

1.0 Administration

Effective Date: 8/28/2024

1.12 Emergency/Disaster Planning and Coordination

PURPOSE: To provide local WIC agencies direction in meeting the needs of WIC applicants and clients prior to, during, and following an emergency period, supply chain disruption, or supplemental food recall.

DEFINITIONS:

Bioterrorism means an intentional release or dissemination of biological agents. These agents are bacteria, viruses, or toxins, and may be in a naturally occurring or human-modified form.

Disaster means an occurrence or threat of widespread or severe damage, injury, or loss of life or property resulting from a natural or human-made cause, including but not limited to; fire, flood, snowstorm, ice storm, tornado, windstorm, wave action, oil spill, water contamination, utility failure, hazardous peacetime radiological incident, major transportation accident, hazardous materials incident, epidemic, air contamination, blight, drought, infestation, explosion, or hostile military or paramilitary action, or similar occurrences resulting from terrorist activities, riots, or civil disorders, as defined in 1976 PA 390, as amended.

Emergency means any occasion or instance for which, in the determination of the President, Federal assistance is needed to supplement State and local efforts and capabilities to save lives and to protect property and public health safety, or to lessen or avert the threat of a catastrophe in any part of the United States.

Emergency period means a period during which there exists:

1. A presidentially declared major disaster as defined under section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5121 et seq.).
2. A presidentially declared emergency as defined under section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5121 et seq.).
3. A public health emergency declared by the Secretary of HHS under section 319 of the Public Health Service Act (42 U.S.C. 247d).
4. A renewal of such a public health emergency pursuant to section 319.

Human pandemic means a disease affecting a large number of people that spreads over multiple continents and countries and usually impacts a lot of people.

Major disaster means any natural catastrophe (including any hurricane, tornado, storm, high water, wind-driven water, tidal wave, tsunami, earthquake, volcanic eruption, landslide, mudslide, snowstorm, or drought), or, regardless of the cause, any fire, flood, or explosion, in any part of the United States, which in the determination of the President causes damage of sufficient severity and magnitude to warrant major disaster assistance under the Robert T. Stafford Disaster Relief and Emergency Assistance Act (P.L. 93-288) Act to supplement the

efforts and available resources of States, local governments, and disaster relief organizations in alleviating the damage, loss, and hardship, or suffering caused thereby.

Recall means any recall as defined in 21 CFR 7.3(g) or any successor regulation. Recalls may be conducted voluntarily by a manufacturer or may be required by the Food and Drug Administration (FDA).

Supply chain disruption means a shortage of WIC supplemental foods that limits WIC clients' ability reasonably to purchase supplemental foods using WIC benefits within a State agency's jurisdiction, as determined, and declared by the USDA Secretary for the purposes of WIC.

A. POLICY

1. During an emergency/disaster, WIC State and local agency staff must contribute to relief efforts to support continuation of WIC services statewide.
2. Emergency/Disaster Plan
 - a. The local agency must have an emergency/disaster plan that includes:
 - i. A copy of the health department or organization's emergency/disaster preparedness plan, to include contingency plans for delivery of services in an emergency/disaster.
 - ii. Local government/community agency emergency/disaster contact information.
 - iii. Name and contact information for the local WIC agency person(s) designated to serve as the emergency/disaster contact(s) and be responsible for coordinating with the non-WIC local and State WIC emergency/disaster contacts.
 - iv. State and local WIC agency and staff contact information.
 - v. A communications plan for keeping the State WIC agency and WIC clients informed during an emergency/disaster, including notifications related to service disruption, relocation, and availability of WIC services.
 - b. A copy of the local agency specific disaster plan must be available at each clinic within an agency.
 - c. The local agency must review with staff on an annual basis the contingency plans for delivery of services in an emergency/disaster.
3. Continuation of WIC Services

- a. Local agencies must work cooperatively with the State WIC agency during emergency periods, supply chain disruptions and/or supplemental food recalls to support continuation of WIC services.
- b. In the event WIC services cannot be provided in accordance with existing MI-WIC policies, the local agency must:
 - i. Notify the State WIC agency to determine potential flexibilities and allowable alternate operating procedures. (When necessary, the State agency will work with USDA to determine if/when waivers to Program requirements apply.)
 - ii. Promptly communicate relevant information to the State WIC agency, including but not limited to the following (contact State for reporting tool).
 - (a.) WIC services that are disrupted.
 - (b.) Clinic operations/building structure (physical damage, availability of electricity and water).
 - (c.) Temporary facility (if applicable), computer, internet service and food instrument availability.
 - (d.) Availability of staff.
 - (e.) Availability of WIC foods and/or formula from area authorized vendors.
 - (f.) Estimated number of clients affected.
 - (g.) Damaged/destroyed WIC records, equipment and/or property.
 - (h.) The extent of time the local agency will be inoperable.
 - (i.) Recovery/restoration plan.
 - (j.) Plan to notify clients.
 - (k.) Technical assistance requested from the State agency.
 - iii. Provide for the safety of WIC staff, clients, and equipment.
 - iv. Secure records, equipment, and supplies.
 - v. Work with their administration and local emergency/disaster response team as appropriate to determine how to implement services.
 - vi. Restore services as soon as possible.
 - vii. Notify clients of disruption or relocation of services (in coordination with the State agency).
- 4. Use of standard operating policies and existing Program flexibilities are encouraged during times of emergency/disaster to minimize disruption of WIC operations, including, but not limited to the following:
 - a. Verification of Certification
 - i. Local agencies must provide a Verification of Certification (VOC) to each client at the time of certification and subsequent certifications, and

additional copies as needed, in anticipation of evacuation or relocation, upon request. Clients can contact their local clinic or the State WIC agency for a VOC. (See Policy 2.19, Verification of Certification.)

- ii. Remind clients evacuating or transferring to another state to take their VOC with them (photo can be stored on mobile device).
- iii. Treat persons presenting a VOC from another local agency or state as a transfer, as long as they are within a current certification period. (See Policy 2.19, Verification of Certification.)

b. Initial and Subsequent Certifications/Subsequent Certifications

- i. Use online tools, such as [FNS WIC Pre-Screening Tool \(usda.gov\)](https://www.usda.gov/food/assistance/wic/pre-screening-tool), State of Michigan prescreening Tool, available client facing technologies or electronic referrals to the extent possible to reduce time in the clinic, maximize limited staff resources, and ensure the safety of staff and clients.
- ii. Unhoused disaster victims seeking WIC services must be considered at special nutritional risk and certified within 10 days of their request for WIC services. (See Policy 3.01, Processing Timeframes and Appointment Scheduling.)
- iii. Local agencies may allow exceptions for physical presence of an applicant/client in certain situations. (See Policy 2.09, Physical Presence.)
- iv. Income, residency, and identity documentation requirements do not apply to individuals for whom documentation is not available. (Refer to Policies 2.02, Residency; 2.03, Identity; and 2.04, Income Determination, for applicable information on short certifications and attestations.)
- v. Displaced individuals who are temporarily residing with another family must be considered a separate family. (See Policy 2.08, Family Size.)
- vi. Certifications may be completed by WIC CPAs working in other programs (e.g. MIHP, home visiting programs). (Refer to Policy 1.07 Staffing and Training for CPA credential requirements and responsibilities.)
- vii. Local agencies must use paper forms to collect client information when MI-WIC is not accessible .
- viii. Records, whether electronic or hard copy, that contain confidential client information must be stored in a secure manner. (See Policy 1.06, Record Retention and Destruction.)
- ix. WIC regulations require, at a minimum, height or length and weight measurements; and a blood test to assess hemoglobin status. Referral data for any of these three requirements can be used in place of taking measurements at the WIC clinic. WIC regulations also allow the blood test to be deferred for up to 90 days for persons with a documented nutritional risk. (See Policies 2.15, Anthropometric Risk Determination and 2.16, Hematological Assessment for Anemia.)

- x. The local agency may extend the certification period for infants and children for 30 days to accommodate difficulty in scheduling clients. (See Policy 2.17, Certification Periods.)
- c. Nutrition Assessment and Education
 - i. Attempt to complete a full assessment at the time clients seek WIC services to ensure they are referred to appropriate local health and social services. (See Policy 5.01, Nutrition Services Overview.)
 - ii. Encourage and provide appropriate nutrition education. Nutrition education topics may include, but are not limited to: food preparation and food safety, including limited or no access to safe water; and handling/storage of human milk and infant formula.
 - iii. Encourage clients to complete online nutrition education for interim nutrition education, if available. (See Policy 5.02, Nutrition Education Contacts.)
- d. Lactation Support
 - i. Human milk is to be promoted as the safest milk for infants and young children during an emergency/disaster.
 - ii. Local agencies will:
 - (a.) Encourage parents to initiate and continue breast/chestfeeding their infants or young children as long as possible.
 - (b.) Educate parents about re-lactation if desired.
 - (c.) Provide breast pumps and lactation aids, if needed.
 - (d.) Provide access to lactation professionals; utilize community resources if local agency staff are not available.

Note: Local WIC agency staff are encouraged to meet with the local emergency preparedness team to convey the importance of continued breastfeeding/chestfeeding during emergencies and contribute to a plan that supports breastfeeding/chestfeeding during emergencies/disasters.
- e. Food Benefits
 - i. Food benefits must be made available to clients at the time of certification. Upon client request, local agency staff must immediately replace EBT cards that have been lost or destroyed during a disaster. (See Policy 8.01, Benefit Issuance and Policy 8.09 WIC EBT Card Issuance.)
 - ii. Food packages may need to be adjusted to accommodate clients who are unhoused, lack food storage or preparation facilities, or experience a disruption in the food supply. (See Policy 7.01 Food Package Determination and Customization.)

- iii. Clients have the option to designate a proxy to redeem WIC benefits on their behalf. (See Policy 8.03, Proxy.)
 - iv. If a supply chain disruption or supplemental food recall results in decreased access to WIC food benefits for clients, the local agency must notify the State agency.
 - v. Formula must only be issued if human milk is not available, is requested by the family, and/or is medically necessary.
 - vi. Upon client request, local agencies must replace food benefits after a documented disaster when redeemed food benefits are unavailable. (See Policy 8.04, Replacement of Food Benefits and Policy 8.02, Benefit Proration.) In cases where a local agency needs to replace food benefits for a significant number of families, the local agency must notify the State agency.
 - vii. Local agencies must refer clients to emergency food distribution locations in their county if appropriate.
 - viii. Local agencies may modify food packages to include ready-to-feed formulas in instances where water supply or refrigeration is inadequate. (See Policy 7.02, Authorized WIC Foods.)
 - ix. WIC food benefits, including formula, may not be used for purposes other than providing benefits to categorically eligible clients.
- f. Food packages for Qualifying Conditions
- i. Refer to Policy 7.03, Food Package for Qualifying Conditions, for medical documentation flexibilities related to telephone orders.
 - ii. Clients transferring into Michigan WIC clinics who can provide medical documentation for WIC-eligible formula may be issued benefits up to the end of the certification period or end date of the documentation (whichever comes first).
 - iii. Clients without available documentation who can name the type of WIC formula they received before relocating may be issued one month of benefits after assessment. (Refer to Policy 7.03, Food Package for Qualifying Conditions, for subsequent benefit issuance.)
 - iv. For re-locating clients, if the exact formula is not on the list of Michigan WIC Authorized Formulas, a comparable WIC-eligible formula appropriate for a participant's qualifying condition may be issued.
 - v. Persons seeking WIC benefits who were not enrolled prior to the emergency/disaster must obtain medical documentation before being issued a food package for qualifying conditions. (See Policy 7.03, Food Package for Qualifying Conditions.)
 - vi. Local agencies and the State agency will work together to develop and update a list of open and authorized WIC stores and pharmacies. If WIC

vendors are closed, local agencies must refer clients to alternative emergency food sources.

- vii. WIC staff must refer clients with documented qualifying conditions in need of medical care to local health care providers during an emergency/disaster.

g. Disruption in Potable Water Supply

- i. WIC formula-fed clients without access to safe water may qualify for ready-to-feed (RTF) formula. (See Policy 7.02, Authorized WIC Foods.) In the event of an emergency/disaster, the local agency must consult with the State agency to confirm authorization of RTF formula. If authorized, the local agency must attempt to contact the formula-fed clients and provide them with the option to receive RTF formula.
- ii. Partially breast/chestfeeding clients must be informed that human milk is the safest choice when water quality is questionable, and if desired, referral to a lactation consultant must be offered to support transition to exclusive breast/chestfeeding.
- iii. If applicable, clients choosing RTF formula must be provided education, including RTF preparation and storage.
- iv. The local agency must take into consideration the length of the emergency/disaster when assigning RTF food packages, if applicable.
- v. RTF formula is not generally authorized in cases of Lead and Copper Action Level Exceedance (ALE) detections that result in recommendations to flush water or use filtered water.
- vi. Local agency WIC Coordinators must rely on their local health department, including environmental health staff for guidance on supplies that may be necessary for safe water (i.e. water filters, water pitchers, bottled water), and availability of these supplies.
- vii. Local WIC agencies that have been asked to assist with filter or potable water distribution must consult with the State agency.

Notes:

1. Parents/caregivers of formula fed clients should be encouraged to have an emergency supply kit that includes enough water to feed them for at least 3 days.
2. Bottled water is not an allowable WIC cost. Local agencies can refer clients in need of water to potential alternate sources (e.g. SNAP, D-SNAP, FEMA and/or mass care organizations such as Red Cross or the Salvation Army).

5. WIC agencies must operate within their funding level during an emergency/disaster. WIC funds must not be used for non-WIC activities. (See Policy 11.01, Program Costs.)
 - a. Allowable Cost:
 - i. WIC staff time to participate in WIC emergency or disaster preparedness and response planning.
 - ii. Cross training non-WIC staff to provide coverage in the WIC clinic in the case of staff absence.
 - iii. During an emergency/disaster, the purchase of supplies is allowable. This includes, but is not limited to:
 - (a.) Cleaning or disinfectant supplies, tissues, waste baskets, or gloves for clients and staff.
 - (b.) Masks and respirators, if it is determined these are necessary for the safety and well-being of WIC Program clients and staff to conduct WIC Program operations.
 - (c.) Personal Protective Equipment (PPE) if not available from other sources such as local health department or other organizations.
 - (d.) Essential equipment to administer WIC services (e.g., cell phone, air card, hot spot, wi-fi, etc).
 - b. Non-Allowable Cost
 - i. WIC Program funds may not be used to pay for WIC staff time used for non-WIC duties during an emergency/disaster.
 - ii. WIC Program funds may not be diverted to non-WIC accounts. Contact your local agency consultant for additional information.
 - iii. WIC Program funds may not be used to purchase or administer vaccines or pay for costs associated with the delivery of acute or primary health care services, such as purchasing medical equipment (e.g., oxygen units, sterilizing supplies, and syringes).

Reference:

- [WIC Policy Memo 2024-3 Implementing ABFA Requirements in WIC State Plans](#)
- [Special Supplemental Nutrition Program for Women, Infants, and Children \(WIC\): Implementation of the Access to Baby Formula Act of 2022 and Related Provisions](#)
- [Guide to Coordinating Special Supplemental Nutrition Program for Women, Infants, and Children \(WIC\) Services When Regular Operations Are Disrupted, 2021](#)
- WIC Policy Memorandum 2007: WIC Program Response to a Human Pandemic

- [WIC Policy Memorandum 2003-4: Allowable Costs of Bioterrorism Preparedness](#)

Cross-Reference:

- 1.06 Record Retention and Destruction
- 1.07 Local Agency Staffing and Training
- 2.02 Proof of Residency
- 2.03 Proof of Identity
- 2.04 Income Determination
- 2.08 Family Size
- 2.09 Physical Presence
- 2.15 Anthropometric Risk Determination
- 2.16 Hematological Assessment for Anemia
- 2.17 Certification Periods
- 2.19 Verification of Certification
- 3.01 Processing Timeframes and Appointment Scheduling
- 5.01 Nutrition Services Overview
- 5.02 Nutrition Education Contacts
- 7.01 Food Package Determination and Customization
- 7.02 Authorized WIC Foods
- 7.03 Food Package for Qualifying Conditions
- 8.01 Benefit Issuance
- 8.02 Benefit Proration
- 8.03 Proxy Policy
- 8.04 Replacement of Food Benefits
- 8.08 Michigan WIC EBT Card Security
- 8.09 Michigan WIC EBT Card Issuance
- 11.01 Program Costs