

All WIC New Staff Training Checklist (links embedded)

Name: _____ Staff Role: All ____ CPA/RD: ____ Clerk: ____ Tech: ____

Date of Hire: _____ Completion Date: _____

Staff Signature: _____ Supervisor Signature: _____

WIC Program Overview		Date Completed	Trainer Initials
Complete Michigan WIC Employee Confidentiality and Compliance Agreement Signature Form			
Complete Michigan Civil Rights Training			
Explore Michigan WIC website			
Explore WIC Works USDA trainings			
<ul style="list-style-type: none"> Especially https://wicworks.fns.usda.gov/resources/wic-learning-online 			
System Setup		Date Completed	Trainer Initials
Create MILogin (3rd party) Account (Contact coordinator)			
Assign MI-WIC roles (Contact coordinator)			
Assign MCIR roles (Contact Immunization coordinator), if necessary			
Assign EPPIC system rights (Contact coordinator)			
Assign EBT Machine number / login (https://www.ebt.acs-inc.com/)			
Assign MI-Health Benefit or CHAMPS roles for Medicaid Verification			
Policy Review MI-WIC Policy Manual		Date Completed	Trainer Initials
ALL STAFF	1.02 WIC Overview		
	1.03 Confidentiality		
	1.04 Fair Hearing		
	1.07 LA Staffing and Training		
	1.09 Civil Rights		
	1.10 Voter Registration		
	2.01-2.23 Certification and Eligibility Policies		
	3.01-3.04 Program Maintenance		
	4.01 Breastfeeding Promotion, Protection and Support		
	4.03 Clinic Environment		
4.04-4.08 Breastfeeding Policies			
5.01 Nutrition Education Overview			
5.02 Nutrition Education Contacts			
5.07 Documentation of Nutrition Services			
6.01-6.06 Service Coordination and Outreach Policies			
7.02 Authorized WIC Foods			
8.01-8.09 Benefit Issuance/EBT Card Security Policies			
9.01-9.03 Program Compliance Policies			
CPA/RD	2.13 Nutritional Risk Determination		
	5.03-5.08 Nutrition Education Policies		
	7.01 Food Package Determination		
	7.03-7.05 Food Package for Qualifying Conditions, Maximum, Customized Food Package		

Review Past, Present and Future Trainings <i>Ask supervisor to help you coordinate</i>		Date Completed	Trainer Initials
ALL STAFF	Print Staff Training Plan and keep for your records		
	Review current Training and Events by Category link		
	Participate in LMS training modules		
	Develop skills for Client Centered Services		
	Review relative archived webcasts (at the bottom) on MPHI		
Other materials to read and review		Date Completed	Trainer Initials
ALL STAFF	Current Food Guide Infant Formula Insert List of Authorized Formulas Health History forms (optional-if agency uses) www.wichealth.org (WIC online NE); Lesson Descriptions What is Project FRESH?		
	CPA/RD	Manually Assigned Risk (MAR Tool) Medical Conditions and Illnesses Nutrition Care Manual/Pediatric Nutrition Care Manual (Contact coordinator or DuJour for login)	
Read and demonstrate clinic duties <i>Ask supervisor, roles may vary according to local agency</i>		Date Completed	Trainer Initials
ALL STAFF	MDHHS Anthropometric Manual		
	MDHHS Laboratory Manual		
	Demonstrate proper technique for measuring heights and weights of women, infants, and children, and head circumference for infants		
	Demonstrate proper technique for collecting blood sample to check hemoglobin		
Demonstrate clinic duties continued <i>Ask supervisor, roles may vary according to local agency</i>		Date Completed	Trainer Initials
ALL STAFF	Search (Family and Client) <ul style="list-style-type: none"> State or Local 		
	Review Clinic Schedule Set-up		
	Scheduling Appointments <ul style="list-style-type: none"> Certification (CERT, RECERT, PCERT) Mid-Certification (IEVAL/CEVAL) Nutrition Education (EDU, EDUO, EDUT, EDUW) High Risk (NCRD) Breastfeeding (BFPC, BFLS, BFLC) WIC Client Connect (WCC) Project FRESH (PFRESH) 		
	Update Family/Client Information Screens		
	Review Cert Action Screen <ul style="list-style-type: none"> Confirm EDD and Category Category Change Resolve short certification 		
	Review Lab Screen <ul style="list-style-type: none"> Anthropometric measurements 		

	<ul style="list-style-type: none"> • Lab measurements 		
	<ul style="list-style-type: none"> • Immunization/MCIR record review 		
	<ul style="list-style-type: none"> • Lead Screening 		
	Electronic Benefits Transfer Card (EBT)		
	<ul style="list-style-type: none"> • Issue EBT card 		
	<ul style="list-style-type: none"> • Re-issue EBT Card 		
	<ul style="list-style-type: none"> • Use/Provide EBT card customer service line (888-678-8914) 		
	<ul style="list-style-type: none"> • Maintain EBT card inventory 		
	Issue Benefits Screen		
	<ul style="list-style-type: none"> • Issuing and voiding benefits 		
	Benefits History		
	<ul style="list-style-type: none"> • Benefit Proration 		
	<ul style="list-style-type: none"> • Benefit Re-Issuance (Per MI-WIC Role) 		
	<ul style="list-style-type: none"> • Print Document Screen 		
	EPPIC		
	<ul style="list-style-type: none"> • Benefits search 		
	<ul style="list-style-type: none"> • Staff Password reset 		
	Other		
	<ul style="list-style-type: none"> • Scanning Documents 		
	<ul style="list-style-type: none"> • Signature Pad 		
	<ul style="list-style-type: none"> • Dual Participation 		
	<ul style="list-style-type: none"> • Transfers (Family, Client, Out of State/Migrant) 		
	<ul style="list-style-type: none"> • Formula Return/Exchange (See LA policy) 		

Demonstrate clinic duties continued		Date Completed	Trainer Initials
<i>Ask supervisor, roles may vary according to local agency</i>			
CPA/RD	Medical History and Assessment		
	<ul style="list-style-type: none"> • Review client’s medical conditions and illnesses • Verify diagnosis, if indicated 		
	<ul style="list-style-type: none"> • Breastfeeding Statistics 		
	<ul style="list-style-type: none"> • Document client responses 		
	Nutrition History and Assessment		
	<ul style="list-style-type: none"> • Review nutrition-related medical conditions 		
	<ul style="list-style-type: none"> • Assess food and beverage intake 		
	<ul style="list-style-type: none"> • Assess family and client eating behaviors 		
	Verify and Assign all Applicable Risks (use MAR tool)		
	Nutrition Education		
	<ul style="list-style-type: none"> • Practice Eligibility Explanation 		
	<ul style="list-style-type: none"> • Provide education 		

	<ul style="list-style-type: none"> Determine NE plan 		
	Determine Client Concerns and Interests (Client Centered Services)		
	<ul style="list-style-type: none"> Practice counseling using client centered services skills 		
	Referrals		
	<ul style="list-style-type: none"> Determine client concerns and needs 		
	<ul style="list-style-type: none"> Provide information about referrals/referral letter 		
	<ul style="list-style-type: none"> New client-local substance abuse treatment and referral 		
	<ul style="list-style-type: none"> If high risk, refer to RD for NCRD appointment 		

CPA/RD/ BF Peer Counselor	Breastfeeding Assessment		
	<ul style="list-style-type: none"> Determine client concerns and needs 		
	<ul style="list-style-type: none"> Provide education and support 		
	<ul style="list-style-type: none"> Document BF assessment 		
	Breastmilk Expression		
	<ul style="list-style-type: none"> Determine client concerns and needs 		
	<ul style="list-style-type: none"> Breastmilk handling and storage 		
	<ul style="list-style-type: none"> Operating and cleaning types of pumps 		
	<ul style="list-style-type: none"> Breast pump issuance procedures 		
<ul style="list-style-type: none"> Multi-user Loaner pump return receipt 			

CPA/RD	Food Prescription Screen		
	<ul style="list-style-type: none"> Assign client food package based on assessments (e.g., allergies, breastfeeding amount, medical conditions) 		
	<ul style="list-style-type: none"> Customize food package, if needed 		
	<ul style="list-style-type: none"> Obtain medical documentation, if needed 		
	<ul style="list-style-type: none"> Food package change request (including education, assessment, counseling) 		

Additional RD Duties	Conduct Nutrition Assessment, Intervention and Monitoring		
	<ul style="list-style-type: none"> Review problem list (past notes, medical documentation) 		
	<ul style="list-style-type: none"> Provide high risk counseling and nutrition education 		
	<ul style="list-style-type: none"> Create individual Care Plan 		
	<ul style="list-style-type: none"> Document nutrition education (in NE pop-up grid) 		
	<ul style="list-style-type: none"> Assess and approve class III formulas 		

Print Forms for Family and Client		Date Completed	Trainer Initials
<i>Ask supervisor, roles may vary according to local agency</i>			
ALL STAFF	For a Family		
	<ul style="list-style-type: none"> Client Agreement 		
	<ul style="list-style-type: none"> Client Shopping List 		
	<ul style="list-style-type: none"> Client Vendor Listing (1st visit and upon request) 		
	<ul style="list-style-type: none"> Discrimination Complaint Form 		

• Fair Hearing Notice		
• Income Attestation Form		
• Nutrition Education Plan		
• Residency Attestation Form		
• Verification of Certification		
• Voter Registration Form & Procedure		
For a Client		
• Client Care Plan and Care Plan Follow Up (report)		
• Client Termination Form		
• Compliance Letter		
• Identity Attestation Form		
• Ineligibility Notice		
• Loaner Breast Pump Return Receipt		
• Multi-User Breast Pump Loan and Release Agreement		
• Referral Notification		
• Residency Attestation Form		
• Short Certification Letter		
• Single User Breast Pump Release Agreement		

- **DuJour (Help Line): 800-942-1636, press 1, then 2**
For WIC procedure or client issues, contact the DuJour line for assistance.
- **3 Sigma Help Line: 800-942-1636, press 1, then 1**
For MI-WIC system issues and technical assistance.