



## Appendix C2. Local Agency Director Survey

### WIC NUTRITION ASSESSMENT AND TAILORING STUDY Local Agency Survey

Thank you for taking the time to complete this survey. The United States Department of Agriculture (USDA), Food and Nutrition Service (FNS) is sponsoring a national study to examine WIC's nutrition risk assessment process. FNS has contracted with Westat and Insight Policy Research to conduct this study.

As part of the study, FNS would like the input of WIC Local Agency Directors about the policies and guidance that their WIC clinics follow when conducting nutrition risk assessments and using assessment results to tailor benefits and services provided.

You may share the link and PIN for this survey with other staff at your agency so that they may assist in responding to questions about the nutrition risk assessment process. However, we would like the Local Agency Director to approve and submit the completed survey.

You and your staff may log in to the survey as many times as you wish before submitting. The website will automatically save your work as you go.

Please complete this survey by **[date]**.

#### NUTRITION RISK ASSESSMENT PROCESSES AND PROTOCOLS

1. State Agencies often provide policy and procedure documents for conducting nutrition risk assessments. In addition to the ones created by your State Agency, has your Local Agency created policy and procedure protocols for the WIC clinics that you oversee?

This information is being collected to assist the Food and Nutrition Service in obtaining a comprehensive and detailed description of the WIC nutrition risk assessment process and the ways in which participant benefits are tailored to address the assessment results. This is a voluntary collection and FNS will use the information to improve the delivery and tailoring of WIC services and increase satisfaction of both staff and participants. This collection does request personally identifiable information under the Privacy Act of 1974. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-[xxxx]. The time required to complete this information collection is estimated to average 33 minutes (0.55 hours) per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5<sup>th</sup> Fl, Alexandria, VA 22314 ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

- Yes
- No → GO TO QUESTION 3

2. In what areas has your Local Agency created additional nutrition risk assessment protocols? (Check all that apply.)
- Determining nutrition risk criteria
  - Adaptations for culturally diverse populations
  - Types of tools used when performing the nutrition risk assessment
  - Documenting nutrition risk criteria
  - Using technology to communicate with participants about the nutrition risk assessment pre- and post-visit
  - Training provided to WIC nutrition risk assessment staff
  - Other (Specify: \_\_\_\_\_)
3. Are your WIC participants/parents or guardians asked to complete any forms prior to appointments that involve nutrition risk assessment?
- Yes
  - No GO TO QUESTION 5
4. What kinds of forms are your WIC participants/parents or guardians asked to complete prior to appointments involving nutrition risk assessment? (Check all that apply.)
- Dietary intake forms for self and/or child
  - Nutrition assessment questionnaires
  - Forms to document participant's eligibility (e.g. address, income, etc.)
  - Other (Specify): \_\_\_\_\_
5. Which of the following types of tools do staff utilize to conduct the nutrition risk assessment component of the visit with a program participant? (Check all that apply.)
- Nutrition questionnaire
  - Health questionnaire
  - Medical information
  - Diet history
  - Measuring or drinking cups
  - Food models
  - Baby bottles
  - Other (Specify): \_\_\_\_\_

6. Which of the following types of staff typically perform the **nutrition risk assessment** at clinic site(s) operated by your Local Agency? (Check all that apply.)

- Registered dietitian/registered dietitian nutritionist (RD/RDN)
- Nutritionist (4 year degree/non-RD/RDN)
- Nurse (Registered Nurse (RN) or Licensed Practical Nurse (LPN))
- Paraprofessional
- Nutrition assistant/nutrition aid
- Breastfeeding peer counselor
- Designated breastfeeding experts (including Certified Lactation Counselors, Certified Lactation Educators, and International Board Certified Lactation Consultants)
- Clerk/support staff
- Other (Specify): \_\_\_\_\_

7. Think about the nutrition risk assessment trainings offered to **all WIC staff who conduct nutrition risk assessments** at your Local Agency's clinics. Which of the following topics are included in the trainings provided to these staff? (Check all that apply.)

- Prenatal nutrition
- Postnatal nutrition (including nutrition for breastfeeding mothers)
- Infant nutrition
- Child nutrition
- The nutrition assessment process
- Assessment of breastfeeding behaviors
- Anthropometric data collection techniques (e.g., how to properly obtain heights, lengths, and weights)
- Hematological data collection techniques (e.g., how to collect blood specimens for measuring hemoglobin levels)
- Physical signs and symptoms of nutrition-related conditions (e.g., nutrition-focused physical exams)
- Dietary assessment (e.g. 24 hour recalls, food frequency questionnaires)
- Documentation of nutrition assessment findings
- Motivational interviewing/Counseling and participant-centered service skills
- Multicultural awareness

- Critical thinking
- Counseling and participant-centered services skills
- Weight issues (e.g. obesity, prenatal weight gain)
- Therapeutic formula
- Use of interpreter services
- Other, specify: \_\_\_\_\_
- Other, specify: \_\_\_\_\_
- Other, specify: \_\_\_\_\_

[FOR EACH TRAINING TOPIC SELECTED IN QUESTION 7 ABOVE, ASK QUESTIONS 8 AND 9.]

8. How often do WIC nutrition risk assessment staff receive [prenatal nutrition] training?

- Twice a year
- Annually
- Once every 2 years
- Other, specify: \_\_\_\_\_

9. Does your Local Agency offer refresher trainings for the [prenatal nutrition] training?

- Yes
- No

10. What are the ways in which training is conducted for the training topics you selected? (Check all that apply.)

- National/State/Regional conference
- Training sessions/courses at a State training center
- In-house training session (e.g., Local Agency conferences, workshops)
- Clinic staff meetings
- State or Local Agency webinars
- Online training modules or courses
- Individual staff mentoring or coaching
- Other, describe: \_\_\_\_\_

## ASSESSMENTS OF HIGH RISK

11. Does your Local Agency or your State Agency determine which nutrition risk criteria are considered high risk?

- The State Agency
- The Local Agency
- Both the State Agency and Local Agency

12. Has your Local Agency created processes or protocols for providing nutrition education to high risk participants that are in addition to those described in your State policy and procedures manual?

- Yes
- No → GO TO QUESTION 14

13. In what areas has your Local Agency created additional nutrition education protocols for high risk participants that are in addition to those described in your State policy and procedures manual?

- Preparing the individual care plan
- Referrals to professional WIC staff
- Referrals to external services
- The number and frequency of educational contacts
- Use of technology to enhance educational messages
- Other (Specify: \_\_\_\_\_)

## BREASTFEEDING ASSESSMENTS

14. Which of the following types of staff conduct breastfeeding assessments for participants at your clinic site(s)? (Check all that apply.)

- Registered dietitian/registered dietitian nutritionist (RD/RDN)
- Nutritionist (4 year degree/non-RD/RDN)
- Nurse (Registered Nurse (RN) or Licensed Practical Nurse (LPN))
- Paraprofessional/nutrition assistant/nutrition aid
- CLC (Certified lactation counselor)
- CLE (Certified lactation educator)

- IBCLC (International board certified lactation consultant)
- Breastfeeding peer counselor
- Clerk/support staff
- Other (Specify): \_\_\_\_\_

15. Do you use the Grow and Glow curriculum for your breastfeeding assessment training?

- Yes – GO TO Q16
- No – GO TO Q20

16. How often do WIC breastfeeding assessment staff receive training using the Grow and Glow in WIC curriculum?

- Twice a year
- Annually
- Once every 2 years
- Other, specify: \_\_\_\_\_

17. How is the training conducted using the Grow and Glow in WIC curriculum? (Check all that apply.)

- National/State/Regional conference
- Training sessions/courses at a State training center
- In-house training session (e.g., Local Agency conferences, workshops)
- Clinic staff meetings
- State or Local Agency webinars
- Online training modules or courses
- Individual staff mentoring or coaching
- Other, describe: \_\_\_\_\_

18. Does your Local Agency offer refresher trainings using the Grow and Glow in WIC curriculum?

- Yes
- No

19. What additional topics not covered by Grow and Glow in WIC do you include in your breastfeeding assessment training?

Specify: \_\_\_\_\_

[IF OTHER TOPICS REPORTED, GO TO Q21, ELSE GO TO Q24]

20. Now, think specifically about the breastfeeding assessment trainings offered to WIC staff who conduct breastfeeding assessments at your Local Agency's clinics. Which of the following topics are included in the breastfeeding assessment training? (Check all that apply.)

- Assessing mother's personal beliefs and attitudes towards breastfeeding
- Assessing mother's milk production/mother and baby's dietary intake
- Assessing potential breastfeeding problems, breastfeeding techniques, and baby hunger cues
- Assessing participant breastfeeding goals
- Infant nutrition
- Counseling and participant-centered services skills
- Other, specify: \_\_\_\_\_

[FOR EACH TRAINING TOPIC SELECTED IN QUESTION 19 OR 20 ABOVE, ASK QUESTIONS 21 and 22.]

21. How often do WIC breastfeeding assessment staff receive [Infant nutrition] training?

- Twice a year
- Annually
- Once every 2 years
- Other, specify: \_\_\_\_\_

22. Does your Local Agency offer refresher trainings for [Infant nutrition] training?

- Yes
- No

23. What are the ways in which training is conducted for the breastfeeding assessment topics you selected? (Check all that apply.)

- National/State/Regional conference
- Training sessions/courses at a State training center

- In-house training session (e.g., Local Agency conferences, workshops)
- Clinic staff meetings
- State or Local Agency webinars
- Online training modules or courses
- Individual staff mentoring or coaching
- Other, describe: \_\_\_\_\_

## TAILORING PROGRAM BENEFITS BASED ON NUTRITION RISK ASSESSMENT RESULTS

### FOOD PACKAGES

24. Do WIC staff in your local clinics modify food quantities (e.g. provide less than the full maximum monthly allowance) in response to nutrition risk assessment results? (Check all that apply.)
- Yes, if it is medically or nutritionally warranted (e.g. to eliminate a food due to a food allergy or another nutrition-related medical condition)
  - Yes, if a participant refuses or cannot use the full nutrition benefit
  - No
25. Do WIC staff at your clinics tailor food types and forms to accommodate household and general living conditions, such as: (Check all that apply.)
- Food storage conditions
  - Equipment for food preparation
  - Unsafe water
  - Homeless and transient status
  - The Local Agency cannot tailor food types and forms to accommodate household and general living conditions
26. Do WIC staff at your local clinics make changes or substitutions to participants' food packages to meet their individual nutritional needs and preferences based on the results of the nutrition risk assessment?
- Yes

No → GO TO QUESTION 28

27. What changes are made by your local clinic staff? (Check all that apply.)

- Substitutions based on medical diagnoses
- Substitutions based on participants' food preferences
- Cultural, belief, or religious food substitutions (e.g., vegan, Kosher, Halal)
- Adjustment to the type of infant formula provided based on breastfeeding assessment
- Adjustment to the amount of infant formula provided based on breastfeeding assessment
- Other (Specify: \_\_\_\_\_)

## NUTRITION EDUCATION

28. At your Local Agency's WIC clinics, how does staff use the information obtained in the nutrition assessment to tailor nutrition education? (Check all that apply.)

- A menu of nutrition education topics are identified, and the participant/caregiver chooses what interests him or her most
- Content of educational materials is modified
- Delivery medium is modified (e.g., in-person discussion, on-line presentation, printed materials)
- The number and frequency of educational contacts is modified
- Other (Specify: \_\_\_\_\_)

29. At your Local Agency's WIC clinics, what modes of nutrition education are offered to participants? (Check all that apply.)

- One-on-one counseling: Face to face (in WIC site)
- One-on-one counseling: Telephone
- One-on-one counseling: Video conferencing
- Group education sessions
- Technology-based nutrition education used by participants at site (e.g., computer, kiosk, tablet)
- Technology-based nutrition education used by participants offsite via Internet (e.g., web-based nutrition education modules)
- Distribution of printed materials to participants
- Other (Specify: \_\_\_\_\_)

30. At your Local Agency's WIC clinics, how does staff prioritize nutrition education topics for participants with multiple nutrition risks? (Check all that apply.)

- Local Agency protocol
- Professional judgement of nutrition risk assessment staff
- Participant's expressed needs and concerns
- Other (Specify: \_\_\_\_\_)

REFERRALS

31. For each of the following specialists, please indicate if an internal referral is offered ... (Select one response for each type of internal referral.)?

Type of Internal Referrals	To all WIC participants at my clinics	Only when indicated based on the results of the nutrition risk assessment	Specialist Is not available in my clinics
Breastfeeding Peer Counselor			
WIC Designated Breastfeeding Expert			
WIC Registered Dietitian/Registered Dietitian Nutritionist (RD/RDN)			
Other (Describe):			

32. For each of the following health and social service programs or organizations, please indicate if an external referral offered ... (Select one response for each type of external referral.)

Type of External Referrals	To all WIC participants at my clinics	Only when indicated based on the results of the nutrition risk assessment	Referral service not available to my clinics
Breastfeeding support groups			
Childhood immunizations			
Community health centers/Health provider			
Oral health resources			
Income support (TANF, SSI, UI)			
SNAP/Food Stamps			
Medicaid/CHIP			
Alcohol, tobacco and substance use counseling			
Domestic violence			
Housing/shelter			
Child abuse prevention/counseling			
Food banks			
Smoking cessation			
Other			
Specify:			
Specify:			
Specify:			

#### CHANGES TO PROGRAM BENEFITS

33. Without a new nutrition risk assessment, can staff at your clinics modify WIC program benefits (e.g., modify food packages, nutrition education, etc.) based on changes noted in identified risks or new risks that the participant brings to the attention of WIC staff between certification appointments? (Check all that apply.)

- Yes, staff may modify benefits if they note changes to the risks identified in the initial assessment
- Yes, staff may modify benefits to address nutrition risks that were previously identified but not addressed in prior appointments
- Yes, staff may modify benefits based on new risks that a participant brings to their attention
- No, staff may not modify benefits until the participant is re-certified.

#### USE OF THE MIS

34. Does the WIC computer program (Management Information System, or MIS) at your clinics help staff to tailor program benefits using information from the nutrition risk assessment?

- Yes
- No → GO TO QUESTION 36

35. How does the MIS at your clinics help staff tailor **food packages** using information from the nutrition risk assessment?

- Automatically tailors food packages, but WIC staff can make changes
- Automatically tailors food packages, and this cannot be changed by WIC staff
- Suggests possible ways to tailor food packages that WIC staff can choose from
- Does not help staff tailor food packages
- Other, specify: \_\_\_\_\_

36. How does the MIS at your clinics help staff tailor **nutrition education** using information from the nutrition risk assessment?

- Automatically tailors nutrition education offered to participants, but WIC staff can make changes
- Automatically tailors nutrition education offered to participants, and this cannot be changed by WIC staff
- Suggests possible ways to tailor nutrition education that WIC staff can choose from
- Does not help staff tailor nutrition education
- Other, specify: \_\_\_\_\_

37. How does the MIS at your clinics help staff tailor **referrals** offered to participants using information from the nutrition risk assessment?

- Automatically tailors referrals offered to participants, but WIC staff can make changes
- Automatically tailors referrals offered to participants, and this cannot be changed by WIC staff
- Suggests possible referrals to offer participants that WIC staff can choose from
- Does not help staff tailor referrals offered to participants
- Other, specify: \_\_\_\_\_

CULTURAL APPROPRIATENESS OF NUTRITION RISK ASSESSMENT SERVICES AND BENEFIT TAILORING

38. How does your Local Agency communicate with participants that speak a language other than English when conducting nutrition risk assessment? (Check all that apply.)

- Have bilingual staff onsite
- Use on-site interpreters (individuals who provide interpreter services only)
- Use a language line service
- Other, specify: \_\_\_\_\_

39. How does your Local Agency communicate with participants that speak a language other than English when providing nutrition education? (Check all that apply.)

- Have bilingual staff onsite
- Use on-site interpreters (individuals who provide interpreter services only)
- Use a language line service
- We offer printed educational materials in other languages
- Other, specify: \_\_\_\_\_

40. How does your Local Agency ensure cultural competency in service provision? (Check all that apply.)

- Staff training
- Pursue feedback and advice from culturally diverse groups
- Conduct culturally sensitive evaluations
- Elicit participant expectations and preferences
- Other, specify: \_\_\_\_\_

41. Do clinic assessment staff make allowable changes or substitutions to WIC participants' food packages to meet their cultural food preferences?

- Yes, always
- Yes, sometimes
- No

LOCAL AGENCY CHARACTERISTICS

Lastly, we would like to ask some questions about the characteristics of your Local Agency.

42. Which of the following categories best describes your Local Agency :

- Local/County Health Department
- Health Center/Clinic
- Non-profit Organization
- Other (Please describe): \_\_\_\_\_

43. How many clinic sites does your Local Agency operate? \_\_\_\_\_

44. Where are these clinic sites located?

- Primarily in urban areas
- Primarily in rural areas
- Primarily in suburban areas
- Clinics are located in a mix of urban/suburban areas
- Clinics are located in a mix of urban/rural/suburban areas

45. Please list the three languages other than English, used most frequently by WIC participants in your Local Agency, and indicate the approximate percentage of WIC participants using each as their primary language.

- Language 1: \_\_\_\_\_ Percent: \_\_\_\_\_
- Language 2: \_\_\_\_\_ Percent: \_\_\_\_\_
- Language 3: \_\_\_\_\_ Percent: \_\_\_\_\_

Thank you for completing this survey. We appreciate your participation.