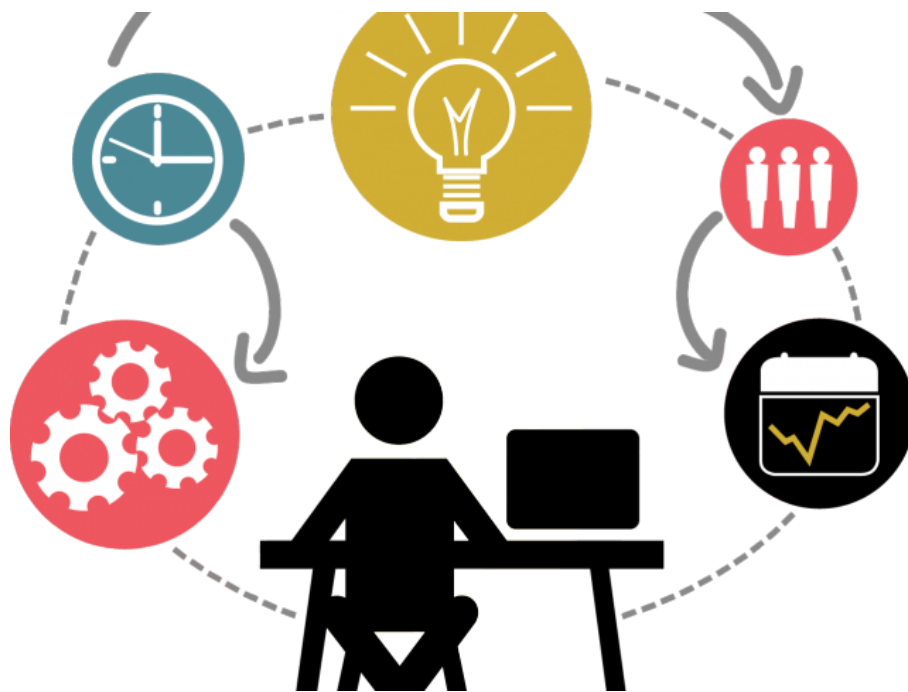


# Nutrition Services Plan (NSP) Guidance



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## Introduction

It is strongly recommended that you read the guidance material before you begin and review the checklist of items to include in your Plan before submitting it to the State Agency (SA).

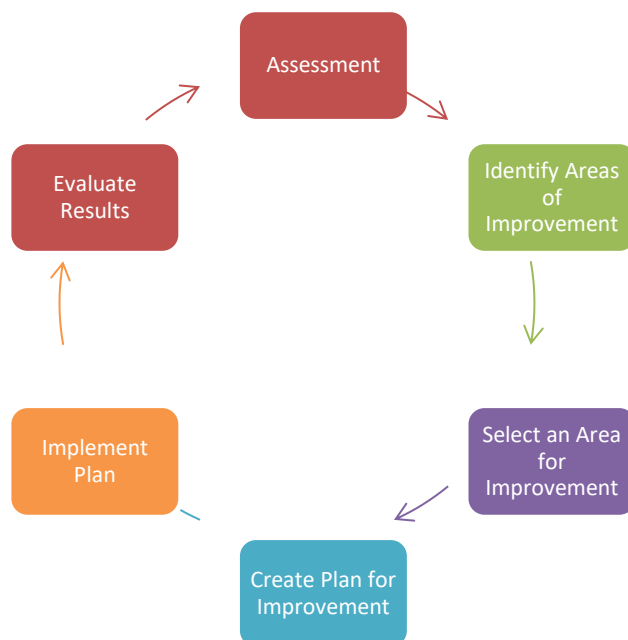
The following guidance describes components of the Nutrition Services Plan (NSP) and provides directions for completing the Plan.

The Nutrition Services Plan is a part of the process of continuous quality improvement. It is important that local agencies (LAs) take time regularly to evaluate where they are in this process and make adjustments accordingly.

This process includes:

- assessment of current practices,
- identification of areas of improvement,
- selection of areas for improvement,
- development of improvement plans,
- implementation of these improvements, and
- evaluation of results.

The Nutrition Services Plan process is shown graphically below.



Kansas continues to align their LA NSP with the 2013 revision of the [USDA WIC Nutrition Services Standards](#). From the USDA standards, the Kansas SA chose the standards listed below to be the focus of the LA NSP.

- **Breastfeeding Education, Promotion and Support:** The State and local agency defines and establishes the breastfeeding education plan, policies, procedures and competency-based staff training to ensure the provision of high quality and comprehensive breastfeeding education, promotion and support.
- **Breastfeeding Peer Counseling:** The State and local agency establish standardized breastfeeding peer counseling program policies and procedures and task-appropriate training for staff on the breastfeeding peer counseling program that are consistent with the *Loving Support Model* for a Successful Peer Counseling Program.
- **Staff Training:** The local agency ensures that staff providing nutrition services adhere to the training schedule to complete a WIC State-approved training program.
- **Nutrition Education and Counseling:** The State and local agency establishes policies to ensure development, implementation, evaluation and dissemination of quality nutrition education materials that deliver accurate, relevant and consistent messages to participants, to achieve optimal health outcomes in relation to their nutritional status and/or their nutrition-related concerns and goals.
- **Program Coordination:** That State and Local Agency coordinate program operations with services of other public and private programs at the local, state, and national level that will benefit participants.
- **Outreach:** There is no specific USDA Nutrition Standard for Outreach. The goal of outreach is to spread information about the WIC program and its many benefits to the public, especially to groups that likely would be eligible for WIC benefits, i.e. Pediatrician's offices, foster parents, teen parent groups, etc.
- **Nutrition Services Documentation:** The local agency develops documentation procedures that facilitate clear communication between staff as well as a seamless continuum of care for clients.

Agencies will again evaluate their previous year's Strategic Action Plans. This evaluation will be written and submitted as part of the NSP. LAs will conduct a self-assessment of their agency, based on the previously listed standards. This is an opportunity to step back and consider what your LA is currently doing and what things you might consider changing or beginning. LAs will rate their progress on a continuum for all Focus Area Indicators. Some indicators are beyond required policy so that LAs can focus more on quality improvement. This assessment is not meant to discourage you but to challenge you. No LA should be able to mark all items as completed. This is a tool to help you focus on what you would like to accomplish in the coming year.

LAs will create two new Strategic Action Plans. One Strategic Action Plan must address Breastfeeding Education, Promotion and Support. The second Strategic Action Plan, the Clinic Improvement Strategic Action Plan, must focus on one of the remaining Nutrition Services Standards.

## Nutrition Services Plan Policy

Below is a link to the Nutrition Services Plan policy:

<https://www.kdhe.ks.gov/DocumentCenter/View/23418/Nutrition-Services-Plan-PDF>

## Nutrition Services Plan Timeline

**June** – Guidance materials are sent to Local WIC Agencies.

**July – September** – Local Agencies organize meetings/conference calls with all NSP contributors to gather input. Ideally, if a planned change might need WIC funding, the cost would be submitted with the budget in mid-July. At a minimum, the contributors should include:

- WIC Coordinator
- WIC Nutrition Services Coordinator
- WIC Breastfeeding Coordinator
- Breastfeeding Peer Counselor (if the LA participates in the BFPC program)

At least one of the contributors must be a licensed dietitian, working with WIC. If the Breastfeeding Coordinator is not the WIC Coordinator or WIC Nutrition Services Coordinator, the Breastfeeding Coordinator should be the lead for writing the Breastfeeding Strategic Action Plan. Agencies are encouraged to include other WIC Staff, which will strengthen the creation of the NSP and assist staff with understanding the NSP process, as well as the rationale behind the implementation of changes.

One person should be designated as the lead person responsible for coordinating and compiling the Plan. This person is often the Nutrition Services Coordinator.

**October** – The lead person compiles and finalizes the NSP. If the lead person is not one of the Coordinators listed above, the lead person shares the final NSP with these Coordinators for their approval, before the NSP is submitted to the SA.

**November 1** – completed NSP due to state WIC office. It is preferred that the NSP be submitted electronically. If the NSP is submitted electronically, it is not necessary to also fax or mail it. Submit your agency's Plan to your assigned State Nutrition Lead, at the email listed below.

- Casey Florea – [cassandra.florea@ks.gov](mailto:cassandra.florea@ks.gov)
- Emily Brinkman – [emily.brinkman@ks.gov](mailto:emily.brinkman@ks.gov)
- Patrice Thomsen – [patrice.thomsen@ks.gov](mailto:patrice.thomsen@ks.gov)

**January 1** – Implementation date for the NSP

## Nutrition Services Plan Completion Checklist and Instructions

Read through the Checklist and Instructions below. As each item is completed, check it off. Prior to submitting your Plan, review the checklist to ensure that all parts of your Plan are included.

- Cover Sheet** – At a minimum the contributors should include: WIC Coordinator, WIC Nutrition Services Coordinator and WIC Breastfeeding Coordinator. At least one of the contributors must be a licensed dietitian working with WIC. Identify the WIC position of each listed contributor: WIC Coordinator, Breastfeeding Coordinator, etc.
  
- Clinic Staff Summary Sheet** – If the Local Agency consists of multiple counties with different staff, complete a separate sheet for each county. If there are multiple clinics in a county with different staff, complete a separate sheet for each clinic.
  
- Clinic Operations** – Complete a separate sheet for each clinic.
  
- Evaluations of the previous year’s Breastfeeding Promotion Strategic Action Plan and Clinic Improvement Strategic Action Plan** – Gather necessary information to write the evaluations, including copies of the previous year’s Strategic Action Plans, completed data collection forms and any other data needed.
  
- Breastfeeding Promotion Needs Assessment**
  1. Read through the instructions for the Breastfeeding Promotion Needs Assessment.
  
  2. The Needs Assessment table consists of four columns. The first column lists the Indicators for each Focus Area. The next three columns are where the ranking on each Focus Area Indicator is marked. Completed Needs Assessments should be submitted with the NSP.
  
- Breastfeeding Promotion Strategic Action Plan** – All agencies must complete an Action Plan focusing upon breastfeeding promotion and support. Utilizing the information obtained from the completion of the Breastfeeding Promotion Needs Assessment, select an area of focus and develop an objective, and at least three action steps to accomplish that objective. In the Appendix, several sample Strategic Action Plan objectives and action steps have been provided by the SA. If appropriate, LAs may use these objectives and action steps. LAs will need to add their own timelines, staff assignments and evaluation methods. LAs would likely need to revise a sample plan to suit their agency. LAs are encouraged to write their own Strategic Action Plan with an objective and at least three or more action steps that are needed in order to achieve their objective. **Please note:** If they pertain to your new Plan, a few of the action steps from the previous year’s Plan may be repeated. **At least one action step must be new and should be identified with a \* or bolded font.**
  
- Clinic Improvement Needs Assessment** – Agencies will complete a Needs Assessment for the remaining Nutrition Services Standards. The Clinic Improvement Needs Assessment is similar to the Breastfeeding Promotion Needs Assessment.
  1. Read through the instructions for the Clinic Improvement Needs Assessment.

2. The Needs Assessment table consists of four columns. The first column lists the indicators for each Focus Area. The next three columns are where the ranking on each Focus Area Indicator is marked. Completed Needs Assessments should be submitted with the NSP.

**Clinic Improvement Strategic Action Plan** – All agencies must complete an Action Plan focusing on one of the remaining Nutrition Services Standards. Utilizing the information obtained from the completion of the Clinic Improvement Needs Assessment, select an area of focus and develop an objective, and at least three action steps to accomplish that objective. In the Appendix, several sample Strategic Action Plan objectives and action steps have been provided by the SA. If appropriate, LAs may use these objectives and action steps. LAs will need to add their own timelines, staff assignments and evaluation methods. LAs would likely need to revise a sample Plan to suit their agency. LAs are encouraged to write their own Strategic Action Plan with an objective and at least three or more action steps that are needed in order to achieve their objective. **Please note:** If they pertain to your new Plan a few of the action steps from the previous year’s Plan may be repeated. **At least one action step must be new and should be identified with a \* or bolded font.**

**Nutrition Education Offerings** – For each low risk education offering that your clinic will provide during the calendar year, list the information in the appropriate box in the table.

During any six-month period, clinics should have a low risk education option for each client category. If your clinic only offers individual nutrition education contacts, mark the appropriate box at the top of the table. The rest of the table does not apply.

If your clinic offers only individual nutrition education contacts to certain client categories, mark the second box and list those client categories. Then complete the table with the nutrition education offerings you provide for the remaining client categories.

If your clinic offers the online nutrition education option, [wichealth.org](http://wichealth.org) to your clients, mark the third box and complete the rest of the table.

## Writing Objectives and Action Steps

Each objective should include the problem to be addressed, the target audience, time frame and the amount of change expected. These four components are also listed on the Strategic Action Plan tables that agencies complete and submit. Let's look at some examples.

1. *"To Increase Our Referrals."* is not an adequate objective.

An acceptable goal could still be to increase referrals, but the written objective needs to be more specific. For example, *"Increase the total number of referrals by 20% between (insert date range)."*

This objective answers all four questions:

the problem – clients may not be receiving all appropriate referrals

the target audience – all clients

the time frame – 1/1/xx – 8/31/xx

the amount of change expected – the total number of referrals will increase by 20%

**Note:** As you are developing your Strategic Action Plans, think about how you will evaluate your results. For example, the Referrals To and From report in KWIC should be used for this Plan. Compare the total referrals from the December report to the August report for the appropriate year. As a short-term evaluation, compare progress by looking at the March report of that year. Although not a part of this objective, the variety of referrals could also be assessed by looking at the actual programs listed on the report.

2. For another example, *"To make pregnant women aware of their Medicaid benefits."* is not an adequate objective.

LAs could format their objective as a list under the Objective column, with each part clearly identified along with the content of that part of the objective: problem, target audience, time frame and change expected. This is what the text would look like in the Objective column:

the problem - *Pregnant and breastfeeding women on WIC are unsure of their benefits through their Medicaid card.*

the target audience - *Pregnant and Breastfeeding women*

the time frame – *1/1/xx – 12/31/xx*

the amount of change expected - *Pregnant and breastfeeding women are aware of and fully utilize all benefits afforded them with Medicaid*

This is an actual objective from one of our WIC agencies and was written in this way on the table. One improvement could be to specify an amount of change expected. For example, *"Staff will discuss with at least 50% of pregnant and breastfeeding women their Medicaid benefits and encourage them to use the benefits."*

**Note:** This objective is harder to measure as there is not a Report that could be used to measure results. For this type of objective, the evaluation might be whether each Action Step is completed. Or the LA might conduct a before and after survey with clients.



3. One more example, *“To increase the visibility of WIC in our community.”* would not be an acceptable objective.

A more specific objective might be: *“To hold a Family Fun Fair in the parking lot of our clinic in August xxxx in order to make WIC more visible in the community and to make potential WIC clients aware of WIC.”*

This objective answers all four questions:

the problem –people in the community and potential clients may not know about WIC

the target audience – families in our community

the time frame – 1/1/xx – 8/31/xx

the amount of change expected – people in our community will learn about WIC, which may result in clients who are eligible for WIC will apply for WIC

**Note:** This is another example that might be hard to measure. The agency might measure it by whether each Action Step is completed on time. The Referral From function in KWIC could be used if new clients are asked how they heard about WIC. In order to do this, the Fair would need to be added in KWIC as a choice for where the client heard about WIC.

Once the objective has been written, then the action steps need to be written. Make the action steps specific so that you have a step-by-step plan showing how you will achieve your objective.

Based on example #2 preceding, these are some action steps that the agency could use to accomplish their objective.

- Action Step #1: Contact representatives from each Medicaid provider and invite them to have a table in the WIC Waiting Room to discuss services offered.
- Action Step #2: Determine a date that would work well for your clinic and the Medicaid providers. Make sure all WIC staff mark the date on their calendars and discuss specifics at a staff meeting.
- Action Step #3: Assign someone to oversee making all arrangements for the day – tables and where they will be set up, get table covers, designate a WIC staff member to stay with tables/providers in case of WIC questions.
- Action Step #4: Promote your Medicaid information day at the clinic. Use posters, cards to hand out, etc.
- Action Step #5: Create a very short questionnaire for clients, who visit the tables, to find out if they learned anything new.

## Appendix 1 – Sample Objectives & Action Steps – Breastfeeding Promotion Strategic Action Plan

**Please**, consider the following as samples and adapt them as desired for your agency. Do not simply copy them.

### 1.1 Maternity Care Practices

#### # 1.1a Sample: Baby-Friendly®

**Objective:**

Assist our local hospital in reaching one or more of the 10 steps toward achieving the “[Baby-Friendly®](#)” designation by *(insert date)*.

*Prior to choosing this objective, a WIC staff member must meet with the appropriate person at the hospital to assess whether there would be interest in this project. If the hospital/community member is not interested, a different objective must be used.*

**Action Steps:**

1. WIC Coordinator will identify a WIC staff member to serve as the liaison between WIC and the hospital to help lead action steps.
2. WIC liaison will read about “[Baby-Friendly®](#)” and prepare an in-service for all WIC staff about it. (Note: A Baby Friendly hospital completes a multi-year national program that includes a site visit.)
3. WIC liaison will schedule a WIC staff in-service on “[Baby-Friendly®](#)”.
4. WIC staff will learn about “[Baby-Friendly®](#)” at staff in-service.
5. WIC liaison will schedule a meeting with key hospital staff to introduce the Baby-Friendly designation and prioritize actions towards reaching at least one of the steps.
6. WIC liaison will plan meetings with hospital staff at least quarterly to assess progress and identify next steps.
7. WIC liaison will schedule a year-end meeting in September to celebrate successes and begin to map out next year’s goals.

#### # 1.1b Sample: High 5

**Objective:**

Assist our local hospital in meeting at least 5 of the 10 requirements for [High 5](#) status by *(insert date)*.

*Prior to choosing this objective, a WIC staff member must meet with the appropriate person at the hospital to assess whether there would be interest in this project. If the hospital/community member is not interested, a different objective must be used.*

**Action Steps:**

1. WIC Coordinator will identify a WIC staff member to serve as the liaison between WIC and the hospital to help lead action steps.
2. WIC liaison will read about [High 5](#) and prepare an in-service for all WIC staff about it. (Note: High 5 is a Kansas designation.)
3. WIC liaison will schedule a WIC staff in-service on High 5.
4. WIC staff will learn about High 5 at staff in-service.

5. WIC liaison will schedule a meeting with key hospital staff to introduce High 5 and prioritize actions towards reaching all 5 requirements and plan timeline for submitting application.
6. WIC liaison will plan meetings with hospital staff at least quarterly to assess progress and identify next steps.
7. WIC liaison will schedule a year-end meeting in September to celebrate successes and submit application.
8. Distribute and discuss the Coffective [We're Prepared Checklist](#) with pregnant clients.

### # 1.1c Sample: Breastfeeding Welcome Here

**Objective:**

By *(insert date)*, \_\_\_\_\_ (number or percent) local businesses and/or public establishments will have obtained the "Breastfeeding Welcome Here" decal and signed the [pledge](#).

**Action Steps:**

1. Meet with upper level management at the health department about the Breastfeeding Welcome Here decal and pledge to receive approval.
2. Order "Breastfeeding Welcome Here" decal from the [Kansas Breastfeeding Coalition](#).
3. Have administrators sign the pledge.
4. Share the [Breastfeeding Welcome Here Toolkit](#) with local businesses and/or public establishments.

### # 1.1d Sample: Lactation Room

**Objective:**

Establish a designated lactation room for staff and clients according to the [Nursing Room Guidelines](#) by *(insert date)*.

**Action Steps:**

1. Select a space in the clinic that is shielded from view, free from intrusion through signage and is not a restroom.
2. Ensure that the space selected meets, at minimum, the requirements for the Basic Model of the Nursing Room Guidelines.
3. Meet the requirements for the Even Better or State of the Art Model of the Nursing Room Guidelines.
4. Promote the opening of the room to staff, WIC clients and the community.

### # 1.1e Sample: Coffective

**Objective:**

Increase the number of contacts WIC clients have with the [Cffective](#) messaging by (number or percent), both in clinic and in the community by *(insert date)*.

*Prior to choosing this objective, a WIC staff member must meet with the appropriate person to assess whether there would be interest in this project. If there is no interest, a different objective must be used.*

**Action Steps:**

1. Set up a meeting with doctors and their staff in your community who deliver babies to review the Coffective mission and [available materials](#). Describe how WIC uses the materials to prepare families for delivery. Discuss how the content is in alignment with the High 5 for Mom and Baby and Baby Friendly Hospital Initiative steps. Give copies of the [We're Prepared Checklist](#) and [Motivation Document](#) and emphasize that consistent messaging is the key to improving breastfeeding support for families.
2. Talk with home visitor programs (Healthy Start, Parents as Teachers, Head Start/Early Head Start, etc.) about the Coffective mission and available materials. Give copies of the We're Prepared Checklist and Motivation Document and emphasize that consistent messaging is the key to improving breastfeeding support for families.
3. Attend a local or regional breastfeeding coalition meeting. Review the Coffective mission and available materials. Give copies of the We're Prepared Checklist and Motivation Document and emphasize that consistent messaging among coalition members is the key to improving breastfeeding support for families.

## 1.2 Professional Education

### # 1.2a Sample: Staff Training

#### Objective:

**By (insert date), \_\_\_\_% of WIC staff will attend additional training beyond what is required of new WIC employees to increase breastfeeding promotion and support.**

#### Action Steps:

1. Identify breastfeeding promotion and support training opportunities (*Some suggestions are listed below. Contact the SA Breastfeeding Coordinator for additional recommendations*).
  - a. Kansas WIC Conference (not held every year)
  - b. Certified Lactation Counselor 5-day [Course](#).
  - c. Wichita State University Anatomy & Physiology of Lactation [Badge Course](#)
  - d. Kansas Breastfeeding Coalition [Breastfeeding Education Courses](#).
  - e. Kansas Breastfeeding Coalition Annual Conference.
2. Identify staff who will enroll in the identified training opportunities.
3. Enroll and complete the training(s).
4. Share and discuss what was learned with all staff.
5. Implement one new idea introduced at the training.

### # 1.2b Sample: Training Community Health Professionals

#### Objective:

**Host (number) of additional breastfeeding educational training opportunities for community health professionals in your community by (insert date).**

*Prior to choosing this objective, a WIC staff member must meet with the appropriate person to assess whether there would be interest in this project. If the hospital/community is not interested, a different objective must be used.*

#### Action Steps:

1. Identify breastfeeding education training opportunity to host. (Some suggestions are listed below.)

- a. Certified Lactation Counselor 5-day [Course](#).
  - b. Kansas Breastfeeding Coalition [Breastfeeding Education Courses](#).
  - c. Educational opportunity for hospital personnel and physicians with the assistance of [Gwen Whittit](#), High 5 for Mom and Baby Coordinator.
  - d. Share [Childcare Provider Education](#) with childcare providers in the community.
2. Identify and advertise the educational opportunity to community health professionals who may be interested.
  3. Enroll interested participants.
  4. Host educational training.

## # 1.2c Sample: Materials for Community Health Professionals

### Objective:

Increase by \_\_\_\_% the use of evidence-based breastfeeding promotion and support education materials by health professionals in the community by *(insert date)*.

*Prior to choosing this objective, a WIC staff member must meet with the appropriate person to assess whether there would be interest in this project. If there is no interest, a different objective must be used.*

### Action Steps:

1. Set up meetings with health professionals in the community to discuss their current use of evidence-based breastfeeding promotion and support education materials, and to have a “baseline” number of the current materials being used in the community.
2. Provide materials to those that are not currently using evidence-based breastfeeding materials, or that want to provide additional materials. Some ideas of materials that can be shared include:
  - a. [Clinical protocols](#) developed by the Academy of Breastfeeding Medicine, specifically #19: BF Promotion in the Prenatal Setting, to community health professionals.
  - b. [“BF Questions for MD’s to ask their pregnant patients” handout](#) for applicable doctors.
  - c. [Coffective](#) materials: Counseling sheets (laminated), Motivation Document (tearsheet), We’re Prepared Checklist (tearsheet), Waiting room slideshow (contact State Breastfeeding Coordinator), Posters and/or App, with community health professionals.
3. Document which community health professionals have indicated their intent to share these materials with their clients/patients to determine if there is an increase in evidence-based materials being used in the community.

## # 1.2d Sample: International Board Certified Lactation Consultant

### Objective:

Increase by \_\_\_\_% WIC client access to IBCLC services by *(insert date)*.

### Action Steps:

1. Identify the agency [Designated Breastfeeding Expert](#) (DBE) and strengthen the referral process within WIC.
2. Identify nearby IBCLCs and establish or strengthen the referral process outside of WIC.
3. Assist a WIC staff member in becoming an IBCLC.

(Note: You might pick any of these action steps and add more detail to reach the minimum of 3 steps.)

## 1.3 Access to Professional Support

### # 1.3a Sample: WIC Contacts After Delivery

**Objective:**

Increase by \_\_\_\_% the proportion of PG clients that are contacted soon after delivery to discuss breastfeeding by *(insert date)*.

**Action Steps:**

1. Implement a call program/policy including timeline and protocol for phone calls.
2. Identify process for learning that PG clients have delivered, as soon as possible after delivery, including partnering with other programs who may assist with providing delivery information.
3. Assign staff members to make the contact(s).
4. Develop specific open-ended questions to ask clients related to breastfeeding and the breastfeeding relationship.
5. Plan support and referrals for overall well-being of the breastfeeding dyad.

### # 1.3b Sample: Local Breastfeeding Coalition

**Objective:**

Increase by \_\_\_\_% WIC staff participation in local breastfeeding coalition activities by *(insert date)*.

**Action Steps:**

1. Start (or re-establish) a [Local Breastfeeding Coalition](#)
2. Attend Local or Regional Breastfeeding Coalition meetings.
3. Advertise Local or Regional Breastfeeding Coalition meeting information in the community.
4. Actively participate in the planning and completion of Breastfeeding Coalition projects.
5. Assist the Breastfeeding Coalition with achieving financial sustainability.

### # 1.3c Sample: Collaborative WIC-Medicaid Referrals

**Objective:**

To promote collaboration between WIC and local Medicaid representatives, hold at least two collaboration meetings between WIC and local Medicaid staff by *(insert date)*.

*Prior to choosing this objective, a WIC staff member must meet with the appropriate person to assess whether there would be interest in this project. If there is no interest, a different objective must be used.*

**Action Steps:**

1. Determine which WIC staff will meet with local Medicaid representatives to hold a collaboration meeting about how to increase the quality and quantity of referrals between the two programs.
2. If not all WIC staff will be involved in the meeting, obtain ideas from all WIC staff.
3. Meet with local Medicaid representatives
4. Implement ideas to improve joint referrals, such as
  - a. Implement a policy for assisting WIC clients in applying for Medicaid.
  - b. Develop and distribute flyers and other outreach materials.
5. Hold at least one follow-up collaboration meeting to assess progress. (If not all staff are attending, obtain staff input first.)

### # 1.3d Sample: Breastfeeding Support Group

**Objective:**

Increase by \_\_\_\_% WIC client access to breastfeeding support groups by *(insert date)*.

**Action Steps:**

1. Complete [KS-TRAIN](#) Course *WIC: Breastfeeding Support Group* (ID # 1047630).
2. Establish a community breastfeeding support group.
3. Advertise the community breastfeeding support group to WIC clients and the community, if applicable.

### # 1.3e Sample: Hospital Breastfeeding Clinic

**Objective:**

Assist in establishing a hospital breastfeeding follow-up clinic to increase WIC client access to breastfeeding clinic services by *(insert date)*.

*Prior to choosing this objective, a WIC staff member must meet with the appropriate person at the hospital to assess whether there would be interest in this project. WIC staff should also have identified a different community (Step 1) with a member who is willing to meet with you. If the hospital/community member is not interested, a different objective must be used.*

**Action Steps:**

1. Meet with a different community that has successfully established a breastfeeding follow-up clinic and also has a strong relationship with the local health department.
2. Assist the hospital in establishing a breastfeeding follow-up clinic.
3. Refer clients to the breastfeeding follow-up clinic.
4. Advertise the breastfeeding follow-up clinic to WIC clients and the community.

### # 1.3f Sample: Breastfeeding Support Resource List

**Objective:**

Increase the proportion by \_\_\_\_% of WIC clients that receive a breastfeeding support resource list by *(insert date)*.

**Action Steps:**

1. Work with hospital and community groups to develop or update a breastfeeding support resource list.
2. Implement a policy for when to distribute the breastfeeding support resource list to WIC clients.
3. Assign staff member(s) to distribute the breastfeeding support resource list.
4. Determine which clients (e.g. PG, PP, BF) will receive the breastfeeding resource list.
5. After 5 months, check back with the other community groups to see if their use of the Resource list is working.

### # 1.3g Sample: WIC Breastfeeding Warm Line

**Objective:**

Establish a breastfeeding “warm line” to increase WIC client access to breastfeeding support outside of normal business hours by *(insert date)*.

**Action Steps:**

1. Establish a dedicated phone number or extension for WIC clients to call and leave a message 24/7.
2. Implement an internal policy for the warm line including a reasonable amount of time that client calls must be returned by.
3. Assign staff member(s) to return warm line messages and/or answer the phone during normal business hours.
4. Advertise the breastfeeding warm line in the clinic and community.
5. Establish and implement a procedure for referring clients to the Breastfeeding Peer Counselor or Designated Breastfeeding Expert depending on severity of breastfeeding problems.

**# 1.3h Sample: Breastfeeding Friendly Physician Office****Objective:**

By *(insert date)*, improve breastfeeding promotion and support in local outpatient clinics that serve WIC families by helping increase the number of Breastfeeding Friendly Physician's Offices in the community by \_\_\_\_%.

*Prior to choosing this objective, a WIC staff member must meet with the appropriate person to assess whether there would be interest in this project. If there is no interest, a different objective must be used.*

**Action Steps:**

1. Visit local physicians' offices, tell them about the program and encourage them to apply.
2. Assist physicians' offices with completing one or multiple of the 19 recommendations described in the AAP Clinic Report, [The Breastfeeding-Friendly Pediatric Office Practice](#).
3. Encourage local physicians' office staff to participate in the local or regional breastfeeding coalition.
4. Contact the [Kansas AAP Chapter Breastfeeding Coordinator](#) for more information on how to help local outpatient clinics become more breastfeeding-friendly.
5. Reach out to existing [Breastfeeding Friendly Practices](#) in Kansas for information and tips for success.
6. Create and distribute a promotional flyer to share with local physicians' offices.
7. Share free one-hour breastfeeding [webinars](#) with local physicians.

**1.4 Peer Support Groups****# 1.4a Sample: Peer Support****Objective:**

Increase WIC client access by \_\_\_\_% to peer breastfeeding support by *(insert date)*.

*Prior to choosing this objective, a WIC staff member must meet with the appropriate person to assess whether there would be interest in this project. If there is no interest, a different objective must be used.*

**Action Steps:**

1. Assist an interested mother in becoming a trained La Leche League Leader.
2. Establish a meeting La Leche League meeting time and place in your community.
3. Refer clients to the local La Leche League by sharing contact information for the LLL Leader or providing information about meeting dates, times and locations.
4. Advertise the LLL meetings in clinic and the community.



5. Contact Breastfeeding Peer Counselor Program Coordinator to discuss starting a BFPC program in your clinic.
6. Start a breastfeeding support group where clients can share with other WIC families.

## **# 1.4b Sample: Breastfeeding Peer Counselor Program**

### **Objective:**

**Evaluate and increase the impact of the WIC Breastfeeding Peer Counselor Program by *(insert date)*.**

### **Action Steps:**

1. Review each of the questions included on the [Loving Support Award of Excellence Gold Award Application](#).
2. Review each of the questions included on the [Loving Support Award of Excellence Gold Premiere and Gold Elite Award Application](#).
3. Review the [WIC Breastfeeding Model Components for Peer Counseling](#).
4. Select 3 components of the WIC BFPC program that can be improved. In other words, select at least three questions that your agency cannot mark “yes” to and implement solutions.
5. Conduct a needs assessment and determine the following: the needs of your target audience, where gaps exist in breastfeeding services and resources within your local agency and the community that can be addressed through peer counseling; and where improvements in your program are needed.

## Appendix 2- Sample Objectives & Action Steps – Clinic Improvement Strategic Action Plan

### 2.1 Staff Training

#### #2.1a Sample: Staff Will Learn About and Use Motivational Interviewing

**Objective:**

All WIC staff will be skilled in [Motivational Interviewing for WIC](#) by *(insert date)*.

**Action Steps:**

1. Implement a schedule for all staff to complete [Motivational Interviewing \(MI\) for WIC](#), the 11-module online course, over a designated period of time.
2. Implement a schedule to observe staff practicing MI skills learned and provide feedback and encouragement (tip: could be done throughout training period to focus on just 1 or 2 things at a time and build upon skills learned).
3. Discuss MI successes and challenges in staff meetings.
4. Plan how to bring new staff up to speed on MI and how to monitor WIC Staff so that MI concepts will continue to be part of the WIC experience.
5. Consider how to change any internal procedures or commonly used questions/practices based on MI.

### 3.1 Nutrition Education Contacts

#### # 3.1a Sample: Required Nutrition Education Contacts Are Scheduled

**Objective:**

Appropriate nutrition education will be made available to all clients. By *(insert date)*, \_\_\_\_\_% or more of the minimum number and correct type of nutrition education appointments will be made for each client. The correct number and type of appointments is based on the client category and risk type.

*Prior to choosing this objective, a WIC staff member must conduct a random client record review to assess the percent compliance with Policy NED 02.00.00. If 100% of the appropriate number and type of nutrition education appointments are being made per the record review, then a different objective must be used. Notes will be kept of the results of the record review.*

**Action Steps:**

1. At a staff meeting, [Policy NED 02.00.00](#) will be reviewed and discussed. Staff will put together a plan so that all staff know their role in ensuring that all of the required nutrition education appointments are made for each client. For example, who will complete Flow Sheets, who will make appointments, etc.
2. A staff person will be assigned to write up the notes at each staff meeting and copies will be placed in staff training folders.
3. At the next staff meeting, staff will discuss how the plan is working and decide if any changes need to be made.
4. At the end of [# months], the WIC or Nutrition Services Coordinator will do another random client record review of [number] records to assess compliance with policy in number and type of client nutrition education appointments made.
5. The Coordinator will share the results of the record review and compare the before and after record review results to assess whether there was an improvement.
6. Based on the results, staff may or may not need to change their plan.

### # 3.1b Sample: Flow Sheets

#### Objective:

By (*insert date*), Flow Sheets will be completed fully and accurately, with the correct number and type of nutrition education contacts, in \_\_\_\_\_% or more of client KWIC records.

*Prior to choosing this objective, a WIC staff member must conduct a random client record review to assess the percent of fully and accurately completed client Flow Sheets. If 100% of the Flow Sheets are complete and correct per the record review, then a different objective must be used. Notes will be kept of the results of the record review.*

#### Action Steps:

1. At a staff meeting or prior to the staff meeting, WIC staff will review the KWIC Flow Sheet Training on the [training page of the WIC website](#).
2. At the staff meeting staff will discuss the Flow Sheet training and how they can make sure all client flow sheets are completed fully and accurately at each appointment. Staff will discuss the different types of nutrition education appointments for both low and high risk clients. A plan will be made so that all staff know their role in making sure Flow Sheets are completed fully and accurately.
3. A staff person will be assigned to write up the notes at each staff meeting and copies will be placed in staff training folders.
4. At the next staff meeting, staff will discuss how the plan is working and decide if any changes need to be made.
5. At the end of [number] months, the WIC or Nutrition Services Coordinator will do another random client record review of [number] records to assess if [\_\_%] or more of the client flow sheets have been completed fully and accurately.
6. At the next staff meeting, the Coordinator will share the results of the record review and compare the before and after record review results to assess whether there was an improvement.
7. Based on the results, staff may or may not need to change their plan.

### 3.2 Client Centered Education

#### # 3.2a Sample: Staff Address Client's Questions/Concerns

#### Objective:

By (*insert date*), staff provide effective education by asking clients about their questions/concerns and then taking time to address these at \_\_\_\_\_% of nutrition education contacts

#### Action Steps:

1. The WIC Coordinator finds a source of information on client-centered education. This might be a speaker, an online module, a book or an article. (Tip: Could have staff review VENA modules on KS-TRAIN #1067702 and #1067705; or see information on the [Training Webpage](#) of the Kansas WIC Website, under Additional Training Resources > Nutrition Counseling.)
2. At a staff meeting, the WIC Coordinator has someone speak or has all staff review the information found on client-centered education.
3. A staff person will be assigned to write up the notes at each staff meeting and copies will be placed in staff training folders.

4. For the next several months, staff will be asked to make a specific effort to ask clients about their concerns at every nutrition education contact.
5. The WIC Coordinator or the Nutrition Services Coordinator will conduct a random record review of (\_\_\_\_) client KWIC records, where a certification was completed (since this training). The record review will include a review of KWIC Notes and KWIC Goals/Plans, to evaluate the client-centered education.
6. At the next staff meeting the WIC Coordinator asks each staff member to share an example of how they asked a client about their concerns and then addressed those concerns to the extent possible.

### **# 3.2b Sample: Staff Know When Clients Need to Be Referred to Someone Else and Identify Who Would be Appropriate**

#### **Objective:**

**By (insert date), a procedure will be developed to give guidance to staff on when to refer a client's questions/concerns to someone else and information on who to use or available sources/resources to use for referrals.**

#### **Action Steps:**

1. WIC Coordinator reviews new employee training to assess if information is given on when to refer a client to someone else.
2. A flow chart is created with examples of when to refer a client to someone else and who should be used for different referrals.
3. Staff become familiar with referral sources.
4. Staff document referrals in KWIC, if appropriate

### **# 3.2c Sample: WIC Staff Interaction with Clients**

#### **Objective:**

**By (insert date) all WIC Staff who interact with WIC clients will complete training on customer service.**

#### **Action Steps:**

1. WIC Coordinator researches options for staff customer service training that can meet parameters of available times, cost and training content. (Consider viewing KS WIC recorded webinar, "[Dealing with Difficult Clients in a Difficult World](#)" with accompanying resources.)
2. If needed, WIC Coordinator presents information gathered to Administrator for approval of staff customer service training.
3. WIC Coordinator or other staff make arrangements for all staff to receive the customer service training.
4. All employees obtain some type of proof of attendance, which is placed in their training file.

## **3.3 Education Based on Thorough Assessment**

### **# 3.3a Sample: Assessment**

#### **Objective:**

**By (insert date) all CPAs will be competent in using the new Nutrition Assessment Process (NAP).**

**Action Steps:**

1. One CPA WIC staff member is designated to lead the project.
2. The leader ensures that all CPAs have completed the NAP training and the [Motivational Interviewing for WIC](#) program.
3. The leader will host regularly scheduled meetings for all CPAs to discuss how the implementation of NAP is going, including successes and struggles.
4. The leader ensures that each CPA has several opportunities to observe other CPAs (within own clinic and/or nearby clinic).
5. The leader provides a supportive avenue for CPAs to give constructive feedback to each other for improvement.
6. The leader ensures that all CPAs participate in SA Zoom calls or other support for implementing NAP.
7. The leader continues meetings and opportunities for support until all CPAs consider themselves competent in using NAP.

**# 3.3b Sample: Nutrition Education Materials****Objective:**

**So that WIC staff are familiar with all nutrition education materials available for use with clients, a resource will be created by WIC staff no later than (*insert date*) to use to help select appropriate materials.**

**Action Steps:**

1. At a WIC staff meeting or a separate meeting all staff will participate in a brainstorming session on what could help staff select appropriate nutrition education materials to use with WIC clients.
2. A small group/committee will be created to put together some ideas based on the brainstorming session. This group will then schedule another meeting.
3. At the scheduled meeting members of the small group will present their ideas on a resource that could be created to help WIC staff select appropriate education materials for clients.
4. Either the same small group or another group selected for the task will create the resource.
5. All staff will test the resource and suggest changes.
6. Any changes needed will be chosen by WIC staff.
7. The “creation” group will make any suggested changes.
8. Staff use the resource.

**# 3.3c Sample: Documentation****Objective:**

**By (*insert date*) an improvement plan will be developed and implemented to improve documentation of nutrition education in client’s KWIC records as measured by pre and post client KWIC record reviews.**

**Action Steps:**

1. No later than [date], the WIC Coordinator or Nutrition Services Coordinator shall randomly select [number] client records and review documentation of low and high risk nutrition education given to clients.

2. At a staff meeting, the results of this record review will be shared with WIC staff.
3. Staff shall discuss/brainstorm ideas of ways to improve documentation. Staff will select some of the suggestions and implement them.
4. Notes of the meeting will be kept and a copy placed in each staff member's training file.
5. After a period of at least [\_\_ months], the WIC Coordinator or Nutrition Services Coordinator will conduct a post record review of documentation of nutrition education.
6. Results will be shared and discussed at a staff meeting, including any further suggestions to improve documentation. Copies of notes of the meeting will be placed in each staff member's training file.

### 3.4 Education is Adapted as Needed

#### #3.4a Sample: Language

**Objective:**

**In order to provide appropriate information, that clients can understand, staff will ask \_\_\_\_% of clients/cg about their primary language and document it in KWIC. No later than (*insert date*) a procedure will be written for the determination of need and provision of interpreter services.**

**Action Steps:**

1. It will be determined which staff have the role of asking all new client/cg what language they are most comfortable with and staff will document it in the primary language field in KWIC.
2. For all clients/cg that indicate their primary language is not English, designated staff will ask whether they would like interpreter services and if yes, staff will document this in KWIC.
3. Before staff provide any verbal or written instructions/education, staff will check KWIC to determine the client/cg preferred language and whether interpreter services will be needed.
4. It will be determined which staff will check \_\_\_\_\_ days ahead of appointments to see which clients will need interpreter services and will make arrangements for those services.
5. No later than [date], a written policy/procedure will be created with instructions for the steps listed above.
6. By [date], all WIC staff will review this policy and follow it.

#### #3.4b Sample: Interpreter Services Are Available

**Objective:**

**By (*insert date*) the clinic will assess needs for interpreter services among clients and develop a procedure which includes options for interpreter services and how staff can use these services to provide appropriate information, that clients can understand.**

**Action Steps:**

1. The WIC Coordinator or designee will review the KWIC Report, Interpreter Services, to determine the languages that current clients/cg speak. (This report will only be accurate if staff always ask clients about their primary language and document it in KWIC.)
2. The WIC Coordinator or designee will ask all WIC staff about which potential languages the clinic might have a need for interpreter services.
3. The WIC Coordinator will research available options for interpreter services for each potential language needed.

4. The WIC Coordinator and Administrator, if appropriate, will decide, based on cost and other factors, which interpreter services the agency will use.
5. Potential interpreter costs will be included in the WIC budget.
6. All WIC staff will be instructed on how to provide or arrange to be provided any interpreter services.
7. Instructions will be made into a written procedure.

### 3.5 Life Course Perspective

#### # 3.5a Sample: Education Targeted to Client Category

##### Objective:

By *(insert date)* in order to provide individualized education, staff will provide education materials appropriate to the client's category \_\_\_% of the time.

*Prior to choosing this objective, a WIC staff member must conduct a random client record review to assess the percent of clients that are receiving education materials appropriate to the client's category. If 100% are already receiving this information per the record review, then a different objective must be used.*

##### Action Steps:

1. A staff member is designated to make a list of the educational materials available to use with each client category. These include: infants under 6 months, infants over 6 months, children 1 – 5 yrs of age, pregnant women, breastfeeding women, postpartum women.
2. At a staff meeting, this list is reviewed and any gaps are identified.
3. Designated staff will research available materials the agency could use to fill any gaps.
4. The list of potential materials are reviewed by staff and it is determined which or any to obtain for the clinic to use.
5. Once any new materials are obtained or source located (print from a website), the original list of materials is updated.
6. Any new materials are added to KWIC Nutrition Education Handouts
7. After [number] of months, another random record review at least [number] of clients comparing client's category and what education materials they received will be conducted to assess improvement.

#### # 3.5b Sample: Staff Will Provide Exit Counseling to Appropriate Clients

##### Objective:

By *(insert date)*, \_\_\_% of women (PG, BF, PP) clients will be provided with information about lifelong health at their last WIC appointment.

*Prior to choosing this objective, a WIC staff member must conduct a random client record review to assess the percent of women clients that are receiving Exit Counseling at their last WIC appointment. If 100% are already receiving this information (as documented in the Topics section of the Nutrition Education page), per the record review, then a different objective must be used.*

##### Action Steps:

1. To establish a baseline, the WIC Coordinator conducts a random client record review of at least [number] records to assess the percent compliance with [Policy NED 02.05.00 Exit Counseling](#). WIC Coordinator may want to observe staff as well.

2. At a staff meeting the results of the record review and the policy [NED 02.05.00](#) Exit Counseling: Reinforce Healthy Living will be reviewed. Staff will discuss how to best meet the requirements of providing Exit Counseling information to all women clients at their last WIC appointment.
3. Once staff decide the procedure they will use to ensure that all women clients are given Exit Counseling information, it is written as a procedure. Part of the procedure must include how the information will be documented in KWIC.
4. Over a [\_\_ month] period, staff will follow this procedure.
5. Another random record review will be conducted on at least [number] client KWIC records to see if there is any improvement. Observations may be helpful as well.
6. Based on the results, the procedure may be revised.

### # 3.5c Sample: Developmental Stages

#### Objective:

By *(insert date)* staff will referral the Developmental Milestones feature in the WICShopper App to \_\_\_\_% of infant and child clients at certification appointments clients.

#### Action Steps:

1. Designated staff member will become familiar with the Developmental Milestones feature in the WICShopper App and use <https://www.cdc.gov/ncbddd/actearly/index.html> to learn about the CDC Developmental Milestones project/resources.
2. Staff member will teach all other WIC staff about the feature at a staff meeting.
3. A plan will be made at the staff meeting to outline which staff will be responsible for making the referrals to clients.
4. Staff will make referrals to the Developmental Milestones feature during the appointment. If it appears a child may not be at the expected developmental stage for their age, staff discuss and share other appropriate referral sources with caregiver.
5. If Developmental Stages are discussed with the caregiver beyond pointing out the app feature, move the Developmental Stages topic in the Nutrition Education screen as well.
6. The designated staff member will run the Referrals To and From Report and compare to total number of infants and children certified.

## 3.6 Alcohol, Tobacco and Other Harmful Substance Abuse (ATOD) Information

### # 3.6a Sample: ATOD information provided

#### Objective:

By *(insert date)*, \_\_\_\_% of clients/caregivers will have been provided with at least verbal information on the dangers of ATOD at every certification/recertification appointment.

*Prior to choosing this objective, a WIC staff member must conduct a random client record review to assess the percent of clients/caregivers that are receiving information on the dangers of ATOD at certification/recertification appointments. If 100% are already receiving this information (as documented in the Topics section of the Nutrition Education page), per the record review, then a different objective must be used.*



#### Action Steps:

1. To establish a baseline, the WIC Coordinator conducts a random client record review of at least [number] records to assess the percent compliance with [Policy CRT 08.03.00](#), providing ATOD information. WIC Coordinator may want to observe staff as well.
2. At a staff meeting the results of the record review will be shared and staff will discuss how to best meet the requirements of sharing ATOD information. Handing out a pamphlet is not adequate. There must be a verbal message appropriate for the adult client/caregiver.
3. Once staff decide the procedure they will use so that all clients and caregivers are given information on ATOD, it is written as a procedure. Part of the procedure must include how the information will be documented in KWIC.
4. Over a [\_\_ month] period, staff will follow this procedure.
5. Another random record review will be conducted on at least [number] client KWIC records to see if there is any improvement. Observations may be helpful as well.
6. Based on the results, the procedure may be revised.

### 3.7 Client Goals

#### # 3.7a Sample: Clients Have Goals and Plans

##### Objective:

**By (insert date), all staff will have completed training and practice for helping clients set goals to improve the quality and usefulness of client goals.**

##### Action Steps:

1. All staff will review the [Help Your Clients Be Better Goal Setters](#) Newsletter Article. At a staff meeting the results of the record review will be shared and staff will discuss how to best help clients set a goal and create a practical step-by-step plan to meet their goal. Having a standard goal, such as “have a healthy baby” is not acceptable.
2. All staff will practice on each other the best approach to help a client set their goal and plan. Every staff member will take a turn being the “client” and being the “staff member.”
3. Staff use one or more of the techniques they discussed to help clients with goals and plans.
4. At the next staff meeting, staff will discuss if any of their techniques helped. If so, staff will again take turns in trying the technique on each other as “client” and then “staff” and switch.
5. At the next staff meeting, staff will again discuss what worked well in helping clients with the goal and plan.

#### # 3.7b Sample: Review Client Goals

##### Objective:

**By (insert date), \_\_\_\_\_% of clients/caregivers will either be setting a goal or sharing their progress on their goal as evidenced by KWIC documentation.**

*Prior to choosing this objective, a WIC staff member must conduct a random client record review to assess the percent of clients/caregivers that either set a goal or shared progress on their goal at each appointment (as evidenced by either a goal entered, new Staff Reinforcers added to an existing goal, or Notes to indicate that WIC staff asked about progress toward the goal at a subsequent appointment). If 100% already have this documentation in their records at each appointment, , then a different objective must be used.*

**Action Steps:**

1. To establish a baseline, the WIC Coordinator conducts a random client record review of at least [number] records to assess percentage of clients that have this documentation for each appointment.
2. At a staff meeting the results of the record review will be shared and staff will develop a procedure with steps to ensure that staff are helping clients set or discuss progress on a goal at each appointment. Procedures should include steps such as:
  - a. Once clients have created a goal and plan at their Cert/Recert, staff will incorporate asking about client's progress on their goals into subsequent appointments.
  - b. Staff will update the client's goal and plan as needed in their KWIC record.
  - c. Staff put notes in the staff reinforcers section of the goal tab or under appointment notes to help in discussing progress with the client on reaching their goal.
3. Over a [\_\_ month] period, staff will follow this procedure.
4. Another random record review will be conducted on at least [number] client KWIC records to see if there is any improvement. Observations may be helpful as well.
5. Based on the results, the procedure may be revised.

### 3.8 RD/LD Provides High Risk Nutrition Education

#### # 3.8a Sample: Available RD Hours

**Objective:**

**By (insert date), it will be evaluated whether our clinic has enough RD/LD work hours to complete 100% of appointments for high risk clients in our caseload.**

*Prior to choosing this objective, a WIC staff member must complete a record review by checking the following reports: High Risk Summary Report, KWIC Staff Guided Ad Hoc Report. Based on the reports, and the number of high risk clients, an estimate of the number of hours needed for providing high risk nutrition education by the RD/LD will be calculated. Then, the appointment book will be checked to see the number of RD/LD appointment slots and compare those to the available hours. If it is estimated that 100% of high risk client appointments can be covered by RD/LD work hours, then a different objective must be used.*

**Action Steps:**

1. The high risk client list will be used to check [number] or more high risk client records to see if the correct type of appointment – RD is made for each high risk client for their secondary nutrition education.
2. The WIC Coordinator will create a report based on this information and share it with their administrator and/or state WIC RD.
3. After discussion, it will be determined whether additional RD/LD hours are needed to meet requirements for provision of nutrition education for all high risk clients.
4. If more hours are needed, the WIC Coordinator will determine if current staff hours can be increased or if further FTE/contract hours will be needed.
5. Based on the WIC budget it will be decided if the increase in hours can be made.

### **# 3.8b Sample: RD/LD Provides High Risk Nutrition Education**

#### **Objective:**

**By (*insert date*), there will be \_\_\_\_\_ compliance with RD/LD high risk nutrition education appointments being made correctly and the outcome being handled correctly.**

#### **Action Steps:**

1. The WIC or Nutrition Services Coordinator will conduct a record review of [number] high risk client KWIC records to assess whether the required RD/LD appointments for secondary nutrition education are being made. Notes will be kept of the results of the record review.
2. Results of the record review will be shared at a staff meeting.
3. Staff will put together a plan so that all staff know their role in ensuring that all of the required nutrition education appointments are made for each client. For example, who will complete Flow Sheets, who will make appointments, who will record outcomes for No show, etc.
4. A staff person will be assigned to write up the notes at each staff meeting and copies will be placed in staff training folders.
5. At the next staff meeting, staff will discuss how the plan is working and decide if any changes need to be made.
6. At the end of [number] months, the WIC or Nutrition Services Coordinator will do another random client record review of [number] high risk client records to assess if improvement has been made and high risk clients are now scheduled with the RD/LD for their secondary nutrition education.
7. The Coordinator will share the results of the record review and compare the before and after record review results to assess whether there was an improvement.
8. Based on the results, staff may or may not need to change their plan.