MI-WIC POLICY

Service Coordination and Outreach

Effective Date: 04/12/13

6.0 Service Coordination and Outreach

6.02 Referrals

PURPOSE: To assure that clients are informed of available and appropriate health and community

services and how to access those services.

A. POLICY:

1. During the initial certification visit and thereafter as appropriate, each client, parent or caretaker must be advised of the types of health and community services available, where they are located, how they may be obtained, and why they may be useful.

- 2. Local agencies must make information available to all WIC adults and caregivers for Medicaid/MIChild, and also make referrals, when appropriate, for persons who are:
 - a. Uninsured
 - b. Underinsured
 - c. Potentially eligible for Medicaid, but who are not currently enrolled in the Medicaid program
- 3. Local agencies must maintain and provide a list of resources for local drug and other harmful substance abuse counseling/treatment information. This list of area resources must be given to all new clients enrolled in the program at their first certification appointment and thereafter as appropriate.
- 4. The local agency must comply with the State of Michigan Child Protection Law, P.A. 298, 1975 and Policy 6.06, Reporting of Suspected Child Abuse.
- 5. Local agencies must ensure that nutritional high risk clients are identified and scheduled/referred for the appropriate nutrition care according to Policy 5.02 Required Services for Nutritional High Risk Clients.
- 6. If, during a visit to the Local Agency, it is determined that a client may benefit from health or community services not provided by the local agency, WIC staff must provide specific referral information to clients related to their individual needs. Referrals to a public health nurse, social worker or 211, while recommended for continuity of care, do not replace WIC's requirement to refer.
- 7. When WIC staff provides referral information to clients related to their individual needs, the referral must be documented in the client's record.
- 8. If referrals are made directly to the referral agency, the local agency must obtain a release of information. Release of information forms must specify which agency is to have the information and what information is to be released.
- 9. Applicants placed on a waiting list, or not able to be served by WIC, must be provided with information about other potential sources of food assistance (CSFP, Special Nutrition Assistance Program (SNAP), area Food Pantries, etc.).

B. GUIDANCE:

- 1. Referrals may be made directly by contacting the referral agency or indirectly, by informing the clients of services that are available and providing information on how to obtain them.
- 2. Local agencies may establish a standard procedure that ensures all WIC clients receive information on:
 - a. Food assistance programs, such as:
 - i. Special Nutrition Assistance Program (SNAP)
 - ii. Commodity Supplemental Food Program
 - iii. Food pantries, soup kitchens and other emergency feeding programs
 - b. MIChild, Healthy Kids Programs
 - c. Temporary Assistance to Needy Families (TANF)
 - d. Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services
 - e. Head Start and Early Head Start
 - f. Expanded Food and Nutrition Education Program (EFNEP)
 - g. Family planning
 - h. Immunizations
 - i. Maternal-Child Programs
 - j. HIV testing services and treatment programs
 - k. Lead screening
 - 1. Lactation support
 - m. Child Support Enforcement Program
 - n. Area substance abuse referral/treatment programs
- 3. As a best practice, local agencies shall follow-up on previous referrals, and offer appropriate referrals at mid-certification assessments.

References:

FNS Instruction 800-1

Federal Regulations 246.6 (b) (3), 246.7 (a), (b)(1)-(3), (j)(4)

Nutrition Services Standards, US Department of Agriculture, Food and Nutrition Service, October 2001 P.A. #298, 1975

USDA: Guidance for Providing Quality WIC Nutrition Services during Extended Certification Periods. August 29, 2011.

Cross-Reference:

- 1.03 Confidentiality
- 5.02 Required Services for Nutritional High Risk Clients
- 6.06 Reporting Suspected Child Abuse