### Lesson Plan Contents (5.01)

Review two (2) nutrition education lesson plans and verify that they contain:

- *required elements starred*
  - Title or topic area
  - Learning objectives
  - Target group
  - Learning activities/methods
  - Materials needed
  - Presentation: Outline of content, sequence of activities, how materials are to be used
  - Staff qualified to present lesson
  - Evaluation methods and materials
  - References

**Date last reviewed (up to date?)**

<table>
<thead>
<tr>
<th>Lesson Plan 1</th>
<th>Lesson Plan 2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Yes or N/A</strong></td>
<td><strong>Yes or N/A</strong></td>
</tr>
<tr>
<td><strong>If not, Action Plan needed</strong></td>
<td><strong>If not, Action Plan needed</strong></td>
</tr>
</tbody>
</table>

6.4a Does the lesson plan include all of the required components?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
<td>N</td>
</tr>
</tbody>
</table>

6.4a Does the agency maintain lesson plans/modules for group education and self-directed activities? (MI-WIC 5.01)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Y</td>
<td>N</td>
</tr>
</tbody>
</table>

Best Practice: Does the lesson plan appear to incorporate client-centered approaches?

If not, suggest they do

Comments:

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### Agency Awareness:

Is the agency aware of the posted NEAT modules?

http://www.michigan.gov/mdch/0,4612,7-132-2947-275624--,00.html

Do they have modules they would like to submit?

Y N

Does the agency offer a variety of NE options for clients with no internet or low literacy? Circle options: Individual NE Group NE Ed Mall MIHP BF Peer Self Directed Other:_________
<table>
<thead>
<tr>
<th>Self-Directed Education - 6.2 e</th>
<th>wichealth.org</th>
<th>Yes or N/A</th>
<th>No, need Action Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency offer internet education to all clients who qualify? (i.e., low risk, established breastfeeding)</td>
<td></td>
<td>Yes or N/A</td>
<td>No, need Action Plan</td>
</tr>
<tr>
<td>How does the agency assist client access to wichealth.org? (circle)</td>
<td>Brochure Posters NE Plan Word of mouth Demo Other: Don't market to clients (if not, suggest they do)</td>
<td>If no, suggest they do</td>
<td></td>
</tr>
<tr>
<td>Does the agency follow up with clients who complete their wichealth.org modules? When? (circle)</td>
<td>Contact the client Ask client to call Use Online Ed Report Schedule next appointment, check for address update/Voter reg. Does the agency document education received? (system/agency staff)</td>
<td>Are EBT benefits loaded for clients who complete wichealth.org modules without a clinic visit? (cite if client wasn’t offered/encouraged to complete NE)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Education Mall/Self Directed Modules</th>
<th>Client 1</th>
<th>Client 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the client offered a variety of topics based on nutrition status and interests, language, literacy?</td>
<td>Yes or N/A</td>
<td>Cite if No</td>
</tr>
<tr>
<td>Is the client directed to the topics that they may be interested in?</td>
<td>Yes or N/A</td>
<td>Cite if No</td>
</tr>
<tr>
<td>Are the materials provided easy to understand, factual, appropriate for nutrition status and interests?</td>
<td>Yes or N/A</td>
<td>Cite if No</td>
</tr>
<tr>
<td>Is there evaluation of client learning? (Best Practice - and determination/documentation of planned behavior change?-if not suggest they do)</td>
<td>Yes or N/A</td>
<td>Cite if No</td>
</tr>
<tr>
<td>Does staff interact with the client providing opportunity to discuss what was learned and offering support? When? (circle)</td>
<td>Yes or N/A</td>
<td>Cite if No</td>
</tr>
<tr>
<td>▪ At the time the education occurs</td>
<td>Yes or N/A</td>
<td>Cite if No</td>
</tr>
<tr>
<td>▪ At the next recertification visit</td>
<td>Yes or N/A</td>
<td>Cite if No</td>
</tr>
<tr>
<td>Client Interview (Self-Directed Learner)</td>
<td>Client 1:</td>
<td>Client 2:</td>
</tr>
</tbody>
</table>

| Did you get to choose from a variety of topics/materials that interested you? | |
| Did the education give you ideas that will be helpful with a concern of yours? Do you plan to make any changes based on this information? | |
| Did staff discuss your concerns and your plans to use the information? | |
| Did you find the information…? Helpful Not helpful Too easy Just right Too hard | |
| What would make this learning experience more helpful for you? | |

<table>
<thead>
<tr>
<th>Observe benefit issuance: (MI-WIC Policy 2.03)</th>
<th>Client 1</th>
<th>Client 2</th>
<th>Client 3</th>
<th>Client 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>O4.2f Is ID checked before food benefits are issued? (MI-WIC Policy 2.03) (including ID/VOC/WIC Bridge cards)</td>
<td>Yes or N/A</td>
<td>Cite if No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>O4.2f Does the agency allow personal recognition by WIC staff at benefit issuance?</td>
<td>Yes or N/A</td>
<td>Cite if No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### WIC Nutrition Education Materials

<table>
<thead>
<tr>
<th>MPR</th>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.4b</td>
<td>Is the locally developed material written at a 4-6&lt;sup&gt;th&lt;/sup&gt; grade reading level? (Acceptable 4-8&lt;sup&gt;th&lt;/sup&gt; grade level, includes breastfeeding, nutrition education, supplemental, nutritionist or registered dietitian, formula, obesity, vitamins, minerals, vegetables (E-Notice 2011-10) Old Policy 6.02c, MI-WIC 5.01C)</td>
</tr>
<tr>
<td>6.4b</td>
<td>Is the material appropriate for the ethnic-racial diversity of the population served? (MI-WIC 5.01/5.01C) Old manual 6.02c</td>
</tr>
<tr>
<td>6.24b</td>
<td>Are the examples and suggestions used appropriate for the target population (socioeconomic status, food preferences and cultural values)? (MI-WIC Policy 5.01)</td>
</tr>
<tr>
<td>2.1b</td>
<td>Are actions explained simply, in a step-by-step fashion using accessible, everyday items/ingredients?</td>
</tr>
</tbody>
</table>

### Client Handouts

<table>
<thead>
<tr>
<th>MPR</th>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.4b</td>
<td>Are nutrition education materials, locally developed or otherwise, evaluated for appropriateness using Old Manual Exhibit 6.02C or equivalent local agency form? (5.01)</td>
</tr>
<tr>
<td>6.2d</td>
<td>Are nutrition education materials available that address the danger of using drugs or other harmful substances? (5.01) (i.e., Intro to WIC Program, materials that discuss avoiding drugs, alcohol abuse during pregnancy and while parenting)</td>
</tr>
<tr>
<td>6.4b</td>
<td>Does nutrition education material stress the relationship between proper nutrition, physical activity and good health with special emphasis on the nutritional needs of pregnant, postpartum and breastfeeding women, infants and children less than five years of age? (5.01)</td>
</tr>
</tbody>
</table>

**Comments:**

### Breastfeeding Education and Support (6.5 ae, 9.1 a)

<table>
<thead>
<tr>
<th>Observe education/support interactions with Breastfeeding clients</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>MPR</td>
<td>CPA</td>
<td>Yes or N/A</td>
</tr>
</tbody>
</table>

#### 6.5e
Pregnant client – Is Breastfeeding education offered detailing the benefits of breastfeeding and the risks of not breastfeeding?

**PROVIDER:**
Was the contact documented?  Y  N
BF support screen
NE grid

#### 6.5e
Breastfeeding client – Was the client provided support for breastfeeding questions or problems?

**PROVIDER:**
Was the contact documented?  Y  N
BF support screen
NE grid

#### Observe clients issued Breastpump (4.05, 4.06, 4.07)

<table>
<thead>
<tr>
<th>Observe clients issued Breastpump (4.05, 4.06, 4.07)</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>MPR</td>
<td>CPA</td>
<td>Yes or N/A</td>
</tr>
</tbody>
</table>

#### 9.1a
Was the client provided education on Manual expression?
Pump assembly and cleaning?
Handling and storing breastmilk?

**PROVIDER:**
Was the contact documented?  Y  N
BF support screen
NE grid

#### BF Peers: Observe education/support interactions provided

<table>
<thead>
<tr>
<th>BF Peers: Observe education/support interactions provided</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>MPR</td>
<td>CPA</td>
<td>Yes or N/A</td>
</tr>
</tbody>
</table>

#### 6.5e
Pregnant client – Breastfeeding education offered detailing the benefits of breastfeeding and the risks of not breastfeeding?

**Peer:**
Was the contact documented?  Y  N
BF support screen
NE grid

#### 6.5e
Breastfeeding client – Was the client provided support for breastfeeding questions or problems?

**Peer:**
Was the contact documented?  Y  N
BF support screen
NE grid

#### 6.5a
Ask peer what steps are taken when client presents with an issue outside of peers scope of practice, such as poor weight gain. Who: BF Coord., CLS, CLE, IBCLC

**Process:**  is it timely?
### Secondary Nutrition Education Contact

Observe two (2) separate Interim contacts. Obtain lesson plans and nutrition education materials used. For each contact, determine whether the following items are present:

<table>
<thead>
<tr>
<th>Contact Items</th>
<th>Secondary Contact 1</th>
<th>Secondary Contact 2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes or N/A</td>
<td>Yes or N/A</td>
</tr>
<tr>
<td>If not, Action Plan needed</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MPR</th>
<th>Topic</th>
<th>Indicate individual (I) or group (G)/ NE facilitator's name</th>
<th>I</th>
<th>G</th>
<th>I</th>
<th>G</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.4a Is there a lesson plan/module (group)? (MI-WIC Policy 5.01)</td>
<td></td>
<td>I G</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.2a Is the education provided appropriate for the ethnic-racial diversity of the population served? (MI-WIC Policy 5.01)</td>
<td></td>
<td>I G</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>6.2b Does the facilitator relate the topic area to what the client already knows and does? (MI-WIC Policy 5.01)</td>
<td></td>
<td>I G</td>
<td></td>
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</tr>
<tr>
<td>3.1b Is the presenter qualified to provide nutrition education? (WIC Policy 6.07)</td>
<td></td>
<td>I G</td>
<td></td>
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</tr>
<tr>
<td>6.2a Does the NE provided take into consideration/review the client’s needs and concerns?</td>
<td></td>
<td>I G</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>6.2b Do the messages provided engage the client in setting simple and attainable goals and provide steps to accomplish those goals?</td>
<td></td>
<td>I G</td>
<td></td>
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</tr>
<tr>
<td>6.2a Are the teaching methods used relevant and easily understood by the client?</td>
<td></td>
<td>I G</td>
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<tr>
<td>6.2a Do the activities create opportunities for client interaction and feedback?</td>
<td></td>
<td>I G</td>
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</tr>
<tr>
<td>6.2a Does the client receive reinforcement of the message through materials (posters, handouts, media)?</td>
<td></td>
<td>I G</td>
<td></td>
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</tr>
<tr>
<td>6.2a Are adult learning principles (respect for client knowledge, and experience) incorporated in the session?</td>
<td></td>
<td>I G</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>6.2b Was there a process to assess for learning and intent of client’s behavior change?</td>
<td></td>
<td>I G</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.2b Does the education include an evaluation of understanding and outcomes of behavior change to determine the program’s effectiveness? (MI-WIC Policy 5.01) How? Circle: post-test open-ended contract other:</td>
<td></td>
<td>I G</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.2a Is the education provided appropriate for the client’s individual nutritional needs and concerns, socio-economic status, food preferences, language and cultural values? (MI-WIC Policy 5.01)</td>
<td></td>
<td>I G</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>6.2 Did the nutrition education presented include all of the requirements? Comments:</td>
<td></td>
<td>I G</td>
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</tr>
</tbody>
</table>

### Benefit issuance tied to Nutrition Education Participation

<table>
<thead>
<tr>
<th>Benefit issuance tied to Nutrition Education Participation</th>
<th>No</th>
<th>If YES, Action Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.1c Does the local agency deny clients benefits if they do not participate in nutrition education activities? (MI-WIC Policy 5.01)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:
### Nutrition Counseling/ Care Plan with Nutritional High Risk Client

(MI-WIC Policy 5.01, new MI-WIC Policy 5.06)

Observe 2 high risk nutrition counseling sessions & review documentation

<table>
<thead>
<tr>
<th>High Risk Nutrition Counseling/Care Plan</th>
<th>Yes or N/A</th>
<th>If not, Action Plan needed</th>
<th>Yes or N/A</th>
<th>If not, Action Plan needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>MPR</td>
<td>Client Name/ID Provider name</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.6b Was a nutrition assessment completed? (i.e. review of all pertinent data – Health history, Growth/prenatal weight gain chart, Dietary assessment, Medical status, Other: ______________________)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.6b Was the counseling related to the client’s concerns/risk/needs?</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>6.6b Was the client encouraged to participate?</td>
<td></td>
<td></td>
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<tr>
<td>6.2a Does the counseling provided build on or reinforce what the client already knows?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.2a Was the counseling tailored to client’s cultural values, situation, etc?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.6b Was there evaluation of understanding? (How do I know when I am doing it right?)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>6.6b Was a follow-up session scheduled?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.6b Are the activities for the follow-up session documented?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.6b Did the RD provide and document appropriate nutrition services in the care plan and on NE screens? (WIC Policy 5.02)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is the client provided a copy of the Nutrition Education Plan? If not, suggest they do. (MI-WIC Policy 2.20)</td>
<td></td>
<td></td>
<td>If not suggest they do.</td>
<td>If not suggest they do.</td>
</tr>
<tr>
<td>6.2a Was the counseling/education provided easy to understand with time for questions and answers?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.6 From observations or discussions, does the counseling meet high risk guidelines?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Monitoring

| 6.6d Does the agency monitor high-risk services? How? Circle all that apply: |
|-----------------------------|-------------------------------|
| a. Record review            |                                |
| b. Monthly reports of RD activities |                        |
| c. High Risk Report         |                                |
| d. Observation/client interview |                |
| Other:                      |                                |

Comments:

Reviewed by: ________________________________ Date: __________________

Consultant: ________________________________ Date: __________________