

Chapter 1 Introduction to WIC

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This chapter provides an introduction to the WIC Program and information on the required no smoking policy, retention of program records, staff conflict of interest, management of program policies and procedures, and resources available from the Nutrition Services Branch to support program activities.

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Attachments:

- Attachment 1. Log of WIC Program Numbered Memos (*sample*)
- Attachment 2. Separation of Duties Log

Required Local Agency Written Policies and Procedure

- Local agencies must have a written policy describing how the local agency ensures separation of duties and that addresses strategies implemented when separation of duties is not possible.

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Overview of WIC

The **Special Supplemental Nutrition Program for Women, Infants, and Children**, more commonly known as WIC, is a federal program administered by the United States Department of Agriculture (USDA). The program is designed to provide food and nutrition education to low-income pregnant and postpartum breastfeeding women and infants/children until age five. Additional information on WIC can be found at <http://www.fns.usda.gov/wic/>.

■ Introduction

The purpose of the WIC Program is spelled out in Section 17 (a) of Public Law 95-627 (Child Nutrition Amendments of 1978).

The Congress finds that substantial numbers of pregnant women, infants, and young children are at special risk in respect to their physical and mental health by reason of poor or inadequate nutrition or health care, or both. It is, therefore, the purpose of the program authorized by this section to provide supplemental nutritious foods and nutrition education as an adjunct to good health care during critical times of growth and development in order to prevent the occurrence of health problems and improve the health status of these persons.

It is the philosophy of the North Carolina WIC Program that in order to fulfill the legislated purpose of the Program, the following must be present at the level of implementation:

... integration of WIC with established health services; emphasis on the WIC food package as a prescription; and nutrition education services tailored to the needs of the individual target population participant.

Transformation of this philosophy into reality has been and continues to be a challenge to those concerned with WIC at the local, regional, and state level. They have dealt with the difficulties of communicating and demonstrating the novel concept of the food prescription to the lay and professional community. They have worked to ensure the survival of the Program through the past few challenging legislative and funding cycles. With the continued dedication of the nutritionists, nurses, physicians, interviewers, bookkeepers, and administrators throughout the North Carolina WIC Program areas, the goal of improving the physical and mental growth and development of WIC participants in North Carolina will be accomplished.

■ WIC Program Benefits

- **WIC Food Prescription.** The foods available through WIC are foods containing nutrients determined to be beneficial for pregnant, breastfeeding, and postpartum women, infants and children. Refer to Chapter 7 for information on the specific types and quantities of foods available through the WIC food prescription for WIC Program participants.

- ▶ **Nutrition Education.** Nutrition and physical activity education is an integral part of the WIC Program and is designed to improve health status, achieve positive change in dietary habits, and emphasize relationships between nutrition and health, all in keeping with the individual's personal, cultural, and socioeconomic preferences. Refer to Chapter 5 for information on the nutrition education benefit of the WIC Program.
- ▶ **Breastfeeding Promotion And Support.** Pregnant and postpartum women who participate in WIC receive comprehensive breastfeeding education and support. Refer to Chapter 9 for information on the breastfeeding associated benefit of the WIC Program.
- ▶ **Referrals to Health Care and Public Assistance Programs.** WIC Program applicants and participants receive information on and referrals to other relevant health care services (e.g., immunization services, prenatal care, well child health care), appropriate public assistance programs (e.g., Food and Nutrition Services, Medicaid), and potential sources for food assistance.

■ **Eligibility For WIC**

To qualify for the North Carolina WIC Program, an applicant must meet four eligibility criteria. Refer to Chapter 6 for additional information about each of these criteria.

- ▶ **Categorical eligibility.** A participant must be a pregnant woman, a non-breastfeeding woman up to six months postpartum, a breastfeeding woman up to one year postpartum, an infant, or a child up to the fifth birthday.
- ▶ **Residential eligibility.** A participant must live in the State of North Carolina and in the health services delivery area of the local agency.
- ▶ **Income eligibility.** A participant must have a gross annual income at or below 185% of the federal poverty line. All Medicaid, TANF (Work First), and Food and Nutrition Services recipients are automatically income-eligible for WIC (i.e., adjunctively eligible).
- ▶ **Nutrition risk eligibility.** A participant must have an identified medical/nutritional risk problem, as determined by a competent professional authority (CPA). Risks include anemia, poor growth, previous poor pregnancy outcome, inadequate diet, and other nutrition-related problems.

■ **Participation In WIC**

Over 259,279 North Carolina women, infants, and children receive WIC Program services each month. Monthly participation in WIC is defined as the sum of:

- ▶ the number of pregnant women, breastfeeding women, non-breastfeeding postpartum women, infants and children who received food instruments or cash-value vouchers during the reporting period;

- the number of breastfeeding infants who did not receive food instruments, but whose breastfeeding mother received food instruments or cash-value vouchers during the reporting period; and
- the number of breastfeeding women six months or more postpartum who did not receive food instruments or cash-value vouchers, but whose breastfed infant(s) received food instruments during the reporting period.

Refer to Chapter 7 for more information on the food benefit of WIC and to Chapter 8 for information on the issuance of this benefit.

■ **Impact Of WIC On Health Status**

Over the years, USDA has conducted extensive evaluations of the WIC Program as have a variety of other groups, including the federal General Accounting Office (GAO). The positive impact of WIC on its participants has been shown to be varied and significant.

- Participation in WIC during pregnancy is associated with lower rates of infant mortality, fetal mortality, perinatal mortality, and neonatal mortality. Evidence suggests that improved pregnancy outcomes to women participating in WIC saves significant dollars in newborn medical and intensive neonatal care costs.
- Infants born to women receiving WIC during pregnancy have lower rates of low birth weight and have head circumferences the same size or larger than infants born to low-income women who were not on WIC during their pregnancies.
- Children enrolled in WIC are more likely to have better diets and are more likely to participate in regular preventive health services and be better immunized than children who are not participating in WIC.
- WIC appears to improve intelligence of children long after the pregnancy. Four and five year olds whose mothers participated in WIC during pregnancy were shown to have better vocabulary scores than comparable non-WIC children. Children who subsequently participated in WIC after their first birthday appeared to have better digit memories than children who did not participate in WIC.

■ **WIC In North Carolina**

WIC is administered at the State level by the NC Department of Health and Human Services, Division of Public Health, Women's and Children's Health Section, Nutrition Services Branch. Locally, the WIC Program is administered by public health agencies (e.g., county health departments and community and rural health centers) serving all 100 counties. Additional information about the North Carolina WIC Program can be found at www.nutritionnc.com.

In addition to the WIC Program federal regulations (<http://www.fns.usda.gov/wic/wic-laws-and-regulations>) program activities are governed by rules outlined in the **North Carolina**

Administrative Code (NCAC), Title 10A Health and Human Services, Chapter 43, Subchapter D. The NCAC can be accessed online at <http://www.oah.state.nc.us/rules/> At this website, select **Administrative Code Online** to access the NCAC Table of Contents. Once at the NCAC Table of Contents, complete the fields at the top of the web page as noted below and click “Look Up”

10A	NCAC	43		Look-Up
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No Smoking Policy In Local Agency Facilities

To receive WIC administrative funds, local agencies and WIC clinics must have an announced public policy that prohibits smoking. This policy applies to any space where staff conducts WIC activities including accepting WIC applications, certifying participants, and issuing food instruments.

This prohibition against smoking applies only to those times when the WIC Program is actually operating. Satellite operations, such as church basements or community health centers that offer WIC services only once or twice a week, are not required to announce and implement the non-smoking policy when the WIC Program is not operating.

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Program Policies and Procedures

The North Carolina policies and procedures are described in writing in the WIC Program Manual. All staff working with the WIC Program must have ready access to the WIC Program manual.

■ **Distribution Of The WIC Program Manual**

Each Local WIC Program receives at least one copy of the WIC Program Manual and may request additional copies. The Local WIC Director is responsible for:

- ▶ making staff aware of the manual's contents,
- ▶ assuring that all copies of WIC Program Manuals in the local agency are updated when manual revisions are received, and
- ▶ providing staff with ready access to a program manual at all times.

■ **Updating Program Policy**

The Nutrition Services Branch periodically issues a numbered memorandum to reflect changes in federal and state regulations, rules, and/or policies and procedures.

Numbered memos contain policy changes which may be short-term solutions to temporary challenges or permanent policy changes such as a WIC Program Manual revision. Staff should maintain a log of numbered policy memos and file the policy memos so they can be easily retrieved. A sample numbered memos log is found in Attachment 1.

Manual revisions contain changes/clarifications which become part of the North Carolina WIC Program Manual. When staff receives a manual revision, they should follow the guidance in the correspondence for inserting the revision into the manual as well as for reviewing, distributing, and implementing changes in policies and procedures.

■ **Local Agency Policies and Procedures**

At times, a Local Agency must develop a written policy and procedure specific to the agency. Required areas within the WIC Program where an agency must have a written policy and procedure on file are listed in the "Table of Contents" for each chapter within the NC WIC Program Manual.

Staff is encouraged to develop the written policies and procedures using a format consistent with that used by other programs within the agency, to have the written policies and procedures signed and dated by the WIC Director (and any other staff per agency protocol), and to review policies and procedures at least every two years and update as needed.

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Staff Conflict of Interest

To preserve the integrity of the certification and food benefit issuance processes and to minimize the potential for staff fraud and program abuse, federal regulations require the implementation of policies and procedures that prevent conflict of interest or the appearance of conflict by local agency staff. Refer to Chapter 8 for information on providing food benefits issuance.

- **Certifying and Issuing Food Benefits to Self, Relatives or Close Friends.** To prevent the appearance of conflict of interest, local agency staff must not participate in any component of the certification process or food benefits issuance to herself/himself, relatives, or close friends.
 - *Relatives* include spouse, parents, children, grandchildren, grandparents, brothers, sisters, aunts, uncles, nieces, nephews, first cousins, stepparents, stepchildren, stepbrothers, and stepsisters by blood or marriage.
 - *Close friends* cannot be defined in a way that fits every situation; therefore, local agencies have authority to determine if a WIC applicant or participant is a close friend of a local agency WIC staff.

WIC staff who is scheduled or who has a relative or close friend scheduled for a certification or an appointment that includes food instrument issuance shall notify the WIC Director or clinic supervisor, so that arrangements can be made for other staff persons to certify and issue food instruments.

- **Certifying and Issuing Food Benefits by the Same Staff Person**

- **Separation of duties.** There must be a separation of duties among local agency staff so that the same person does not complete both income eligibility determination and medical or nutritional risk eligibility determination for the same participant. It is acceptable however, for one staff member to conduct part of the certification (i.e., determine nutrition eligibility) if a different staff member determines income eligibility; either staff member may issue food benefits in this situation.
- **When separation of duties is not possible due to limited staff.** Sometimes, separation of duties is not possible because only one employee is available to complete both income eligibility determination and medical or nutritional risk eligibility. Each local agency must have a written policy that describes how the local agency ensures separation of duties and that addresses strategies implemented when separation of duties is not possible. The local agency policy must make it clear that the guidelines below are followed:
 - Staff completing the certification when separation of duties is not achieved must complete the first five columns of the Separation of Duties Log (Attachment 2). The log must be retained in consecutive order by date.

- The local agency will designate staff other than the certifier (e.g., local agency WIC Director, Health Director, or designee) to review selected certification records (see below) for which separation of duties was not achieved.
 - Using the last five columns on the Separation of Duties Log, designated staff will conduct a review of all non-breastfeeding infant certification records and at least 20 percent of the remaining certification records for which separation of duties was not achieved. This review must occur within 14 calendar days of the certification.
 - The completed Separation of Duties Log must be filed at the local agency in a secure and retrievable manner, and shall be made available for review during state agency monitoring events and local agency self-assessments.
 - The Separation of Duties Log must be retained in consecutive order by date.
 - The local agency WIC Director or designee must contact the agency's Regional Nutrition Consultant immediately if the local agency review of the Separation of Duties Log suggests irregularities in WIC certification activity.
- **WIC Staff and WIC Vendors.** To ensure there is no appearance of conflict of interest regarding the relationship of local agency staff and WIC Vendors, the following policies must be followed.
- Local agency staff whose salary is paid in whole or any part by WIC Program funds are prohibited from having financial ownership in any authorized WIC Vendor.
 - Local agency staff whose salary is paid in whole or any part by WIC Program funds shall not be employed by, or handle, transact, deposit, or store WIC food instruments or cash-value vouchers for, a WIC vendor in the same county served by the local WIC Program. Likewise, local agency WIC staff must not have a spouse, child, or parent who is employed by, and handles, transacts, deposits, or stores WIC food instruments or cash-value vouchers for a WIC vendor in the same county served by the local WIC Program.

Program Materials Available From The Nutrition Services Branch

The Nutrition Services Branch (NSB) stocks a wide variety of materials used by Local Agency staff for WIC Program activities including breastfeeding education and support, program outreach, nutrition education, and vendor management.

A complete list of available materials can be found on the Nutrition Services Branch Requisition Form (DHHS 2507). The requisition form can be downloaded from the NSB website www.nutritionnc.com under local agency resources.

■ **Ordering Materials**

To order materials from the NSB, local agencies should use the NSB Requisition Form (DHHS 2507). Staff should complete the form and mail or fax it to: Nutrition Services Branch, 1914 Mail Service Center, Raleigh, NC 27699-1914; fax: 919-870-4818.

When ordering materials, local agencies are requested to:

- ▶ coordinate orders with other staff in the agency who use NSB materials;
- ▶ submit no more than one order a month to help with NSB efficiency in serving all agencies submitting orders; and
- ▶ order no more than a 3-month supply and to not stockpile materials.

■ **Receiving Materials**

The Nutrition Services Branch will fill an order in its entirety and ship requested materials within two-three (2-3) weeks of receiving a requisition form with the following exceptions.

- ▶ **Materials in Limited Supply.** When an item(s) is in limited supply, the NSB will ship only a portion of the quantity ordered. Your agency will receive notification that NSB has a low stock of that item, and the difference will be shipped when the stock of that item(s) is replenished.
- ▶ **Materials on Back-Order.** When an item(s) is temporarily out-of-stock, the NSB will provide notification to the agency that the item is on back-order. The item does not need to be re-ordered; the NSB will keep the agency's requisition on file and fill as per the original request when the item is re-stocked.

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Instructions for Completing Separation of Duties Log

For the certifier:

1. When separation of duties is not possible, complete the first five columns (1 through 5) on the date that the certification occurs.
2. Enter the date of certification, Crossroads participant ID number, and participant category.
3. Answer the question regarding whether the participant is a non-breastfeeding infant (The policy memorandum does not define non-breastfed infant. For the post record review requirement, all food packages containing infant formula must be reviewed).
4. Sign in the staff name column.

For the reviewer:

1. Within 14 days of the certification date, the designated reviewer will conduct a post review of all non-breastfeeding infants' certification records and at least 20 percent of the remaining certification records by completing the remaining five columns (6 through 10).
2. Log into Crossroads and navigate to Income Information under Certification quick links. Expand Income History and review Selected Row Details for the date of the certification being reviewed. Determine if income eligibility was determined appropriately by checking for verification details of adjunctive eligibility; identifying the source, proof, frequency, amount, and duration if not adjunctively eligible; viewing the scanned affidavit if no proof of income exists; or viewing the reason for zero income if zero income was documented. Assess for unexpected or irregular patterns among the certification records reviewed, such as frequent use of zero income or frequent round or repeated numbers in income amounts. Indicate yes or no based on whether income appears to be determined appropriately. (See the WIC Program Manual, Chapter 6B and Attachment 1 for more information.)
3. Navigate to the Care Plan Summary under Care Plan quick links. Expand the care plan for the participant's record being reviewed. View the assigned risk codes for the certification being reviewed and determine if they are valid. Document findings on the log.
4. Navigate to the Care Plan Detail under Care Plan quick links. Expand the care plan for the participant's record being reviewed and determine if the correct food package was prescribed by examining the current food prescription. Determine if the prescription consistent with participant category and documentation in the nutrition assessment. Document findings on the log.
5. Sign in the reviewer name column, and enter the date the record was reviewed in the date column.
6. If the reviewer answered no to any questions, notify the agency's Regional Nutrition Consultant immediately or no later than within one business day of identification.