Policies from the WIC State Program Certification Policy and Procedure Manual

Policy 215.30 Terminations - Pending Terminations

Participants or their caregiver must be notified if their certification is about to expire within 15 days but no more than 45 days of expiration of their certification end date. Follow the steps in the table below:

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>At the beginning of each month, select Reports from the main panel in Focus.</td>
</tr>
<tr>
<td>2</td>
<td>In the Reports tree view, open the following: Clinic Services Reports Administrative Reports And select Termination by system pending</td>
</tr>
<tr>
<td>3</td>
<td>Choose your agency and select the “Next Month” drop down choice under Time Frame and click View Report.</td>
</tr>
<tr>
<td>4</td>
<td>Bring up the report and export to a PDF, Word or Excel file and print.</td>
</tr>
<tr>
<td>5</td>
<td>Contact each individual on the report via phone, text, or written notice to ensure that an appointment has been scheduled and to inform the participant that their benefits will end if they do not come in for their appointment. Document on the report attempted contacts and contacts made.</td>
</tr>
<tr>
<td>6</td>
<td>File the report.</td>
</tr>
</tbody>
</table>

Policy 215.42 – Adjunctive Income Eligibility

If an applicant is found to be adjunctively income eligible, Policy 215.42 states that the sources of income, amounts and time periods must still be recorded for adjunctively income eligible participants. However, verbal declaration of this information is adequate. This should be documented in the data system by selecting “Verbal report” as the proof provided.

If a participant is found to be adjunctive income eligible, no further income documentation should be requested of the applicant(s).

Policy 215.95 – Advising Participants of their Rights and Responsibilities

At the time of certification, WIC staff must advise each applicant or parent/guardian of the rights and responsibilities of a program participant. The applicant or parent/guardian must then sign a statement that they have been:
- Advised of their rights and responsibilities, and
- Provided accurate information regarding eligibility for the WIC Program.

If the participant is unable to electronically sign the document, for example due to equipment malfunction, the participant must manually sign the document and the document must be scanned into the computer system.
Policy 390.30 – Homeless Facilities

The following conditions apply to homeless facilities where WIC participants stay:

- The facility must not gain financial or in-kind benefit from a person’s participation in WIC,
- WIC foods must not be used in communal feeding,
- No homeless facility restrictions or constraints can exist relative to WIC Program participation. The homeless facility cannot restrict the ability of the WIC participant to get supplemental foods and all associated WIC services made available to participants by the WIC agency.

If an agency has applicants who are using a homeless facility in the agency’s service area, contact the facility periodically by phone to verify that the facility meets the conditions above.

The local agency must ensure that the homeless facility is aware that they must notify the local agency if it ceases to meet any of the applicable conditions.

Policy 245.20 – Making Referrals

The objectives of WIC referrals for participants are to:

- Ensure access to ongoing health care services, particularly prenatal care, well child services, and dental services;
- Assist WIC participants with current problems and prevent potential ones by utilizing available resources;
- Encourage positive approaches in working with families through focusing on strengths, promoting wellness, and integrating appropriate resources, and
- Develop and maintain linkages between agencies and health care providers serving WIC participants.

There are two types of referrals that can be made to WIC participants: written and verbal.

Written referrals must be documented in the WIC data system. The staff member making the referral must follow-up on the status of the referral. For referrals about immediate concerns, the referring staff member is strongly encouraged to call the participant within a few days to see if the referral was completed and needed services obtained. For referrals of a less urgent nature, the referring staff member can follow-up with the participant by phone or at their next scheduled appointment. Each agency should develop a plan to ensure that follow-up is completed.

It is best practice to document verbal referrals in Focus by identifying the general type of referral made. It is also best practice to follow-up on verbal referrals.

It is best practice for local agencies to maintain basic referral contact information in the Focus system for agencies and programs to which referrals are frequently made. Contact information includes name, address, phone, fax, e-mail, and contact person. Referrals can be documented in the “Education and Care” panel of Focus.
**WIC Works Resources of the Week:**

As part of the ongoing partnership efforts to share other government agency health-related resources that may benefit WIC participants, the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) posted new resources from the Department of Health and Human Services’ Office of Adolescent Health to the WIC Works Resource System (WWRS) at [https://wicworks.fns.usda.gov/pregnancy/adolescent-pregnancy](https://wicworks.fns.usda.gov/pregnancy/adolescent-pregnancy). The resources support expectant teens and their families.

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**Thank You of the Week**

“When our third child was born, he measured completely average in every way. However, he struggled to maintain his weight, and failed to gain over the following weeks. I was so frightened, worried, and confused! The ladies at the WIC office became my supporting angels. They had me coming in regularly for frequent weight checks and counseling. The director even called me at home to check on him! When the decision was made with our pediatrician to supplement breastfeeding with the prescription formula, WIC stepped up again to facilitate. I was so worried and broken-hearted, but their concern and comfort really made a difference, and having them arrange delivery of the formula was blessing for my extremely distracted mind! Now, our little boy is almost 5 and will be graduating from the WIC program soon. I will miss celebrating his growth milestones with our team of “WIC Angels”. Obviously, I am grateful for the WIC program. There is little I could suggest to improve it.” - WIC Participant
Participant Centered Services:

The top 3 heart buttons identified among WIC moms are:

**Reinvention** is inventing a different and better life for oneself and one’s family, whether by achieving greater financial security, educational degrees that lead to better jobs, more positive behaviors, or more opportunities for children.

Many families today feel trapped by “dead end” jobs, academic failures, overwhelming responsibilities, and dysfunctional families. These stresses can actually be the triggers that motivate clients to make significant improvements in their lives.

**Speak the Language of Reinvention.**

In counseling, consider using the following words and phrases to help put clients in a Reinvention mindset:

- Fresh start
- Breaking old habits
- A better life
- Forming new habits
- A new you
- Setting new goals
- New attitude
- Reassessing your situation
- Escaping the past
- Embracing the future
- Switching priorities
- Being who you want to be

**Real Moms Speak the Language of Reinvention.**

“My first child changed my entire life. To me, she saved me. I was on drugs. Bad, bad times and when I found out I was pregnant, it totally changed everything in my life. Everything turned out better.”

“I don’t want my kids to relive my life. For my child to have a different childhood than I did, I’ve got to change something.”

“I learned how to actually be there for family. You don’t have to be out drinking and having fun. You can just start a whole new life and make it better. Not just for you, but for your kids.”

“I want my children to not follow in my footsteps. I want them to go to college before they start a family.”

**Family Values**

Family Values are the set of attitudes, beliefs, and behaviors transmitted - generally from parent to child - that help establish a foundation and roadmap for the child’s future growth and character development.

In a comfortable, supportive family environment, children are better able to learn what’s important for a satisfying life and develop their character accordingly. They experience firsthand the guiding force of a loving parent, discover what it means to be mentored, and build happy memories of family life.
Participant Centered Services: (continued)

Speak the Language of Family Values.

In counseling, consider using the following words and phrases to help put clients in a Family Values mindset:

- Having fun
- Talking about the child’s day: Togetherness
- Making memories together: Sharing
- Sitting down at meals together: Quality time
- Playing cards and board games: Creative activities
- Finding common ground: Putting family first
- Storytelling

Real Moms Speak the Language of Family Values.

“Family time is really important. I believe in sitting at a table and eating as opposed to kids and family all over the place, one here, one there, TVs on in every room. I don’t condone that. I don’t like it. You’re teaching them a number of different things—how to behave, how to sit, how to communicate with your family and your immediate social circle. That’s where you learn everything.”

“We live in a crazy society and a lot of things are going on. A lot of things even between people— and that’s horrible. You have got to teach your kids. And then just spend time with your kids. Like I do, no matter how late I work or whatever, I wake up in the morning and I give them hugs, I play with them, I make sure I’m involved in whatever they are involved in. And I educate them. I teach them, ‘don’t do this, don’t do that, do it this way, the right way.’”

“My mom and dad were always working so I didn’t get to have both of them at the same time. We try to have dinner together every night because I want him to have at least some memories of both of us with him.”

Nurture

Nurture is the unselfish practice of giving care, support, comfort, and encouragement to someone else, frequently reflected in a mother’s desire to be the child’s hero by putting the child’s needs first.

Nurturing is not only about providing the essentials of food, clothing, and shelter. It also involves meeting the child’s mental, emotional, and spiritual needs in order to help them achieve their full potential as successful, well-adjusted adults.

Speak the Language of Nurture.

In counseling, consider using the following words and phrases to help put clients in a Nurturing mindset:

- Listening
- Providing a secure environment: Understanding
- Modeling behaviors: Sacrificing
- Being there (for someone) Pointing out strengths Treating children with respect Supporting
- Giving children space (to grow): Calming
- Making ends meet
Participant Centered Services: (continued)

Real Moms Speak the Language of Nurture.

“I want to teach my son to be a better judge of character than me. I don’t think I was a good judge of character. I made friends with a lot of people that ended up being bad influence or not good friends. If I had surrounded myself with better people, I would have stayed in school and made a bunch of better choices.”

“I like to see them happy. They’re happy when they learn something. I like to see the excitement when they are learning something new.”

“We stress it very hard that we pray over everything. And we go to church two days a week and that is just part of who we are. That is how we were raised.”

“My mom didn’t give me the guidance that was necessary for me to actually be successful. There’s a major difference between somebody that actually basically cares for you and your well-being versus somebody that’s just drilling information in your head and expects you to catch on and do the right thing instead of helping you through it.”

-learning opportunity-

Please see the flyer on the last page of this issue of Friday Facts for information regarding the 2017 National Maternal and infant Nutrition Course through the University of Minnesota. FNS and MCH Bureau are the sponsors of this course. Some current topics of interest to maternal and child nutrition programs will be discussed this year. For any question about this course, the contact information is provided on the flyer.
NETC 2017 Schedule:

May:
NETC Go-To-Meeting (Health Professional) – May 24, from 8:30-11:30 (Nicole and Caryn)
NETC Go-To-Meeting (Support Staff) – May 25, from 8:30-11:30 (Connie and Nicole)

July:
NETC Go-To-Meeting (All new staff) – July 13, from 8:30-11:30 (Nicole and Nikki)
NETC Go-To-Meeting (Health Professional) – July 20, from 8:30-11:30 (Charlie and Caryn)
NETC Go-To-Meeting (Support Staff) – July 27, from 8:30-11:30 (Connie and Nicole)

September:
NETC Go-To-Meeting (All new staff) – September 14, from 8:30-11:30 (Nicole and Caryn)
NETC Go-To-Meeting (Health Professional) – September 21, from 8:30-11:30 (Nikki and Charlie)
NETC Go-To-Meeting (Support Staff) – September 28, from 8:30-11:30 (Connie and Caryn)

November:
NETC Go-To-Meeting (All new staff) – November 9, from 8:30-11:30 (Nicole and Charlie)
NETC Go-To-Meeting (Health Professional) – November 15, from 8:30-11:30 (Nikki and Caryn)
NETC Go-To-Meeting (Support Staff) – November 16, from 8:30-11:30 (Connie and Caryn)

Please note: all webinars will take place in Room 479 Lucas Building, IDPH.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form,(AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

1. Mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C.20250-9410
2. Fax: (202) 690-7442; or
E-mail: program.intake@usda.gov

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## Available Formula

<table>
<thead>
<tr>
<th>Product</th>
<th>Quantity</th>
<th>Expiration Date</th>
<th>Agency</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neocate</td>
<td>6 Cases (4 cans per case)</td>
<td>3/19/17 to 6/18/17</td>
<td>Johnson Co.</td>
<td>Chuck Dufano (319) 688-5863</td>
</tr>
<tr>
<td>Enfagrow Toddler Transitions Soy</td>
<td>2 cans</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enfragrow Toddler Transitions Milk</td>
<td>3 cans</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RCF Concentrate</td>
<td>11 cans</td>
<td>5/17</td>
<td>Webster Co.</td>
<td>Kathy Josten, LD CBE (515) 573-4107</td>
</tr>
<tr>
<td>Eternal Pediasure Vanilla flavored</td>
<td>112 cans</td>
<td>7/17</td>
<td>Scott County</td>
<td>Deb Dodson (563) 823-9228</td>
</tr>
<tr>
<td>Beneprotein</td>
<td>4 cans 8oz. PWD</td>
<td>2 cans 8/2017 2 cans 10/2017</td>
<td>HACAP</td>
<td>Angela Munson (319) 366-7632</td>
</tr>
<tr>
<td>RTU Neosure</td>
<td>26 containers</td>
<td>9/1/17</td>
<td>Upper Des Moines</td>
<td>Tammy Chapman, RD, LD (712) 859-3892</td>
</tr>
<tr>
<td>Enfaport Infant 6oz bottles</td>
<td>10 six-packs plus 5 bottles (65 bottles total)</td>
<td>January 16, 2018</td>
<td>Webster County</td>
<td>Susan Freeman (515) 573-4107</td>
</tr>
<tr>
<td>Vivonex Pediatric powder</td>
<td>13 boxes each with 6 - 1.7oz. packets and an additional 5 packets</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>category 41 subcategory 216</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Similac PM 60/40</td>
<td>10 cans</td>
<td>November 2018</td>
<td>Marion County WIC</td>
<td>Jessica Johnson 641-828-2238 ext. 225</td>
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2017 National Maternal and Infant Nutrition Intensive Course

August 16–18, 2017
Minneapolis, Minnesota
cceevents.umn.edu/mnic

This continuing education program focuses on the improvement of maternal and infant health through the delivery of risk-appropriate, high-quality nutrition services. It is designed for dietitians, nutritionists, certified nurse midwives, registered nurses and nurse practitioners, physicians, and public health professionals who serve preconceptual, pregnant, postpartum, and breastfeeding women.

Visit cceevents.umn.edu/mnic to learn more and to register for the course.

Conference Topics

- Mindfulness for Work and Daily Resilience for the Health Care Provider (New This Year!)
- Diet, Depression, and Sleep in Pregnant and Postpartum Women
- Relationships between Adverse Childhood Events and Weight in Women
- Cannabis Use in Pregnancy: Clinical and Policy Implications
- Social-Ecological Model of Factors Affecting Breastfeeding Initiation and Duration
- Telehealth Interventions for Pregnant and Postpartum Clients
- Perinatal Diet, Inflammation, and Brain Development
- Fatty Acids in Pregnancy: An Update
- Inflammation, Infection, and Pregnancy: An Epigenetic Perspective
- Effects of Malnutrition on Pregnancy Outcomes and Breastfeeding
- Infant Feeding Guidelines

Distance Learning Opportunities

Distance education options will be available for certain sessions for a three-month period following the course.

The National Maternal Nutrition Intensive Course is supported in part by:

Food and Nutrition Services, US Department of Agriculture, under Grant Agreement No. WIC-UNIV.MN-17. Financial support of this course provided by the Food and Nutrition Service cannot be interpreted as an endorsement of the views presented by the course speakers.

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