

**APPENDIX C.1:
SITE WEB SURVEY VERSION 1—ENGLISH**

OMB Control Number: 0584-XXXX
Expiration date: XX/XX/XXXX

WIC Nutrition Education Study Site Survey (Version 1)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0584-XXXX. The time required to complete this information collection is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Thank you for completing the Site Survey for the WIC Nutrition Education Study (NEST). This survey is being conducted for the USDA, Food and Nutrition Service (FNS) to collect information that will provide a description of how WIC sites provide nutrition education to participants. This site was randomly selected as part of a group of about 2,000 sites that represent all WIC sites in the nation. Your responses to the survey will be combined with responses from the other sites to develop a comprehensive picture of the methods, staffing, resources, and space used to deliver nutrition education in local WIC sites. Your input is critical in achieving the study's goal of providing a comprehensive description of WIC nutrition education. The information you provide will help strengthen and enhance WIC nutrition education efforts and highlight the efforts across the country to promote healthy eating and physical activity practices among WIC participants.

Local agencies/programs, sites, and individual respondent names will not be identified in any study reports or publications. Although survey responses will be identifiable to FNS, the responses will not be used for compliance or monitoring activities.

Please complete the survey by MM/DD/YYYY.

Most questions include a "button" [show icon] or a box [show box] for you to select the response. Some questions include a "pick list" for you to select an answer and a few require that you enter numbers or text responses. The survey will take about 45 minutes to complete. We recommend that you review the questions before beginning the survey so that you can obtain any information needed to respond or ask other staff at the site to assist with answering some of the questions. [Click here] to download and print a copy of the survey.

Site Survey for *[Insert Name of Site]*

Questions 10 through 16 ask about the characteristics of staff members who provide nutrition education (e.g., education, credentials, etc.). [\[Click here\]](#) to download and print a copy of an optional form that you can complete to help answer these questions.

Nutrition Education Survey Help Desk

If you have any problems completing the survey, please contact:

[Toll-free phone number]

[Email address]

Nutrition Education Contacts and Methods

For all questions, nutrition education includes breastfeeding education.

1. How many days per month does the site provide WIC nutrition education services? *(Count days when any form of nutrition education is provided. If it varies from month to month, enter the number of days WIC nutrition education services were provided last month.)*

Number of days: _____

2. Are participants at the site classified into nutrition risk levels (e.g., high risk, not high risk)?
 - Yes
 - No
3. What, if any, modifications to nutrition education does the site make based on participant's risk levels or nutrition risks? For this question, "high risk" includes participants identified as high risk and/or participants with nutrition risks requiring special attention. *(Select all that apply.)*
 - There are no modifications to nutrition education for high-risk participants.
 - High-risk participants receive more nutrition education contacts.
 - High-risk participants receive nutrition education from a dietitian, nutritionist or other health professional.
 - High-risk participants are given longer appointment times.
 - High-risk participants receive one-on-one counseling instead of group sessions or other types of education.
 - High-risk participants receive more detailed and individualized care plans.
 - There is more follow-up on referrals for high-risk participants.
 - Other (describe): _____

Site Survey for [Insert Name of Site]

4. In the first column, enter the number of nutrition education contacts the site **offers** (i.e., makes available) during a certification period for each participant category and time period. While the number of contacts varies based on individual needs, enter the number that is offered to the **majority of participants** in the category. *(Count all contacts beginning with the certification visit; for example, if prenatal women who enroll in the 1st trimester are offered nutrition education at their initial visit and two more contacts during their prenatal certification period, enter "3." Enter NA for any category/time period that is not applicable at the site.)*

In the second column, enter the **estimated** percentage of participants who **receive** that number of nutrition education contacts during their certification period. *(Please estimate based on your experience. You do not need to run a report or review participant records to answer this question.)*

Participant Category and Time Periods	Number of Nutrition Education Contacts Site Offers during Certification Period	Estimated Percentage of Participants who Receive this Number of Contacts
Participants who are NOT high risk		
Prenatal woman, enrolling in 1 st trimester	—	— %
Prenatal woman, enrolling in 2 nd trimester	—	— %
Prenatal woman, enrolling in 3 rd trimester	—	— %
Breastfeeding woman, 6-month certification period	—	— %
Breastfeeding woman, 12-month certification period	—	— %
Postpartum woman, not breastfeeding	—	— %
Infant, 6-month certification period	—	— %
Infant, 12-month certification period	—	— %
Child, 6-month certification	—	— %
Child, 12-month certification	—	— %
Participants who are high risk and/or have nutritional risks requiring special attention		
Prenatal woman, enrolling in 1 st trimester	—	— %
Prenatal woman, enrolling in 2 nd trimester	—	— %
Prenatal woman, enrolling in 3 rd trimester	—	— %
Breastfeeding woman, 6-month certification period	—	— %
Breastfeeding woman, 12-month certification period	—	— %
Postpartum woman, not breastfeeding	—	— %
Infant, 6-month certification period	—	— %
Infant, 12-month certification period	—	— %
Child, 6-month certification period	—	— %
Child, 12-month certification period	—	— %

Site Survey for *[Insert Name of Site]*

5. During what types of visits does the site provide nutrition education contacts? *(Select all that apply.)*

- Certification visit (e.g., enrollment, recertification)
- Mid-certification visit (e.g., prenatal trimester visit, infant/child mid-certification, breastfeeding mid-certification)
- Secondary education follow-up visit (e.g., group classes, food issuance/pick-up, breastfeeding follow-up, low risk follow-up)
- High-risk follow-up visit (e.g. nutritionist visit, nutrition counseling visit, high-risk group classes)
- Other visits (describe): _____

Programming Note: For Question 6, display only the types of visits selected for Question 5. If “certification visit” was selected, display both “enrollment certification” and “recertification.”

6. What methods are used to provide nutrition education? *(Select all methods that are used for each type of visit.)*

Method	Enrollment Certification	Recertification	Mid-certification	Secondary Education	High-Risk	Other
One-on-one counseling: Face to face (in WIC site)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-on-one counseling: Telephone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-on-one counseling: Video conferencing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Group education sessions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology-based nutrition education used by participants at site (e.g., computer, kiosk, tablet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology-based nutrition education used by participants offsite via Internet (e.g., web-based nutrition education modules)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other nutrition education activities (e.g., monthly topic, worksheets, videos, self-study modules)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Programming Note: For Question 7, display only the types of visits selected for

Site Survey for *[Insert Name of Site]*

Question 5. If “certification visit” was selected, display both “enrollment certification” and all three types of “recertification.”

7. On average, how much time do staff members who provide nutrition education at the site spend providing nutrition education during each of the following types of WIC visits? Do **not** include time spent on eligibility (e.g., income and residency) or assessment (e.g., weighing/measuring, blood work, reviewing nutrition questionnaires).

Type of Visit	Less than 5 Min	5-10 Min	11-20 Min	21-30 Min	31-45 Min	46-60 Min	More than 60 Min	Don't Know
Enrollment Certification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recertification — Not high risk, 1 person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recertification — High risk, 1 person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recertification — 2 or more family members	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mid-certification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Secondary education follow-up (individual)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Secondary education follow-up (group)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
High-risk follow-up	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Nutrition Education Staff

The next questions ask about the staff members at the site who provide nutrition education. If the number of these staff varies on different days, respond about staffing for a “typical” day or use the most common/frequent staffing pattern for the site. Count staff who provide nutrition education using any method. Do **not** include translators or interpreters who assist nutrition educators.

If you completed the optional form [[click here](#)] you can refer to this form to answer Questions 10 through 16 on the characteristics of staff members who provide nutrition education.

8. Which **best** describes the staff members who provide nutrition education at the site? (Select one response.)
- All of them work **only** for WIC.
 - All of them work for WIC **and** for other programs or services (e.g., immunizations, family planning) offered at the site.
 - Some of them work only for WIC and some work for WIC and other programs or services offered at the site.

Site Survey for [Insert Name of Site]

9. For each job classification/type of staff, enter the number of staff who currently provide nutrition education at the site who work full time and the number who work part time. (If a staff member works 32 or more hours/week on WIC, count them in the Full-Time Staff column and if less than 32 hours/week on WIC, count them in the Part-Time Staff column appropriate for the number of hours they work per week. If a staff member **performs more than one role**, count them only once in the job classification/type for their **primary** role.)

Job Classification/Type of Staff	Number of Full-Time Staff (work on WIC activities 32 or more hours per week)	Number of Part-Time Staff (work on WIC activities 21-31 hours per week)	Number of Part-Time Staff (work on WIC activities 20 or fewer hours per week)
WIC director/coordinator	—	—	—
Site/clinic supervisor	—	—	—
Registered dietitian (RD)	—	—	—
Degreed nutritionist, not RD	—	—	—
Trained nutrition paraprofessional (e.g., nutrition assistant, nutrition aid, competent paraprofessional authority, diet technician, social services technician)	—	—	—
Nurse	—	—	—
Nutrition education coordinator	—	—	—
Administrative/clerical/support staff	—	—	—
Lactation consultant/WIC-designated breastfeeding expert	—	—	—
Breastfeeding coordinator	—	—	—
Breastfeeding peer counselor	—	—	—
Other: _____	—	—	—
Total	—	—	—

For question 9 and all subsequent survey questions that include a response option of “other” in a table, display the following question when “other” is selected as a response: You selected “other” as a response to the question above. Please enter an explanation of “other” in this box. [Include a text entry box allowing for entry of 200 characters.]

Site Survey for [Insert Name of Site]

10. How many years have staff members who provide nutrition education at the site worked for WIC? *(Count both full-time and part-time staff and count each staff member only one time for the total number of years they have worked for WIC. Include time worked at this site or local agency/program and time at other WIC sites or local agencies.)*

Number of Years Worked at WIC	Number of Staff who Provide Nutrition Education
Less than 1 Year	—
1-2 Years	—
3-6 Years	—
7-10 Years	—
11-20 Years	—
More Than 20 Years	—
Total	—

11. What is the educational level of individual staff members who provide nutrition education at the site? *(Count both full-time and part-time staff and count each staff member only one time for the highest degree they have received.)*

Education Level (Highest Degree Received)	Number of Staff who Provide Nutrition Education
High school diploma or GED	—
Associate's degree	—
Bachelor's degree	—
Graduate degree	—
Unknown	—
Total	—

Site Survey for [Insert Name of Site]

12. How many of the staff members who provide nutrition education at the site have one or more of the credentials* listed below? (If a staff member has more than one credential, count them **for each credential** they have; for example, if a staff member is both an RD and a LD/LN, count them in each credential group. If no staff members have any of these credentials, select “None of these credentials” box).

Credentials	Number of Staff who Provide Nutrition Education
Registered Dietitian (RD)	—
Licensed Dietitian/Nutritionist (LD/LN)	—
Dietetic Technician, Registered (DTR)	—
Registered Nurse (RN)	—
Licensed Practical Nurse (LPN)	—
International Board Certified Lactation Consultant (IBCLC)	—
Certified Lactation Consultant/Certified Lactation Educator/Certified Lactation Educator & Counselor (CLC/CLE/CLEC)	—
Certified Medical Assistant (CMA)	—
None of these credentials	<input type="checkbox"/>

*A credential is a certification from a professional association or training program.

13. What is the ethnicity of staff members who provide nutrition education at the site? (If you do not know the ethnicity of a staff member, count them in the “Unknown” category.)

Hispanic or Latino Ethnicity	Number of Staff who Provide Nutrition Education
Hispanic or Latino	—
Not Hispanic or Latino	—
Unknown	—
Total	—

Site Survey for [Insert Name of Site]

14. What is the race of staff members who provide nutrition education at the site? (*Staff members may be included in more than one category. If you do not know the race of a staff member, count them in the "Unknown" category.*)

Race	Number of Staff who Provide Nutrition Education
American Indian or Alaska Native	—
Asian	—
Black or African American	—
Native Hawaiian or other Pacific Islander	—
White	—
Unknown	—

15. How many staff members provide nutrition education in a language other than English? (*Do not include interpreters and translators.*)

Number of staff: _____

Programming Note: If Question 15 is "0" or blank, then skip Question 16. The selection for Question 16 will be a drop-down list allowing for multiple selections.

Site Survey for *[Insert Name of Site]*

16. Other than English, what languages are spoken by staff who provide nutrition education at the site? *(Select all that apply.)*

- Spanish
- Arabic
- American Sign Language
- Cambodian/Khmer
- Cantonese/Mandarin
- Farsi
- French/Creole
- Fulani
- Hindi
- Hmong
- Korean
- Laotian
- Portuguese
- Punjabi
- Russian
- Somali
- Swahili
- Tamil
- Tagalog
- Urdu
- Vietnamese
- Other (describe): _____

Site and Participant Characteristics

17. In addition to WIC, which of the following services are available at or near the site? *(Select all that apply.)*

- Children's health care
- Dental services
- Environmental health/screening
- Family planning services
- Lead screening
- Maternal/prenatal health care
- Parenting support
- Prevention and screening services (e.g., vision, early and periodic screening, immunizations)
- Sexually transmitted disease services
- Smoking cessation
- There are no other services available at this site.
- Other (describe) _____

Site Survey for [Insert Name of Site]

18. What settings at the site are used for **one-on-one counseling**? (Select all that apply.)

- Private room (full walls and door, e.g., office, exam/lab room)
- Modular office/cubicle (with full or partial walls)
- Area with movable partitions separating it from other space
- Open area with no partitions and staff at desks that are arranged for privacy
- Open area with no partitions and staff at tables (e.g., waiting room, community center room)
- Other (describe): _____

Programming Note: Display Question 19 only if "Group education sessions" was selected as a method in Question 6.

19. What settings at the site are used for **group education sessions**? (Select all that apply.)

- Designated room or space used predominately for group education
- Multi-purpose room used for group education and other meetings, but not a waiting room (e.g., conference room, auditorium)
- General open area (e.g., waiting room, open room where all WIC activities take place)
- Private room used for both one-on-one counseling and group education
- Other (describe): _____

Site Survey for [Insert Name of Site]

20. Which, if any, of these rooms/areas are available at or near the site? (Select all that apply.)

- Designated room/area where breastfeeding education is provided
- Kitchen/area for cooking classes or recipe preparation demonstrations
- Room/area for nutrition education activities with children
- Room/area for providing WIC orientation to families
- Room/area for viewing nutrition education or breastfeeding videos
- None of the above

21. Which, if any, of these equipment items or materials does the site have available for providing nutrition education? (Select all that apply.)

- Bulletin boards for nutrition education information
- Computer, kiosk, or tablet computer for nutrition education
- Display tables with nutrition information
- DVD player and TV for showing nutrition education information
- Equipment for teaching cooking classes (e.g., stove, refrigerator)
- Equipment for simple food tasting (e.g., blender, crock pot)
- Nutrition education curricula or materials targeted to children (e.g., Sesame Workshop, kids' camp)
- Nutrition newsletters
- Rack/table/stand with written nutrition education materials for participants to select
- Other (describe): _____
- None of the above

22. About what percentage of participants served at the site speak a language other than English as their **primary** language? (Please estimate if this information is not readily available. You do not need to run a report or review participant records to answer this question.)

- None
- 1-5%
- 6-10%
- 11-30%
- 31-50%
- 51-70%
- 71-90%
- 91-100%

Programming Note: If response to Question 22 is "None," then skip Question 23. The list of response options for Question 23 will be a drop-down list allowing for multiple selections.

Site Survey for [Insert Name of Site]

23. Other than English, what languages are spoken by participants served at the site?
(Select all that apply.)

- Spanish
- Arabic
- American Sign Language
- Cambodian/Khmer
- Cantonese/Mandarin
- Farsi
- French/Creole
- Fulani
- Hindi
- Hmong
- Korean
- Laotian
- Portuguese
- Punjabi
- Russian
- Somali
- Swahili
- Tamil
- Tagalog
- Urdu
- Vietnamese
- Other (describe): _____

Questions about You

24. Did you complete the Local Agency Survey for the local agency/program that oversees this site?

- Yes
- No

Programming Note: If "Yes" is selected for Question 24, then skip Questions 25 through 29.

Site Survey for *[Insert Name of Site]*

25. Which job titles or roles do you have? *(Select all that apply.)*

- WIC director/coordinator
- Site/clinic supervisor
- Registered dietitian (RD)
- Degreed nutritionist, not RD
- Trained nutrition paraprofessional (e.g., nutrition assistant, nutrition aid, competent paraprofessional authority, diet technician, social services technician)
- Nurse
- Nutrition education coordinator
- Administrative/clerical/support staff
- Lactation consultant/WIC-designated breastfeeding expert
- Breastfeeding coordinator
- Breastfeeding peer counselor
- Other (describe): _____

Programming Note: If only one option is selected for Question 25, then skip Question 26.

26. Which **best** describes your **primary** role in the WIC Program? *(Select one response.)*

- WIC director/coordinator
- Site/clinic supervisor
- Registered dietitian (RD)
- Degreed nutritionist, not RD
- Trained nutrition paraprofessional
- Nurse
- Nutrition education coordinator
- Administrative/clerical/support staff
- Lactation consultant/WIC-designated breastfeeding expert
- Breastfeeding coordinator
- Breastfeeding peer counselor
- Other (describe): _____

27. What is the highest degree you have completed?

- High school diploma or GED
- Associate's degree
- Bachelor's degree
- Graduate degree

Site Survey for *[Insert Name of Site]*

28. Which, if any, of the following credentials do you have? *(Select all that apply.)*

- Registered Dietitian (RD)
- Licensed Dietitian/Nutritionist (LD/LN)
- Dietetic Technician, Registered (DTR)
- Registered Nurse (RN)
- Licensed Practical Nurse (LPN)
- International Board Certified Lactation Consultant (IBCLC)
- Certified Lactation Consultant/Certified Lactation Educator/Certified Lactation Educator & Counselor (CLC/CLE/CLEC)
- Certified Medical Assistant (CMA)
- Other (describe): _____
- No credentials

29. How many years have you worked for the WIC Program? *(Include time at this site or local agency and other WIC experience.)*

- Less than 1 year
- 1-3 years
- 4-6 years
- 7-10 years
- 11-20 years
- More than 20 years

30. As part of your job, do you design and/or oversee nutrition education at the site?

- Yes
- No

31. As part of your job, about what percentage of your time each month is spent providing nutrition education to WIC participants?

- Less than 25%
- 25-49%
- 50-74%
- 75-100%

32. Please use the space below to share a brief description of any special nutrition education activities or approaches used at the site.

Programming Note: Please provide a text field with sufficient space for an open-ended, 8-line response (800-character response) for Question 32.

Thank you for completing the Site Survey for the WIC Nutrition Education Study!

