

# January 24, 2022, Advisory Group Meeting

## Notes

### Welcome New Members

#### ADVISORY GROUP (AG) MEMBERS PARTICIPATING:

- **Chair** - Nikki Bennett (St. Louis Co.); **Regional Reps:** **Jenny Barta** (Carlton Co.); **Kristen Bricko** (Sherburne Co); **Jessica Holst** (Fillmore Co.); Teresa Cooling (Watonwan); **Sue Olson** (Clay Co.); Stephanie Olson (Polk Co.); Maggie Domski (Washington Co.); **Caseload Group Reps:** **Kathy Duffy** (Ramsey); **Megan Keller** (Scott County); Amber Converse (Dodge Co.); Amber Koski (Pine Co.); **LPHA Rep** - Marlee Morrison (Hubbard Co.)
- **AG MEMBERS Not Able to Attend:** Katlyn Hubbard (Becker Co.); Jessica Allred (Winona Co.); **Lenora Yellow Bird** (White Earth Reservation); **Vacant** – Southwest Region, Group 5 & CHB Admin

#### MDH STATE STAFF PARTICIPATING:

- Kate Franken, WIC Director; Tina Breitenbach, Breastfeeding, Training, & Communications Unit Supervisor; Rebecca Gruenes, Nutrition & Clinic Services Unit Supervisor; Tami Matti, MIS & Data Unit Supervisor; Jessie Zins, Food Delivery Unit Supervisor, and Tammie Edmundson, Financial Analyst, Roberta Suski, Office and Administration Specialist, Sr.

#### CVB Increase for April

- Reviewed options sent out ahead of AG meeting, discussed the options & gathered feedback from the group. A summary of the discussion was sent out in the January 26, Wednesday Update.
- AG determined that based on the information we have available at this time, the best way to move forward is to allow each Local Agency to determine which of the following options will work best for them:
- **Do not issue benefits for April 2022.** A Local Agency can choose not to issue any benefits for April until the level of CVB is known. Participants with appointments or nutrition education contacts in February would only receive benefits for February and March; those participants provided services in March would only receive benefits for March. The Local Agency would then, once the level of CVB is known for April, run the DUE FOR CERT, MCA or NUTRITION VISIT Infoview report to get a list of those participants due for a nutrition visit, and benefit issuance, in April.

#### OR

- **Issue higher amount of CVB for April 2022.** A Local Agency can choose to issue the higher amount for April 2022. The end date for the current CVB food item has been changed to 4/30/2022. However, if on February 18, 2022, the increased CVB is **not** extended the Food item end date will be changed back to March 31, 2022. At that time, these Local Agencies will need to use a new Infoview report, PARTICIPANTS ISSUED INCREASED CVBs, to identify participants issued the increased CVB amount for April. Once identified, the benefits must be voided and then reissued.

### **State/Local Data Privacy Agreements**

Kate shared documents r/t data sharing agreements with programs and summarized the work done by the workgroup in 2014 & 2018.

To pursue a WIC data sharing agreement,

- It must be declared in the state plan.
- The Chief State Health Officer of MN must be notified.
- Participants need to be notified regarding program data sharing. (The MN Rights and Responsibilities could provide this notice.)
- Specific terms must be included in any written data sharing agreement.

One concern is that this would not allow participants to opt out which could impact their decision to participant in WIC. MN has one of the strictest state data privacy laws so there could be some resistance by other groups to WIC data sharing.

Depending on the program, written agreements will need to be created at the local level and some agreements created at the state level.

Overall response from AG members was to pursue these agreements. Some AG members said Head Start, FHV, C&TC, School Agencies, Ucare, and medical clinics are the most common program referrals.

The next steps are to work on this effort at a state level and continue to report back to WIC AG on progress.

### **State Staff Updates**

Currently three positions are open in the following units: Food Delivery (WIC Vendor Consultant), Nutrition & Clinic Services (Northwest Region Consultant), & the Breastfeeding, Training, & Communication (Policy & Civil Rights Coordinator).

### **Lactation Station Plans**

Exploring the option of working with TPT and the possibility of supporting their lactation station at the state fair.

### **Follow-up from regional meetings**

**Carol Kelnhofer attended Regional Meetings and asked for input on training needs. Summary of the discussion:**

- Are staff currently accessing the MDH WIC Website? *Yes*
- What other training resources are commonly used? *Great Lakes, UMN, Webinars shared, Memos, TOM*
- How do staff prefer to receive trainings? (webinars/memos/conference style/self-study) *Webinars, Conference, Memos, all of the above*

- What times/days' work best for scheduled trainings? *Early in the week, mornings, Fridays, importance expressed to give advance notice to staff*
- How often for the Topic of the Month (TOM) Memo (monthly/quarterly)? *Mix of monthly or quarterly, monthly more common response*
- Any topics that stand out for future trainings? *Vit D, front-line staff/clerks, substance abuse, feeding older kids, trends/popular diets in nutrition, picky eating, PCS – goal setting summarizing, formula troubleshooting, cup use, cultural specifics, weight/maternal weight*

Additional Comments: *staff have limited time, keep trainings short, staff miss in-person trainings, podcasts, staff try to schedule dedicated time for training and work it in*

### **Medical Referral Form:**

- Some considerations that came forward from the discussion at the meetings:
  - Name of the form: "Medical Referral" has a different meaning within WIC and Public Health so this may be confusing to staff and also to participants.
  - Adding the medical formula form to the website as a fillable form healthcare providers can submit directly to the LA.
  - Does it have enough information to call the client back (name of adult might be helpful). Possibly add a place to note the reason for the referral, such as 'needs breastfeeding assistance.'
  - Occasionally the application might be sent to the wrong agency (e.g., City or County of Blue Earth).
  - It has been challenging at times to reach participants that fill out the application. Would a second phone number listed be helpful in contacting the family?

The workgroup that developed the Medical Referral Form and the Online Application, will reconvene, and review these topics and feasibility of changes.

### **Reminder of Equipment Inventory**

This hadn't been done for a while due to the pandemic, due to this, there were more items to account for and communicate about. There were some LA requests to do the inventory more often. This routinely has been a yearly practice, and we will resume it annually.

### **HuBERT after hours use/access**

- After hours use – remind staff of hours of availability for HuBERT, InfoView and Reports
  - Monday – Friday between 7:00am and 8:00pm
  - Saturday between 7:00am and 12noon
  - Sunday between 7:00am and 2:00pm
- Use the STAFF ACCESSLOG Infoview report found in the INFOVIEW TEMPLATES >> Staff Management folder to help assess if any staff are in HuBERT beyond hours of availability.

### **Other comments:**

- Educational buy, it is beneficial to offer to staff (NE region), will this be an option again? State staff will discuss how this could be made available again.
- Reports question – There was a question that came forward about the best report to run to see if staff are accessing HuBERT, InfoView and Reports outside of availability hours. In response, there was a [December 2021 HuBERT Hints #1](https://www.health.state.mn.us/docs/people/wic/localagency/infosystem/hubert/hints/2021/12_)  
([https://www.health.state.mn.us/docs/people/wic/localagency/infosystem/hubert/hints/2021/12\\_](https://www.health.state.mn.us/docs/people/wic/localagency/infosystem/hubert/hints/2021/12_)

1.pdf) that addressed why the Staff Access log report is a good tool for this. There was also information regarding a name change for the Benefits Issued & Certs Performed b/n 7PM and 7AM.

### **Health Equity – next steps thoughts**

In October we had Amy Lopez, MSW present from the Center for Health Equity - Health Equity Planner.

**Amy's presentation from October is recorded, you're each welcome to download it & view.**

*You can find it in the Advisory Group file under agency gateway on FileZilla. If you need help getting in FileZilla you can call the helpdesk.*

**Nikki read the April notes from Kate w/themes from April's AG meeting for further discussion.**

Discussion was held. One idea is to share health equity ideas or updates on what various agencies are doing at our quarterly AG meetings. Some agencies are working towards recruiting and hiring a more diverse staff, some are looking at how their satisfaction surveys can be ready in other languages, and some how to use more inclusive language. Ramsey County provides a Health Equity Toolbox for their various programs that can be used as needed w/many options such as short videos & discussion points that can be used at staff meetings.

In summary, AG would like to keep health equity ideas/sharing at our AG meetings, explore looking at a minimum health equity training for all WIC staff on a state level. Perhaps we could tap into other states or look at the WIC Hub for ideas. Nikki will also ask at her monthly NWA call what other states in the region are doing & share w/group. Also, it would be nice to get an update from Hennepin on their health equity work w/their NWA grant & what they are learning.

### **Extension of National Health Emergency/waivers**

Will the state still encourage local agencies to operate remotely and utilize the waivers as they have in the past?

Extension of the PHE has been approved & authorizes WIC waivers through July. Some states that have moved to in person services have had to reverse due to surges in COVID cases. In MN, the plan is to stay the course now & encourage use of waivers and remote services. We hope changes in WIC modernizations will be looked at closer & may be permanent in the future with the Child Nutrition Reauthorization.

Currently the WIC Program is presented w/many challenges & opportunities.

### **Challenges discussed:**

- Few anthropometric measurements present challenges w/assessment and counseling.
- Being effective in remote/hybrid environments.
- Many participants are not attending medical appointments.
- Appointment show rates. Staff find it can be hard to reach participants.
- COVID surges & different variants.

**Opportunities discussed:**

- Stress importance of what WIC offers beyond food.
- Use technology & social media to market & interact w/participants.
- Build relationships w/medical providers & other programs to obtain ht, wt, & hgb measurements.

**WIC Visioning Update**

In 2018 the AG had a visioning session to help strategize & identify prioritizes for MN WIC. Kate shared a document summarizing those prioritizes & it will be sent to AG members.

**Agenda Items for April 2022 meeting**

Health Equity – standing item

*Minnesota Department of Health - WIC Program 85 E 7<sup>th</sup> Place, PO BOX 64882, ST PAUL MN 55164-0882; 1-800-657-3942, [health.wic@state.mn.us](mailto:health.wic@state.mn.us), [www.health.state.mn.us](http://www.health.state.mn.us); To obtain this information in a different format, call: 1-800-657-3942*

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