|  |  |  |  |
| --- | --- | --- | --- |
| **Agency:** |  | Reviewer: |  |
| **Clinic:** |  | **Date:** |  |

*Observe a nutrition education group. If observation is not possible, review a group session guide and group list.*

*C = Compliance QA = Quality Assurance N/A = Not Applicable UO = Unable to Observe*

| **Group Title →** | | |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date →** | | |  |  |  |  | |
| **Instructor →** | | |  |  |  |
| **GROUP EDUCATION** | | | | | | **Notes:** | |
| 1 | C | Is the NE lesson plan and/or group session guide on file? |  |  |  |  | |
| 2 | C | Was the intent or main objectives of the lesson covered by the instructor? |  |  |  |  | |
| 3 | C | Were the participant’s cultural/language needs met? |  |  |  |  | |
| 4 | C | Was participant attendance documented in TWIST? |  |  |  |  | |

| **PARTICIPANT CENTERED EDUCATION** | | | | | | | **Notes:** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 5 | QA | Were elements of Participant Centered Education demonstrated? |  |  |  |  | |
| * Opens the session | | |  |  |  |  | |
| * Involves the group. * Allows everyone to talk, participate, or be silent by choice. * Pauses for answers to questions before giving info. | | |  |  |  |  | |
| * Affirms participation | | |  |  |  |  | |
| * Asks open-ended questions about participants experience or ideas | | |  |  |  |  | |
| * Summarizes or reflects | | |  |  |  |  | |
| * Keeps session on topic | | |  |  |  |  | |
| * Closes the session | | |  |  |  |  | |
| * Spirit * CARING * Displays positive energy and relaxed, open body language | | |  |  |  |  | |