical relationship to their nutritional needs and cultural preferences, and include how to select food for themselves and their family.
 - 1. Required content of nutrition education and breastfeeding promotion and support can be found in the Addendum *NPS Nutrition Education*.
- E. Competent Professional Authority (CPA) and CPA Assistant (CPAA) staff that provide WIC nutrition education must complete the Department's initial and on-going job specific WIC training, which includes effective nutrition education interventions and counseling approaches as part of VENA training (IL WIC PM AD 11.1).
- F. Nutrition education, including breastfeeding promotion and support, is a benefit of the WIC Program and must be thoroughly integrated into participant health care plans, the food prescription, and other program operations at no cost to the participant.
- G. Nutrition education contacts must be made available at the time of certification and quarterly thereafter following the Addendum *I-WIC Appointments* (IL WIC PM CS 8.1).

Addendum – Nutrition Practice Standard (NPS) – Nutrition Education

Nutrition Education

NE-2 Certification Education

1. *Nutrition Education Goals (Effective: December 2024)*

Nutrition Education in WIC must be designed to achieve the following three broad goals:

- A. Stress the relationship between proper nutrition, physical activity, and health with special emphasis on the nutritional needs of pregnant, postpartum and breastfeeding women, infants, and children under five years of age and raise awareness about the dangers of using drugs, tobacco, alcohol, and other harmful substances or substance misuse.
- B. Assist the individual who is at nutritional risk in achieving a positive change in dietary and physical activity habits, resulting in improved nutritional status and in the prevention of nutrition-related problems through optimal use of the supplemental foods, other nutritious foods, and breastfeeding. This is to be taught in the context of the cultural preferences of the participants and with consideration for household situation and educational level of the participant.
- C. Promote and support exclusive breastfeeding as the standard infant feeding practice. Breastfeeding has been shown to have significant advantages for women and infants. WIC staff should provide women with appropriate and adequate information and support to successfully breastfeed.

Nutrition Education

NE-3: Nutrition Education Plan

1. *Nutrition Education Plan (Effective: December 2024)*

- A. The WIC Nutrition Education Plan (NEP) establishes nutrition priorities, including breastfeeding promotion and support, and focuses activities to improve participant health and nutrition outcomes.
- B. The NEP is implemented at the start of the federal fiscal year (October 1) and:
 - 1. Is based on a needs assessment conducted by the Department
 - 2. Includes goals, measurable objectives, and action steps
 - 3. Includes an evaluation component (participant survey)
- C. An annual participant survey will be provided that will identify strengths and opportunities to improve WIC services . The survey should be conducted per fiscal year guidance.
- D. A summary report is required by a date specified by the Department per fiscal year guidance.

Nutrition Education

NE-4: Certification Education

1. *Counseling Approach (Effective: December 2024)*

- A. The Value Enhanced Nutrition Assessment (VENA) is the expected counseling approach during the WIC certification, incorporating the following concepts:
1. Properly setting the stage for which the remainder of the WIC visit will follow, including body language, listening skills, and attitude of the counselor.
 2. Collecting relevant information through springboard and probing questions, in addition to reflective listening.
 3. Assessing protective factors and building on strengths by evoking strengths and values, along with crafting strong affirmations.
 4. Assessing nutrition risk within a strength-based framework, avoiding the expert trap, and listening for change language in order to recognize a participant's internal motivation for change.
 5. Exploring sensitive topics with empathy and compassion.
 6. Understanding principles needed to clarify and synthesize assessment data to identify topics for nutrition education. Explore strategies for evoking and building on internal motivation for change to target potential action steps.
 7. Exploring family-based assessments, goals, and action steps.
 8. Summarizing nutrition assessment findings and exploring strategies for transitioning from the nutrition assessment to prioritizing and providing nutrition education topics.
- B. The process of the assessment is ongoing, with the documentation of the previous assessment creating the foundation for subsequent visits. At the next visit, the CPA/CPAA should assess change from the previous visits and collect additional information needed to help the participant achieve small positive behavior changes over time.
- C. There is not one counseling approach that fits the needs of all participants. However, the counseling approach must be participant centered. The counseling approach should help participants identify their own motivation for change, setting individualized, simple, and attainable goals; providing clear and relevant "how to" actions to accomplish goals; and tailoring nutrition education to address the specific needs of migrant farm workers, homeless individuals, person with substance use disorder, high-risk participants, and/or breastfeeding women.
1. Use the Addendum *NPS Counseling Approach* as a guide for counseling approaches that are participant centered, interactive, and promote behavior change.

Addendum – Nutrition Practice Standard (NPS) – Counseling Approach

Nutrition Education

NE-4: Certification Education

2. *WIC Program Explanation (WPE) (Effective: December 2024)*

- A. It is important for participants to receive an explanation of the Program's purpose and key operational features to optimize understanding about the nature of WIC and the benefits it provides¹.
- B. The following information must be communicated to all applicants/participants to reflect the Value Enhanced Nutrition Assessment (VENA) philosophy, as part of a positive participant-centered certification visit:
 - 1. The purpose- of the WIC Program is to provide nutrition services, 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 to achieve positive health outcomes.
 - 2. The nutrition assessment- process is necessary to identify nutrition needs and interests so that WIC can provide education and referrals that are responsive to the participant's wants and needs.
 - 3. The relationship- between WIC staff and the participant is a partnership with open dialogue and two-way communication, working to achieve positive health outcomes.
 - 4. WIC food benefits- are prescribed for the individual, for their personal use, to promote and support the nutritional well-being of the participant, and to help meet the recommended intake of important nutrients or foods.
 - a) At the time of issuance, the Head of Household (HOH) must be educated on proper use of the EBT card and benefits mobile app per IL WIC PM SFD 2.3.
 - b) Review and offer the Family Shopping List, IL WIC Food List, and local Vendor List with HOH to ensure participants know how to purchase allowable items to attain their full nutrition benefit of their food package.
 - c) When reviewing the IL WIC Food List, offering education to the HOH on drugs, tobacco, alcohol, and other harmful substances.
 - 5. Supplemental food- The food provided by the Program is supplemental; it is not intended to provide all of the participant's daily food requirements.
 - 6. Certification period- Each participant must reapply at the end of the certification period and be reassessed for Program eligibility.
 - 7. When agencies are not serving all priorities, the nature of the Priority System must be explained (IL WIC PM CS 7.1).
- C. The Addendum *WIC Program Explanation* should be used to ensure all information is explained to each participant throughout each WIC certification visit and documented in the WIC MIS per Addenda *WIC Flow Sheets* (IL WIC PM CS 11.1).

Addendum – Policy Practice Standard (PPS) – WIC Program Explanation

¹ USDA WIC Policy Memo 2008-1

Nutrition Education

NE-5: Secondary Nutrition Education

1. General Guidelines (Effective: December 2024)

- A. The local agency must assure that the staff person responsible for providing nutrition education for WIC participants meets the qualification for a Competent Professional Authority (CPA) per Federal Requirements or a trained Competent Professional Authority Assistant (CPAA) per IL WIC PM AD 12.
 - 1. Outside agencies or non-WIC staff must be approved by the Department (IL WIC PM NE 5.5).
- B. There are multiple ways to deliver secondary nutrition education (individual in person or telephone education, internet education, group education, virtual education and self-study modules). Whichever method is chosen must:
 - 1. Be appealing, creative, relevant, and interactive to engage the participant as well as create opportunities for feedback and follow the Addendum *NPS Nutrition Education* (IL WIC PM NE 1.1).
 - 2. Consider the nutritional needs and concerns, household situation, cultural practices, geographic locations, environmental influences, and educational abilities of the participant as identified through the nutrition assessment process.
 - 3. Include follow up to assess behavior change, determine intervention effectiveness, and allow for continued interaction.
- C. Local agencies should utilize the Addendum *Illinois WIC Talks Template* when creating group or virtual education and self-study module topics.
 - 1. If a different format is used, techniques that engage the participant and create an opportunity for feedback must be included.
- D. At the time of certification, WIC staff must advise the Head of Household (HOH) of their secondary education options.
 - 1. Secondary education, including method of education, date, and time should be determined with the participant and documented in the WIC MIS.
 - 2. Local agency's system for providing services (scheduled appointments, same-day and/or walk-in appointments) should be explained.
 - 3. The second parent or proxy are encouraged to attend secondary education visits (and may attend in place of the HOH).
- E. Secondary education must not be provided in the same encounter or on the same day as the certification and should be scheduled to coincide with food benefit issuance (3 months at a time, following the WIC visit timeline per Addendum *I-WIC Appointments* (IL WIC PM CS 8.1).
- F. Local agency staff must document in the WIC MIS that nutrition education was completed, including participant notes to ensure continuity of care.
 - 1. Secondary education documentation must follow Addendum *NPS Documenting in WIC MIS* (IL WIC PM CS 11.1).
- G. Individuals must not be denied supplemental foods for failure to attend or participate in nutrition education activities.
 - 1. Local agency staff must monitor missed nutrition education appointments to further education efforts. Participants who miss or do not attend their scheduled secondary education appointment should be offered another option to complete.

Nutrition Education

NE-5: Secondary Nutrition Education

2. Participants should not be issued more than 2 consecutive months of food benefits for missed appointments without reminding participants of the program expectation to keep WIC appointments, offering telephone education to follow up on the previous assessment, and reviewing food package usage.
- H. Following completion of secondary education, WIC staff must follow up with participants before issuing benefits to confirm:
1. Completion of required nutrition education (IL WIC PM SFD 7.5, NE 5.2).
 2. Understanding of nutrition education received, any questions for the CPA/CPAA, and follow up on referrals.
 3. Any changes that need to be made to their food package prescription. If applicable review need for Medically Prescribed Formula.
- I. Following confirmation of completion of nutrition education, benefits may be issued:
1. Remotely per IL WIC PM SFD 8.1 (e.g., telephone education, internet education, virtual group session).
 2. By Frontline staff following the decision tree provided in Addendum *NPS Nutrition Education* (IL WIC PM NE 1.1).
- J. Local agency secondary education contacts must be evaluated at least annually as part of quality assurance activities and program operations review (IL WIC PM AD 6.1).

Addendum – Illinois WIC Talk Template

Nutrition Education

NE-5: Secondary Nutrition Education

2. *Stay Healthy and Connected with WIC - Exit Counseling (Effective: December 2024)*

- A. Exit counseling must be offered to all women participants, including pregnant, postpartum, and breastfeeding participants, before the end of their certification period². Pregnant participants may be eligible to continue WIC services following delivery, however, exit counseling must be offered during the prenatal certification period in the event they do not return for subsequent certifications.
 - 1. Exit counseling may not be used in place of individual counseling at the certification visit.
 - 2. A participant's second or final nutrition education contact of each certification period may be used as the exit counseling session.
 - 3. Exit counseling does not require an additional education contact.
- B. Exit counseling reinforces the benefits of the WIC program including nutrition and health messages, nutritious foods, and is also an opportunity to remind participants of WIC program requirements and to encourage WIC participation in the future.
- C. Exit counseling reinforces messages on:
 - 1. Nutritious foods and low-cost recipes that maximize the specific components of the WIC food package
 - 2. Importance of folic acid intake
 - 3. Continued breastfeeding
 - 4. Staying current on immunizations for parent and child(ren)
 - 5. Health risks of using alcohol, tobacco, and other drugs
 - 6. The need for a well-balanced diet
- D. Information may be tailored using a participant-centered approach, following VENA guidance, to reinforce important nutrition and health messages, and provide anticipatory guidance appropriate for each category.
- E. The Addenda *Stay Healthy and Connected with WIC During Pregnancy* and *Stay Healthy and Connected with WIC After Delivery*, must be offered to ensure all messages are provided (verbal, hard copy, or digital). Participants must be offered an interactive opportunity to discuss the exit counseling brochure content.
- F. Document that exit counseling was provided in the WIC MIS.
- G. Staff should refer to the Addendum *NPS Nutrition Education (IL WIC PM NE 1.1)* for further information on how to incorporate exit counseling into secondary education and documentation expectations.

Addendum – Stay Healthy and Connected with WIC During Pregnancy

Addendum – Stay Healthy and Connected with WIC After Delivery

² *USDA WIC Policy Memo 1994-9*

Nutrition Education

NE-5: Secondary Nutrition Education

3. Individual Nutrition Education (Effective: December 2024)

- A. Individual education may be preferred when several family members are on the program, to accommodate family's scheduling needs, and/or to provide a more individualized follow up.
- B. CPA/CPAA should use past assessment information to prioritize and individualize the nutrition education visit. In many cases, follow up will include checking on the status of a nutrition or health related condition, medically prescribed formula, prior referral, or assessing progress toward goals.
- C. Individual nutrition education contacts may be provided in a variety of ways.
 - 1. In Person Education is completed at the local agency. Participants may prefer the easier communication, immediate support, and interactive nutrition education.
 - 2. Telephone or Video Education is completed remotely (staff and/or participant is not in the local agency). It improves access to nutrition education and health professionals, overcoming barriers of time and location. Telephone education may not be used in place of individual counseling at the certification visit.
 - a) Refer to Addendum *NPS Nutrition Education* (IL WIC PM NE 1.1) for tips on conducting telephone or video appointments.
 - 3. High Risk Follow Up follows the same protocol as individual education but also includes follow up on the individual care plan. It may be necessary to update some of the original assessment data, such as rechecking weight or hemoglobin/hematocrit values.
 - a) Only a CPA may implement individual care plans for high-risk participants
 - b) Refer to IL WIC PM AD 11.3 for details on CPA roles and responsibilities for developing and documenting visits for high risk participants.
 - c) High risk follow up may be completed in conjunction with home visit case management programs following consent, nutrition education, and remote issuance policies. A written procedure must be developed and approved by the Department (via the Regional Nutritionist Consultant) before beginning.

Nutrition Education

NE-5: Secondary Nutrition Education

4. Internet Nutrition Education (Effective: December 2024)

- A. Internet education provides innovative and easily accessible nutrition education to WIC participants and allows them the option of doing their learning on their own time and anywhere they have internet access.
- B. Internet education must consider a participant's literacy level, primary language spoken, and educational abilities as identified through the nutrition assessment process.
- C. WIChealth incorporates the goals of WIC nutrition education (IL WIC PM NE 2.1) into an internet-based health information website approved for use by the Illinois WIC Program.
- D. Internet education may not be used in place of individual counseling at the certification visit.

Nutrition Education

NE-5: Secondary Nutrition Education

5. *Group Nutrition Education (Effective: December 2024)*

- A. Group education provides an opportunity for parents and caregivers to interact and learn together with a qualified health professional. It can also free up clinic time by completing multiple secondary education visits at one time.
- B. Virtual group education or support groups have the same benefits to in person group education while also offering improved access, flexibility, reduced barriers and streamlined services.
 - 1. Refer to Addendum *NPS Nutrition Education* (IL WIC PM NE 1.1) for tips on conducting virtual education.
- C. Session should be planned at least three months in advance so participants can be scheduled at the time of their preceding appointment.
- D. Nutrition education may be provided through the local agency directly or through arrangements made with other agencies. Sessions must be presented by:
 - 1. Trained WIC staff (CPA/CPAA).
 - 2. WIC Breastfeeding Peer Counselors (for breastfeeding sessions only).
 - 3. Outside agencies or non-WIC staff, approved by the Department:
 - a) The Department must be notified prior to use of outside agencies or non-WIC staff and Letters of Agreement or Memorandums of Understanding (MOU) must be on file.
 - 1) The MOU should include how nutrition education will be delivered; time the agreement covers; responsibilities of the non-WIC staff and WIC staff; and how attendance will be documented and shared back with the agency.
 - 2) The Addendum *Nutrition Education MOU Template* should be used to ensure requirements are met.
 - 3) Services provided by non-WIC staff must be within their scope of practice.
 - b) Session details, including lesson plans, must be submitted to the Department (via the Regional Nutritionist Consultant) for approval.
 - c) Sessions should fit into the category specific topics listed in IL WIC PM NE 6.1.
 - d) Proof of session attendance must be received to document secondary education was completed.
 - 1) Proof must include the topic/specifics of the course, participant's name, completion date, and, if applicable, goal for follow up at next WIC visit. Proof must be within 90 days of completion date to meet WIC visit timelines.
 - 2) Participants must be contacted for follow up before issuing benefits.
 - e) The coordination and collaborative efforts including review of sessions, plans, and agreements will be reviewed periodically as determined by the Department.

Addendum – Nutrition Education MOU Template

Nutrition Education

NE-5: Secondary Nutrition Education

6. *Self-Study Modules (SSM) Nutrition Education (Effective: December 2024)*

- A. Group, individual, or online education options allow the opportunity to personalize the participant's learning experience. These are the preferred methods for effective nutrition education that promote positive behavior change.
- B. Self-study modules, walk-thru, or bulletin boards may be offered as an alternative education method allowing participants to learn at their own pace while allowing for flexibility in scheduling.
- C. Self-study modules must:
 - 1. Consider a participant's literacy level, primary language spoken, and educational abilities as identified through the nutrition assessment process.
 - 2. Include an evaluation component which evaluates both knowledge and behavior change.
 - 3. Provide an opportunity for follow up with a CPA/CPAA before issuing benefits.
- D. Self-study modules may not be used in place of individual counseling at the certification visit.

Nutrition Education

NE-6 Category Specific Nutrition Education

1. *Category Specific Nutrition Education (Effective: December 2024)*

- A. The nutrition assessment obtains and synthesizes relevant and accurate information in order to plan category specific nutrition education and breastfeeding support that address a participant's needs and concerns.
- B. Category specific nutrition education must be offered at the initial certification visit and subsequent secondary education visits.
- C. CPA/CPAA staff must ensure required nutrition education is offered per IL WIC PM SFD 7.5, NE 2.1 and NE 5.2.
- D. The most current guidance from USDA must be used as a reference for program expectations for required and category specific nutrition education. This guidance is the basis for Department developed educational materials and complies with Federal requirements.
 1. For a list of USDA and Illinois WIC resources, refer to the Addendum *NPS Nutrition Education* (IL WIC PM NE 1.1).
 2. For more information on growth in infants and children, refer to the Addendum *NPS Growth in Children*.
- E. The following topics are based on common nutrition concerns to assist CPA/CPAAs in offering appropriate category specific nutrition education. Staff should refer to Addendum *USDA WIC Nutrition Risk Manual* (IL WIC PM CS 6.1) for details on each topic.

Infant Education

1. Infant feeding skills (infant behaviors such as developmental skills, hunger and satiety cues, the feeding relationship)
2. Nutrition needs (frequency of human milk or iron-fortified formula the first six months, size of newborn infant's stomach, when to expect growth spurts)
3. Positioning of infant during feeding, holding baby, nursing positions, etc.
4. Preparation, handling, and storing human milk and infant formula
5. Proper use of nursing bottles and cups
6. Transitioning to complementary foods (developmental readiness, early/late introduction, food allergies, choking prevention, baby-led weaning, food and beverage choices)
7. Preparing and storing home-prepared and commercial foods safely
8. Dietary supplement needs

Child Education

1. Parent-Child Feeding Relationship (division of responsibility with feeding)
2. Eating behaviors (offering a variety of healthy foods, including fruits, vegetables, whole grains, and iron rich/fortified foods daily, choking prevention)
3. Beverage and cup choices (proper use of pacifiers, nursing bottles and cups, preventing oral health problems)
4. Planning family meals and snacks (how to make mealtime positive)
5. Food safety (food borne illnesses)
6. Food allergies

Nutrition Education

NE-6 Category Specific Nutrition Education

7. Physical activity behaviors (encourage structured and free play, limit screen time)
8. Dietary supplement needs

Prenatal Education

1. Eating foods to support a healthy pregnancy (including fruits, vegetables, whole grains, and iron rich/fortified foods daily, addressing food allergies, potentially harmful foods)
2. Achieving recommended weight gain
3. Engaging in regular physical activity
4. Dietary supplement needs and over-the-counter/prescription drug use
5. Coping strategies for nausea and vomiting
6. Risks of drugs, tobacco, alcohol, other harmful substances or substance misuse, and environmental tobacco smoke exposure.
7. Oral health conditions and care
8. Mental health concerns (depression, bipolar disorder, anxiety disorder)
9. Breastfeeding promotion and support
 - a) Those participants who are undecided should be offered information on the benefits of breastfeeding and address specific concerns related to breastfeeding.
 - b) Participants who plan to breastfeed should be offered basic how-to information, information on dealing with common concerns, and support on getting a good start.
 - c) Breastfeeding Peer Counselor (or designated breastfeeding support staff) should provide specific breastfeeding support and educational services.

Postpartum and Breastfeeding Education

1. Achieving and maintaining a healthy weight
2. Healthy eating behaviors (selecting food choices of high nutritional quality including fruits, vegetables, whole grains, and iron rich/fortified foods daily, avoiding calorie-rich foods, addressing food allergies)
3. Engaging in regular physical activity
4. Supplement needs and over-the-counter/prescription drug use
5. Risks of drugs, tobacco, alcohol, and other harmful substances or substance misuse
6. Oral health conditions and care
7. Mental health concerns (depression, bipolar disorder, anxiety disorder)
8. Support of breastfeeding goals
 - a) Importance of exclusivity and duration
 - b) Concerns, including use of prescription medications
 - c) Breastfeeding Peer Counselor (or designated breastfeeding support staff) should provide specific breastfeeding support and educational services.
9. Importance of pregnancy spacing (developing a reproductive plan and birth spacing)

Nutrition Education

NE-7: Education Materials

1. *Teaching Aids (Effective: December 2024)*

- A. Educational materials are important components of nutrition and breastfeeding education and should be utilized to enhance participant comprehension.
- B. Printed materials must be easily understood by the participant, culturally diverse, and content consistent with USDA WIC Nutrition Services Standards. Teaching aids such as handouts, posters, and audio-visuals are available from the Department and its partner agencies, and many are available in other languages.
- C. All non-Department educational materials must be evaluated initially to check for accuracy and consistency with Department policy and recommendations. State staff are available for assistance.
- D. Except in the case of highly motivated individuals or individuals who express a desire for more information, it is not recommended to offer more than two handouts. Give only materials directly related to the topic or problem identified for the participant.
- E. Handouts are considered a tool for reinforcing an educational message. They are to be used to enhance or supplement the nutrition education provided by local staff but do not take the place of nutrition education. Handouts should be personalized for the participant.

Nutrition Education

NE-8: Department Assistance

1. General Information (Effective: December 2024)

- A. Department Dietitians have expertise in: Community Nutrition/Public Health Research; Maternal and Child Health; Infant and Pediatric Nutrition; Breastfeeding and Human Lactation; Chronic Disease Prevention; Child/Adolescent Weight Management; Nutrition Education and Evaluation; Training/Group Facilitation; Program and Policy Development; Computer Management Information Systems-data collection and use; Nutrition for Children with Special Health Care Needs; Diabetes and Gestational Diabetes; Interagency Collaboration, and Food Security Issues.
 - 1. Refer to Addendum *State Nutrition Contacts* for contact information for Department staff.
- B. Regional Nutritionist Consultants work directly with the WIC program and:
 - 1. Conduct management evaluation and monitoring reviews.
 - 2. Provide job specific training, technical program assistance, and consultation.
 - 3. Work on special projects (e.g., development and monitoring of the annual Nutrition Education Plan, policy updates, preparing trainings and conferences).
- C. The Department has a training contract to provide:
 - 1. WIC Management Information System (MIS) training.
 - 2. WIC Staff training (Civil Rights, Frontline, CPA/CPAA, BFPC, and WIC and Breastfeeding Coordinator).

Addendum – State Nutrition Contacts