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Celebrating A Dazzling Decade!

By Mandy Caid-Jefferson, MS, RD/LD
Education & Training Specialist

Are you ready to celebrate? WIC Services will be hosting the 10th Anniversary of the Annual Oklahoma Nutrition/WIC Conference! The theme for this diamond anniversary is *Celebrating a Dazzling Decade*. The conference is scheduled for February 2-4, 2011, at the Embassy Suites in Norman, Oklahoma.

You are sure to be *dazzled* by the spectacular lineup of speakers! Zonya Foco will educate, motivate, and humor nutrition educators with her presentation, *How to Make Nutrition Exciting, Fun & Inspirational*. Susan Miller will inspire us to work in our *Positive Zones*. Also, you will have the honor of hearing from Oklahoma's Champion for Nutrition Education, Mayor Mick Cornett. In addition, our long time friend, Regie Thornton, will be here to help us celebrate this dazzling event!

The conference will kick-off on Wednesday, February 2, 2011 at 11:00 a.m. with the **Laura K. Savage Creativity in Nutrition Education** poster setup and nutrition education sessions. The winner of the poster contest and the winner of the lesson plan contest will be eligible to attend the 2011 NWA Conference in Portland, Oregon.

Thursday, February 3rd, is a very special day! *A Dazzling New Development in Nutrition Education* will be unveiled by Stephine Pichan and the State WIC staff.

Thursday is also designated as *Denim and Diamonds Day*. Be creative in wearing your denim and lots of dazzling diamonds!



Conference and hotel registration can be found online at www.ok.gov/wic under *What's New* and *Special Meetings*. If you have any questions, please contact Mandy Caid-Jefferson at 1-888-655-2942 or (405)-271-4676 Extension 50035.

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Breastfeeding Business

By Rosanne Smith, RD/LD, IBCLC
Breastfeeding Education Coordinator

WIC's Lactation Support Keeps on Growing!

Congratulations to Angie Johnson, Amy Mauldin, and Carla Robertson for passing the 2010 *International Board of Lactation Consultant Examiners (IBLCE)* exam. They have earned the credential of International Board Certified Lactation Consultants (IBCLCs). **Angie Johnson** is a Registered Dietitian who provides nutrition services in Seminole, Pottawatomie, Hughes and Okfuskee Counties. **Amy Mauldin** is a Registered Dietitian and a WIC Program Consultant who provides technical assistance to WIC clinic staff in 14 counties. **Carla Robertson** is a WIC Peer Counselor and provides breastfeeding support to WIC participants in LeFlore County. These three ladies were part of over 4,000 candidates who took the exam across 5 continents, in 40 countries and in 14 languages. They join the other 20 IBCLCs who are currently employed with OSDH and/or WIC. There are now approximately 120 IBCLCs now serving Oklahoma families.



Amy Mauldin, RD/LD, IBCLC



Angie Johnson, RD/LD, IBCLC



Carla Robertson, IBCLC

What a great accomplishment ladies! Way to go!

Please note:

The IBLCE exam eligibility requirements are changing in 2012. Here is the link to the new requirements that will be effective for the 2012 exam:

[http://americas.iblce.org/announcing-future-requirements.](http://americas.iblce.org/announcing-future-requirements)

Breastfeeding Business

By Krista Lantz, MS, RD/LD

Relaying the Message “Breastfeeding and the 1st Month of Life”

Do you ever struggle with how to respond to breastfeeding moms when they ask for formula during the first month? WIC knows there are situations that are tough: an infant on special formula, a premature baby, or a mom already supplementing. Per WIC policy, breastfeeding infants may only be issued supplemental formula after the 1st month of life. This policy was designed to strengthen WIC's breastfeeding promotion efforts and provide additional incentives to assist mothers in making the decision to initiate and continue to breastfeed. As breastfeeding advocates, WIC is a model to the community, hospitals, and businesses. Waiting to issue formula until the first month of life sends a strong message, “WIC believes in your ability to breastfeed and you CAN breastfeed.” Empowering and building a mother's confidence is vital to her success. With supportive staff and a positive approach, participants can leave the clinic feeling they have been helped. Even with a strong breastfeeding message there may be times where supplemental formula is needed during the first month. Making moms aware of the policy allows them to be prepared to purchase formula in the first month if needed.

A telephone survey was conducted by State WIC staff to learn more about how the policy is perceived and how WIC can better support the message. Based on the survey, WIC developed five tips for relaying this message.

1. Get WIC staff on board

- WIC staff needs to support the policy and understand the importance of exclusive breastfeeding during the first 4-6 weeks while milk supply is being established.
- Staff giving the same response helps avoid conflicting and confusing messages.

2. Relay the message to moms during the first visit and thereafter

- Educate prenatally so moms can be prepared.
- Relay the message to mom at her pregnancy certification appointment and continue to remind her at other visits. Repetition is the key.

3. Explain the purpose and sell the message

- Emphasize the importance of exclusive breastfeeding in the first month to help protect the baby and build mom's milk supply.
- Let moms know that we are here to support their breastfeeding efforts and help get them off to a great start so they can establish a healthy milk supply.

Breastfeeding Business *continued...*

- Explain that exclusive breastfeeding mothers will receive an enhanced food package and infants will receive more variety and greater amounts of baby food beginning at 6 months of age.
- Display and show the food package poster. Highlight the larger food packages given to breastfeeding mothers and infants. Show mom what is in it for her.

4. Focus on the positive

- “It’s great you are breastfeeding, good job! I know you are working hard to provide breastmilk for your baby.”
- “We want to support you while you breastfeed. It takes 4-6 weeks for your milk supply to be fully established. WIC provides formula if needed after the 1st month of your baby’s life.”
- “We want to help you reach your breastfeeding goals.”
- “WIC has some great new food packages for breastfeeding moms! Let me tell you more about them today!”
- “WIC has peer counselors, WIC moms just like you, who you can talk to about making breastfeeding fit into your life.”

5. Provide support

- Discuss breastfeeding concerns with mom and make appropriate referrals.
- Refer moms to the Breastfeeding Peer Counselor program, trained breastfeeding staff, Lactation Consultants, Oklahoma Breastfeeding Hotline 1-887-271-MILK (6455), and the OSDH breastfeeding website <http://bis.health.ok.gov> for support and information.

Planned Parenthood of Arkansas and Eastern Oklahoma Attends Tulsa State Fair

By *Planned Parenthood WIC Staff*

The sounds of people screaming and bells ringing are just a few things you experience at the Tulsa State Fair. For PPAEO WIC, we attended to spread the word about our clinics and to make a few other resources available to families.

Just a few days post fair, we are all still exchanging stories of our moments there. The first Sunday brought a man who approached the booth with an ear-to-ear grin studying over the WIC information. Just then his wife came up in a different kind of mood. After a few glances exchanged between the first time parents, she informed us that she was pregnant with triplets. The pamphlets and information packets proved to be much-needed advice and also prompted many questions from how WIC works to tips on getting junior to eat broccoli and carrots. On Senior Citizen Day, many of the elders came by praising WIC and stating they participated when their kids were younger and “it was a lifesaver”! Others were also excited to find out prenatal care is available in the same clinic as WIC. They received information on how and where to apply for SoonerCare (Title 19). As our days there ended, we all discovered that even though attending the fair might be costly, the helpful nutrition information from (PPAEO) WIC... is priceless.



Reasons Behind Risk Code Changes

By Nicole Dresback, RD/LD
WIC Program Consultant

After the changes in risk codes took place October 1st, several WIC CPAs have asked why certain risks were removed, such as pyloric stenosis and consumption of raw or undercooked tofu. The guidance documents discuss the reasons why new risk criteria were added but do not cover why things were removed.

Pyloric Stenosis

Pyloric stenosis was removed as a nutrition-related risk condition for infants. Pyloric stenosis is generally diagnosed soon after birth (usually within the first three weeks of life) and treated immediately with surgery and a 2-3 day hospital stay. There is no long-term nutrition complication associated with pyloric stenosis once it is treated, so this condition was removed from the list of allowable nutrition risks. However, a patient presenting in the WIC clinic with postoperative pyloric stenosis may be assigned Risk 340 for having undergone recent major surgery.¹

Raw or Undercooked Tofu

Raw or undercooked tofu was deleted from the list of potentially harmful foods based on the revision to the sixth edition of the American Academy of Pediatrics (AAP) Pediatric Nutrition Handbook.¹ Most tofu available in supermarkets is pasteurized, commercially sealed, and refrigerated. If the tofu is kept refrigerated and used within a week after opening and the storage water is changed every day or two after opening, there is little food safety risk to a healthy person from eating the product raw.²

¹ USDA WIC Policy memorandum 98-9, Revision 10 July 31, 2009

² UC Berkeley Wellness Letter, November 1999.

VENDOR NEWS

By *Mark Northcutt*
Vendor Management Specialist

Oklahoma Unified WIC Approved Food Card Update

The Oklahoma State WIC Program is pleased to announce the new updated Oklahoma Unified WIC Approved Food Card.

Please take time to note the changes that have taken place throughout the folder. New items and sizes have been added.

Please pay special attention to the shelf stable juice section for the addition of tomato & vegetable juice in the 46-48 and 64oz sizes, as well as the whole grain option section for the addition of new breads. Minimum stocking requirements have not changed. Also note the new FAQ section in the fruit & vegetable section.

Remember to dispose of any food cards with the August 2009 date located on the front page bottom line and replace with these new and improved cards.

If you have any questions, please contact Vendor Management at 405-271-4765 or toll-free at 1-888-655-2942, Extension 14765.



Policy Pointers



From the Desks of Treta Whitethorn & Persephone Starks

Welcome Pam!!!

WIC Policy welcomed Pam McKenna onboard November 30, 2010! Pam will be working with the PHOCIS/WIC Helpdesk helping to resolve issues with:

- Unvoiding food instruments
- Issues with transfers
- Assistance with issuing WIC food instruments when it involves:
 - Changing the client's status, category, certification date, termination date, and next FI date
 - Issues with client records, why a clinic cannot input food packages, or issue FIs, why a clinic cannot certify or reinstate a participant, and why dates did not change in PHOCIS

You can reach the PHOCIS/WIC Helpdesk at (405) 271-4676 Ext. 50046 or 1(888) 655-2942 Ext. 50046

Verifying Proof of Residency

If a participant is receiving Medicaid and you have confirmed enrollment by visiting the Eligibility Verification System, this site can also be used to confirm proof of residency.

PLEASE NOTE: You will not see the participant's address. You are confirming they are in the Oklahoma Medicaid/SoonerCare Eligibility Verification System, and are therefore residents of Oklahoma. If you are a WIC location that would like to have access to the Eligibility Verification System in order to confirm enrollment and verify proof of residency, please contact Vickie Foster by phone at (405) 271-5585 Ext. 56521 or by email at VickiF@health.ok.gov.

Civil Rights and Security Awareness Trainings

Reminder: Civil Rights and Security Awareness Trainings are to be completed yearly. There is no date affiliated with the completion of training. **As long as the training is completed within a year of the previous year's training**, the requirement has been met.

Civil Rights and Security Awareness Trainings are available online and are accessible by visiting the WIC Training Link at www.ok.gov/wic. Please be sure to print off a training log to sign and date at the completion of each training.

We enjoy answering your questions! Please feel free to email WIC policy related questions to tretaw@health.ok.gov or persephone@health.ok.gov. The answer to your question may be selected for publication in an upcoming issue of *OkWIC Focus*!

This is the section of OkWIC Focus where you can receive fun activities that reveal tips on how to continue to improve Oklahoma WIC and the services you provide each participant. We hope that you find this section helpful in the continued success of your WIC clinic. If you have any questions regarding WIC Policy feel free to call the policy line at (405) 271-5623 or toll free at 1-888-OKLAWIC (1-888-655-2942).



AAP Policy and Clinical Report Update

By Josie Turner, RD/LD
WIC Program Consultant



American Academy of Pediatrics has recently released a new clinical report "Diagnosis and Prevention of Iron-Deficiency and Iron-Deficiency Anemia in Infants and Young Children (0-3 Years of Age)". This clinical report is a revision of the AAP policy "Iron Fortification of Infant Formulas" from July 1, 1999. The new report was created to help prevent iron deficiency anemia in young children including infants who are both breastfeeding and formula fed.

Exclusively Breastfed Infant

The AAP states that full term exclusively breastfed infants have enough iron stores for at least the first four months of life. Since human milk contains very little iron, it is recommended that exclusively breastfed term infants receive iron supplementation of 1mg/kg per day starting at four months of age and continued until appropriate iron-containing complementary foods have been introduced. Complementary foods may include iron-fortified cereals for infants.

Formula-fed Infant

For formula-fed infants, iron needs for the first 12 months of life can be met by a standard infant formula and the introduction of iron-containing complementary foods after 4 to 6 months of age, including iron-fortified cereals. Please note that in some cases, supplements may be necessary if the iron needs are not being met by the intake of formula and complementary foods.

For infants around six months of age consuming complementary foods, the report recommends at least 11 mg of iron per day, ideally from iron-rich foods, and then supplementing with liquid iron as needed.

Preterm Infant

Preterm infants should have 2 mg/kg of iron per day for 12 months—an amount equivalent to that found in iron-fortified formula. Preterm infants receiving only breast milk need this amount as a liquid supplement of 2mg/kg until they begin eating complementary iron-rich solid foods or are weaned to iron-fortified formula.

Children

The report recommends toddlers 1-3 years of age should have an iron intake of 7mg/day. It is best to get this amount of iron through eating red meats, cereals fortified with iron, and vegetables that contain iron. Fruits with vitamin C can help with the absorption of iron. Liquid iron supplements may be given to toddlers from 12-36 months of age. A chewable multivitamin is suitable for children older than three years.

Encourage mothers to discuss this recommendation with their health care provider in order to decide on appropriate supplementation. Please refer to the online version of this article at:

<http://aappolicy.aappublications.org/cgi/content/full/pediatrics;126/5/1040>.

If there are any questions regarding the above policy changes please refer to the above web link or feel free to call Josie Turner at 405-271-4676 ext. 50028.



FROM THE CHIEF

Prevention of Obesity: A Vision for Infants

By Terry Bryce
Chief

Let's take a look at a global issue: Obesity. Let's also look at a global strategy: Breastfeeding!

There is no doubt some regions in the world are calling obesity an epidemic. Surgeon General Regina M. Benjamin stated "today's epidemic of overweight and obesity threatens American's quality and years of healthy life" (*The Surgeon General's Vision for a Healthy and Fit Nation 2010*). Until recently, most interventions have focused on older children. Evidence continues to mount that breastfeeding is a component in the fight against obesity. The breastfeeding preventative approach may be key in reversing obesity. But wait, if there is a connection, why are there inconsistent results from studies examining the association between breastfeeding and subsequent obesity? Unavoidably, various methodological limitations and issues affect this controversial connection.

While breastfeeding for any length of time has health benefits, exclusive breastfeeding appears to have a stronger protective effect than breastfeeding combined with formula feeding. Additional research is needed to convince some officials and policy makers that breastfeeding is protective against obesity. But for today, funding and time is limited. Our vision is for greater breastfeeding duration and thus decreasing the risk of obesity.

Prevention of Obesity: A Vision for Infants

- Breastfeed exclusively for 6 months
- Feed age-appropriate nutritious foods in a responsive manner
- Allow infants to move, stretch, reach, crawl, run, play, and explore throughout their lives
- Allow infants to behave like babies

I am proud our breastfeeding rates are increasing. You are doing a great job and I hope to see even greater improvement with the recent expansion and emphasis on the Peer Counselor Program. Let's continue to focus on supporting breastfeeding in the workplace, educating mothers, and increasing professional education. Thanks again for everything you do to promote and support breastfeeding for the health of Oklahomans!

"Save the Date"

OSDH WIC Service

What's Up With WIC	January 7, 2011
Annual Oklahoma Nutrition/WIC Conference	February 2-4, 2011
What's Up with WIC	April 8, 2011
Breastfeeding Educator Course	April 20-22, 2011
11 th Annual Breastfeeding Symposium	June 3, 2011
What's Up with WIC	July 8, 2011
What's Up with WIC	October 14, 2011

PHOCIS TIPS

By Priscilla Tiger, RD/LD
WIC Program Consultant

Two of the most common calls that the PHOCIS/WIC Help Desk receives are regarding why the cert date is so far in the future and why on the PHOCIS/Risk Assessment module a certain month will not open up when the CPA is trying to assign a food package. These issues are somewhat related so I thought I would use this PHOCIS Tips article to try and explain. This is primarily an issue on women when they are coming back to the clinic to be recertified postpartum. Let me try to explain this issue to give you some understanding into why this happens.

Client Information for Group 950502507271974F00 (1 Members)

Clinic	Name	DOB	Cert Date	Term Date	NewFDDate	Months
07206	JENNIFER WOMANTEST	07-27-1974	07-21-2010	02-09-2011	01-21-2011	3

Issued Food Instruments for WomanTest, Jennifer R.

Clinic	Seq Number	First Day to Use	Last Day to Use	Package No	Item No	Issue Date	Void Code	Bank Pay Date	Reiss
07206	1023774434	12-21-2010	01-21-2011	50104	3	09-27-2010 03:33:58 PM			
07206	1023774433	12-21-2010	01-21-2011	50104	2	09-27-2010 03:33:58 PM			
07206	1023774432	12-21-2010	01-21-2011	50104	1	09-27-2010 03:33:58 PM			
07206	1023774431	11-21-2010	12-21-2010	50104	3	09-27-2010 03:33:58 PM			
07206	1023774430	11-21-2010	12-21-2010	50104	2	09-27-2010 03:33:58 PM			
07206	1023774429	11-21-2010	12-21-2010	50104	1	09-27-2010 03:33:58 PM			
07206	1023774428	10-21-2010	11-21-2010	50104	3	09-27-2010 03:33:58 PM			
07206	1023774427	10-21-2010	11-21-2010	50104	2	09-27-2010 03:33:58 PM			

When a woman is certified as pregnant, her termination date is automatically set by PHOCIS to be 6 weeks past her due date, so in this case her EDD is 12-29-2010 and her termination date is 2-9-2011. In this example, Jennifer has been given food instrument through 1-21-2011. These food instruments were issued on 10-27-2010.

Jennifer has her baby early on November 30th. She comes back into the clinic on December 2, 2010 to be recertified as a breastfeeding woman. Before she is recertified, you will notice that her term date is still 2-9-11 and her FI's are printed through 1-21-11. So what is going to happen now to her certification date and her next FI date when she is recertified? Since she just has food instruments through 1-21-11, her new certification date will be 1-21-11, not December 2, 2010 or February 9, 2011. It won't be December 2, 2010 because the new certification date takes into consideration how far previous food instruments have been issued and it won't be February 9, 2011 because she only has food instruments through January 21, 2011. I know this can be a little confusing, but just remember that we do not want food instruments to overlap and be printed for the same time frame. PHOCIS will actually show that her visit date was December 2, 2010, but the cert date is in the future. We are currently working to see how we can make this a little less confusing so hopefully in the future it will be easier to understand.

PHOCIS TIPS *continued...*

So this gets us to the other question-when the CPA gets to the Risk Assessment Module she is unable to enter a food package for December, why is that month grayed out? It is because the client already has food instruments dated December 21, 2010 through January 21, 2011. These food instruments were issued before she delivered the infant.

WIC Risk Assessment (TEST)

File Modules WIC Modules Group Members Cert Status

Cancel Save

Client Information
Name: WOMANTEST, JENNIFER R SSN: DOB: 07-27-1974 Age: 36 Mo: 4 Phone:

Client Risk Assessment Last Update: 11-02-2010 09:01:00 BY: PRISCILLA

Unique ID: 950502507271974F
Clinic: 99001 OSDH ITTESTING2
WIC Status: Active Priority: 1
WIC Category: Breastfeeding
Cert Date: 01-21-2011 Original Cert Date: 07-21-2010
Term Date: 11-30-2011 Next FI Date: 01-21-2011

Current Risk Factors:

Code	Description
300	Phag Induced Conditions
602	BF Complications

Food Packages: X

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec

Nutritionist Referral: N

Editing Record. 99001 PRISCILLA 12/2/2010 3:53 PM

How does the CPA know that she already has food instruments through January 21, 2011? On the Risk Assessment module there is a field that says next FI date. In this case the next FI date is 1-21-2011.

The CPA wants to give mom the fully breastfeeding package so what should she do? The CPA will need to explain to the clerk that she wants to have the December FIs reissued for Jennifer. At this point the clerk is reissuing FI's from a previous certification and the December food package is entered off of the Food Instrument Module and not off of Risk Assessment. The CPA still needs to assign the food package number but the clerk is the one that will actually input the number into the food instrument module.

The actual procedure for issuing food instruments from a previous certification is explained in the Policy and Procedure Manual, Section C-Food Instruments - Tips on Voiding and Reissuing Food Instruments/ Cash Value Benefits – **H. Food instruments/cash value benefits that need a food package change, and the food instruments are from a previous certification.**

You will also notice on children that are being recertified that the certification date is usually not the visit date. The new certification date is the previous termination date. The child's food instruments will start on the certification date, not the visit date. For example, a child has a current certification period of 6-29-2010 through 12-29-2010. They come into the clinic on 12-15-10 to be recertified and have been given food instruments through 12-29-10. The new certification period runs from 12-29-10 through 6-29-2011 and their food instruments begin on 12-29-2010.

I hope this information is helpful. Let me or your WIC Program Consultant know if you have additional questions about this information.

Maximum Benefit Card

By Cheryl Copeland, RD/LD
Relations and Information Specialist

The WIC Maximum Benefit card has been updated and can now be ordered from shipping and receiving! Federal Guidelines require that the choice to achieve the full maximum allowance must be made available to participants and that local agencies must provide appropriate education to participants about how to obtain their full food package benefit. The Maximum Benefit card was developed to make providing this information easier. For more information on when to provide the Maximum Benefit card to participants, please refer to policy Section A.



Certification: WIC Records and Documentation. Please specify ODH 868P when ordering, and remember to give this valuable tool to your participants with their *WIC Approved Food Card* so that they can receive the most benefit from their WIC Food Instruments!

Contractor's Corner

By Richard Woofter
Sub-Recipient Contracts Specialist

February is quickly approaching. Again this year, the Independent Contractor's Meeting is being held in conjunction with the Statewide WIC Conference. The date for the Independent Contractors Meeting has been set for Wednesday, February 2nd and is scheduled from 9am to 11am. Both conferences will be held at the Embassy Suites in Norman.

In previous years, attendance at the Independent Contractor's Meeting has been optional; however, that is not the case this year. Due to language in the Independent Contract, the contractor's financial officer, director, or WIC director must attend a mandatory post award contractor's conference. This is your chance to meet that contractual requirement.

There will be several items of discussion including review of the most recently completed and negotiated contract. As everyone is aware, this is a one-year contract with four one year renewal periods. Staff from both WIC Service and other Oklahoma State Department of Health divisions will be available to answer questions pertaining to the contract or other areas of concern.

The agenda for the Statewide WIC Conference looks especially *dazzling* this year. The lineup of exciting speakers includes Oklahoma City's own mayor, Mick Cornett. Hopefully everyone attending the Independent Contractor's Meeting can make plans to stay for all three days of the State WIC Conference. Details, as well as the agenda, can be found on the WIC training link. Remember, January 15, 2011 is the last date for registration.

If you have items you would like included on the Independent Clinic Meeting agenda, please send them to me at richardw@health.ok.gov. If you have questions or concerns you can also email those to me, or call 405-271-4676, Extension 50033. The toll free number is 1-888-655-2942, Extension 50033.

Ask Aunt Norma!



Dear Aunt Norma,

We just had a mom come to our WIC clinic who insists on buying Enfamil Premium for her son, but she wants WIC baby fruits and vegetables when he turns six months. What kind of food package, if any, can I give to him? Some staff members tell me if we don't give him formula, we can't give him anything. He's not a breastfed baby so I don't feel right about giving him a breastfeeding package with higher baby food amounts. I really don't think it is right to give a package for a formula I know isn't going to be used by this family. What can I do?

Package Perplexed

Dear Perplexed,

Thank you for asking this timely question and for wanting to do whatever you can to help this family. I am sure you have already worked with this family to accept Good Start formula but that does not sound like it's an option for them right now. There is an answer for this little guy, however. Issue him a BUY package. What's a BUY package, you ask? It's a set of food packages designed just for this situation. When the caregiver wants to buy the infant's formula themselves, F0BUY can be entered for the first six months followed by F6BY1 (for four months) and F6BY2 (for two months)*. These food packages will generate food instruments with the phrase, "This food instrument has no cash value" on the first food instrument. Think of this as a placeholder in case they come back willing to try Good Start formulas again, then that food instrument could be voided and reissued for formula. The second and third food instruments have the same amount of baby foods as the other fully formula fed infants. Once you have selected this package be sure and tell the parents that

as their baby matures, he may be able to accept Good Start formula again. They are then more than welcome to come back and receive our contract formula. Thanks for this wonderful question and hopefully you can share with your coworkers so no one is 'perplexed'. Bye for now!

Aunt Norma

***Also available:**

- Partially BF Infants, age 1-5 months:
 - o P1BUY
- Partially BF Infants, age 6-11 months:
 - o P6BY1 (use for 4 months) and P6BY2 (use for 2 months)
- Occasionally BF Infants, age 1-5 months:
 - o Y1BUY
- Occasionally BF Infants, age 6-11 months:
 - o Y6BY1 (use for 4 months) and Y6BY2 (use for 2 months)



High Five!

If you would like your clinic or someone at your clinic to be recognized for an outstanding accomplishment, please email your story to mandyc@health.ok.gov.

For going **ABOVE** and **BEYOND**, WIC Service would like to bestow high fives on: Rhodena DeWitt RD/LD, Carrie Emberton RD/LD, Shannon Kennedy MS, RD/LD and Stacy Walker MA, RD/LD. These nutrition therapists were an integral part of the continuation of the Individual Nutrition Education pilot project from August 1, 2010 – October 1, 2010. Giving generously of their time, sharing suggestions and keen observations, they improved the Eating Behavior Assessment Tool for participants and staff. We would like to thank them for their willingness to pilot this tool and being instrumental in assisting WIC develop effective nutrition education materials.

High Five ladies! Awesome job!!



Rhodena Dewitt



Shannon Kennedy



Carrie Emberton



Stacy Walker

WIC Program Consultant's Corner

By *Christina Windrix, RD/LD*
WIC Program Consultant

UPDATE ON INDIVIDUAL NUTRITION EDUCATION POLICY

The Individual Nutrition Education Policy was revealed at our Annual Oklahoma Nutrition/WIC Conference in 2010. We are excited to announce that we have completed the final phase in our pilot! The policy will now go through a few final steps before it is available to **ALL** our WIC nutritionists for use.

To quickly recap, the new Individual Nutrition Education Policy will allow the high-risk WIC participant to have access to the expertise and skill of our nutritionists by receiving an Individualized Nutrition Care Plan, which is required by USDA/FNS. A Nutrition Care Plan will be developed and documented based on the complete nutrition assessment and planned nutrition counseling and strategies. Tools were developed to explore the participant's eating behavior and environment. They are available for each participant category and are titled Eating Behavior Assessment Tools (EBAT). As we all know, the eating environment influences our nutrition decisions and choices. It has a major impact on nutritional/health status and sets the stage for a lifetime of eating habits. Guidance sheets have also been developed to assist the local agency nutritionist understand the objective(s) of each question from the EBAT. The nutrition assessment includes information obtained through anthropometric measurements, dietary history, nutrition/health goal set at certification/recertification, and evaluation of the EBAT.

Our pilot took place in both Independent and County Health Departments with six nutritionists assisting in the pilot, Rhodena DeWitt, Carrie Emberton, Shannon Kennedy, Brenda Sanchez, Lindsay Upchurch, and Stacy Walker. They provided insightful advice and important feedback to help with the organization of the EBAT. They reported that the EBAT was helpful for all categories. It provided structure to the Individual Nutrition Education Appointments and formed a base for nutrition education counseling. After becoming familiar with the tools, they reported there was enough time to complete all required components of the individual appointment. Many reported that it made their WIC Encounter documentation easier, especially if they could not document immediately following the appointment. The tool helped establish a relationship between the nutritionist and participant. It also helped in forming an open relationship where dialogue can occur. All of the nutritionists involved in the pilot project reported that they found the tools to be beneficial in the individual appointment.

As previously mentioned, we are in the final phase of the Individual Nutrition Education Policy. Once this policy is available, your WIC Program Consultant will contact the local agency nutritionist for further training.

WIC Matters

By Cathy Montgomery, MS, RD/LD
WIC Program Consultant

Using the New Prenatal Weight Gain Grid

Effective October 1, 2010, our clinics began implementing several new changes. Based on Federal mandates, we added one risk code and expanded the definitions of several other codes. These changes also required us to make new versions of the Nutrition/Health Assessment forms and the new prenatal weight gain grids.

A laminated prenatal weight gain grid has recently been provided to every CPA. Although we no longer require filing a copy of the prenatal weight gain in the participant record, it is still very important to plot the pregnant woman's weight. One of the nutrition education protocols for prenatal women is to discuss the recommended weight gain and rate of gain needed to promote healthy birth outcomes.

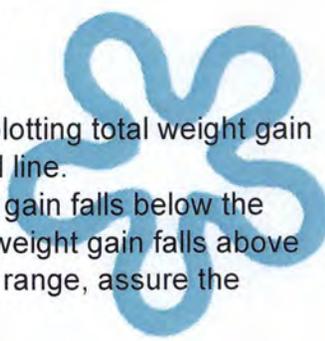
The laminated grid is a tool that allows the pregnant woman to see how her weight is progressing and encourages questions. Plotting the woman's weight on the grid also helps the CPA assess her weight gain status. Risks 131 and 133 can only be assigned if the weight gain is correctly plotted. Risk 132 (Wt. Loss Current Preg.) is another applicable risk that may be assigned when a pregnant woman is experiencing low maternal weight gain issues.

Risk 131 or Low Maternal Weight Gain is assigned when the pregnant woman's weight falls below her weight gain range based on pre-pregnancy BMI. **Risk 133 or High Maternal Weight Gain** is assigned when the pregnant woman's weight exceeds her weight gain range based on pre-pregnancy BMI.

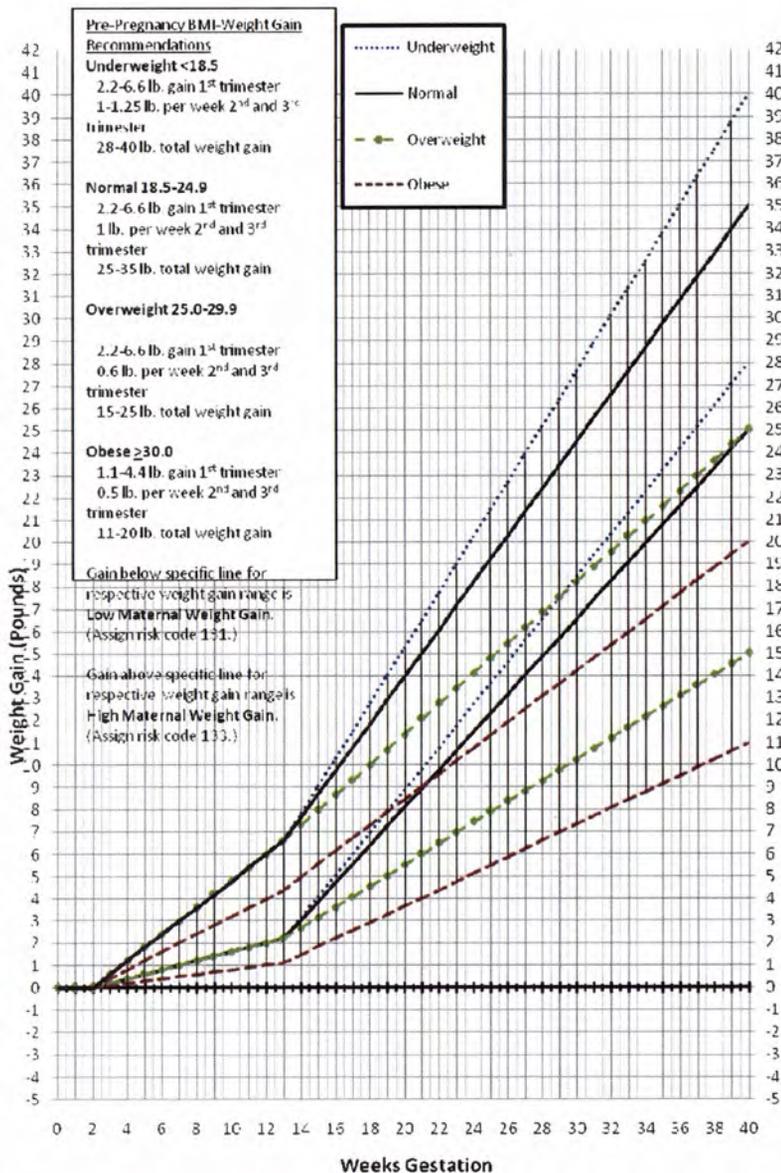
The new prenatal weight gain grids now have 4 different BMI ranges: Underweight, Normal Weight, Overweight, and Obese. Here are the steps to follow to correctly use the prenatal weight gain.

- Complete the PHOCIS/WIC Health History Module for the pregnant woman. A BMI value will be assigned based on the height and weight entered.
- Using the new Prenatal Weight Gain Grid, find the category that includes the BMI value collected.
 - o If the BMI is <18.5, use the Underweight recommendations. The Underweight weight gain range on the graph is a series of blue dots (.....).
 - o If the BMI is 18.5—24.9, use the Normal weight recommendations. The Normal weight gain range on the graph is a solid black line (_____).
 - o If the BMI is 25.0—29.9, use the Overweight recommendations. The Overweight weight gain range on the graph is a series of green dots and lines (.....).
 - o If the BMI is > or = 30.0, use the Obese recommendations. The Obese weight gain range on the graph is a series of red lines (_____).

WIC Matters continued



- Next plot the pregnant woman's weight on the Prenatal Weight Gain Grid, plotting total weight gain for the pregnancy on the vertical line and week's gestation on the horizontal line.
- Now, assess her weight gain in light of her unique BMI range. If her weight gain falls below the range, assign Risk 131 or Low Maternal Weight Gain and educate*. If her weight gain falls above the range, assign Risk 133 and educate*. If her weight gain falls within her range, assure the participant she is gaining at the recommended rate.



Our current protocol pamphlet *MyPyramid for Healthy Eating During Pregnancy* contains the older, outdated version of the prenatal weight gain grid. Before providing this pamphlet to the participant, mark through the outdated grid. In the future, when this pamphlet is updated and reprinted, the prenatal weight grid will be omitted. (Note: Several CPA staff members have expressed disappointment in not having a copy of the weight gain grid to provide to participants. If you have effectively utilized this teaching tool in the past, you are encouraged to make a copy from the laminated weight gain grid and provide it to participants who would benefit.)

If you have further questions, your clinic's WPC will be happy to help.

*Refer to the following for more educational information:

- 1) *Guidance for WIC Nutrition/Health Assessment – Pregnant Woman* (located in the VENA Toolbox—Forms and Guidance)
- 2) *Growth Assessment Module* (located in the WIC Training Link)

Meet the Clinics

Did you know that there are 88 County Health Department clinics and 38 Independent WIC clinics in the state of Oklahoma? Do you know where these clinics are located? The next section of this newsletter is dedicated to our wonderful WIC clinics! We will be randomly featuring clinics from across the state in the upcoming editions of *OkWIC Focus*. The following clinics are featured in this edition:

CANADIAN COUNTY HEALTH DEPARTMENTS

Coal County Health Department

NEWMAN MEMORIAL HOSPITAL
ELLIS COUNTY INDEPENDENT CLINIC

Haskell County Health Department


MORION
COMPREHENSIVE HEALTH SERVICES

Neighborhood Services
Organization - Northwest

NEIGHBORHOOD SERVICES
ORGANIZATION-WEST

*Payne County Health
Department-Cushing*

CANADIAN COUNTY HEALTH DEPARTMENTS



CLINIC INFORMATION:

Canadian County has two sites - Yukon and El Reno. WIC is offered daily at both sites by appointments or walk-ins. Nutrition education classes are offered weekly and are divided into infant, child, and breastfeeding.

STAFF:

WIC CPAs include: Maria Deloera, LPN, IBCLC, Kandie McMahill, LPN, and Sue Ellen Majors, LPN. Other nurses or dietitians help out with recertification appointments when needed. The nurses also make sure other needs are met during the WIC appointment, such as immunizations.

Lupe Porras, Cecilia Romero and Rose Passmore are available to interpret for Spanish-speaking participants.

Charlene Hudson, RD/LD, and Jenna Holland, RD/LD, IBCLC do the nutrition education classes and individual WIC appointments. Charlene has been a WIC dietitian for 11 years and Jenna has worked with WIC for seven years.

Typically, four clerks help with WIC in Yukon, and three in El Reno. These helpful clerks make life easier for the clients by ensuring they get the information and referrals they need, and by getting them quick and convenient appointments.

CASELOAD:

- The WIC caseload in September 2010 was 1,798 participants in Yukon and 644 in El Reno.
- FFY 2010 caseload average of 2,456 participants.



Yukon Clerical:

Janice Arnold, Steve Wheeler,
Jennifer Springer and Helen Aldridge



Yukon Clerical:

Sarah Guthrie and Sherryl Burdick

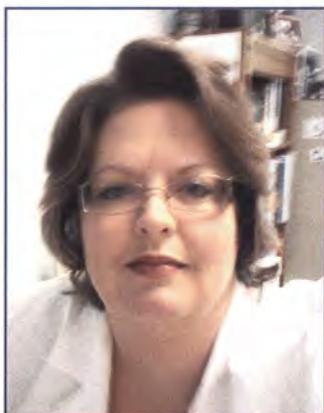


Yukon Staff

Back Row: Sharon Kibic, Marsha Nichols,
and Judy Wright. Front Row: Maria Deloera,
Donna Novotny, Saundra Main,
Kandie McMahill, and Lora Dysinger

CANADIAN COUNTY HEALTH DEPARTMENTS CONTINUED

Charlene Hudson



El Reno Staff:

Back: Pat Sneed, Gayle Black, Cecelia Romero, and Lupe Porras. Front: Jenna Holland, Sue Ellen Major, and Keri McReynolds

ACTIVITIES:

Canadian County Health Department has outstanding support for breastfeeding women and babies. Canadian CHD administrator, Jay Smith, is very supportive of breastfeeding, and ensures clients have as much support as possible available to them.

Breastfeeding support at the Canadian County Health Departments includes:

- The entire WIC staff does their part to help moms succeed with breastfeeding.
- Individual appointments are available quickly when there is a breastfeeding issue or problem.
- Canadian CHD has three lactation consultants on staff.
- The Breastfeeding Peer Counseling Program is available at both sites.
 - Sarah Devane RD/LD, IBCLC is the Peer Counselor Coordinator.
 - Emily Bruce, Stasha Howard and Keri McReynolds are the Breastfeeding Peer Counselors – they offer much experience and support to breastfeeding families.

• Breastfeeding Support Groups:

The Breastfeeding Peer Counselor Program coordinates the support groups. Pregnant and breastfeeding moms on WIC are invited to these support groups and are encouraged to bring a supportive friend, family member or significant other as well. During the meetings, a topic is discussed, refreshments are served, a door prize is given out, and there is plenty of time for discussions and questions.

• Breastfeeding-friendly Environment:

- Attractive, framed art prints of women breastfeeding are hung in the clinics.
- Private, comfortable places are available at both clinics for moms to breastfeed their babies.

Breastfeeding Support:

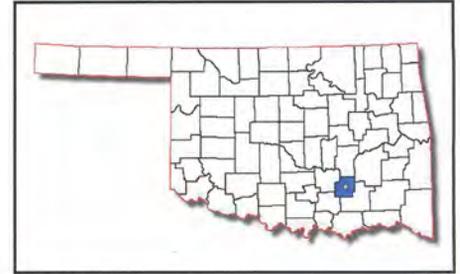
Stasha Howard, Sarah Devane and Keri McReynolds



El Reno Clerical:

Sharon Vincent, Dina Kamm, Pilar Phillips, and Julie Morlan

Coal County Health Department



County and Clinic Information:

Organized at 1907 statehood, Coal County, claimed 15,585 residents. In that year Boone Williams of Lehigh, a Democratic representative to the first state legislature, persuaded the representatives to select Lehigh as the county seat. However, many individuals objected, and a special election was held in 1908. Citizens selected Coalgate over Lehigh and Centrahoma. Since more people voted than were registered, Lehigh sued, but the courts refused to hear the case. Coalgate celebrated its victory with a visit from Socialist Party leader, Eugene V. Debs and a barbecue on July 4, 1908. Peter Hanraty, Oklahoma's chief mine inspector, was Coalgate's first mayor. Coal mining and agriculture have been the major sources of employment in Coal County, Mining reached its peak between 1910 and 1916 with thousands working daily in the mines.

<http://digital.library.okstate.edu/encyclopedia/entries/C/CO002.html>



Approximately 6,031 people, 2,373 households, and 1,653 families reside in the county. There is a large Amish community in Clarita of Coal County. Since 1988, the Clarita Amish have sponsored an annual festival and consignment sale to raise funds to support their school. At the sale, they feature Amish and Mennonite quilts. This event has grown into a major tourist attraction and a supplementary source of income for the members. It is typically held on the 2nd Saturday in September and is open to the public.

The Coal County Health Department located in Coalgate, Oklahoma originally opened its doors in 1962. In 1993, they opened their new location. The clinic will perform WIC certifications each day, but Thursday is their main WIC day for both certifications and nutrition education classes.

Staff:

This WIC clinic is typically staffed with one nurse and two clerks. Rhonda Trivitt has been an RN at this site for approximately 15 years. She is planning to retire in December 2010. Currently, they are training Jeanne Davidson to become a floating nurse between Coal, Ada, Atoka, and Pittsburg counties. During her off time, Jeanne travels with her children to many extra-curricular activities including dance, baseball, football, and basketball. The clerical staff includes Mergie Bergman and Debbie Fanning. They both started at the Coal County Health Department 15 years ago. In Debbie's spare time, she travels from ballpark to ballpark with her son. Mergie is engaged in the Coalgate community and is actively involved in her church. Melody Taylor also assists the clerical staff when needed. She has been with the Health Department for 12 years. Cecelia Canales is the local agency nutritionist. She has been with the Health Department for 26 years. She has three cats. The eldest being over 18 years old!



Left to Right: Cecelia Canales, Debbie Fanning, Jeanne Davidson, Rhonda Trivitt, and Mergie Bergman

Caseload:

- The WIC caseload in July 2010 was 199 participants.
- FFY 2009 caseload average was 207 participants.

NEWMAN MEMORIAL HOSPITAL

ELLIS COUNTY INDEPENDENT CLINIC



CLINIC INFORMATION:

Newman Memorial Hospital in Shattuck is the location of an independent WIC clinic in Western Oklahoma. Ellis County does not have a health department; therefore, WIC contracts with Newman Memorial Hospital to provide WIC services in that county since June 1995 under the initiation of Gwen Stafford, RN.

The clinic sees WIC participants every Thursday.

STAFF:

This WIC clinic is typically staffed with one nurse and one clerk. Carolyn Kraft has been the WIC clerk at this site for 10 years and is planning to retire in December 2010. They are currently training two new clerks to rotate in the clinic. The newest members of the WIC staff are Lila Rogers and Melody Lennington. Jean Bartow, RN has been working at this clinic for three and a half years. Clinic staff works in many other areas of the hospital when not providing WIC services. This office contracts with Ruth Ann Givens, RD/LD for high risk nutrition education. She visits the clinic once a month.

CASELOAD:

- The WIC caseload in July 2010 was 63 participants.
- FFY 2009 caseload average was 66 participants.

ACTIVITIES:

- Jean helped to implement skin to skin after C-section deliveries in the hospital after attending WIC breastfeeding training. The hospital delivers an average of 200 babies a year.
- Ruth Ann teaches a quarterly breastfeeding class to the community in addition to her WIC classes.
- The hospital is currently being remodeled. The WIC clinic has moved to another location in the hospital during construction.



Melody Lennington, Carolyn Kraft,
Lila Rogers and Jean Bartow

Haskell County Health Department



Clinic Information/Caseload:

Haskell County Health Department is located in the town of Stigler, situated between Lake Kerr and Lake Eufaula. The average monthly WIC caseload for FFY 2010 was 400 participants.

Martha Speer, Lisa Martin and Sue Davis



Staff:

Bill Pierson, MBA, is the Administrative Director of Haskell County Health Department. WIC clinic staff include: Sue Davis, Administrative

Assistant; Lisa Martin and Martha Speer, Administrative Technicians; Lisa Sharp and Angela Proe, Registered Nurses; Emmy McPeak, Registered

Dietitian and Lactation Consultant and Jeneé Hensley, Breastfeeding Peer Counselor. The staff has a total of 120 years of health department service.



Angela Proe and Lisa Sharp

Activities:

Emmy and Jeneé host a monthly breastfeeding support group for prenatal and breastfeeding WIC participants. For the past several years, the health department has hosted a reception to honor breastfeeding mothers during World Breastfeeding Week. These receptions include refreshments and door prizes donated by local businesses.



Jeneé Hensley and Emmy & Jade McPeak

Haskell County Health Department staff created a farmer's market stand that won first place at the 2010 local health fair and placed third in the Laura K. Savage Creativity in Nutrition Education Award this year. Teamwork is demonstrated by participation in an annual community-wide health fair and school-based education. We also partner with other local health care agencies in hosting an annual Back-To-School Round-Up that provides immunizations, school supplies, and haircuts to area school-aged children.



Clinic Information:

Morton Comprehensive Health Services dates back to 1921, when it was opened as Maurice Willows Hospital. In 1941 it was named Morton Memorial Hospital and was renamed Morton Health Center in 1968. Then in 1983, the center's name was changed to Morton. Morton is a Federally Qualified Health Center (FQHC) and is one of the largest Community Health Centers in Oklahoma.

In October 2006, Morton moved into a new facility located at 1334 N. Lansing Ave. in Tulsa. In 2008, Morton became one of only two FQHC facilities in the State of Oklahoma to achieve Joint Commission accreditation status. In addition to the main facility on Lansing, Morton has three satellite clinics – two in Tulsa and one in Nowata.

In addition to offering WIC services, Morton also offers other health care services such as optometry, adult & pediatrics, dental, OB/GYN, behavioral/mental health, laboratory/radiology, pharmacy, HIV testing/counseling, medical nutrition therapy, DHS outstation and patient/outreach education. Along with the medical services, Morton also has a transportation department which assists clients to and from their appointments at the clinic.

Staff:

The WIC department consists of four employees. The staff not only completes the everyday duties of assisting and processing WIC clients, but also participates in numerous outreach activities, health fairs, and nutrition presentation. During the past year, we collaborated with the local food bank which allowed us the opportunity to offer fresh produce to our WIC clients at their recert appointments and/or when they came in for nutrition education classes. The WIC department is open five days a week, Monday thru Friday, which includes being open until 7:00 pm on Tuesdays. The late Tuesdays allows WIC participants to take evening breastfeeding and general nutrition education classes and also gives clients a chance to have evening recertification appointments.



Liz Rangel

The WIC department staff strive to create a positive experience for the WIC participants during their visit to the clinic. Through the years we have worked to change our approach for recerts and classes so that the client's experience is both knowledgeable and fun.

As Oklahoma WIC continues to conquer new horizons, the WIC department at Morton will surely be there to assist with the success.



Adriana Suazo, Charlene Franklin, and Bridget Walker

Neighborhood Services Organization - Northwest



Clinic Information:

Neighborhood Services Organization – Northwest WIC Clinic is an independent clinic operating in Oklahoma County. Neighborhood Services Organization is under the direction of Stacey Ninness, Executive Director. The clinic provides certifications, nutrition education classes, and individual nutritionist appointments. Hours of operation are from 7:45 a.m. to 4:15 p.m. Monday through Friday.

Staff:

The staff consists of two clerks, two CWNTs, and one nutritionist. Members of the WIC staff are Renee Pouncil, Chloe Eyachabbe, Becky Messner, Cutter Milligan, and Suzanne McCoy. The nutritionist is available three days a week. Job duties of the nutritionist include certifications and special nutrition education plus individual nutritionist appointments. Special classes for high-risk populations are *Teen Class*, *Weight Management*, *Low Iron*, and *Fit Kids Yoga*.

Caseload:

The WIC caseload for November 2010 was 2,102 participants.

Activities:

- Renee and Chloe, CWNTs, teach three general classes on Friday and one breastfeeding class. New general classes are offered every two months. These include: *Kick the Junk food Habit Out the Door* and *Power Up With Veggies*. Breastfeeding classes change quarterly and include *The Early Weeks*.
- A Blue-Cross-Caring Van Program is offered several times a year. Free vaccinations are provided for participants.
- The WIC staff participates in various health fairs through the year promoting WIC services & nutrition education.
- A successful breastfeeding event was hosted in August to celebrate World Breastfeeding Week. NSO Northwest and West WIC Clinics planned a luau luncheon theme and invited 20 participants who had breastfed exclusively for three months or more. Games were played, door prizes and complimentary gifts were given, and chair massages were provided by the Integrated Massage Therapy School of Bethany, Oklahoma.



Back Row: Chloe Eyachabbe, Renee Pouncil, Becky Messner, and Cutter Milligan
Front Row: Suzanne McCoy

NEIGHBORHOOD SERVICES

ORGANIZATION-WEST

NSO West WIC is an independent WIC Clinic located in northwest Oklahoma City. This clinic has been serving a diverse population of WIC participants for the last 17 years and is open Monday through Friday.

STAFF—This WIC clinic is staffed by one Registered Dietitian/Lactation Consultant, three CWNTs, and three Clerical staff under the guidance of the Neighborhood Services Organization Executive Director, Stacey Ninness. Most staff members are bilingual and all are very customer and service oriented.

- Zubaida Begum is the RD/LD, IBCLC, overseeing all clinic operations, and has worked at NSO for 14 years. She is fluent in English, Hindi, and Tamil.
- Maria deLeon and Karen Villagran are CWNTs. Both began working as WIC Clerks and then trained on the job to become CWNTs. Maria and Karen each speak Spanish, and have served as CWNTs for the last ten years and five years, respectively.
- Sheila Hystad, who also began as a WIC clerk, completed her training a year ago as a CWNT. She has worked at NSO-West and NSO-Northwest for five years.
- Lilia Enriquez, Magdalena Esparza, and Janine Cox are the clerical staff at this location with a service record of five years, one and a half years, and three months, respectively. Lilia and Magdalena both speak Spanish. All employees are full-time staff.

CASELOAD—This clinic has an average monthly case load of 3,350.

ACTIVITIES—This is a baby friendly clinic, with all staff promoting breastfeeding at every contact. We celebrate World Breastfeeding Week every year, thanks to the dedication and untiring efforts of the staff plus community support. Last year, staff from both NSO clinics organized a “Hawaiian Luau” to honor breastfeeding moms, complete with leis, healthy buffet items, Polynesian decorations, interactive games, and professional photographs of each participant to take home.

Special and General Nutrition Education classes and Breastfeeding classes (in Spanish and English), are offered weekly. Several times a year nutrition education classes include food demonstrations and healthy recipe ideas. Individual appointments are offered daily.

Walk-in recertification appointments are encouraged between regularly scheduled appointments. IBCLC breastfeeding appointments are also available to resolve breastfeeding problems without delays and help increase breastfeeding duration.

This clinic staff has worked hard in the community establishing positive outreach liaisons. Successful outreach efforts have taken place with the OKC Public Library System, Head Starts, elementary school health fairs, and most recently at a health fair sponsored by OKC Metro Transit.

This summer, staff participated in a pilot project of their own. In the back alley behind their clinic, on a small strip of land next to the fence, they grew a garden. They raised okra, bell peppers, tomatoes, and leafy greens. The produce was shared with all the staff members who helped tend the garden—plus some fresh produce left over to share with participants. They wanted to show you can grow a garden anywhere—and they did!



Back Row: Sheila Hystad, Janine Cox, Maggie Esparza, Lilia Enriquez, and Karen Villagran. Front Row: Maria deLeon, Zubaida Begum, and Carla Kellogg

Payne County Health Department-Cushing



Clinic Information:

Payne County has two health department sites. Cushing provides services for residents in the eastern part of the county. Staff moved into a brand new facility in May of 2009. Participants are seen for WIC certifications by walk-in on Monday and Tuesday and by appointment on Wednesday and Thursday. Nutrition education classes and individual appointments are conducted on Tuesday and Wednesday.

Staff:

Clerical staff for the clinic are Lori June Focht and Joyce Fox. Lori June has worked with the health department for over 25 years and Joyce has worked at the clinic for over 10 years. The clinic's Coordinating Nurse is Darlene Albrecht, RN. Darlene has worked with the health department for 11 years. Kay Waggoner, Certified WIC Nutrition Technician, has



Joyce Fox, Kay Waggoner, Darlene Albrecht, and Lori June Focht

been with the health department for 18 years. Dawn Kukuk, MS, RD/LD and Sarah Walker, MS, RD/LD provide nutrition

services for participants of this clinic. Dawn has worked at the health department for nine years and Sarah for four years. Combined, this clinic staff has over 77 years of experience!

Dawn Kukuk and Sarah Walker



Caseload:

- The WIC caseload in September 2010 was 390 participants.
- Average monthly WIC caseload for the past year was 397 participants.

Activities:

The Cushing clinic received Honorary Mention as the ERC 2009 County Health Department of the Year. Staff emphasized their commitment to "teamwork" as a key attribute of their clinic. This attribute was called upon when the clinic managed a TB outbreak while moving into their new facility and conducting regular clinic services.

Upcoming Food Package Changes

By Priscilla Tiger
WIC Program Consultant

Nestle has informed us they are making changes in the Gerber Good Start formulas that will happen in April 2011. Since we issue food instruments three months in advance, we need to make changes NOW!

What is changing?

- Good Start Gentle Plus (powder) is changing from a 12 oz can to a 12.7 oz can.
- Good Start Protect Plus (powder) is changing from a 12 oz can to a 12.4 oz can.
- Good Start Gentle Plus 2 (powder) is changing from a 24 oz can to a 22 oz can.
- Good Start Protect Plus 2 (powder) is changing from a 24 oz can to a 22 oz can.
- The "Plus" will be removed from the name of all the formulas.
 - o All new food packages will have the new description on the food instrument.
 - Good Start Gentle Plus will become Gerber Good Start Gentle.
 - Good Start Protect Plus will become Gerber Good Start Protect.
 - Good Start Gentle Plus 2 will become Gerber Good Start 2 Gentle.
 - Good Start Protect Plus 2 will become Gerber Good Start 2 Protect.
 - o Good Start Soy Plus will become Gerber Good Start Soy (description on the FI will change in March).
 - o Good Start Soy Plus 2 will become Gerber Good Start 2 Soy (description on the FI will change in March).
- The removal of the word **Plus** does not mean a change in the product formulation. The products will remain the same except for the changes in the can sizes.

What is staying the same?

- Good Start Soy Plus (powder and concentrate) will be the same size can.
- Good Start Soy Plus 2 (powder) will be the same size can
- Good Start Gentle Plus (concentrate) will be the same size can.

What does this mean for the clinic staff?

- New food package numbers for the Good Start Gentle Plus, Good Start Protect Plus, Good Start Protect Plus 2 and Good Start Gentle Plus 2 will be assigned and issued beginning January 3, 2011 for April 2011 and beyond. You will not be able to use the search feature in Risk Assessment until April 2011. You will not be able to assign the new food packages for the months prior to April 2011.
- You will not be able to assign the current food package numbers for Good Start Gentle Plus, Good Start Protect Plus, Good Start Protect Plus 2 and Good Start Gentle Plus 2 for April 2011 and beyond beginning on January 3, 2011. You will be able to continue to assign the current food package numbers for January, February, and March.

Upcoming Food Package Changes continued

- The food package numbers will be similar to what they are currently. For example, the Good Start Gentle Plus full formula package for the 0-3 month infant is F0000. The new package will be F0200 and package F6000 will be F6200. For most packages the 3rd digit that is currently a 0 will now be a 2.
- The *Most Commonly Used Food Package Document* and the *Abbreviated Food Package List* is being revised and will be available for you to view and print from the WIC Training Link by December 22, 2010.
- The food packages that have previously been entered for April 2011 through November 2011 for Good Start Gentle Plus, Good Start Protect Plus, Good Start Gentle Plus 2, and Good Start Protect Plus 2 will be converted to the new numbers by an automated process. This conversion is planned for the first week of January.

What does this mean for the participant?

- Gerber Good Start Gentle will reconstitute to 90 ounces per can. The current Good Start Gentle Plus reconstitutes to 85 ounces per can. Participants on the full formula package will receive one less can which will amount to 40 ounces less formula per month. There are some changes in the can amounts allowed for the partially breastfed and occasionally breastfed infants.
- Gerber Good Start Protect will reconstitute to 90 ounces per can. The current Good Start Protect Plus reconstitutes to 87 ounces per can. Participants on the full formula package will receive one less can which will amount to 60 ounces less formula per month. There are some changes in the can amounts for partially breastfed and occasionally breastfed infants.
- Gerber Good Start 2 Gentle will reconstitute to 154 ounces per can. The current Good Start Gentle Plus 2 reconstitutes to 167 ounces per can. Participants on the full formula package will receive the same amount of cans as they currently receive, but it will amount to 52 ounces less formula per month.
- Gerber Good Start 2 Protect will reconstitute to 157 ounces per can. The current Good Start Protect Plus 2 reconstitutes to 172 ounces per can. Participants on the full formula package will receive the same amount of cans as they currently receive, but it will amount to 60 ounces less formula per month.
- We are planning to have a handout available that your clinic can print and give to the participant which will explain the change.

No Egg Packages

We have also created “no-egg” packages for those participants allergic to eggs. There are packages created for pregnant/partially breastfeeding women, fully breastfeeding women/pregnant with multiples, nonbreastfeeding/occasionally breastfeeding women, and children. If you need a package with lactose free milk, acidophilus milk, nonfat dry milk, or evaporated milk please contact the Nutrition Line. Clinic staff will need to document in the WIC Encounters the participant is allergic to eggs when assigning these packages. These new food package numbers are available in the revised *Most Commonly Used Food Package Document* on the WIC Training Link under Nutrition Education, Food Packages.

If you have questions, please contact your WIC Program Consultant.



The State WIC staff would like to thank you for another great year. We appreciate your hard work and dedication to WIC!



Do you have news or pictures for OkWIC Focus?

Has your clinic had an event that you would like to share with the rest of Oklahoma WIC? Do you know someone that deserves a High Five? If you have a story, a picture, a nomination for *High Five*, a question for Aunt Norma or just have a comment, please contact me at:

Mandy Caid-Jefferson
Education and Training Specialist
2401 NW 23rd Street, Suite 70
Shepherd Mall
Oklahoma City, OK 73107-2475

Phone: (405) 271-4676 Ext. 50035
Fax: (405) 271-5763
Email: mandyc@health.ok.gov

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