

Nutrition & WIC Update

KANSAS NUTRITION AND WIC SERVICES



Seward County WIC Staff Help Clients in the Store!

Tiffani Krause, RN, Seward County

In October and November 2018 we started helping clients at the store. Every week staff go to the store to help clients shop with eWIC. We bring the WICShopper trifold and show people how to use the app. We also give the handout, How to Become a WIC Client. We are staying in the

stores for two hours at a time. The morning times were very slow in the stores, so we changed our times in November to the afternoon. Through this experience we are learning more about what our clients go through, and it helps us to better help our clients. We are evaluating the success of this assistance and if we feel it is good for client retention, we will continue with the services in 2019.

We started offering this service after hearing lots of questions from clients about shopping and about what foods they can buy. There is some confusion since the change to EBT. Clients were also losing cards frequently as well as calling about how to reset PIN numbers. We thought it would be a good idea to meet the clients where they are shopping and help. We put up signs about where we will be to help shop or answer questions.

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Sherman County Coffective Community Outreach

Rhea Daise, Sherman County

For our community outreach action plan for Coffective, we met with nursing students at a local college. We used slides 16 – 47 of the Coffective Tools Power Point and highlighted the basic points. It went well, and they had some good questions. We gave them the Checklist and Get Ready to Fall in Love handouts. It only took us around 45 minutes and I hope they walked away feeling they have some information to use in their career or when they become parents.



Kansas WIC Staff Take on New Orleans!

The NWA 2018 Nutrition Education & Breastfeeding Promotion Conference and Exhibits was held September 25-27, 2018 in New Orleans, Louisiana. Over 20 Kansas WIC state and local agency staff attended this amazing conference. If you have never attended before, you might consider including this in your 2020 FFY budget.



NWA Conference Provided Ideas to Make WIC Easier for Clients

Dee M Ramsey, BFPC/Clerk, Dickinson County

I was fortunate to attend the National WIC Association Nutrition Education and Breastfeeding Promotion Conference in New Orleans, LA. The number of sessions available to attend was varied and each offered important tools to improve my skills as a WIC staff member.

With WIC participation numbers dropping nationwide, making WIC easier was a large focus of the conference with several breakout sessions sharing information on how agencies implement technology into their WIC appointments and marketing. Social media has exploded with opportunities and many agencies have implemented one or more ways of getting information to WIC participants. The average age of clients we work with is 19 - 29 and they have grown up with the internet. The millennial generation we work with have frequent phone number changes, but they always stay connected to the various platforms available. It is what they know and are comfortable with. Life decisions are often done through text or messaging.

Some of the changes made in agencies are allowing pictures of proofs for certifications, for example: a picture of their utility bill as proof of residency. Employees now receive electronic notifications of deposits for their paychecks. Allowing a client to screenshot or take pictures of these items to present at check-in, allows for a smoother and quicker process. A picture or screenshot will not interfere with data use as some clients do not have large data plans or can only operate on WiFi. Emailing proofs is also an option and encouraging clients to use these avenues could make appointments less time taking for the individual.

Using electronics to communicate with clients has also grown with time. Reminding a client via text what they need to bring to an appointment, or what to expect is useful in reducing thirty day follow-up appointments and/or missed appointments. Exploring delivery options for nutrition education such as videos and/or interactive displays has proven effective versus handouts. Our clients are streamlining their way of life and view paper handouts as heavy reading or homework.

WIC needs creativity and growth right now. Nutrition sets the foundation for how children's bodies develop and brains grow. Gaps in development at ages 0-5 still may show up in college years as decreased cognition, language, academic skills and attention problems. Meal or snack time is a learning time and can encompass many words and skills. Spatial recognition and fine motor skills such as using fingers to pick up small bites, instead of grasping with the entire hand; recognizing how far away something is and what amount of strength it takes to get it closer are monumental milestones.



Raising Dad's WIC Voice: Ideas for Fostering a Father-Friendly WIC Program

Jennifer Jamison, RD, Wyandotte County

At the 2018 NWA Nutrition and Breastfeeding Promotion Conference, I was able to attend a lecture focusing on incorporating dads into the WIC program. This lecture was outstanding. I had never thought about including the dad in a counseling session during an appointment with a client. The dads in our clinic seem uninterested in what the topic might be and they are usually focusing on other things. But, what I learned was dads really do want to be included in the counseling session. The panel was made up of four men who are involved with the WIC program from various states. One presenter named Sharmain Harris was from Kenosha, Wisconsin. He shared with us his experiences as a WIC father and the start-up of a program titled, Dedicated Dads Program. Sharmain reaches out to WIC fathers in their clinic and tries to get them involved with the WIC Program through appointments and other various activities. After attending the conference, I now try to involve the dads that come in by asking them questions and not just the mom. I will ask the dads how they feel about the way their children are eating. To my surprise, most dads are very talkative, and I sense that they are happy that I included them.

Mealtime Blessings

Brenda Stoneberger, RD, LD, Southeastern Kansas

First off, I would like to thank KDHE for enabling me to attend this conference. One of the most valuable sessions I attended at the conference was the Mealtime Blessings breakout session presented by Katrina Lewis of the Chickasaw Nation in Oklahoma.

Imagine this: a group of parents were asked; "If you could have anyone at the dinner table to share a meal with...who would it be?" Some responses included super stars from the entertainment industry like actors, singers, models; world leaders, etc. Next, we see the children of this same group being asked the same question. Did the children list off the same group of influential and famous people like their parents listed? No, it was much different. The kids unanimously stated they would want to have a dinner with their own parents. It was quite touching and there was probably not a dry eye in the room.

Family mealtime is essential for the health and well-being of children. Some benefits include: less likely to be obese as an adult, less likely to have type II diabetes, more likely to be successful academically, more likely to go to college, less likely to be depressed and to be a victim of bullying. It's not all about the food being consumed at the meal but about the communication that is occurring during the mealtime. Talk about how the child's day was; this may be especially helpful for those children who don't want to sit down to eat with the rest of the family. Engage them in meaningful conversation about them and their day. Keep in mind, this does not have to occur only at the evening dinnertime meal. If your family's schedule is more conducive to sitting down over a breakfast or a lunch, do what works for you! It is important to try to eat together 5-7 times per week. Start out gradually and hopefully you can gain momentum as you are seeing the positive results from coming together at mealtime.



Nighttime Sleep Duration and Sleep Behaviors among Toddlers from Low-Income Families

Shortened sleep duration is associated with poor health and obesity among young children. Little is known about relationships among nighttime sleep duration, sleep behaviors and obesogenic behaviors/obesity among toddlers. A study published in the *Childhood Obesity Journal* attempts to characterize sleep behaviors/duration and examines relationships with obesogenic behaviors/obesity among toddlers from low-income families.



Researchers recruited mothers of toddlers (ages 12–32 months) from urban and suburban sites serving low-income families. The mothers provided demographic information and completed the Brief Infant Sleep Questionnaire. A 6-item Toddler Sleep Behavior Scale was derived from the information with higher scores reflecting the use of more of the recommended behaviors. Toddler weight and length were measured during the study. Obesity was defined as ≥ 95 th percentile of weight-for-length. Measures of obesogenic behaviors including physical activity and diet quality were also assessed. The study used a variety of models to examine associations between nighttime sleep behaviors/duration with obesogenic behaviors/obesity.

The study included 240 toddlers (mean age = 20.2 months), 55% male, 69% black, 59% urban. The toddlers spent an average of 55.4 minutes per day in moderate to vigorous physical activity. The mean Healthy Eating Index score was 55.4. Thirteen percent were obese. The mean sleep duration was 9.1 hours, with 35% demonstrating 5–6 of the recommended sleep behaviors. The study found that moderate to vigorous physical activity was positively related to sleep duration; obese toddlers had a shorter nighttime sleep duration than healthy weight toddlers. The researchers concluded that toddlers with a shorter nighttime sleep duration are at higher risk for obesity and inactivity. Interventions to promote healthy sleep behaviors among toddlers from low-income families may improve nighttime sleep duration and reduce obesogenic behaviors/obesity.

Hager Erin R., Calamaro Christina J., Bentley Lauren M., Hurley Kristen M., Wang Yan, and Black Maureen M.. *Childhood Obesity*. October 2016, 12(5): 392-400. <https://doi.org/10.1089/>

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Notes from Nutrition Services Plans

Are you looking for a creative conversation starter about breastfeeding promotion at a fair? Here is a “share” from Haskell County’s Nutrition Services Plan. (Thank you to Kristi Kelling.)

“We had a WIC Breastfeeding promotional booth at the Haskell County fair in July, 2017. The title was “Nature Knows Breastfeeding is Best” and featured a Fisher Price barn sitting on a bed of hay that had several plastic animals that were mothers and babies standing in a nursing position.”



An idea from Harvey County Health Department is helping families apply for Medicaid and working to expedite the process. Amber Jackson, their MCH Home Visitor helps families complete the application and reviews it to make sure all information is completed and correct. She then scans and emails the application to a KanCare Outstationed Eligibility Worker. Families can indicate on the application that they want Amber to facilitate and check up on the application and answer questions on their behalf. This process has helped clients receive these benefits more quickly. Thanks Harvey County and Amber!!!

Looking for ideas to celebrate World Breastfeeding Week? Read about what Cloud County did! “With the aid of a local grant, we were able to host a breastfeeding event in August. We showed the film “Babies” on the outdoor screen at the new Broadway plaza four times that day and in the evening sponsored an event for pregnant and breastfeeding WIC participants. They were able to view the documentary, visit, and select nursing bras, cover-ups, and leggings.”

There are always new partners to seek! (From Sherman County) “This year we have added a “PALS coach”. PALS stands for Play and Learning Strategies. The coach attends our WIC clinics for recruitment and we are able to refer new mommies and PG also. A PALS session includes showing them how to interact and play with their babies.”



Notes from the Nutrition Services Plans (continued)

Reno WIC continues to collaborate with the newly formed local perinatal coalition, Bump to Baby. This coalition is responsible for presenting the prenatal classes, utilizing the March of Dimes *Becoming a Mom* curriculum, as well as community baby showers. WIC is well represented at both events. The WIC Coordinator presents the Healthy Nutrition session for the prenatal classes, and showcases WIC services, breastfeeding support, and smoking cessation information at the community baby showers.

Seward County shared several efforts in which they participate. “At Seward County Health Department, we are working more closely this year with our Maternal and Infant (M&I) Program so we can all work together on the Becoming A Mom (BAM) agenda. We have always worked with our M&I group but starting this year we have attended BAM training so we can let all moms attending BAM classes know about WIC services, as well as teach some nutrition portions and breastfeeding portions of the training.”

Seward County has also been very involved in the Frontier Breastfeeding Coalition and working with all the agencies involved in the Coalition in SW Kansas. They attend the meetings quarterly - at least one person from their clinic - and work on giving the same information to all clients and patients.

Seward County Community College continues to be one of their major collaborators in the community. Seward County WIC works with the nursing students in the spring and fall semesters and the students teach classes to WIC clients - approximately 18 classes a year. The nursing students also observe in the clinic the day of the class and they have had great success with this program. This is their 12th year working with the nursing students in WIC.

The WIC Immunization program is another program of which Seward County WIC is very proud. This year the vaccination rate for all WIC children has been approximately 95%. This program has been with them for about 9 years and they show a great success rate of vaccinations.

“When I came into the New Employee Breastfeeding Training I honestly thought, why do I need breastfeeding training? I mean, I’m only a clerk, right? But now I’m very glad I came and I actually feel like I can make a difference with new moms and share some of my knowledge. Thank you!”

-Wichita 2017 New Employee Breastfeeding Training participant



Funding Local Agency Budgets

Dave Thomason, Kansas WIC Director



You've probably noticed that WIC's funding model is different than the Aid -to-Local funding. Aid-to-Local funding is distributed through grants. With Aid-to-Local grants, local agencies apply for a grant or several different grants and then funds are awarded. The amount awarded does not change over the time frame of the grant and is paid out in various ways depending on the grant. Additionally, some grants require matching funds.

WIC's funding model uses an estimated allocation through a service contract with a budget. WIC reimburses local agencies on a monthly basis for actual expenditures that are submitted on an affidavit. A WIC budget is submitted prior to the coming year's contracts and reflects what the local agency believes will be spent in the upcoming FFY (federal fiscal year).

In 2018, the State WIC office participated in a USDA Financial Management Evaluation. USDA staff stressed that the State Agency must do a better job at estimating and requesting federal funds. For several years Local Agency's budgets and allocations have exceeded actual expenditures. In FFY 2018 most local agencies received additional funds above their previous year's total expenditures and ended up not using the funds. Accurate estimates start with realistic budgets. Local Agency budgets and requested funds should reflect realistic program decisions and expenditure estimates. The local agency may have plans that have the potential to increase expenditures for the upcoming year, such as filling a currently vacant position. It is appropriate to build expenses such as this into the budget. However, budgets should not include amounts for expenditures that are not planned and anticipated.

Prior to local agencies receiving an annual allocation of funds, state staff review each budget and compare the budget to the agency's past and current reimbursement levels. If an agency submits a budget that is much higher than the previous and current reimbursement levels, clarifying justification statements are required. A discussion between state and local agency staff about the budget and justification statements will result in a final allocation amount. When the process has been completed, local agencies receive their contracts that show what their allocation will be for the coming FFY.

At any time during the year, a local agency may submit a revised budget. The revised budget is reviewed, and if appropriate and funds are available, the initial allocation is adjusted. At mid-year every local agency's expenditures are reviewed to determine if they are on track to spend all, spend under, or spend over their allocation and why. During this review, a local agency's allocation may be adjusted upward or downward to meet the needs of the entire state.

Because local agency costs make up approximately 90% of the state's Nutrition Services and Administration (NSA) funds, we appreciate everyone's efforts to accurately estimate yearly expenditures. Note: funds paid to vendors to cover WIC clients' food purchases are tracked separately.



Funding Local Agency Budgets (continued)

In FFY2017 22 of the 64 contracted agencies came within 5% of spending all of their allocation. These 22 agencies did a great job on determining what their budget needs were for FFY2017. Meanwhile, the remaining 42 contracted agencies were not as successful. Fifteen agencies actually underspent their budget and allocation by 20% or higher. **The total of unspent funds by all LAs in FFY2017 was \$800,000.**

WIC is a discretionary program with limited funds. The Financial Management Evaluation conducted by the USDA called upon the Kansas WIC program to improve estimates of expenditures and reflect these estimates in future requests for funding for the program. KDHE staff are committed to working together with local agency staff and stand ready to discuss with you any ideas to improve the budgeting process. Feel free to contact me at 785-296-1324 or david.thomason@ks.gov.

Number of WIC Local Agency Contracts in FFY2017	Percent of Unspent Funds
22	5% or less
15	6% - 10%
6	11% - 15%
6	16%- 19%
15	20% or higher
64	Total KS WIC Contracts

Increasing Caseload by Calling All “Enrolled But Not Participating Clients”

Heather Peterson, RD, LD, Reno County WIC Coordinator

Reno WIC caseload, like almost every agency in the state, has been steadily declining. We are constantly trying to come up with ways to reach out to new clients by forming partnerships with agencies that work with eligible families, such as teaching Becoming a Mom, being interviewed by radio and newspapers and talking about WIC everywhere we go. How could we reach the families already enrolled in WIC, but not participating? I stumbled across the “Enrolled but not Participating Prior to Month End” report in KWIC. I would like to say our report was 5 short pages, but it was >25 pages!

I gave each staff member five pages and instructions to prioritize pregnant women, then infants, then children and women. It was a crazy couple of weeks as all staff began calling and scheduling appointments for clients. One lesson learned - give out only one sheet per week to divide the appointments out over a month. The clerks were inundated with NE+/CP appointments for about two weeks. This idea worked well because some families had lost our contact information, some had moved, some requested to be terminated from WIC services due to new financial situations, and some didn't realize they still qualified. The vast majority were excited to hear from us and to come in to obtain new benefits. For that month, our active & participating increased by almost 100. While many of them dropped off again, we were able to retain at least 40%. We have not run this report since eWIC went live; there were too many other changes to manage in FFY 2018. We plan to run this report and call again in 2019. I anticipate this will be something we do once a quarter.