Colorado WIC News

An Update for Colorado WIC Agencies

Volume 24 | Issue 3 May/June | 2012

Promoting, Protecting, Supporting Breastfeeding: Colorado WIC Food Package Policies (Part 1)

Over the next couple of issues of the WIC News we will focus on putting this policy into practice so that it doesn't matter which staff person a mother talks to, she will receive the information and support she needs to make informed infant feeding decisions.

Why Does WIC Promote Breastfeeding?

The WIC Program is mandated to promote and support long-term breastfeeding. As you know, the benefits of breastfeeding are dose-related. This means the longer a mother and infant exclusively breastfeed, the more likely they will enjoy the health (and many other!) benefits of breastfeeding.

What happens when an infant begins regular formula supplementation in the early days and weeks of life? Unless, in addition to breastfeeding, mother is using a hospital grade pump to remove milk, her milk supply never becomes adequate. The end result is mother and baby now have reduced chances of experiencing the health benefits of breastfeeding.

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ATTENTION ALL STAFF

USDA defines breastfeeding as the practice of feeding a mother's breast milk to her infant(s) on the average of at least once per day.

At each infant visit, make certain the breastfeeding description in the Nutrition Interview is accurate and up to date.

1) An infant who is breastfeeding and receiving out of range formula is still counted as breastfeeding (even in the first month of life).
2) An infant, who is no longer breastfeeding but initiated breastfeeding, must have "no longer BF" selected or the clinic breastfeeding rate data will not show this infant as initiating breastfeeding.

What is WIC's policy?

WIC policy describes, *Promoting, protecting, and supporting breastfeeding is the responsibility of all WIC staff .... To ensure a mother's milk supply is fully established and to support exclusive breastfeeding, formula will not be routinely provided to breastfed babies before they complete four weeks of age. All pregnant and breastfeeding participants will be made aware of this policy.*

Policy states: *Any request for formula by a breastfeeding mother, regardless of an infant's age, requires readily available breastfeeding support and advice from WIC staff.*

Policy to Practice

Question: What if a mother of a two week old baby tells me she doesn't have enough milk and has been giving her baby formula for almost two weeks? What I am supposed to do?

Response: The first time you have this dialogue with a new mother it may be a little uncomfortable for you. Break it down into chunks of information. Begin by digging out some information.

1) When and why did she begin supplementing? This may inform you if the hospital started baby with a supplement for a medical or nonmedical reason. Or maybe mother got home from the hospital and baby was crying a lot and she or family thought baby was still hungry so formula was started. Or maybe a bottle was offered to baby after each feeding session just to make certain baby gets all she needs.

2) What are her goals with breastfeeding? This will help you to understand how committed mother is to breastfeeding. You can learn from her choice of words.

- *As long as I have enough milk*
- *Until I go back to work*
- *Until my milk dries up*
- *I want to breastfeed until he turns one*
- *I am not sure; I am just going to see how long I can last, a couple of weeks/ months.*

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Administrative Update

Colorado WIC Participation

New FORM for ordering WIC Education/Administrative Materials

The Administrative Order Form and the Nutrition Education Materials Order Form have been combined into one order form – the Colorado WIC Program Materials Order Form. We hope the merging of the two forms will make the ordering process easier for staff. The new order form has been posted to the Colorado WIC website at www.coloradowic.com

Equipment Maintenance Update

HemoCue Portable Analyzer

If a HemoCue Portable Analyzer is not working properly in your clinic, please contact HemoCue Technical Support (1-800-426-7256). Technical Support will request the serial number, located on the bottom of each analyzer, to determine if the unit is still under warranty.

Technical Support will ask you to perform a couple of tests on the analyzer. If testing does not correct the problem with the analyzer and the unit is no longer under warranty; contact Katie Roby at the State Office for a replacement analyzer. It is more cost effective to replace an analyzer no longer under warranty than to repair one.

If you would like or need a refresher on HemoCue Analyzer maintenance and capillary sampling, HemoCue has developed an e-learning opportunity that takes about 20 minutes. You will find it at: www.hemocuelearningcenter.com. A certificate may be printed upon completion.

Medela Breast Pumps

From time to time the Medela Lactina or Symphony breast pumps require cleaning, refurbishing, or repair. When a pump is no longer working as expected, the local agency contacts Medela via phone or email to arrange service. This month's CWN includes an insert with instructions on contacting Medela and shipping pumps for repair. Please keep the insert as a supplement to information in the Program Manual.

Contact Katie Roby at the State Office concerning any pump repairs and/or procedural updates. Katie's contact information: Katie.Roby@state.co.us or 303-692-2595.

Note: pumps infested with insects or contaminated with disease require special handling.

FOLLOWING YOUR SUCCESS TOWARD WIC COMPETENCY

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

Nancy Garcia	Denver	I, II, III	Michelle Moeller	El Paso	I	Colleen Novata	Tri-County	III
Nora Lynch	Denver	I, II	Daniela Carasco	Northeast	I	Mindy Stewart	Tri-County	I
Elizabeth Myrick	Denver	I	Jaclyn Blitz	Tri-County	III	Annalisa Miller	Tri-County	III
			Melanie Morrison	Tri-County	I, II	JoAnn Kunugi	Valley Wide	I, II

LA Procedure for Reconditioning and/or Bug Infested Cleaning services of electric breast pumps:

Reconditioning/Repair/Cleaning/Bug Infestation:

1. Clinic employee calls Medela directly at 1-800-435-8316 or emails at Medela Customer service. *Email correspondence is preferred:* customer.service@medela.com

→ Give customer number: #C2872262

→ Tell Medela to bill State WIC (under *CO Health Department WIC – Denver* in Medela's system) Valerie at extension 490 is our contact.

→ Ask about the mailing address at this time
The mailing address should be:

Medela Inc.		**Medela Inc.**
1101 Corporate Dr.	**OR**	**4501 Prime Parkway**
McHenry IL 60050		**McHenry, IL 60050**

→ Ask if the pump is still under warranty

→ If Medela asks about the pricing structure, the local agency is authorized up to a Level 2 repair. If the repair is a level 3, contact the State Office.

→ Ask for an RMA number from Medela so the pump doesn't get lost in the system.

→ If Medela requests a PO number, please use today's date.

2. Here is a format to use for your email correspondence:

> Hello!
> I have a broken Lactina breast pump that I would like to send in for service.
> - Serial number – **XXXXXX**
> - Problem – *Describe the problem here*
> - Billing account – C2872262 (CO Health Department WIC – Denver)
> - Please use today's date as the PO number
> - Please check and see if the pump is still under warranty
> - Please send the RMA number and I will ship the pump to:
>
> Medela
> 1101 Corporate Drive
> McHenry, IL 60050
>
> - Ship fixed pump to:
> **Your Agency Name Here**
> **Attn: Your Name Here**
> **Your Agency Address Here**

3. When shipping the pump for repair be sure to use peanuts and/or bubble wrap and **DO NOT** ship in the pump case,. Pump cases do not always get returned. Please write the RMA number on the outside of the shipping box for tracking purposes. Bug infestation or disease contamination requires special handling. See below.
4. Local agencies pay to send the pump to Medela and Medela will cover the return costs.

Once an RMA has been received from Medela please forward the following information to Katie Roby, preferably via email, at the State WIC Office, Katie.Roby@state.co.us.

- ✓ Agency and Clinic the pump belongs to
- ✓ LA Contact Person
- ✓ Direct Phone Number
- ✓ Email Address
- ✓ Pump Serial Number
- ✓ Date being sent to Medela
- ✓ Medela RMA number
- ✓ Notes: *any additional information you may feel important to the State Office fiscal unit.*

Special Instructions for Pumps that are Bug Infested or Contaminated with MERSA or other diseases:

Pumps contaminated with potentially contagious "germs" such as MERSA must be placed in doubled red biohazard bag!!! The pump should be labeled 'contaminated with MERSA' (or disease) on the outside of the bag.

For pumps that are bug infested, contain the infestation by placing the pump in a bag and seal. Then place the sealed pump into a second bag. Seal the second bag. The pump is now ready to be boxed and shipped. Note that a handling fee of $50.00 will apply if the pump is not sent to Medela double bagged and sealed. Local agencies pay to send the pump to Medela and Medela will cover the return costs.

The RMA number must be written on the outside of the box along with the word 'INFESTED'.

1. Clinic employee calls Medela directly at 1-800-435-8316 or emails at Medela Customer service. Email correspondence is preferred: customer.service@medela.com

→ Inform Medela that the pump is *Contaminated and/or Bug Infested*
→ Give customer number: #C2872262
→ Tell Medela to bill State WIC (under *CO Health Department WIC – Denver* in Medela's system) Valerie at extension 490 is our contact.
→ Ask about the mailing address at this time
The mailing address should be:

Medela Inc.		**Medela Inc.**
1101 Corporate Dr.	**OR**	**4501 Prime Parkway**
McHenry IL 60050		**McHenry, IL 60050**

→ Ask if the pump is still under warranty
→ If Medela asks about the pricing structure, it should cost $60.00 to clean and sanitize a bug infested electric pump.
→ Ask for an RMA number from Medela so the pump doesn't get lost in the system.
→ If Medela requests a PO number, please use today's date.

2. Here is a format to use for your email correspondence:

Hello!
I have a broken Lactina breast pump that I would like to send in for service.

- Serial number – **XXXXXX**
- Problem – *Describe the problem here*
- Billing account – C2872262 (CO Health Department WIC – Denver)
- Please use today's date as the PO number
- Please check and see if the pump is still under warranty
- Please send the RMA number and I will ship the pump to:

Medela
1101 Corporate Drive
McHenry, IL 60050

- Ship fixed pump to:
  Your Agency Name Here
  Attn: Your Name Here
  Your Agency Address Here

3. When shipping the pump for cleaning, be sure to use peanuts and/or bubble wrap and **DO NOT** ship in the pump case, pump cases do not always get returned. **EXCEPTION**: *If you feel the case is contaminated as well as the pump, feel free to send the pump to Medela in the case and then packed in a box, a replacement case can be purchased if necessary*. Please write the RMA number on the outside of the shipping box as well as the word **INFESTED** for tracking purposes.
4. Local agencies pay to send the pump to Medela and Medela will cover the return costs.

Once an RMA has been received from Medela please forward the following information to Katie Roby, preferably via email, at the State WIC Office, Katie.Roby@state.co.us.

✓ Agency and Clinic the pump belongs to
✓ LA Contact Person
✓ Direct Phone Number
✓ Email Address
✓ Pump Serial Number
✓ Date being sent to Medela
✓ Medela RMA number
✓ Notes: *any additional information you may feel important to the State Office fiscal unit.*

STRENGTHENING YOUR PARTNERSHIP WITH WIC

By Lynn Ireland, MS, RD - Colorado WIC Program Nutrition Coordinator

This article is published here so that you can be aware of information recently shared with physicians.

A few months back, State Senator Nicholson approached the Colorado Chapter of the American Academy of Pediatrics Executive Committee to discuss the concept of pediatricians working more closely with WIC staff to identify and meet the needs of infants and children with "failure-to-thrive". Those discussions confirmed that pediatricians value the relationship with WIC staff and want to be more collaborative. The below article was published in the March 2012 Colorado Children's Healthcare Access Program (CCHAP) Newsletter in efforts to help physicians better understand WIC. The CCHAP Newsletter reaches most Colorado pediatricians and family physicians. For more information about CCHAP, visit http://www.cchap.org

Forging stronger partnerships between public health and clinicians can strengthen the care children receive. WIC (the Special Supplemental Nutrition Program for Women, Infants and Children) is a core public health service for children. Following is a description of the Program and ways that the partnership might be strengthened to achieve our mutual goal: that of improving the health of Colorado children.

Although WIC serves only low income families (household income is 185% or less of the poverty level), Colorado WIC serves over 50% of all infants born in the state and 25% of all children through their 5th birthday. WIC's primary purpose is to screen, counsel and refer. Here's how that happens:

Most often, a WIC paraprofessional conducts a child's WIC enrollment, or certification visit. This visit consists of eligibility determination, nutrition assessment, nutrition education and food benefits issuance. Height, weight, blood iron, medical history, current medical conditions, and nutrition practices are a few of the required components of the nutrition assessment. All WIC Programs utilize federally standardized, evidence-based "nutrition risk factors" (NRFs) to quantify how the child is nutritionally at risk. NRFs are either low risk or high risk.

Every child with one or more identified high risk NRFs receives high risk nutrition counseling by a WIC Registered Dietitian or Registered Nurse.

The WIC RD or RN provides individualized nutrition counseling specific to the child's identified high risk NRFs. The visit focus is to illicit trust, understand family circumstances, provide counseling and establish realistic behavior change goals. Documentation of the assessment and counseling into the participant's electronic care plan is the final step.

Discussions between the WIC RD or RN and the child's healthcare provider often occur around diet orders. In other instances, WIC's automated growth charts, a participant's nutrition care plans, or low blood iron notices are shared with the child's healthcare provider. Increased sharing of assessment and counseling data between WIC RDs or RNs and physicians improve the probability that standardized counseling messages occur. Such sharing could be particularly impactful for very high risk situations, such as potential failure to thrive. WIC participants can often provide the phone number for the WIC clinic where they are receiving services. Local WIC Program phone numbers and email addresses are available at www.coloradowic.com.

Should you have ideas on ways to improve the WIC and physician partnership, please email them to Lynn Ireland, MS, RD, Colorado WIC Nutrition Coordinator at Lynn.Ireland@state.co.us.

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Promoting, Protecting, Supporting Breastfeeding:

3) What does she think will be challenges to achieving her goals?

- *My baby cries a lot so I don't think my body makes enough milk for her.*
- *Going back to work will be hard because I can't imagine how I will breastfeed and work at the same time.*
- *I tried to breastfeed my last baby for 6 months and my milk dried up after one month.*
- *I don't think I will be able to breastfeed every time he needs to feed; what if I want to go somewhere without him?*
- *I have 3 other children who need me too; I can't be tied to the baby all the time…someone else has to feed her.*

Whew! These three questions provide you with a heap of information and can direct your responses. Based on mother's responses, do you think she has all the information she needs to make an informed decision? What additional information can you provide? Do you think she is 100% committed, somewhat committed or not sure about her breastfeeding experience?

This is a good time to say something to check for your understanding of where she is. Depending on how committed she is you might say something like:

- *It sounds like you are committed to breastfeeding Marimar!*
- *It seems you really want to breastfeed Daniel and have some concerns as to whether you will be able to because of where you work.*
- *So help me to see if I understand you right, you want to breastfeed and yet you feel like if you spend the time feeding Betina your other children might feel left out and you are busy and so maybe breastfeeding is too much at this time?*

Ask Yourself!

The next question is to honestly ask yourself, *Do I have the confidence and knowledge to help this mother be successful with her breastfeeding goals?*

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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.

Reporting Defects/Issues A Critical Reminder!

The number of Compass application defects has decreased significantly since rollout of the new releases/ versions of Compass. However, some defects still remain. It is important that staff contact the State Office WIC Help Desk with possible Compass defects. The Compass system is under warranty with Ciber until Fall 2013. Let's find and report all errors/issues before the warranty expires!

Pregnancy Panel – "Weight Gained This Pregnancy" field

Some users are mistakenly typing the participant's weight at delivery into the "Weight Gained this Pregnancy" field causing the High Maternal Weight Gain risk factor for postpartum women to be assigned incorrectly on the Risk panel.

Compass Referrals

WIC provides not only nutritious foods and nutrition education, but also referrals for families! Just like we document the foods participants receive (Food Package & Food Benefits panels) and the nutrition education we provide (Nutrition Education & Care Plan panels), referrals must be documented. Referrals can be documented in the Referrals-Participant panel in the Family/Intake branch. It is important that staff document the referrals given to the participant/family so they know what Referrals the participant has received and can follow up on those referrals at the next appointment. The Referrals-Participant panel also allows staff to note the outcome of the referral by choosing from the drop down in the Follow-up column. Follow up on referrals can also be documented in the Care Plan.

Documentation of Referrals and the Compass Reports

The Referral Detail and the Referral Summary report both utilize the referral data users enter into the Referrals-Participant panel and the Family panel (Referred to WIC by fields). These reports indicate the number and types of outgoing and incoming referrals from different agencies.

Adding Referral Organizations into Compass

Staff with security access may add referrals specific to their local agency & clinic into Compass. For instructions, please refer to the document "Setting Up Compass For Your Clinics" in the Compass Preparation binder, System Administration/Operation section.

MICR Printer Cartridges

The acronym MICR stands for Magnetic Ink Character Recognition. This technology uses magnetically chargeable ink or toner to print the numbers and special characters on the bottom of the check.

This number includes the account number, the routing and transit number, and check number. MICR technology is used in the banking industry in many countries because it allows for fast and reliable document processing.

In order to print these special characters on the bottom of the check, a special secure toner cartridge is required. TROY MICR Toner Secure™ was created as a way to help prevent fraudulent alteration of documents. The patented security agent forces a bright red stain to permeate through the document if chemical alteration is attempted. MICR Toner produced by TROY provides a level of quality to meet or exceed the highest printing standards. TROY's MICR toner cartridges are precision-matched to meet the print characteristics of each WIC MICR printer.

Only Troy Toner Cartridges can be used and installed in the MICR printers. Any other toner will void the printer's warranty and create an unreadable MICR line.

The State Office has worked with a local company, The Certex Company, to provide Troy toner at a reduced rate for local WIC Programs. Two types of cartridges are available. The Standard Yield Cartridge yields approximately 6,000 pages with 5% coverage, while the High Yield Cartridge yields approximately 12,500 pages with 5% coverage. **Both toners have a one year shelf life which means the ink cartridges are good for up to one year from the date of purchase! To ensure properly working toner cartridges, make sure your ink cartridge is less than one year old!**

Please develop a plan to replace toner cartridges that are one year past the date of purchase.

See page 7 for MICR Cartridge Ordering Procedures

Documenting Nutrition Education in Compass

by Julie Griffith, RD, Nutrition Consultant

Documentation in Compass is the primary way that WIC staff members communicate with each other about individual participants and ensure seamless care from one visit to the next. Clear documentation enables staff to assess medical and nutritional concerns, determine progress on participant goals, reinforce nutrition education messages and follow up on previously documented plans.

Federal regulations for the WIC Program require a minimum of two nutrition education contacts be documented in the participant's record per certification period. When breastfeeding women and infants are certified for more than six months, nutrition education contacts must be made quarterly.

Proper documentation of a nutrition education contact includes completing both the Nutrition Education panel and the Participant Care Plan panel in Compass. A separate nutrition education contact including completion of the Nutrition Education panel and Participant Care Plan panel is required when both an educator and high risk counselor see the same participant the same day. Combined care plans are not acceptable. The high risk counselor must check the "High Risk Follow Up Appointment" box on the Nutrition Education panel in order for the visit to be identified a High Risk session.

I. Nutrition Education Panel

The Nutrition Education Panel is the location where you record your nutrition education contact, select the nutrition education topics covered and select the pamphlets provided during the visit. The nutrition education covered topics covered must have at least one item selected for each nutrition education session. Pamphlets provided is optional but encouraged at each nutrition education contact.

II. Participant Care Plan Panel

The Participant Care Plan is divided into several sections: Subjective, Objective, Assessment and the Counseling/Plan that includes Counseling Topics, Pamphlets, Goal, and Plan. Let's take a closer look at all the components of the Participant Care Plan in Compass and what needs to be included in each section.

Subjective: Compass pulls information from the most recent Nutrition Interview and goal into the grey area. Staff should add additional client's comments, follow-up on previous goals, and additional referrals not previously documented.

Objective: Compass will pull information from the Anthropometric and Blood panels. Staff may add additional information.

Assessment: All assigned risk factors are pulled from Compass and listed here. Staff should add justification for assignment of subjective nutrition risk factors, such as Nutrition Practice risk factors and Minimum Expected Weight Gain (MEWG) calculation. This is also the place for staff to document their assessment statement such as "diet high in sugar sweetened beverages" or "following growth curve". Any additional counseling points not covered in the counseling topics listed in the 'Topics' field may also be listed here labeled as "Counseling. For agencies whose high risk counselors are using the Nutrition Care Process, PES (Problem, Etiology & Signs/ Symptoms) statements may be added here also.

Counseling/Plan:

Topics: Topics are pulled from the selected nutrition education topics covered in the Nutrition Education panel.

Pamphlets: Pamphlets provided are pulled from the selected pamphlets in the Nutrition Education panel.

Goal: At least one goal is required to be entered. Goals should be participant centered, specific and time sensitive.

Referrals: Referrals provided to participants are pulled from those documented on the Referrals-Participant panel in Compass.

Plan: The plan is a place to record information to be covered at the next visit or additional measures to take. High Risk counselors may enter in the Plan section when to schedule the next visit with the High Risk Counselor.

Remember to complete the important elements of a nutrition education contact and give yourself credit for all of the wonderful work that you do at WIC appointments!

Formula Update

by Kathy Baker MS, MPH, RD
Nutrition Consultant

In the January/February 2012 Colorado WIC News, staff were notified of an upcoming can size change for powdered Enfamil EnfaCare. Mead Johnson has subsequently postponed the change. Therefore, Enfamil EnfaCare powder will continue to be available in the 12.8 oz can.

Mead Johnson Nutrition

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Promoting, Protecting, Supporting Breastfeeding:

Can I provide other ways of looking at her situation that would support breastfeeding and ease her concerns?

If the answer is no, then find someone to assist you in the clinic.

Policy states: *In situations where staff is unable to determine if formula is necessary, the situation must be appropriately assessed by a specially trained staff member to determine the appropriateness of supplementation for the infant.*

The next step is to let your supervisor know you would like additional support in this area. Your supervisor might suggest:
1) observing other staff in the clinic
2) reviewing the Breastfeeding Module and Resource Manual
3) taking an online breastfeeding course
4) discussing situations staff have experienced in the clinic on a weekly basis or during staff meetings, or other ideas.

Stay Tuned!
In the next issue we will review the policy:
Educate all mothers throughout the prenatal and early postpartum period about the benefits of exclusive breastfeeding. Make them aware of the policy that Colorado WIC does not routinely provide formula to breastfed infants who are younger than one month of age.

Staff Tips for Success
Loretta Rivera, WIC Educator at Tri-County Health Department's Englewood clinic, offers ideas for how she helps inform mothers' decisions when they want formula. Loretta shares;

When moms have their babies and call to add baby to WIC, they often tell me they are offering both breast milk and formula. I ask them, "Why are you offering formula?"

They usually say something like, "Well I want to get them use to formula so when I go back to work I don't need to worry about formula", or "My family tells me that it's good to have some formula just in case. " I just get to the point and tell them "WIC does not offer any formula the first month of life for the baby and it's so much better for your baby to get your breast milk." I also say to the mom "Look, breastfeeding is what only you can offer to your baby at this time, no other mom can do this for you." I suggest to moms they freeze their milk so they have some ready to give to their baby when they go back to work too. The mothers usually say, "So I don't get any formula?" I say, "No, no formula for the first month." When they come in a month later they are exclusively breastfeeding and don't typically get formula."

Do you have ways of talking with mothers/parents about exclusive breastfeeding that have brought you success? Share them with Jennifer at Jennifer.Dellaport@state.co.us or 303.692.2462 for the next issue of the WIC News!

by Jennifer Dellaport, RD, MPH, Breastfeeding Coordinator

Upcoming 2012 Breastfeeding Coordinator Conference Calls

July 26 and October 25
9:00 am - 10:30 am
Denver Metro: 720-279-0026
Toll Free: 1-877-820-7831
Participant Passcode: 173985

UPDATE on BPA

Last month, the FDA ruled against banning the plastic additive Bisphenol-A (BPA) from food packaging. BPA, present in items such as plastic baby bottles and metal food cans, has raised concerns following research findings of cancer and reproductive health problems in mice and other animals exposed to large doses. Research from the FDA's National Center for Toxicological Research (NCTR) reports the following findings:

- The level of BPA from food that could be passed from pregnant mothers to the fetus is so low that it could not be measured. Researchers fed pregnant rodents 100 to 1,000 times more BPA than people are exposed to through food, and could not detect the active form of BPA in the fetus eight hours after the mother's exposure.
- Exposure to BPA in human infants is from 84 to 92 percent less than previously estimated.

The updated FDA website provides the following information to consumers who wish to limit exposure to BPA:

- Plastic containers have recycle codes on the bottom. Some, but not all, plastics that are marked with recycle codes 3 or 7 may be made with BPA.
- Do not put very hot or boiling liquid that you intend to consume in plastic containers made with BPA. BPA levels rise in food when containers/products made with the chemical are heated and come in contact with the food.
- Discard all bottles with scratches, as these may harbor bacteria and, if BPA-containing, lead to greater release of BPA.

The FDA continues research to assess the chemical's health effects.

Visit the FDA's Consumer Update page to read more about the FDA consumer updates.

Local Agency Spotlight

Tri-County Health Department

Spring is here, and things are starting to heat up at Tri-County Health Department (TCHD).

WIC has launched a *Rethink Your Drink* campaign, asking moms to consider the amount of added sugar their children are ingesting through sweetened beverages. Using funding from our Communities Putting Prevention to Work grant, the agency is distributing 10,000 *Rethink Your Drink* handouts that were developed by the California WIC program. We hope to increase our clients' awareness of the amount of sugar in beverages by using the sugar display kits that are shown here. These kits have been very effective since clients are shocked by the amount of sugar in their favorite drinks. We look forward to sharing our results with you in the future. In the meantime, please visit our website to view TCHD's commercial and obtain handouts: http://www.tchd.org/sugar.htm

Sugar Kits

WIC Los Valientes Garden in Commerce City

Gardening time is once again upon us. The first TCHD WIC Community Garden began in 2003 at the DeLaney Farm in Aurora and has grown to five gardens with local partners in Adams and Arapahoe counties. With the increase in the number of community gardens and through marketing, we have increased WIC participation at the gardens, along with the amount of produce harvested and provided to WIC participants and food banks. Clients can come to the garden for follow-up appointments. Group classes focus on harvesting fresh produce, tasting the produce right from the plant, and learning how to use and store the food items. The participants then take recipes home to prepare and enjoy food from the gardens. After they work in the garden, clients take home fresh produce along with their WIC vouchers.

TCHD's Dietetic Internship program is helping train interns for registered dietitian jobs in WIC and other public health/community nutrition roles. Interns at TCHD work in WIC clinics for two months, learning WIC budgeting and office management, and they plan a training workshop for staff. We are now able to accept six full-time interns per year. For more information, please visit: http://www.tchd.org/dietetic_internship.htm.

MICR Cartridge Ordering Procedures

Perform the following steps when placing an order:

1. Determine your toner needs. Would your clinic need a Standard Yield or High Yield toner cartridge.
2. Fill out the order form (MICR Toner Cartridges – Form in this issue of the Colorado WIC News). If you are ordering for an entire Agency, you can create one email order, but for delivery clarity please create one form for each shipping location.
   - Email contents:
     From: person sending the email order to Certex
     To: lrandall@certexco.com
     Cc: anniek@certexco.com
     Subject: Local Agency & Clinic name, email date & MICR Toner Order (example: Denver-Westside 8.1.11 MICR Toner Order)
   - Attach completed form. Please be sure to include all the following information in order
     Item number of specific toner cartridge (02-81600 **or** 02-81601), Quantity needed, Price (contracted rate of $228/$380 respectively), Total Amount of order, Agency Name, Shipping Address, LA Contact Name, LA Contact Phone Number, LA Contact Email Address
   - Additional clarification/notes if necessary
3. Email the order to the Certex Company at lrandall@certexco.com
4. Wait for delivery. If you have questions about your order, please contact the Certex Compny.

ADDITIONAL DETAILS:
Local agency staff can direct questions regarding ordering policy, procedures or financial questions to State Fiscal Staff member Katie Roby (katie.roby@state.co.us) or 303-692-2595.

WIC Protocol Manual Updated and Renamed

by Kathy Baker MS, MPH, RD - Nutrition Consultant

The WIC Protocol Manual has been revised and has been given a new name – the WIC Nutrition Education Guide. The WIC Protocol Manual, developed in 2005, was a collaboration between state and local WIC staff designed to assist with training staff, standardize assessment and counseling, and provide a streamlined method of nutrition education documentation. The topics, subtopics, and counseling points listed in Compass are an abbreviated version of those noted in the booklet. The updated WIC Nutrition Education Guide still serves the same purpose and now matches the updated Compass nutrition risk factors and procedures. All updates in the WIC Nutrition Education Guide are also incorporated into Compass. Other changes to the guide include:

- Revision of the "General" section, with updated listing of approved acronyms and abbreviations; updated visit protocols; addition of visit protocols for Mid-cert visit, Follow-up/Follow-up with Anthros, Add baby, Transfer, Breast pump issuance; updated protocols for high risk counseling; updated listing of Medical Conditions
- Additional counseling points addressing prevention of overweight, such as physical activity, limiting juice and sweetened beverages, adequate sleep, limiting convenience and fast food, adult role modeling for healthy eating.
- Addition of an "All Participant Categories" section, matching the listing in Compass. The sub-topics include the following: General Nutrition Education, High Risk Counseling Points in Care Plan, Orientation, and Other. Note that when "High Risk Counseling Points in Care Plan" and "Other are chosen, staff are required to document in the Compass Care Plan the specific counseling provided.

The newly revised WIC Nutrition Education Guide will soon be posted under the "Resources for Agency Staff" on the Colorado WIC website at www.coloradowic.com. Newly hired WIC employees will receive paper copies as part of their New Employee Training, whether the training is conducted at the State Office or at their local agency.

Retailer News

Changes to the Retailer Coordination Unit

Here at the state office of Colorado WIC, there have been some big changes to the Retailer Coordination group. A Benefit Delivery Unit has been developed to coordinate the delivery of various benefits to our customers—including WIC participants, local agencies, and other community partners. Our assignment includes: ensuring WIC participants receive the nutritious foods prescribed for them; averting and sanctioning abuse of Program policies; providing guidance and training for local agencies and retailers; and, developing and updating the delivery and distribution of the materials and tools we use to provide all those benefits and services.

The new Benefit Delivery Unit is made up of Michael Walters, Peggy Ramirez, Brandan Slattery, and Cheryl Cassell. We look forward to learning from you—our customers—how to provide the best possible service to meet your needs. We are developing survey questions to identify your priorities that will be distributed in the next few months. Each local WIC agency is a VIP!

July LARC Conference Calls

Tuesday, July 3rd at 8:30 am & Thursday, July 5th at 2:30 pm. Phone Call-in #: 1-877-820-7831 Code/Room #: *381274*

Thank You

Michael Walters, Benefit Delivery Unit at the State WIC Office, would like to thank all of the local agency folks who assist him with the FI Ordering and Receipt in the Compass System. Your cooperation is greatly appreciated.

Colorado Department of Public Health and Environment

Colorado WIC News is published by the Nutrition Services/WIC Program, Colorado Department of Public Health and Environment, 4300 Cherry Creek Drive South, Denver, CO 80246-1530, (303) 692-2400. Comments, questions, and contributions are encouraged; please address them to Katie Roby, Editor, Katie.Roby@state.co.us.
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