



Colorado WIC News

An Update for Colorado WIC Agencies



Volume 24 | Issue 2

March/April | 2012

Save the Date: April 30 - May 6, 2012 Screen Free Week



Screen-Free Week is an annual celebration where children, families, schools, and communities turn off screens and turn on life. Instead of relying on screens for entertainment, participants read, daydream, explore, enjoy nature, and enjoy spending time with family and friends. For more information about the event, visit the commercial free childhood website at: <http://www.commercialfreechildhood.org/screenfreeweek/resources.htm>

Among young children, television viewing (more than 2 hours per day) is associated with increased body mass

index (BMI) and body fatness. Why is this?

1. Time spent viewing television replaces time spent in active play. Children need a lot of physical activity every day to be healthy and happy!
2. Children often eat unhealthy food while watching TV.
3. Food and beverage advertising on television influences food preferences and requests for particular foods from parents. Many advertisements use popular characters to attract children to foods that are less healthful.

1. watching and watch the program with their child.
2. Placing a television set in a child's room is discouraged.
3. Television use by parents can have a negative effect on their children, because it can be distracting for both the parent and the child.
4. Unstructured playtime is more valuable for the developing brain than any electronic media exposure, including solo-play time.

A recent study reports that more than a third of health care providers fail to discuss television guidelines with parents. Therefore, it is uncertain if parents will receive this guidance during well child visits. **WIC is a key partner in supporting parents with screen time solutions.** Counseling by WIC staff may help families reduce the amount of television viewing and increase parent self-efficacy for limiting television viewing in the home.

Changing television viewing habits at home can be challenging for families. For many busy parents, the reality is that television viewing or other forms of media are easy ways to supervise children while parents accomplish necessary household tasks, such as preparing dinner or paying bills. Helping parents identify safe alternatives for children that can provide the same benefit and supervision is critical.

IN THIS Issue

- 2 Administrative Update
- 4 Compass Connection
- 5 2012 Civil Rights Training
- 7 Breastfeeding Update
- 8 Local Agency Spotlight
- 9 Compass Connection continued
WIC Works Resource System
- 10 Lead Exposure - Risks to
Young Children & Preventative
Strategies
- 11 Lead Exposure continued
Spanish Intensive Course
Medela Breastpump Updates
- 12 Retailer News

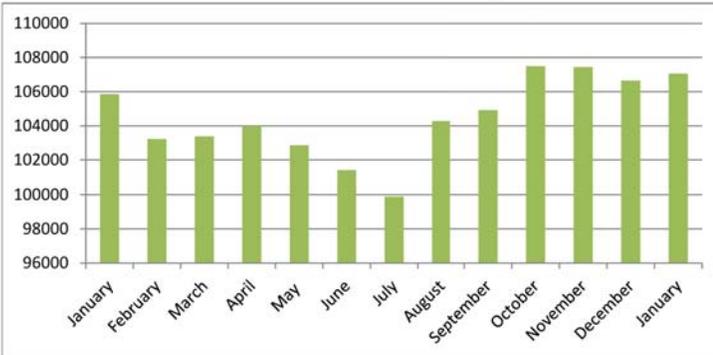
What is considered screen time? The Centers for Disease Control and Prevention (CDC) defines screen time as "time spent watching TV, videotapes, or DVDs; playing video or computer games; and surfing the internet."

The American Academy of Pediatrics (AAP, 2001) recommends limiting children's total media time to no more than 1 to 2 hours of quality programming per day and discouraging television viewing for children younger than 2 years of age. The AAP also provides the following recommendations for parents (2011):

1. Parents should have concrete strategies to manage young children's engagement with media exposure, given the understanding that media exposure is a reality for many families in today's society. Ideally, parents should review the content of what their child is

Administrative Update

Colorado WIC Participation



New Employee Training

New Employee Training will be held at the State WIC Office:

March 19 - 23, 2012, May 14 - 18, 2012 &

July 16 - 20, 2012

Please complete the New Employee Training Registration

Form (located www.coloradowic.com>WIC Agency

Staff>New Employee Training) and email it to

Peggy.Ramirez@state.co.us. Please copy your consultant.

Clinic Contact Information

This is a friendly reminder to include your clinic's contact information on the back of the check envelope and outreach brochure. State Office receives numerous calls from active participants regarding directions, missed and/or rescheduled appointments.

In order to provide efficient customer service, please be sure participants are aware of the appropriate number to call in these circumstances.

FOLLOWING YOUR SUCCESS TOWARD WIC COMPETENCY

Congratulations to the following staff who have received Level I, II, or III certificates in previous months. TERRIFIC WORK!

Clear Creek: Crystal Brandt, Level I & II

Eagle: Heather Gilmartin, Level I, II & III

Garfield: Christina Hernandez, Level III

Mesa: Kandis Dalaba, Level I; Nina Dowling, Level III; Melanie Johnson, Level III and Kathleen Moran, Level III

Pueblo: Michelle Martinez, Level III

Summit: Whitney Smith, Level I

Valley-Wide: Isabel Rodriguez, Level II

There's a New Kid (Unit) in Town

Peggy Ramirez, Michael Walters, Brandan Slattery, and Cheryl Cassell will join forces to create a new unit in the State Office. With the creation of the unit, which has been named the "**Benefit Delivery Unit**", there are going to be a few changes (improvements!) in the delivery of several WIC benefits and services to clients, local agencies, and retailers.

We'll be asking for your suggestions and input in the coming months on how to enhance services related to WIC checks, materials, and food delivery/ retailer policies, etc.

ATTENTION:

The following items have been sent to all local agencies since the last issue was published. If you are not aware of an item on this list, please contact your director and/or nutrition consultant to request a copy.

Colorado WIC Program Manual FY2012, Colorado WIC Program Mini Manual FY2012, Vouchered Participants Report and Draft Funding Formula Reports

See additional
Administrative Updates
on page 3

Screen Free Week

continued from page 1

For many families, encouraging children who are under the age of 5 years to go outside to play without an adult is not realistic for many reasons; required close supervision, shortened daytime hours during the winter months, living on a busy street, or limitations in safe outdoor places to play. Engaging activities that can be enjoyed by children indoors while parents manage day-to-day responsibilities in the home may be key solutions for them.

Examples include:

Arts and crafts table: Set up a small table in the kitchen or dining area, outfitted with art supplies, such as glue, markers, construction paper, scissors, and other materials.

Kitchen helper: Children love to help prepare meals by completing simple tasks like washing vegetables, stirring, or setting the table.

Building a fort: Children can imagine their castle using pillows and blankets.

Treasure hunt: With a little preparation from parents, children can be busy searching for a list of treasures throughout the home. Small prizes are a plus!

A designated cupboard: Small children love to explore cupboards. Set up a special cupboard that is safe to play in, with plastic dishes, utensils, and cups.

Tools and Resources:

The following web pages provide tool

kits and resources, with activities and self-monitoring tools that may be useful for families:

Seattle and King County Public Health in Washington State:

<http://www.kingcounty.gov/healthservices/health/chronic/overweight/reducetv.aspx>

The US Department of Health and Human Services, National Heart, Lung, and Blood Institute:

<http://www.nhlbi.nih.gov/health/public/heart/obesity/wecan/downloads/screen-time-log.pdf>

Healthy People Wood County, Wisconsin:

<http://www.getactivewoodcounty.org/woodcounty/get-active-communities/screen-time/>

References:

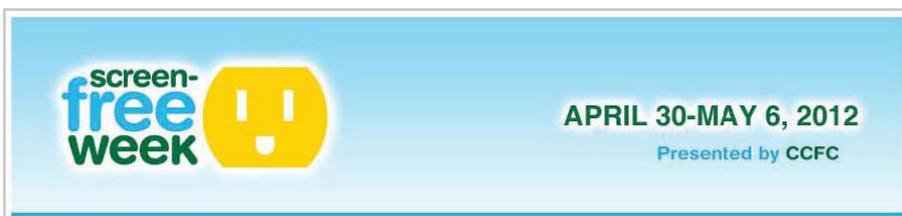
1. Institute of Medicine (IOM). 2011. Early Childhood Obesity Prevention Policies. Washington, DC: The National Academies Press.
2. Council on Communications and Media, Brown A. Pediatrics. 2011 Nov;128(5):1040-5. Epub 2011 Oct 17.
3. Schmidt ME, Haines J, O'Brien A, McDonald J, Price S, Sherry B, Taveras EM. Obesity (Silver Spring). 2012 Jan 5. doi: 10.1038/oby.2011.348.

Administrative Update continued

Focus on Fiscal

The Fiscal Unit has undergone a number of changes over the past few months which impact how we work with the WIC offices in Colorado:

- **Katy Gasowski** has moved into the Fiscal Unit Manager position for both WIC and the Child and Adult Care Food Program. Among other duties, she will work predominantly with local agency budgets and the funding formula. For budget questions or to request approval for agency contract purchases, please e-mail katy.gasowski@state.co.us
- **Cyril Padilla** is now the Fiscal Contract Monitor. She directly works with local agencies regarding their contracts, invoices. She will conduct fiscal monitoring visits starting Spring 2012. Monthly invoices and contract questions should be directed to cyril.padilla@state.co.us
- **Katie Roby** is the newest member to the WIC fiscal team. She is coordinating check processing activities as well as coordinating breast pump and Hemocue supply orders with local agencies. Questions regarding these orders should be directed to katie.robby@state.co.us



Compass Connection

by Vanessa Hodack, RD
Nutrition Consultant

The Compass Connection is a section of the Colorado WIC News highlighting hot topics related to the Colorado WIC computer system.

Food Packages – Creating Effective Dates in the Future

Compass updates the food packages at certain milestones such as when an infant is 4 months or 6 months at the beginning of the month. However, there are times when staff must update the food package manually and create future food packages for the participant. It is critical that when staff create food packages with **future effective dates**, that the effective date is NOT the last day of the future month. This will cause a problem if the participant decides that they need a different food package because a new effective food package cannot be created.

For example:

Today is 2/8/12. A food package is created with a future effective date of 3/31/12 and checks are printed for the participant. The participant calls back and needs to exchange the March food package for a different food package. In order to reissue the food package, staff would need to create a new food package with an effective date in March the day after the previous March food package effective date (remember, the effective date was 3/31/12). This is a problem because there is no day in the month of March after 3/31/12.

It is important to make sure that the food package effective date is the first of the month (e.g., March 1) when you create food packages with future effective dates. That way the participant does not experience issues if they want to exchange their food package. Please note a change idea has

been submitted to eliminate this issue

Network Downtime (NDT) and Scheduler

When a clinic is in NDT mode, staff can only see appointments in Scheduler for families associated with the clinic the staff person logged in to. If there are appointments on the clinic's schedule for families not associated with the clinic the staff person logged into, those appointments are not visible in Scheduler while the clinic is in NDT mode. There will appear to be open slots when in fact there are appointments scheduled.

For example if families associated with Clinic A, are scheduled in Clinic B, the families associated with Clinic A will not show up in the Scheduler of Clinic B (while in NDT mode). It is important to be aware of this as this could cause double booking. It is best practice to transfer the participant to the clinic they will be scheduled in to eliminate this problem.

Reprint & Void

When replacing checks, it is important to determine when to REPRINT a check versus when to VOID the food package and the check.

Use REPRINT when you need to:

- Replace a check with the exact same food package such as needing to replace a lost, stolen or damaged checks. For step by step instructions, please refer to the Quick Reference Guide – Reissue Lost/Stolen/Damaged Checks located in your FY12 Mini Manual

Use VOID when you need to:

- Exchange checks for a different food package. For step by step instructions, please refer to the Quick Reference Guide – Exchange Checks for a Different Food Package located in your FY12 Mini Manual.

Exchanging Checks (not formula):

- Staff can only exchange checks for a different food package if none of the previously issued checks have been cashed. If, for example, you issued a child's peanut butter package, the family cashed the fruit and vegetable voucher and now wants beans instead of peanut butter; you cannot exchange the current month checks. You can only void and exchange the un-cashed checks for the following month. For step by step instructions, please refer to the Quick Reference Guide – Exchange Checks for a Different Food Package.

Exchanging Formula Checks:

- If none of the checks have been cashed, staff may create a new food package (effective date must be at least one day after the previous effective date). Void the checks for the unwanted formula, and print new checks. For step by step instructions, please refer to the Quick Reference Guide – Exchange Checks for a Different Food Package.
- If any of the formula checks have been cashed, staff need to use the "formula return" feature of Compass, and record the total number of returned cans of formula plus the number of cans on the un-cashed check, and then create a food package for the appropriate number of cans of the new formula. For step by step instructions, please refer the Quick Reference Guide – Exchanging Formula.

Refer to pages 72-62 in the Clinic Procedures section of the 2012 Program Manual for additional information on the Formula Exchange

continued on page 9

REQUIRED

2012 Civil Rights Training

Name: _____

Date: _____

Everyone working for WIC must know how civil rights pertain to WIC and how to handle civil rights complaints. Please read the following information and check your reading comprehension by answering the questions on back. Once complete, return this training to your supervisor for safe keeping in your agency/clinic's Civil Rights file.



Q: Who is responsible for following civil rights laws?

All WIC staff members are responsible for knowing and complying with all civil rights regulations affecting the WIC program.

Q: Why do we ask participants about their race and ethnicity?

USDA mandates collection of racial and ethnic data. This information is used for statistical purposes and helps to ensure that no ethnic or racial group is discriminated against in outreach or participation. If a participant is unwilling to self-identify their race or ethnicity, you may visually determine the participant's race and/or ethnicity.

Q: Why is it important for WIC to conduct outreach?

The State Office and local agencies should conduct annual outreach efforts to make sure all eligible people are aware of the availability of WIC services and how to enroll.

Q: What are the six protected classes for WIC under the Civil Rights Law?

1) Race, 2) Color, 3) National Origin, 4) Sex, 5) Age and 6) Disability

Q: Where should the non-discrimination poster, "And Justice For All," be displayed?

It must be displayed in an area where both participants and staff can easily read it.

Q: All informational materials, including websites, must contain the statement of non-discrimination. What are the long and shorter versions of this statement?

"In accordance with Federal law and U. S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue S.W., Washington, DC 20250-9410 or call (866) 632-9992 (voice) or (202) 260-1026 (local). Individuals who are deaf, hard of hearing, or have speech disabilities can call using the Federal Relay Service at (800) 877-8339 English or (800) 845-6136 Spanish. USDA is an equal opportunity provider and employer."

When space prohibits use of this statement, the following minimal statement may be used: The WIC Program is an equal opportunity provider.

Q: What is required of the local agency regarding participants with disabilities?

Reasonable accommodations must be made for person with disabilities. This means that participants with disabilities must have access to programs and services. If a local agency is unable to provide easy access to clinic facilities, other accommodations may be made (examples of these are outlined in the Civil Rights section of the Procedure Manual).

Q: If someone does not speak English, what should I do?

Local agencies must ensure that interpretative services are available for participants with limited English proficiency. Limited English proficiency means any individual who does not speak English as their primary language and has a limited ability to read, write, and understand the English language. Language is not a protected WIC class, but it does fall under the protected class of national origin.

Q: Participants are entitled to a fair hearing. What does this mean?

Any individual whose application for benefits or services has been denied, any participant whose benefits or services are being reduced or terminated, or anyone who is otherwise aggrieved by agency action has a right to a fair hearing. Participants must be advised of their right to a fair hearing and the procedures to follow to obtain a fair hearing. Refer to the Fair Hearing section of the Colorado WIC Program Procedure Manual for more information.

Q: What should WIC staff members do if a participant believes she has been discriminated against or has a customer service complaint?

WIC staff must document all customer service and Civil Rights complaints in both the Customer Service Log in Compass and on the WIC Civil Rights/Customer Service Complaint Reporting Form (WIC #80). This form must be forwarded to the Colorado WIC Civil Rights Coordinator at the State Office within 2 days of the initial report and to the USDA within 5 days of initial report. Together, the local agency and State Office can decide which agency, state or local, will send the report to the USDA. Typically, State Office sends this form to USDA. The local agency and State Office do not determine the validity of a complaint.

U.S. Department of Agriculture
Director, Office of Adjudication
1400 Independence Avenue, SW
Washington, DC 20250-9410

Civil Rights Coordinator
Colorado WIC Program
4300 Cherry Creek Dr. South
Denver, CO 80246-1530

Keep in mind, the participant has the right to file a complaint within 180 days of the occurrence. She may file the complaint directly with USDA or may submit it to the local agency or State Office.

Q: How must local agencies keep track of complaints?

Local agencies are required to follow up on all complaints and document them on the local agency maintained Civil Rights Complaint Tracking Log (#81). Follow up entails clarifying the complaint with the participant, speaking with local staff, communicating with the appropriate person at the State Office, (i.e., State Nutrition Consultant or Civil Right Coordinator), and developing a corrective action plan. Additional guidance for complaint procedures and complaint tracking may be found in the Civil Rights section of the Colorado WIC Program Manual.



TEST YOUR KNOWLEDGE

1. What are the six protected classes for WIC under the Civil Rights Law?

_____.

2. What is the non-discrimination poster called? _____

Locate the poster in your clinic and list its location _____

3. Who is responsible for following the Civil Rights Law in the WIC Program?

4. A complaint received at the local agency must be sent to the State Office within how many days? _____

5. All participants have a right to a _____ if they do not agree with the decisions made by the WIC Program.

Breastfeeding Update

by Jennifer Dellaport, RD, MPH,
Breastfeeding Coordinator

Spotlight

Lorraine Redmond, IBCLC
Upper Arkansas Area Council of Government
WIC Program IBCLC

In the nation, Colorado ranks 16th with 1.34 La Leche League (LLL) Leaders per 1,000 live births and 17th with 3.10 International Board Certified Lactation Consultants (IBCLC) per 1,000 live births. We are especially fortunate when a LLL leader becomes an IBCLC and practices in more rural Colorado!

Kudos to Lorraine Redmond, IBCLC, as she provide lactation support services throughout Chaffee county (Salida and Buena Visita) as well as occasionally in Fremont and Saguache counties. As an IBCLC and LLL Leader Lorraine leads support group meetings, teaches breastfeeding classes, trains breastfeeding peer counselors, holds workshops for health professionals and maintains an active private practice. Lorraine's interest in breastfeeding grew in 1990 when she attended her first La Leche League (LLL) meeting. It felt like home. She became a LLL Leader in 1993. Several years later she began studying to become an IBCLC. In 1998 she achieved that goal. Thank you Lorraine for protecting breastfeeding in the Upper Arkansas region!

Ask an LMS

(LMS are Colorado WIC staff trained as lactation management specialists)

This column is provided for WIC LMS to review and use as a case to discuss with other clinic LMSs. Consider what other information you would want to know, the education and counseling you might provide, and other interventions you might make.

A mother arrives in the WIC clinic for a follow up visit with her five week old son. Four weeks ago her son was certified on the program exclusively breastfeeding. To the question, "How is breastfeeding going?" the mother describes that she started seeing what looked like blood in her son's stools about a week ago and finally took him to the doctor. The doctor thinks he has allergic proctocolitis which means an allergy that occurs in the gastrointestinal tract. The mother reports he is otherwise a healthy cheerful baby.

The WIC LMS then inquires as to what the doctor is recommending for the allergy. The mother reports she was told to not eat or drink anything containing dairy products. In spite of omitting dairy, she added that his bloody stools continued. Yesterday they met with the doctor. He told her to stop breastfeeding and only offer her son Elecare for 10 days. During those 10 days she was to avoid the most likely offending foods: dairy and foods made from cow's milk products, soy, citrus fruits, eggs, nuts, peanuts, wheat, corn, strawberries, and chocolate. He also recommended she keep a record of everything she puts in her mouth during that time. She was very distressed about not being able to breastfeed and figuring out what she could eat.

How might an LMS respond to this mother and her situation?

1. Affirm the mother's distress and assure her that the doctor's recommendations are common. Empathize with her that following a rigorous diet after being a new mother can be hard. "I can only imagine how overwhelming it must be to have to figure out what you can eat when you have to avoid all those other foods"
2. Assure her the efforts she is making will help her to find out what food/s she may need to avoid for a longer time and it is unlikely

she will need to avoid all. Refer her to a WIC dietitian for support with identifying foods she can eat and maintain a balanced diet.

3. Inform her that she can preserve her milk supply during the time she identifies the problematic food. Issue her an electric breast pump to maintain her milk supply. Recommend she pump as often as she breastfed (~every 3 hours) and freeze the milk for another time.

Talk amongst fellow coworkers: What other questions would you ask? What education might you provide? What follow up would you plan in addition to a visit with the dietitian?

For more information The Academy of Breastfeeding Medicine recently released ABM Clinical Protocol #24: Allergic Proctocolitis in the Exclusively Breastfed Infant. View it at http://www.bfmed.org/Media/Files/Protocols/Protocol24_English_120211.pdf

The protocol describes a different process of eliminating foods than the case study above. Different providers use different approaches. The protocol describes eliminating one food at a time, waiting 2-4 weeks, to determine if the food was an offending food. LMS may want to consider sharing this protocol with local physicians.



World Breastfeeding Week August 1 - 7, 2012



This August 1-7 marks the 20th year of celebrating World Breastfeeding Week!! The theme Understanding the Past – Planning for Future: Celebrating 10 years of WHO/ UNICEF's Global Strategy for Infant and Young Child Feeding presents us with a time to reflect on and celebrate Colorado's achievements in breastfeeding protection, promotion and support of the past twenty years.

While the State Office will provide Local Agency WIC Breastfeeding Coordinators with ideas for how to celebrate this week in their communities and agencies, staff may want to begin digging through files and interviewing longer term agency staff to learn what they have observed as changes to the topic of breastfeeding since 1992.

For more information about this theme visit www.waba.org.my/

2012 Breastfeeding Coordinator Conference Call

April 26, 2012
9:00 am - 10:30 am
New call-in information will be emailed to coordinators prior to the call.

Local Agency Spotlight Mesa County

The Mesa County WIC program has been working on the Farm to Family Pilot program. This pilot program authorized farmers to be approved retailers and accept fruit and vegetable checks. Nine family farmers' participated in this pilot. During the pilot over 40 checks were cashed. This unique program, allows participants to get fresh produce directly from local farmers at farm stands, and farmer's markets. Mesa County and the State Office are in the process of evaluating the programs future in Colorado. Pat Stiles along with Cheryl Cassel, State Retailer Coordinator will give a presentation at the NWA conference this May.

Outreach Activities

This year included the introduction of a local (Mesa County) WIC newsletter developed to increase awareness of the many facets of WIC to our Health Department co-workers and participants.

Nutrition Tips

Mesa County WIC staff member's Kathleen Moran, Karla Klemm and Pat Stiles have been presenting nutrition programs at local agencies such as Head Start and the School District and have been volunteering for the Cooking Matters program.



Congratulations!

Kathleen Moran, High Risk Counselor, Melanie Johnston and Nina Dowling, WIC Educators have completed their Level III training. Kandis Dalaba, Peer Counselor, attended New Employees Training in January and is training to be able to serve as a WIC Educator.



Good Bye & Good Luck!

We are both happy and sad to report that Melanie Johnston will be leaving the Mesa County WIC staff in March as she begins her new career as a first time mom.

Denver Health

Joan Friend, RD for the Denver Health WIC Program is retiring after 15 years at Denver Health. Her last day is February 10th, 2012. Joan has extensive experience working with the pediatric population. In addition to WIC, Joan is also the dietitian for Clayton Family Futures Head Start Program, plus the Kids Care clinic at Denver Health.

Joan will be missed by staff and the participants she has followed for years at the Eastside Health Center.



Compass Connection continued

continued from page 4
Policy and Replacement of Food Instruments.

Alias Names:

If a participant changes their name, be sure to add their previous name as an alias by clicking the Edit link next to their name on the Family panel and clicking the Add to Alias box.

For example, if Mary Smith changed her last name to Garcia, you would click the "Add to Alias" button for Mary Smith and then change her last name from Smith to Garcia. The name Mary Smith would now be in the list of Mary Garcia's alias names.

Performing Searches in Compass

When a WIC applicant calls, it is important to ensure that a thorough search is performed before adding the participant's name into the system. The more thorough of a search performed, the less likely a dual will be created! Some tips are below for performing a thorough search:

1. Search on the first name and date of birth only. Think this will return too many results? You will be surprised that it does not! Searching on the first name and

date of birth will help you find the name if a WIC applicant had a misspelling in the last name, had two last names entered before and now they are only giving you one last name, or have an alias name, etc.

2. Remember you can use the wildcard sign (%) to search for participants. A wildcard character (%) may be used to search for a participant when the specific spelling of their name is unknown. For example you may put in Mary Gon%. This will search for anyone with the first name Mary and the last name starting with Gon.
3. Remember you can click the check box called "Include Alias" to search for participants that have had different names (womans maiden is Smith and her new last name is Garcia).

Dual Participation Report

A multiple record is a participant with at least two Compass Person IDs who is not dual participating (getting double benefits). When multiple records are found and the participant has two different last names, it is important to record the different last names as alias' for

both records. For example, Mary Smith was added to the program as a pregnant woman. A few years later Mary Smith marries and changes her name to Mary Smith Garcia. Staff do a search on "Mary Smith Garcia", however no one with that name exist in Compass. Mary Smith Garcia is added as a new WIC Participant. When the dual participation report is run, Mary Smith and Mary Smith Garcia are appearing as duals. Staff discover that this is the same person who is not dual participating. Staff should add the name "Smith" into Mary Smith Garcia's list of alias names, and staff should also add "Smith Garcia" into the list of alias names for Mary Smith.

Entering Participant Names into the New Member/Proxy Link – Compass asks for **NO SPACES** please!

When entering first and last names into the New Member/Proxy link on the Family panel, it is important that staff do not create spaces by clicking the space bar after the first and/or last name is entered into the appropriate fields in Compass. A session termination will occur when a staff member retrieves a participant from these families where spaces are entered after the participant's name.



When was the last time you visited the WIC Works Education and Training Materials Database? Did you know you can now create a favorites list while searching? This list can be printed or shared via email. You can also email any of the product results pages to yourself or share with colleagues. These new features allow you to capture a variety of materials during your search.

Looking for MyPlate resources? WIC Works lists over 40 new products based on MyPlate.

Start your search today for materials that you can order (free or for purchase) to help you in your nutrition education efforts!

Questions can be directed to wicworks@ars.usda.gov.

Your Health & Wellness

Springtime brings flowers, sunshine, warmer weather and, of course, the dreaded spring cleaning. Below are tips to help you remain stress-free while you remove the winter blues and the winter dust.

1. Establish cleaning goals to help manage your time. The sooner your goals are accomplished, the sooner you can get outside!
2. With your goals in mind, create a realistic schedule. Keep in mind that a single weekend of cleaning may not suffice and be too overwhelming.

continued on page 11

Lead Exposure

by Kathy Baker, MS, MPH, RD
Nutrition Consultant

Risks to Young Children & Preventative Strategies

What is lead?

Lead is a heavy, soft metal that occurs naturally in the earth. It is toxic to humans, and can get into our bodies when we breathe or swallow something that has lead in it or on it. Young children are most vulnerable to the effects of lead.

Lead was once used in products found in and around homes such as paints, gasoline and lead solder used for plumbing and food cans. It is still used to make batteries, ammunition, devices to shield X-rays and some metal pipes. Lead is released into the environment when burning fossil fuels such as coal, oil and natural gas and during some mining and manufacturing activities.

What are the symptoms of lead poisoning?

Lead poisoning often goes unrecognized because it might not cause any obvious signs or symptoms. But lead poisoning can cause long-term health problems. Although lead poisoning is entirely preventable, in Colorado approximately 100 children are confirmed to have lead poisoning each year.

If not detected early, high levels of lead in a child can cause:

- Damage to the brain and nervous system
- Speech, language, behavior and learning problems
- Slowed growth
- Hearing problems
- Digestive problems, loss of appetite
- Death

Who is at risk for lead poisoning?

Children are at greater risk of lead poisoning if they:

- live in poverty
- live in or regularly visit a home built before 1978 that is in poor condition (lead-based paint was

used in homes before 1978)

- live in or regularly visit a home built before 1978 that is in poor condition (lead paint was used in homes before 1978 and is especially common in homes built before 1950)
- live in or regularly visit a home built before 1978, especially those built before 1950, that is being renovated, or has been worked on in the past without proper safety precautions
- travel in and out of the United States often
- are exposed to products from countries that do not regulate lead as strictly as it is regulated in the United States (these products often include spices, candies, herbal remedies, cosmetics and toys)
- have poor nutrition (children are more likely to absorb lead if they are lacking certain nutrients in their diet)
- have frequent contact with an adult who has a job or a hobby that involves lead exposure

Pregnant women should also be careful to avoid lead exposure because it can harm babies before they are born.

Who should be tested?

Colorado guidelines currently recommend all low-income children in Colorado be tested for lead at 12 months and 24 months of age, using either a capillary or venous blood specimen. It is important to test children when they are young so they can get the appropriate treatment if they have been exposed to lead. Children under the age of three are at greatest risk from lead poisoning. Health care providers can provide blood lead testing. For children, an elevated blood lead test result is defined by the Centers for Disease Control and Prevention (CDC) as 10

micrograms of lead per deciliter of blood (10 µg/dL) or higher. WIC staff should refer participants to their health providers for testing.

How can lead poisoning be prevented?

Living in a house or apartment built before 1978, or frequently visit a house that was built before 1978 (for example, grandparents, in-home day care):

- Make sure children cannot get to peeling paint or chewable surfaces covered with lead-based paint, such as window sills.
- Clean up peeling paint chips or dust immediately.
- Wipe down floors and other household surfaces with a damp cloth or mop at least once a week to reduce possible exposure to lead dust. Thoroughly rinse cloths and mops when done.
- Regularly wash children's hands and toys to remove dust and dirt.

Use only cold water from the tap for cooking, drinking, and mixing baby formula.

Most lead in household tap water usually comes from the piping, not from the water supply itself. Hot water is more likely to pick up lead from water pipes.

Avoid regularly using products from countries that do not have lead regulations as strict as those in the United States.

Avoid eating candies imported from Mexico. Certain candy ingredients such as chili powder and tamarind may be a source of lead exposure. Lead sometimes gets into the candy when processes such as drying, storing, and grinding the ingredients are done improperly. Also, lead has been found in the wrappers of some imported candies.

continued on page 11

Lead Exposure continued

continued from page 10

Avoid traditional remedies that contain lead.

Lead has been found in some traditional (folk) medicines used by East Indian, Middle Eastern, West Asian, and Hispanic cultures. Azarcon and Greta are traditional Hispanic sometimes given to teething babies and to treat upset stomach. Ba-baw-san is a Chinese herbal remedy used to treat colic pain or to pacify young children, it also contains lead.

Where can I get more information?
For additional information about preventing childhood lead poisoning visit:

- Colorado Department of Public Health & Environment at <http://www.coepht.dphe.state.co.us/Health/childhoodLead.aspx>
- The National Lead Information Center at <http://www.epa.gov/lead/pubs/nlic.htm> or call 1-800-424-LEAD (5323)
- CDC's Childhood Lead Poisoning Prevention Program at <http://www.cdc.gov/nceh/lead>
- EPA at <http://www.epa.gov/lead/>
- HUD at <http://www.hud.gov/offices/lead>



Breastpumps Updates

Colorado WIC has signed a new Medela contract and can continue to receive Medela, Inc. pumps and pump parts at a special rate.

The WIC two hand Spring Express manual pump is no longer available. The replacement pump is the Manual Pump without Springs. The pump does not contain the comfort cushion (SoftFit shield) or the spring. The comfort cushion and spring may be ordered separately and are included on the revised quarterly order form.

Other new items on the order form include the **Symphony to Lactina Conversion Kits** and the **Lactina to Symphony Conversion Kits**. The Lactina to Symphony Conversion Kits are for agencies that have Symphony pumps in their clinics.

Clients who used Symphony pumps in the hospital and still have their Symphony Pumps Kits only need a Symphony to Lactina Conversion Kit to use the Lactina Loaned Breastpump from WIC. The conversion kits are less expensive than the double pump collection kits. These items are **ONLY** available by the case..

Lastly the contract includes the Lactina Select double electric pump instead of

the Lactina Plus which was the one from our last contract. Agencies may have Lactina Selects pumps as we had these pumps in the past. Essentially the only difference is a knob which regulates pumping speed.

Watch for the Revised Quarterly Order Form in your email the week of March 12th. Your orders will be due to Katie Roby at Katie.Roby@state.co.us by **March 30, 2012**. If you have any questions, please contact either Angela Hansen at Angela.Hansen@state.co.us or Katie Roby at Katie.Roby@state.co.us.

Your Health & Wellness continued

3. Make a list of each room in the house that needs to be cleaned. Remember to prioritize your list. If cleaning the garage has been neglected for years, chances are it's not your main concern and doesn't need to be first on your list. It's okay to save projects for the summer.
4. In each room, break down the individual items that need to be cleaned. This will help you to focus on one task at a time.
5. Hand out responsibilities to the members of your family. If you have young children, you might give them something small to do like picking up their toys or watering the plants.
6. Create a chore-sharing plan with your family for cleaning duties all year long. This will save the amount of time needed for spring cleaning next year!

WIC Spanish Intensive course is Back!

The Colorado WIC Program is excited to sponsor our tenth five-day intensive Spanish-language training for local agency staff members. Spanish-language experts from Expanded Learning will conduct this beginner level training at the Cabrini Retreat Center in Golden, Colorado. The dates for the class will be **June 25-29, 2012** with the possibility of staying overnight on June 24 at the retreat facility.

Applications for this training were sent to all local agency directors and supervisors in January. We are still accepting applications and have moved the application deadline to March 30, 2012. Please send completed applications to Julie Griffith @ julie.griffith@state.co.us.

If you have any questions or need an application, please call Julie Griffith at 303-692-2380.

Retail News

Singing the Same Tune

Article #1: Use the Foods List

WIC has lots of ‘customers’ in Colorado. Let’s see . . . there are over a hundred-thousand participants, roughly ten-thousand authorized store and manufacturing partners, and hundreds of local agency and state WIC staff—just to name a few. That is a lot of people and quite a lot of messages we are hearing and sharing about WIC and WIC foods. Sometimes these messages can miss the mark. This is the first in a series of WIC NEWS articles where we will attempt to streamline and clarify some of the routine messages that go out to our customers. We’ll try to ‘sing the same tune’, ‘get on the same page’ oh, you get the idea.

Through the course of the day, there are some common questions among our customers—and, sometimes, among ourselves—regarding WIC foods. Is this allowed? Is that included in the “Do Not Buy”? Is yogurt a vegetable?

Food can get complicated. As more and more varieties, flavors and packaging options are available on grocery store shelves, determining if items are approved for WIC can get even more complicated. It is understandable that at the check-out stand, sometimes the cashier and WIC customer have a question about an item being allowed by WIC.

Identifying WIC foods

There are two fundamental tools in determining WIC allowance: the WIC Allowable Foods List (foods list) and the customer’s WIC check. The cashier and the WIC customer should use both the foods list and the WIC check to determine if that exact item is WIC-approved for that customer; this helps make a ‘question’ at check-out much less of an ‘argument’.

—If the item is WIC-approved and listed on the check, the purchase is allowed even if an override of the store’s cash register system is needed.

—If the item is not WIC-approved or if it is not listed on the WIC check, the item is not allowed for that transaction. The customer can then choose an allowed item.

In the next issue: Rumors about Overrides



Store Monitoring Visit Update

The Speed Limit Warning

To keep up with the federal guidelines, local agencies should be conducting at least one-third of their store monitoring visits per year. The number of monitoring visits reported to us was 55 for last federal fiscal year; the number that should be completed each year is at least 150.

**Colorado
WIC
Allowable
Foods List**

As of April 2010



Contact your local WIC Program with questions





April 2012 LARC Call

Next LARC conference calls:
Tuesday, April 3 at 8:30 am & Thursday, April 5 at 2:30 pm.
Call-in Number: 1-877-820-7831; Code/ Room Number: 381274#

