| **CT WIC Staff Orientation Competency Areas** | **Meets Competencies When…** | **Initial Review**  Date | **Sign-off**  **Supervisor**  Initials | **Annual Review**  Date | **Sign-off**  **Supervisor**  Initials | **As needed**  Date | **Sign-off**  **Supervisor**  Initials |
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| **Complete within 30 days**  **(prior to providing direct participant services)** |  |  |  |  |  |  |  |
| **Customer Service**   * View the [CT Exceptional Client Services](https://www.train.org/connecticut/course/1087843/) * Review reflection questions * Discuss with Supervisor/Mentor * Print certificate of completion for employee file   Watch [Empathy-Stand in Someone Else’s Shoes](https://www.youtube.com/watch?v=cDDWvj_q-o8&t=12s)  [Brené Brown on Empathy vs Sympathy](https://brenebrown.com/videos/rsa-short-empathy/) | Understands and demonstrates excellent customer service skills.  **WIC staff:**   * Uses good interpersonal skills (3-Step Counseling Strategies, Connect before content build rapport). Is polite and has a customer-friendly manner (deals effectively with upset or emotional participants). * Is sympathetic to participant’s challenges/interests and language. * Listens actively, doesn’t interrupt, and limits use of jargon (Breastfeeding Peer Counseling Service Schedule etc.). * Effectively communicates necessary information regarding peer counseling appointments. * Efficient management of caseload.   Establishes consistent use of local agency appointment policy, procedures for missed appointments, has extended hours to increase access to appointments and considers participant input for appointment times and method (in person, virtual, online, group class, phone).   * List 2 reasons why good customer service is important. * Rewrite the following statement “The other staff person was wrong! That’s not our policy!” * Think about a time when you experienced great customer service and bad customer service. Why were they so memorable and what could have made them better? * Describe the difference between sympathy and empathy. How could you rephrase a sympathetic response to be more empathetic? |  |  |  |  |  |  |
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| **WIC Program Eligibility Requirements**  State Plan Policy  **200 Certification** | States four components of WIC Program Eligibility and can list the noted exceptions to reduce participant barriers to Program access.   * How would you explain the WIC eligibility components to a potential participant? To a health professional or community partner?   As Breastfeeding Peer Counselor (BFPC) why is it important for participants and WIC partners to be clear about WIC eligibility criteria?   * How does WIC differ from other nutrition assistance programs? * How will you explain the importance of nutrition assessment to all WIC participants? |  |  |  |  |  |  |
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| **Local Agency Phone Etiquette or Guidelines**  [Common Phone Courtesies](http://public.health.oregon.gov/HealthyPeopleFamilies/wic/Documents/orwl/pce-cl-rapport-building.pdf)  Oregon WIC | Complies with all local requirements for phone procedures. Understands the importance of excellent customer service from the beginning.   * Describe your agency’s phone policy. * List 4 common courtesies to utilize during phone calls. |  |  |  |  |  |  |
| **Civil Rights**  State Plan Policies  **104-Civil Rights**  **106-Fair Hearings**  [Civil Rights training](https://www.health.state.mn.us/training/cfh/wic/civilrights/civilrights/index.html)  Missouri WIC | Understands the expectation for serving all WIC participants respectfully and legally. Ensures participants race/ethnicity information is collected in accordance with federal regulations. Demonstrates appropriate use of the Notice of Participation Action and Fair Hearing forms.   * Describe the appropriate method for collecting race and ethnicity information of WIC participants. Why is it important that thee WIC Program collects race and ethnicity data? * Explain what the Notice of Participation Action form is used for? * What are the appropriate steps to take when a participant is claiming discrimination and where would you access this information? |  |  |  |  |  |  |
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| **VENA- Value Enhanced Nutrition Assessment**  [WIC Works VENA Learning Center](https://wicworks.fns.usda.gov/resources/value-enhanced-nutrition-assessment-vena-guidance)  [WIC Works Learning Online](https://wicworks.fns.usda.gov/resources/wic-learning-online-wlol" \o " ) | Gain overall knowledge of all aspects of VENA including rationale and background, use of critical thinking, rapport building, effective participant centered communication and education while working with participants toward positive health outcomes. See *WIC Nutrition Risk and Diet Assessment* section below.  *Throughout this document there are suggestions for completion of key areas of VENA. After completion of these areas please print a certificate of completion for employee file.* |  |  |  |  |  |  |
| **Breastfeeding Peer Counseling Core training**  USDAFNS current WIC Breastfeeding Curriculum, Breastfeeding Peer Counseling Protocol    **Complete within 60 days** | Attends, actively participates, and gains skills needed to be a WIC BF PC by completing training with the most current USDA FNS Breastfeeding Peer Counseling curriculum. Learns how to use 3-part counseling steps to effectively communicate and build rapport with participants. BF PC provides enhanced breastfeeding services to pregnant and postpartum WIC Program participants. Peers provide support, encouragement, and basic breastfeeding education to assist a participant in following her infant feeding goals.  Peers are part of the WIC team that enhance the breastfeeding education provided by WIC Nutrition staff. Peers should expect to be included on all staff emails and attend all WIC staff meetings both local and state.  Peers utilize CT WIC to read notes to ensure peer counseling participants receive continuity of care. **As appropriate**, peers participate in either in-person or virtual co-counseling sessions with Nutrition staff to learn and facilitate the feeding plan and/or provide ongoing support, consistent with the Breastfeeding Peer Counseling Protocols.  The peer knows who the local agency Designated Breastfeeding Expert (s) (DBE) is/are and the International Board-Certified Lactation Consultant (IBCLC) to yield to when necessary. BF PC understands the DBE/IBCLC provides ongoing training and holds weekly or biweekly meetings to discuss cases but is also available outside of these established timeframes for immediate yielding and case reviews as necessary. BF PC understands the Peer Counseling Service Schedule and uses this baseline to develop their daily, weekly, and monthly schedule to best serve participants assigned to their caseload. Appendix B of the Protocols: Definitions and Guidance for Documenting Breastfeeding Status in CT WIC Breastfeeding Peer Counseling Program are to be explained, reviewed, and subsequently implemented by the peer.  After completion of USDA Breastfeeding Curriculum, the BF PC will:   * Describe 3 examples of when to yield to a DBE/IBCLC * List staff members names and who to yield to if a participant has a non-breastfeeding related question and/or concerns for example, income questions, introduction to solids etc. * Give examples in the PC tracking log and/or a calendar when participant would need a Service Schedule appointment based on EDD and ADD * IBCLC/DBE observe documentation and service schedule/follow up date the BFPC enters in CT-WIC. * Provide 2 examples of when to counsel a participant for a follow up contact outside of the service schedule and observe how this would be documented in the PC tracking log and/or a calendar. * Identify where the Breastfeeding Curriculum, the Breastfeeding Peer Counseling Protocols and the CT Guidelines for Breastfeeding Promotion and Support are located. * Can define each breastfeeding status from Appendix B of the Protocols and give an example of each. |  |  |  |  |  |  |
| **Service Schedule Contacts and/or Off Service Schedule Contacts:**  **In person: Individual or Facilitated Group Discussions**  **Virtual: Individual or Facilitated Group Discussion**  **Phone: Call, Facetime, Text**  **300-03 Nutrition Education**  [**300-04 Breastfeeding Promotion and Support**](https://portal.ct.gov/-/media/Departments-and-Agencies/DPH/dph/WIC-2018/State-Plan-Policies-WIC-300/WIC-300-04-Breastfeeding-Promotion-and-Support52112.pdf)  Altarum Training Materials: Facilitated Group Discussion  [Creating Group Discussion Guides](file:///\\exec\dfs\DPH-Shared1\Public%20Health%20Initiatives\Women%20Infants%20and%20Children\Shared\Local%20Agency%20INFO\Meetings\Altarum%20Training%20Facilitated%20Group%20Discussion\October%2023,%202018\Creating_Group_Discussion_Guides.pdf)  [Group Education Tip Sheet](file:///\\exec\dfs\DPH-Shared1\Public%20Health%20Initiatives\Women%20Infants%20and%20Children\Shared\Local%20Agency%20INFO\Meetings\Altarum%20Training%20Facilitated%20Group%20Discussion\October%2023,%202018\Handout_No_2.pdf)  WICSmart Modules  **WIC Policy 300-15: On-line Education** | Understands the importance of counseling and interacting with participants in the mode they prefer and that works for both the BF PC and the participant.   * What are some key methods to utilize when providing breastfeeding support and encouragement in a group format? * What are two benefits of providing facilitated breastfeeding groups?   **Video/Virtual Call** whether individual or a facilitated group support and encouragement should occur in an environment that promotes effective communication between the WIC staff and the participant(s) and ensures that both are actively involved in the interaction.   * What is one benefit of conducting video or virtual counseling sessions? * Demonstrate how you would market video/virtual counseling session to participants?   **Phone appointments** should follow the same process as an in-person visit. Staff must meet the participant’s needs by using good active listening skills to provide participant centered services.   * What are two methods to utilize when providing breastfeeding support and encouragement over the phone and/or via text message? * What do you see as two barriers to providing education over the phone and what skills could you use to remove those barriers?   Some of your peer counseling participants may participate in alternative options for second nutrition education contacts via on-line education. Understanding WICSmart policy and procedures and remote benefit issuance processes is important as a member of the WIC staff.   * What are two benefits of WICSmart for eligible participants? * Demonstrate how you would promote WICSmart to breastfeeding peer counseling participants if asked? |  |  |  |  |  |  |
| **CT-WIC Training**  **CT-WIC User’s Manual CLINIC Module** | Demonstrates proficiency in all aspects of the WIC computer system i.e. review previous notes and maintain accurate timely method of contact, topics discussed, feeding goals etc., nd data entry.   * Supervisor/trainer will observe appropriate:   1. Documentation in Breastfeeding Notes and Support screen, both in the contact history and breastfeeding note section.   2. Observe completion of Peer Module for Service Schedule visit including update and documentation of breastfeeding status.   3. Documentation of an Alert   4. Review a nutrition note including a SOAP note |  |  |  |  |  |  |
| **WIC Nutrition Services Documentation**  State Plan Policy  **300-09 Nutrition Services Documentation** | Understands the importance of documentation for continuity of care, program accountability and quality improvement.   * Explain why the Documentation Guidance was developed. * Describe essential information that should documented to allow all members of WIC to support the breastfeeding participant’s feeding goals. |  |  |  |  |  |  |
| **VENA: Communication and Rapport**  WIC Works Sections:  [Using Active Listening in Workplace Situations](https://wicworks.fns.usda.gov/resources/wic-learning-online-wlol" \o " ) | Effectively communicates with participants and caregivers by using open-ended questions, reflective listening skills, and affirmations. Provides context for service schedule visits and/or follow-up visit in addition to anticipatory guidance and tailor’s information to participant’s relevant needs/interests. Adjusts to participant’s stage of change. Applies cultural competence techniques to improve communication and rapport.   * Identify the Stages of Change. How could you support a participant to move into the action phase? * List 2 open ended questions you would ask participant enrolled in peer counseling. Provide 2 examples of affirmations. |  |  |  |  |  |  |
| **VENA: Critical Thinking**  WIC Works Section:  [VENA- Value Enhanced Nutrition Assessment](https://wicworks.fns.usda.gov/resources/wic-learning-online-job-aids)  [VENA: Connecting the Dots Between Assessment and Intervention](https://wicworks.fns.usda.gov/resources/wic-learning-online-wlol)  **Complete within 3 months** | Demonstrates use of critical thinking skills, including accurate identification of breastfeeding concerns/questions/issues that maybe require yielding to a DBE/IBCLC to effectively meet the participant’s needs. Allow for the prioritization of breastfeeding concerns/barriers to meeting feeding goals.   * What are 3 steps that encompass critical thinking? * How would you handle a situation when a participant identifies a feeding goal that is not one you have identified as the most important? |  |  |  |  |  |  |
| **Situational CT-WIC Issues** | Triages problems in CT-WIC that are non-routine in nature. Examples include documenting in participant’s chart and not linking to the baby, realizing a food package a nutritionist issued might not be meeting participants feeding needs/goals etc.   * Identify 3 CT-WIC issues you have encountered over the past 90 days. How did you handle these issues? * Identify one key staff member that can assist you. |  |  |  |  |  |  |
| **CT Local Agency Policy and Procedure Manual** | Locates appropriate information in the procedure manual to maintain clinic flow, late policy, walk-in policy, extensions, etc.   * Where is the local agency Policy and Procedure manual? * As a Peer Counselor, how would you describe your agency’s policy on late participants or walk-ins? * Where is the Peer Counseling Protocols? |  |  |  |  |  |  |
| **Special Formula Assessment and Documentation**  State Plan Policies  **400-10 to 400-15 Food Delivery**  **400-18 Coordination between WIC and Medicaid (HUSKY) and Coordination between WIC and Private Insurance for Issuance of Special/Exempt Formulas and Medical Foods** | As a Peer Counselor it is important to understand CT WIC formula policy for both standard and special formulas plus who is aware of staff directly involved with this process and how to refer families when questions arise.   * What is CT WIC formula policy? * Where can you go for further information on special formula ordering procedures? * What would you say to a partially breastfeeding participant about what she should do if her baby needs a special formula? |  |  |  |  |  |  |
| **VENA: WIC Nutrition Risk and Diet Assessment**  State Plan Policies:  **200-08 through 200-16 Certification**  **300-09 Nutrition Services Documentation** CT WIC Documentation and i-PAUSE Guidance  **WIC PMAD (Perinatal Mood and Anxiety Disorders) Screening Protocol**  Review numbered memo 21-025 Perinatal Mental Health and Anxiety Disorder Training for WIC Staff for training requirements.  Login to [CT Train](file:///C:\Users\lonczakm\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\8BKFWZYO\Home%20-%20TRAIN%20Connecticut%20-%20an%20affiliate%20of%20the%20TRAIN%20Learning%20Network%20powered%20by%20the%20Public%20Health%20Foundation) for above PMAD modules.  <https://psictchapter.com/>  **Module 1\* (Course ID#: 1099281)**  **Module 2\* (Course ID#: 1099437)**  **Module 3 (Course ID#: 1099443)**  **Module 4\* (Course ID#: 1099445)**  **\*mandatory** | * Demonstrates knowledge of the WIC Nutrition Risk Criteria used for WIC Program eligibility. * Understand WIC identified nutritional risk criteria as appropriate in counseling as a Peer Counselor * Considers and incorporates the identified needs/interests of WIC participant into breastfeeding education and counseling.   Understand goal setting using i-PAUSE. Use to address in counseling with information, encouragement and/or support provide or with participant concerns.   * Identify why nutrition staff needs to complete a nutrition assessment * Describe how the assessment process is related to positive health outcomes. * Explain what i-PAUSE is and how you are going to utilize during counseling sessions. * List the three timeframes for PMAD screening and referral. * What is the local agency protocol for referral and follow-up for pregnant and postpartum participants that respond other than “no” on the EPDS (PMAD) screening tool? (Question #10) * Describe your role as a peer counselor in supporting a PMAD referral made by another WIC staff member. * When is it appropriate for Nutritionists to use the EPDS 3-Question screen per PMAD Protocol? |  |  |  |  |  |  |
| **Local Agency Planning**  State Plan Policy  **100-03 Program Plan** | Understands the components and contributes to the annual Local agency Plan (LAP). Can locate the WIC Outcome Objectives as set by the State agency and the local agency targets. Identifies staff’s role in reaching local agency and State goals, including breastfeeding leading to positive health outcomes.   * As a Peer Counselor what is your role in the LAP development? * Describe WIC staff role in the development and execution of strategies identified in the LAP. |  |  |  |  |  |  |
| **VENA: Positive Infant feeding Outcomes** | Help to manage building participant’s knowledge and power to achieve optimal infant feeding practices; consistently tracking participants’ progress to implement their feeding goals. Partners with participants to develop an ideal feeding plan by providing 3-step counseling which allows for connection before content allowing for participant centered goals to be achieved with the support and encouragement with their BF PC.   * List 3 strategies in partnering with participants to develop ideal infant feeding goals. * What is one way to provide continual support through the process of change? |  |  |  |  |  |  |
| **Lifecycle Nutrition**  VENA Section: Feeding Infants: Nourishing Attitudes and Techniques  [Bright Futures](https://brightfutures.aap.org/materials-and-tools/guidelines-and-pocket-guide/Pages/default.aspx)  [Ellyn Satter](https://www.ellynsatterinstitute.org/" \o " )  [My plate](https://www.myplate.gov/)  [USDA Lifecycle Nutrition](https://nal.usda.gov/fnic/lifecycle-nutrition-0)  [Kids Eat Right](https://www.eatright.org/for-kids)  [WIC Works Infant Feeding Guide](https://wicworks.fns.usda.gov/sites/default/files/media/document/infant-feeding-guide.pdf)  WIC Works Section:  [Feeding Infants: Nourishing Attitudes and Techniques](https://wicworks.fns.usda.gov/resources/wic-learning-online-wlol)  [WIC Baby Behavior](https://wicworks.fns.usda.gov/resources/wic-learning-online-wlol) | Awareness of Lifecycle nutrition, developmental readiness, age-appropriate behaviors related to infant feeding, nutrition, and physical activity.   * Why is breastfeeding an effective strategy to prevent childhood overweight and obesity? * As a Peer Counselor what are some other strategies you can support participants families to implement healthy life cycle practices to prevent obesity and other chronic diseases? |  |  |  |  |  |  |
| **VENA: Quality Assurance/Improvement** | Is knowledgeable of strategies to ensure quality assurance (QA)including staff performance reviews, bi-annual State monitoring, off year local agency self-evaluations, peer reviews, observing/coaching from DBE/IBCLC and local agency management and quarterly chart audits.   * What is CT WIC peer counseling chart audit policy? * Why are chart audits important? * What are the benefits of management conducting staff observations? * Why do chart audits alone not provide the entire picture of a WIC appointment? |  |  |  |  |  |  |
| **Complete within 6 months** |  |  |  |  |  |  |  |
| **Multicultural Competence**  Reference book: “Cultural Food Practices”  Editors: Cynthia M. Goody, PhD, MBA, RD and Lorena Drago, MS, RD, CDN, CDE  [Cultural and Linguistic Competency checklist](http://nccc.georgetown.edu/documents/Checklist%20PHC.pdf)  Georgetown University  View videos: [Part 1: Cultural Competency & Cultural Humility - YouTube](https://www.youtube.com/watch?v=6eWb7N6MJ8A)  CSUN Family Focus Resource Center  [Cultural Humility (complete) - YouTube](https://www.youtube.com/watch?v=SaSHLbS1V4w)  Vivian Chávez | Knowledgeable about cultural preferences on feeding practices/diet/health and be able to tailor a participants’ needs according to their culture. Demonstrates ability to locate relevant information on new cultural practices as needed. Review this document as you view the 2 cultural humility videos provided to the left. [Microsoft Word - Cultural Humility - video description and link 2013.docx (melanietervalon.com)](https://melanietervalon.com/wp-content/uploads/2013/08/Cultural-Humility-A-Video.pdf)   * Describe one cultures feeding/diet/health preferences and traditions, other than your own. * What is one culture you are most unfamiliar with? How do you plan on increasing your awareness and comfort level with that culture? * After viewing the 2 videos, what are your thoughts about how these concepts and approaches to interacting with families can be useful in your work in the WIC Program? |  |  |  |  |  |  |
| **Breastfeeding Support and Education**  State Plan Policies  **300-04 and 300-12 Nutrition Services**  Reviews Breastfeeding Content Sheets  <https://portal.ct.gov/DPH/WIC/Breastfeeding-Resources>  [Make It Work!](http://www.itsworthitct.org/make-it-work.html) and [Make A Plan!](http://www.itsworthitct.org/make-a-plan.html) checklists  WIC Works Section:  [Baby Behavior Basics](https://wicworks.fns.usda.gov/resources/modifying-and-extending-fit-wic-materials-start-obesity-prevention-infancy-baby-behavior)  [WIC Breastfeeding Support](https://wicbreastfeeding.fns.usda.gov/) participant webpage and staff related training materials.  View [Ready, Set, Baby](https://www.readysetbabyonline.com/) webpage as a resource for families preparing for breastfeeding.  After attending WIC State agency orientation, reviews “Breastfeeding Orientation Checklist” with local Breastfeeding Coordinator/DBE. | Understands CT WIC’s position on breastfeeding. Is aware of role in breastfeeding support and promotion including increasing comfort of breastfeeding within the clinic and encouraging exclusivity as the norm.   * What breastfeeding support is available to participants in your area? * What are some common barriers to breastfeeding success? * List the 4 stages of breastfeeding support available to WIC participants. |  |  |  |  |  |  |
| **Outreach and Referral**  State Plan Policies: **Outreach 101-04 and 101-05**  WIC Works Section:  [WIC 101](https://wicworks.fns.usda.gov/resources/wic-learning-online)  Review WIC & Head Start Better Together [Local Level Training Modules](https://www.wicheadstartbettertogether.org/new-page)  WIC & Head Start Better Together  <https://www.wicheadstartbettertogether.org/>  Reviews Training Video under Project Overview. Reviews Local agency Collaboration Sections. | Is aware of the purpose of outreach opportunities and how to make the most of them. Contributes ideas on how to reach more participants through creative outreach efforts. Provides referrals to participants to bridge any gaps in obtaining necessary healthcare and social services, adequately documents outcome and follow up of referrals.   * List programs included in the mandatory referral brochure. * What are other common referrals for WIC participants? * What do you believe are the most important community relationships to establish/maintain for the WIC Program? * List at least 2 activities local agencies can implement to support the WIC & Head Start *Better Together* Collaboration. |  |  |  |  |  |  |
| **Nutrition Services Standards**  [USDA Nutrition Services Standard](https://wicworks.fns.usda.gov/sites/default/files/media/document/wic-nutrition-services-standards_0.pdf) | Understands Nutrition Services Standards (NSS) as they encompass all aspects of Nutrition staff job responsibilities.   * Explain why the NSS is integral in providing optimal service and how you can utilize it to improve the service you provide to WIC participants. |  |  |  |  |  |  |
| **Complete within 9 months** |  |  |  |  |  |  |  |
| **Caseload Management, Scheduling and Clinic Flow**  State Plan Policy  **100-02 Local Agency Caseload Management** | Is knowledgeable of the process of determining an appropriate staffing pattern based on assigned caseload and understands how customer service can affect participant retention. Maintains an updated Peer Counseling Tracking log. Maintains service schedule and uses critical thinking to makes appropriate follow up contacts based on participants needs. Understands the agency walk-ins to improve clinic flow and to best service participants. Knowledgeable of when to alert management about clinic issues.   * What is your agency’s current caseload? Assigned caseload? Show rate? * Based on your observations thus far, list strategies that could further improve uses of your Peer Counseling tracking log for service schedule and follow up contacts. . |  |  |  |  |  |  |
| **Food Delivery System**  State Plan Policy:  **300-02 Food Package Prescription**  **400 Food Delivery Policies** | Understands the Pregnant, Breastfeeding, Postpartum and Infant food packages. Is knowledgeable of the local agencies components of the food delivery system including distribution of food benefits to participants and assurance of safeguards for WIC benefits. Is knowledgeable of protocol when a participant shares about a vendor or food benefit complaints. Aware of redemption rates of local agency.   * What participant feedback regarding their WIC shopping experiences have you received? * What strategies would you suggest build positive working relationships with local vendors? * What strategies would you suggest that could positively impact the redemption rates for your local agency? |  |  |  |  |  |  |