High Risk Policy and Criteria – Module 1

Introduction

This on-demand training module is provided by the MN Department of Health WIC Program. It provides an overview of High Risk Care in the Minnesota WIC Program.

High Risk Policy and Criteria

Welcome to the High Risk Module Series

There are three modules in the series, including:

- Module 1: High Risk Care Policy and Criteria
- Module 2: Providing High Risk Care
- Module 3: High Risk Documentation

Objectives

The objectives of the High Risk Policy and Criteria Module are to:

- Review the High Risk Care policies and procedures of the Minnesota WIC Program
- Identify High Risk Criteria. This criteria describes the conditions that make a participant at higher risk medically or nutritionally.
- Understand High Risk designations in HuBERT

There are numerous links to webpages in this module. If you would like to check out any of the webpages, pause the module and select the link. When you are ready to continue viewing the module, select play.

Definition

What does "high risk" mean?

- All participants in WIC are at nutrition risk - that is an eligibility requirement for the program.
- Some conditions put participants at greater risk for poor nutrition-related health outcomes. For example, a child with an hgb of 8.7 is at much greater health and nutritional risk than a child who qualifies for the program with a single dietary risk factor such as 401, Failure to Meet Dietary Guidelines for Americans.
- In WIC, the term "High-Risk" designates a participant that has a nutrition risk that puts them at higher risk and for whom individualized counseling by a "high-risk" CPA is required.

The assessment and high risk care addresses the high risk condition. For example for the child with the 8.7 hgb, the CPA should evaluate what factors may be contributing to the low hemoglobin level and provide care directed towards improving the hemoglobin status.

How High Risk Care works

In a nutshell, here is how high risk care works.

- First, the CPA identifies the high risk problem
- The CPA plans appropriate nutrition care for addressing the problem
- The high risk care helps improve the nutrition status of the participant
- And that prevents other nutrition-related problems from developing!

Goals

Ultimately, the goal of high risk care is to prevent or eliminate health and nutritional problems, as listed on this slide. As a high risk CPA you have the opportunity to positively impact the health and nutrition of Women, Infants and Children!

High Risk Policy

Now to the Minnesota WIC Program High Risk Policy

- The policy is found in the Minnesota Operations Manual, section 6.6. Here are some important highlights from the policy.
- The policy states that a High Risk Care Plan must be developed, at a minimum, for any participant who:
    - Meets the High Risk & Medical Referral Criteria which is found in MOM Exhibit 6-A. We will describe this criteria in a few minutes.

Additionally, CPAs should develop a High Risk Care Plan for any participant who could benefit from additional follow-up or requests High Risk Care.

Remember, if you would like to check out any of the webpages listed on these slides, pause the module and select the link. When you are ready to continue viewing the module, select play.

High Risk Policy Slide 2

The policy also describes the qualifications for staff providing High Risk Care. Because WIC is a nutrition program, High Risk Care should be provided and/or coordinated by the agency's credentialed nutrition professionals which include registered dietitians; individuals with a bachelor's or master's degree in Nutrition; or MN licensed Nutritionists/Dietitians.

- Other CPAs with specialized skills and knowledge may provide High Risk Care. MOM Chapter 4 addresses the expected skills and knowledge of the high-risk CPA.
- Agencies with para-professional staff (previously referred to as Locally Trained CPAs) are required to have procedures in place to assure para-professional staff refer high-risk participants to nutrition professionals.

Participants with challenging breastfeeding issues should be referred to a staff member with more extensive breastfeeding training, such as completion of a 5-day lactation training or is IBCLC certified.

High Risk Policy Slide 3

The high risk policy states that High Risk Care should:

- Identify the strategy to alleviate or resolve the High Risk condition
- And be individualized to the participant

High Risk Policy Slide 4

The policy outlines what must be included in high risk care. The High Risk Care and documentation must address the High-Risk Condition(s) and include an assessment, individualized nutrition education, assurance of adequate medical care and a plan for follow-up.

High risk module #2 will describe these steps to providing high risk care.

High Risk & Medical Referral Criteria

So what is the High Risk and Medical Referral Criteria? "High Risk Criteria" identifies the medical and nutrition conditions for which participants would benefit from more individualized, focused care.

The High Risk & Medical Referral Criteria is found in MOM, Exhibit 6-A. Participants that meet the criteria of Exhibit 6-A:

- Require a high risk care plan AND
- Require a written referral to the participant's health care provider, if the participant is not already receiving care for the high risk condition.

The High Risk Criteria is based on Risk Code Criteria. Some high risk criteria is the same as the risk code criteria. Other high risk criteria is for a specific subset of the corresponding risk code. It is time for some examples to better explain how risk code criteria is used to determine high risk criteria!

Risk Code = High Risk Condition

Here is a sample of high risk criteria from MOM, Exhibit 6-A. When a woman is diagnosed with Gestational Diabetes by her health care provider, Risk Code 302, Gestational Diabetes is assigned. Since a woman meeting this risk code criteria is at greater risk for poor pregnancy outcome, the risk code is deemed "high risk". Criteria for risk code 302 equals the criteria for high risk.

Risk Codes with Qualifying Criteria

For some risk codes, there are "qualifying criteria" for making the risk code high risk.

- There are two Anthropometric codes with Qualifying Criteria. 101 and 113 require some evaluation by the CPA to determine if the participant meets the high risk criteria.
- Many of the "300" series of Health and Medical codes are flagged as high risk. If the CPA determines a condition is beyond the scope of WIC and that the participant is receiving appropriate ongoing care from a qualified health care provider, they may note this. The High risk care should consist of adequate documentation that care is being provided elsewhere. This practice should be rare! WIC can play an important role in supporting participants in resolving or managing a high risk condition. Maintaining their high risk status helps assure they are receiving ongoing care specific to their needs

Risk Code 113, Exhibit 6-A

Now let's look at Risk Code 113 which has qualifying conditions for high risk:

- Risk code 113, Obese (children 2-5 years) is assigned whenever a child is plotted at or above the 95th percentile BMI-for-age on the CDC growth grid. The high risk criteria for

this condition is more detailed. A child may be assigned risk code 113, but not considered high risk by the MN WIC high risk criteria. The high risk criteria for obese children includes these qualifying conditions:

- o The child who is at or greater than 95th percentile BMI-for-age with a high rate of weight gain and has not established a parallel growth curve to the recommended curve. OR the child is at or greater than 95th percentile BMI-for-age and has gained 5 or more pounds in last 6 months OR the child is significantly above the 95th percentile (meaning more than 2 squares about the 95% channel line.)

113: No Qualifying Condition

These qualifying conditions for 113 were added since some overweight children stabilize on the growth grid without rapid weight gain.

- Here is an example of a child who was assigned 113 and flagged as High Risk, but does not meet the qualifying condition in MOM Exhibit 6-A.

Let's look at the Weight/age grid. The child gained 3.9 pounds in 6 months.

113: No Qualifying Condition slide 2

Looking at the BMI/age grid, note how the child's weight gain has stabilized. The BMI/age has not increased and it is NOT more than 2 squares above the 95% channel line.

- If the child is assigned 113 and flagged as high risk, but does not meet the qualifying condition, the CPA may choose to Resolve the High Risk Condition and not provide High Risk Care. We will talk about how to Resolve the High Risk Condition later.
- For overweight children with a stable weight gain, providing low risk education addressing healthy eating and physical activity may be adequate.

Of course, a CPA may have a concern about an overweight child that doesn't meet the qualifying high risk condition. In that case, the CPA may still decide to provide high risk care.

113: Meets Qualifying Condition

Now let's look at the growth grid for a child that meets the High Risk Criteria for 113.

This child has gained over 8 pounds in 5 months

113: Meets Qualifying Condition Slide 2

The BMI/age grid shows a high rate of weight gain and the child has not established a parallel growth curve to the recommended curve.

- The high risk qualifying criteria for 113 enables staff to focus high risk interventions to children displaying rapid weight gain. Rapid weight gain during childhood may be caused by significant underlying dietary, medical or environmental factors.

HR Criteria and HuBERT

- HuBERT is programmed to flag participants who meet criteria for High Risk, when it has adequate information to do so.

- See the column in MOM Exhibit 6-A "Does HuBERT flag as High Risk?" This tells you when HuBERT flags high risk, by risk code.

HR Designation

HuBERT has some "flags" to assist CPAs in identifying High Risk participants.

When you are in the Certification Guided Script, the High Risk indicator is marked Y by applicable risk codes.

HR Designation Slide 2

The High Risk Checkbox in the Certification Guided Script is automatically selected in three instances:

- #1 – when the system assigns risk codes that are considered high risk. We discussed the example of 113 earlier.
- #2 – when a **CPA** assigns a risk code that is considered high risk. An example is **347, Cancer**
- #3 - When the system has enough information to determine whether a risk code meets the qualifying condition for high risk. This applies to risk codes 201 and 371.
  - Risk code **201, Low Hemoglobin** is based on the participant's category and/or age. But High Risk is only flagged if a participant's hemoglobin is below 10, which is the high risk criteria for all participants. For example: The system will assign Risk Factor 201 Low Hemoglobin for a 3 year old child with a hemoglobin of 11. But HuBERT will not flag the participant as high-risk, since the participant doesn't meet the high risk criteria of Hemoglobin below 10.
  - Similarly, HuBERT will assign **371, Maternal Smoking** for any daily smoking of tobacco products but will only flag as high risk if smoking is $\geq$ 20 cigarettes each day by a pregnant or breastfeeding woman.

HR Designations Slide 3

As mentioned earlier, a participant may not meet the criteria for high risk but the CPA feels the participant may benefit from additional support and education for the condition. In the Assign Certification Risk Factors Tab, the CPA may select "CPA-assigned High Risk".

HR Designations Slide 4

There are two more High Risk designations.

- When you open the Participant Folder, Yellow tabs alert you to the fact the participant is high risk.
- In the Participant List, Show Details outlines the participant's information in yellow

Resolve System-assigned High Risk designations

Let's look at the Assigned Certification Risk Factors screen for a child.

- Note the asterisk by Risk Factor 113 indicating it is a high risk condition.
- The system designated this participant as high-risk due to risk code 113. Therefore, the box for CPA-assigned High Risk is greyed out.

- The Resolve System-assigned High Risk Designations is now available. Check this box if it is appropriate to remove all high-risk designations for a participant.

Resolve System-assigned High Risk designations

A local agency may choose to use the Resolve System-assigned High Risk Checkbox if it supports their high risk procedures. There will be circumstances in which it may be appropriate for a CPA to "resolve" high risk status. Below are three examples:

- Example 1: At certification, HuBERT flags a participant "high risk" due to the assignment of a risk code but the participant doesn't meet the high risk criteria for that risk code. Let's go back to our earlier example of a child who meets the risk code criteria for overweight, 113. The child's weight gain has stabilized. The BMI/age has not increased and it is NOT more than 2 squares above the 95% channel line. Therefore, the participant doesn't meet high risk criteria at certification. It would be appropriate for the CPA to resolve the system assigned high risk status.
- Example 2: At certification, the CPA determines the participant is receiving on-going high-risk care and follow-up from a health care provider and it is not necessary from WIC. This should be rare and documented in the participant's chart. Remember the important role WIC can play in supporting participants in resolving or managing a high risk condition. Maintaining their high risk status helps assure they are receiving care specific to their needs and understand their treatment plan.
- Example 3: At a follow-up contact, the CPA determines that the condition(s) is resolved or stable and that further monitoring would either not be necessary or not be beneficial. For example, a pregnant woman is certified early in her pregnancy with risk factor 301, Hyperemesis Gravidarum. At a follow-up contact 2 months later, her nausea has resolved, appetite is improving and she has begun to gain weight and established an acceptable pattern of gain – it may be appropriate to discontinue high risk care.

In every situation, CPAs must use professional discretion in deciding to "resolve" high risk status, and when they do, they must document the reason for resolving the system-assigned high risk with a HuBERT note.

Next Step

Congratulations! You have completed the first of three modules. Next, review **Providing High Risk Care**, Module 2 in the series.

End

End Slide

We appreciate you taking the time to review this on-demand training module presented by the MN Department of Health WIC Program. If you have any questions, please contact your state WIC consultant.