**SECTION:** Certification

SUBJECT: Coordination of Services-Referrals to other programs by WIC Staff

Federal Regulations: §246.7(b)(1)-(3)

**Nutrition Services Standards: 16** 

See Also: CT WIC Policy: 200-14 and 101-04

### **POLICY**

#### Referrals at Initial WIC Enrollment

Provide and review the State Selected Referrals brochure with all adult WIC applicants, parents or quardians of applicants at time of certification/enrollment.

In CT-WIC Family Info-Income Information (tab) Screen, document participation in TFA, Medicaid/HUSKY A, C, or D and the SNAP Program. All referrals must be documented in the Referral screen.

# **Targeted Referrals**

WIC local agencies shall develop a local policy that identifies the high-risk conditions requiring referral and the procedures for follow-up. At a minimum, the policy shall specify the following:

- The high-risk condition(s) requiring referral and follow-up
- Where the following information will be documented:
  - Name of participant who was referred
  - Reason for referral
  - Name of service or provider to which participant was referred
  - Name of person making the referral
  - Date of referral
  - Date of follow-up with participant or parent/caregiver
  - Outcome of referral, i.e., whether or not participant indicated they acted upon the referral
  - Any other action taken

### Procedures for follow-up, including:

- Method of follow-up to be used with participant e.g. phone, home visit, mail
- Length of time between referral and follow-up
- Personnel responsible for follow-up

The WIC local agency shall not contact the agency or provider to which a participant was referred to determine disposition of referral.

**NOTE:** Whether or not a participant has made an appointment or seen a health care provider is confidential information. The health care provider cannot release this information without the participant's consent.

# Referrals for Nicotine/Tobacco, Alcohol and Substance Use

See also: CT WIC Policy: 300-05

In addition to the State Selected Referrals brochure which contains general information, WIC local agencies shall maintain an up-to-date list of local resources for nicotine/tobacco, alcohol and substance use disorder counseling and treatment. At the time of certification, WIC local agencies shall offer a list of appropriate resources to participants certified for Nicotine and Tobacco Use (FNS code 371); Alcohol and Substance Use (FNS code 372); and/or Environmental Tobacco Smoke (ETS) (FNS code 904).

The WIC local agency shall also make the list available to the parent of a child on WIC with the FNS code 902 (Infant/Child of Primary Caregiver with Limited Ability to Making Feeding Decisions and/or Prepare Food), specifically for alcohol and/or substance use, or to any other participant or WIC family that requests the information.

The State WIC agency is aware that many communities have limited resources for the treatment of substance use, and that many of these resources are not free. In communities without any resources, the most important thing you can do for your WIC families with substance use is to ensure they have access to and receive routine, ongoing health services.

Actions required by local agency staff:

- 1. Have a conversation about the information contained in the State Selected Referral brochure about nicotine/tobacco, alcohol and substances with all women participants, parents and caretakers of infants and children at the Certification appointment.
- 2. Provide a copy of the State Selected Referral Brochure containing the information to the participant, parent, or caretaker.
- 3. Document the provision of information and referrals in the participant or child's CT-WIC record.
- 4. Provide targeted referrals to local Nicotine/Tobacco Cessation, Alcohol or Substance Use Disorder and/or Medication Assisted Treatment (MAT) when indicated.

# Referrals after Initial WIC Enrollment or for Ineligible Applicants

After initial enrollment refer as appropriate all WIC participants to the Supplemental Nutrition Assistance Program (SNAP), Temporary Family Assistance (TFA), Medicaid/HUSKY, Healthy Start, Child support enforcement and Expanded Food and Nutrition Education (EFNEP) programs.

Make targeted referrals, such as to the Children and Youth with Special Health Care Needs (CYSHCN) and Birth-to-Three programs, as needed. Provide information about other potential sources of local food assistance to WIC applicants who are found ineligible or who are placed on a waiting list.

Provide a local community resource list to applicants and participants to include description of services, addresses and telephone numbers of local Supplemental Nutrition Assistance program, HUSKY A/Medicaid, and Child Support Enforcement offices and other potential sources of assistance.

#### **Referral Guidelines**

Providing, documenting, and following up on referrals is the responsibility of all members of the WIC local agency staff. However, as outlined below, some types of referrals fit better during certain times in the certification process or WIC agency visit. Also outlined below are general expectations regarding referrals based on specific local agency positions.

- At the time of first enrollment on WIC or an out of state transfer, all applicants must be asked how she/he was referred to WIC and document in the Referral screen.
- During the certification process to determine category, residency, identity and income
  eligibility WIC staff will determine whether the applicant/participant receives HUSKY A, C or D,
  Supplemental Nutrition Assistance Program, and/or Temporary Family Assistance. If the
  individual or family does not currently receive one or more of these benefits staff should make
  appropriate referrals by reviewing the Selected Referrals brochure. Agencies should also
  provide local contacts for Temporary Family Assistance if appropriate.
- It is expected that WIC staff review the State Selected Referrals brochure with all participants enrolling in WIC for the first time. WIC local agencies can best decide how to meet this expectation. However, this brochure may be more appropriate for program assistants or clerks to review during eligibility determination or to review during an orientation group.
  - The State WIC agency understands the expressed concerns of WIC local agency staff that certain referrals may not be appropriate for everyone applying for WIC benefits such as undocumented immigrants or teens. It is important to remember that WIC is federally mandated to provide referral information to all WIC applicants enrolling in the program. Staff should clarify with applicants that the programs listed in the State Selected Referrals brochure are the most common programs our WIC families find helpful and may qualify for, however, reiterate each program has its own eligibility requirements. WIC's role for providing this brochure is primarily informational, however, if a participant has questions or returns and reports difficulty accessing programs listed in the brochure WIC staff should follow-up as needed.
- Additional referrals appropriate for program assistants or clerks to provide during
  precertification or eligibility determination based on conversation with applicants/participants
  include Energy Assistance, Food Pantry and/or other social services programs as directed by
  local agency policies. If other referrals are made, they must be documented in the Referrals
  screen and if necessary, include additional details in the Notes and Alerts screen to ensure
  nutrition staff is aware of the referral and can document details as appropriate in the Nutrition
  Education screen.

- During the nutrition assessment process, nutritionists or nutrition aides may discover additional needs and make appropriate referrals to Birth to Three, Child Guidance, mental health services, DCF, dental care and domestic violence programs. Nutritionists should continue to document referrals in the Referrals screen and provide additional details in the Nutrition Education screen as appropriate.
- At the next WIC re-certification or mid-certification or second contact (individual follow-up), a
  nutrition aide, and/or nutritionist will follow up as to the status of the referral(s), progress
  made, result, and any additional action that needs to be taken. All updates should be
  documented.