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**Required Guidance: Second Nutrition Education - High Risk with a WIC Registered Dietitian Nutritionist (RDN)**

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The WIC Registered Dietitian Nutritionist (RDN) must:

1. Provide a high risk contact and write a High Risk Care Plan (HRCP) for participants identified as high risk based on Washington WIC 's nutrition high risk criteria or as Professional Discretion High Risk.

- The Competent Professional Authority (CPA) can make a participant high risk by professional discretion at the certification appointment. See the [Staff Tool: Professional Discretion High Risk \(PDHR\)](#).

2. See the participant one time per certification unless additional follow up is needed and determined by the RDN or a new high risk factor is identified later in the eligibility period.

**Note:** The participant isn't required to see the RDN for the HRCP when a high risk participant becomes non-high risk at a later visit. Staff write a note in the participant's file on the Individual Care Plan Summary that the participant is no longer high risk.

- The See [Volume 1, Chapter 18 – Certification](#), “Minimum Required Contacts” for information about when second contacts are required for each participant category.
3. Offer nutrition topics guided by both the identified high risk factors and the participant's or parent guardian's interests or needs.
  4. Have a [participant centered](#) conversation about the nutrition topic(s) identified.
  5. Facilitate a goal setting conversation related to the participant's risks, interests, or needs.
  6. Document a High Risk Care Plan (HRCP) in the Individual Care Plan which includes:
    - a. The title: HRCP.
    - b. The participant/parent guardian's thoughts and feelings about the topic(s).
    - c. Information offered/shared/discussed about the topic(s).
    - d. The participant's or parent guardian's goal, if they're ready to set a goal or document that they weren't ready to set a goal.

- Best practice is to label the goal section of the note as “Goal.”
  - e. The plan for future contact or additional information as determined by the RDN.
7. Document the nutrition education topic(s) discussed and “HRCP Completed” and mark as “Complete” in the Care Plan – Nutrition Education.

**PROCEDURE:**

The Competent Professional Authority (CPA):

- A. Assess if the participant is high risk.
1. The participant has a high risk factor assigned in Cascades.
  2. The CPA determines the participant should see the RDN and makes the participant high risk by professional discretion at the initial or subsequent certification appointment.
    - Select the High Risk “Yes” radio button on the Certification Summary screen **before** pressing the Certify button.
  3. The participant becomes high risk or has an additional high risk factor documented during the certification period.
    - Schedule the participant with the RDN when the participant becomes high risk and there are more than 60 days left in the eligibility period.
    - It’s best practice to schedule the participant with the RDN when there are less than 60 days left in the eligibility period, but it’s not required due to the limited time frame.
  4. The participant doesn’t have a high risk factor assigned but the participant requests to see the RDN.
- B. Assure high risk participants receive a high risk second contact as per policy.

The WIC Registered Dietitian Nutritionist:

- A. Has a [participant centered](#) conversation about the nutrition topic(s) identified.
- B. Facilitates a goal setting conversation related to the participant’s risks, interests, or needs.

- C. Documents a High Risk Care Plan (HRCP) in the Individual Care Plan as per policy requirements.
- Use a standardized individual care plan documentation method, such as:
    - Subjective, Objective, Assessment, Plan Intervention, Evaluation (SOAPIE),
    - Assessment, Diagnoses, Intervention, Monitoring & Evaluation (ADIME)
- Note:** RDN has the option to document goals on the Maintain Goals screen in addition to the requirement to document goals in the Individual Care Plan.
- D. Documents nutrition education topic(s) discussed and “HRCP Complete” and mark as “Complete” in the Care Plan - Nutrition Education.

**Information:**

**Participant centered** – a collaboration where staff connect through careful listening and empathy with participants on topics relevant to the participant. Staff consider the participant’s capabilities, strengths, values, cultural practices and customs, environmental factors, family influences and individual needs and tailors the conversation to what is most important to the participant. Staff use open-ended questions, affirmations, reflections, and summaries to individualize nutrition education and guide the participant towards meaningful behavior change.

Washington WIC Program

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