BEYOND CASELOAD: 
Asking Tough Questions

Everybody knows that WIC caseloads have been declining. A good portion of the drop in participation is outside of WIC’s control: lower birth rates, an improving economy, and tighter immigration controls are key factors. Even with these realities, there is still a lot of soul-searching among WIC providers about why participants aren’t coming in and what can be done about it.

Soul-searching can be painful – but it’s a healthy thing to periodically ask tough questions about what we are doing in WIC, and why we do it. How can we quickly modernize and streamline program operations to keep up with the aspirations and expectations of the “millennial” generation? Should we go where they are instead of waiting for them to come where we are? How can WIC customer service be further improved to protect our brand and further our appeal?

But the bottom line is that over 1.3 million needy participants are still coming through our doors, and we can make a huge difference in their lives by focusing on quality as well as quantity. Defining quality WIC services should include looking closely at customer access and satisfaction, setting best practice standards in the delivery of nutrition services, and seeking cost-saving operational efficiencies.

California WIC is in the midst of a long-term dialogue about the creation of new performance standards, including how to measure and evaluate them. Over the longer term, recognizing and rewarding improved health outcomes is not unthinkable.

Our Fall Management Meeting and several articles in this WIC Watch will help you understand the context of the reforms sweeping through public health and WIC in California. What tough questions do YOU have?

How can WIC meet the Triple Aim—Better Care, Better Health, Lower Costs—for California families?
If you’re with us this week in Sacramento, welcome to CWA’s Fall Management Meeting! If you’ve stayed home to keep things running smoothly at a local WIC agency, thank you for supporting your managers, and be sure to ask them to share with you what they’ve learned at this meeting.

As healthcare reform sweeps in, California is entering a new era of innovation and rapid change. Our public health delivery systems have embraced the Triple Aim approach to maximizing performance in three dimensions: (1) improving the patient experience of care; (2) improving the health of populations; and (3) reducing the cost of health care. In other words: Better Care, Better Health, Lower Costs.

WIC can play a critical role in state and local efforts to realize this Triple Aim vision. But to play that role, WIC will need to go beyond the singular focus on serving the maximum possible number of participants, an emphasis that still drives most of our funding and management decisions.

It’s time to go Beyond Caseload, re-tooling our management strategies to include an equal focus on quality services and turning that into better health outcomes for the families and communities WIC serves.

CWA’s Fall Management Meeting will help you understand the context of these innovations and reforms. On Tuesday, once welcomed by CWA President Rose McIsaac and CWA Executive Director Laurie True, you’ll hear about Public Health Accreditation from Loriann DiMartini of CDPH plus a panel of local WIC Directors who have experienced local health department accreditation. After a wellness break (one of several throughout the meeting) and before a tasty lunch, we’ll discuss what’s on the horizon with Local Agency Performance Standards. Then we’ll spend the afternoon actively engaged with CQI expert Patricia Porter, RN, in learning the latest about Continuous Quality Improvement (see pages 6-7) and how it applies in WIC.

On Wednesday morning, CWA will provide up-to-the-minute Federal and State Policy Updates. Then we’ll explore synergistic partnerships between WIC and other programs, from Maternal & Child Health to CalFresh, First Five, and the Child Care Food Program.

Throughout our time together, you can expect to gain practical tools to make you a more effective change manager at the local level, time to discuss WIC management issues with your peers, and inspiration to return to your agency prepared to continue positively impacting California WIC families.
Caseload is Dropping - Why?

The California WIC caseload is dropping, and that largely is as it should be. Does that surprise you? Let’s explore the many factors.

Economic Changes

Like CalFresh (food stamps), the WIC program responds to economic changes, with participation expanding during economic downturns and contracting when the economy recovers and circumstances improve for WIC families. Although California’s recovery from the Great Recession was far slower than the rest of the country, jobs are slowly coming back: in June, unemployment dipped to 7.4%, the lowest figure in six years.

Birth Rates

Since we serve about 63% of all babies born here, California’s birth rates are an important predictor of WIC caseload, and birth rates are down: there were 64,000 fewer babies born in 2011 than there were in 2007. During the recession, the number of babies born in the US fell to the lowest rate ever recorded.

One result of economic distress is a decline in the birth rate -- when you’re out of work and running out of money, having a baby doesn’t make much sense. Moreover, the birth rate fell much faster among immigrant women, who make up a large part of our WIC caseload. Even as the birth rate begins to climb again, it will take time for the “recession cohort” to work its way through WIC.

Immigration Patterns

Immigration also plays a role in WIC participation, and there are fewer undocumented immigrants settling in California since the number peaked in 2007. There’s no evidence that the numbers are ticking back up, even as the economy shows signs of recovery, because growing numbers of new arrivals are choosing to live in other states in the South or Midwest with less history of immigration.

Access to Benefits

Many WIC families increasingly report a preference for CalFresh (SNAP) benefits because of rebranding and improved application processes, easier grocer access (EBT cards compared to cumbersome WIC checks), and substantially higher benefits. Moreover, busier and more web-savvy working poor WIC families (“young millennials”) are impatient with the time-consuming WIC clinic model of group classes and face-to-face nutrition counseling.

On the other hand, face-to-face encounters are often needed to effectively help with infant feeding, build trusting relationships, and identify and assist with other sensitive problems such as domestic violence, family planning, or depression.

California’s Challenges

California’s WIC caseload would have dropped even faster had it not been for continuing high child poverty, chronic underemployment, and low wages which endanger a generation of children. More than 1 in 7 Californians—one-third of them children—lived in poverty in 2013. In fact, by a new, more sensitive federal poverty measure, California has the worst poverty in the nation. Since there are signs that California’s economy is finally turning the corner, WIC caseloads will likely continue down, although less steeply in the drought-stricken Central Valley and Inland Empire counties which are not rebounding as quickly.

What To Do?

It’s important to acknowledge the caseload decline and understand why it’s happening. Even more important, however, is to work toward ensuring quality WIC services for the families we continue to serve—now and in the future.
WIC Policy Updates

WIC Funding

The WIC program is still in a precarious funding and political position going into next year. The mandatory budget “sequester” is still on track to automatically cut up to $1.2 trillion in federal spending over the next 10 years, split between domestic and defense programs. While most nutrition programs are exempt by law from sequestration, WIC is not protected from these across-the-board cuts (estimated at 9%), and is more vulnerable than is widely recognized.

The FY 2015 WIC appropriations process was victim of the extraordinary gridlock and inaction that fell Congress this year. Before leaving town in September, Congress passed a Continuing Resolution (CR) to keep federal programs—including WIC—running until December 11, after the mid-term elections. The CR maintains funding for programs at FY 2014 levels. After November 4 elections, there is talk of the “Lame Duck” Congress negotiating an omnibus appropriations bill including Agriculture (WIC) funding. However, if both the House and Senate come under Republican control, yet another CR could delay a final deal until 2015.

WIC Reauthorization

The Child Nutrition and WIC statute is due to be reauthorized by the 114th Congress that convenes next January. If both the House and Senate are controlled by Republicans after the November elections, WIC policy advocates expect a tough reauthorization process in 2015, and have already been told by key staff, “WIC won’t get off easy this time.”

Advocates will have to work hard to preserve WIC’s current coverage of all households, healthy food packages, Breastfeeding Peer Counselors and evaluation research. The loss of key WIC champions, retiring George Miller (D-Concord), Henry Waxman (D-LA) and Tom Harkin (D-Iowa), create further challenges.

CWA has already begun planning a simple grassroots organizing effort for 2015 that builds on our very successful WE NEED WIC campaign, titled WIC MAKES GOOD CENTS. Using pennies like we used paper plates during our earlier multi-year struggle, we’ll engage WIC staff, participants, and business and community partners asking them to step up their support for WIC at critical junctures in the debate. Stay tuned!

WIC Grocer Moratorium Being Lifted

The multi-year freeze on new WIC grocery store authorizations is almost over: hooray! On May 30, CDPH opened up the application process for chain stores with existing WIC vendor authorization who wanted to add more stores to their master contract. The next stage began on September 14, allowing vendors who have no authorized store locations and meet Full-Line Grocery Store criteria to apply for authorization. Read the Vendor Alerts at www.wicworks.ca.gov to learn more about these criteria.

New State WIC Leadership

In September, CDPH announced that Christine Nelson is now the permanent California WIC Division Chief. The California WIC community has worked closely with Chris and her management team since she came on board as Interim WIC Chief in April 2012. During those years, she managed significant change across several key program areas and quickly became acquainted with WIC’s complex policy and operations. CWA congratulates Chris on a unique achievement: a former WIC participant who now administers the nation’s largest WIC program.

Chris is reporting to a new boss, as well. In July, CDPH appointed Dr. Connie Mitchell, M.D., M.P.H, as Deputy Director of the Center for Family Health. Dr. Mitchell came from the Office of Health Equity and, before that, was on the medical faculty at UCD Medical School, specializing in the area of family violence. She brings a wealth of experience and knowledge about preventive public health and strong support for vulnerable populations.

Congratulations to both Chris and Connie! We look forward to working with them toward our mutual goal: to protect and improve WIC’s frontline public health nutrition services to California’s neediest young families.
CWA News

Save the Date!

Plugged In:
Harnessing the Power of Collaboration

2015 Annual Conference and Trade Show
March 22 - 25, 2015
Hyatt Regency
San Francisco Airport Burlingame
Registration is now OPEN!

CWA Resources

Did you miss one of our WIC WORKS Webinars last summer? Don’t wait to view the recordings of the August breastfeeding topics — they’re only available until the end of October. Presentation slides and other webinar materials will continue to be available on our website for a few more months. Check the Archives at http://calwic.org/events/wic-works-webinars.

How well is your local hospital supporting breastfeeding moms? Find out in our latest report, Bringing Breastfeeding Home: Building Communities of Care, which you can download from our website at http://calwic.org/focus-areas/breastfeeding. Chances are, your local hospital is working toward improvements. You can help by teaming up with local breastfeeding advocates to work with the hospital staff to support families better.

Get & stay connected!

Visit CWA on Facebook! (Search for California WIC Association.) Follow us on Twitter, too! You’ll find us at www.twitter.com/calwic ... and read our blog at www.calwic.org.

Maria LeClair “Graduates”

Interim Nutrition Services Director Magdalene Louie, MCAH Director Mary Hansell, Retiring Nutrition Services Director Maria LeClair, and Executive Assistant Faye De Guzmán celebrate Maria’s 21 years with the City and County of San Francisco. CWA commends Maria for a total of 38 years of service to California WIC families! We wish her well as she—in her own words—“graduates to the next phase of her life.”

Remembering Helene Dublisky

Our longtime WIC leadership and management trainer, mentor and friend Helene Dublisky passed away at home on August 13, 2014, after living for several years with bile duct cancer. We will miss Helene terribly, but we are grateful for her amazing gifts of inspiration and leadership skills to our community. CWA was very humbled and touched that Helene’s husband designated CWA as a donation program in lieu of flowers for all Helene’s many friends and loved ones who would like to make a gift. Helene really admired all that WIC stands for and the amazing dedication and commitment of local WIC employees. Messages of condolence should be mailed to Charles Stansberry, 839 Creed Road, Oakland, CA 94610. Donations to CWA in Helene’s memory can be made using the donation button on our website at www.calwic.org.
BEYOND CASELOAD: Using CQI to Improve WIC Services and Outcomes

CONTINUOUS QUALITY IMPROVEMENT (CQI) is an ongoing process of improving services and outcomes. A WIC CQI team needs to carefully consider three basic questions:

1. What are we trying to accomplish?
2. How will we know that making a change will have any impact?
3. What changes can we make that will result in improvement?

...and then implement a PLAN-DO-STUDY-ACT cycle to implement and manage meaningful change.

A WIC CQI team needs to carefully consider the following:

**1. What are we trying to accomplish?**

- Engage all stakeholders to identify a problem or CQI project – create teams.
- Build consensus around the root causes of a problem and how to solve it.
- Review what’s known: read the research or ask other WIC colleagues what works.
- Analyze the sequence of steps that lead to your desired end goal or product.

**2. How will we know that making a change will have any impact?**

- Do what you said you would do! Have a clear plan and kick-off.
- Start small: practice CQI with an achievable project, such as better telephone contacts.
- Data-driven: Ask “How will we know that this change will have any impact?”
- Make it fun and meaningful – run a campaign with theme and buttons!

**Long Beach WIC** Staff used the Platinum WIC principles to plan together for improved services. They report many positive changes in site environments, participant education and worksite wellness.

In response to a recent Program Evaluation, **Riverside WIC**’s CQI project was to improve documentation in ISIS. And yes, they made it fun and lively!
Beeyond Caseload: Using CQI to Improve WIC Services and Outcomes

WIC outcomes, with a central emphasis on both internal and external customers. Employees are actively using it to make positive changes that lead to real improvements in health. Rather than waiting for change for better health— but it’s not just change for change’s sake!

1. What are we trying to accomplish?
2. How will we know that making a change will have any impact?
3. What changes can we make that will result in improvement?

Accept the need to change and implement a PLAN-DO-STUDY-ACT cycle to implement and manage meaningful change.

### STUDY

- **Run your data** and share the results transparently using scorecards.
- **Fine-tune** your approach with mid-course corrections or adjustments.
- **Analyze barriers** or bottlenecks; ask for team input or experience in overcoming them.
- **Celebrate milestones**, recognize team members, and highlight positive outcomes.

### ACT

- **Act on the information you collect!**
- If you were successful, standardize or institutionalize the plan.
- Seek **further improvements** by continuing the cycle.
- **Think Big**: Tackle achievable health outcomes over the long term—you may need to **work outside WIC** with partners in healthcare, community or business.

Partnering with hospitals and community clinics to improve the breastfeeding continuum of care is a prime example of CQI to create positive change.

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**CQI RESOURCES**

**INSTITUTE FOR HEALTHCARE IMPROVEMENT**
http://www.ihi.org/Pages/default.aspx

**ROBERT WOOD JOHNSON FOUNDATION**
http://www.rwjf.org/en/research-publications/research-features/evaluating-CQI.htm

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**PHFE WIC** is a pioneer in using ISIS data to track improvements and target areas or sites that need additional attention.
Breastfeeding Friendly Community Clinic Modeled at Eisner

A long-term plan for establishing comprehensive breastfeeding support and ensuring continuum of care is paying off for patients and employees at Eisner Pediatrics and Family Medical Center in downtown Los Angeles. Much like the process of earning Baby Friendly hospital designation, community health centers are beginning to adopt comprehensive breastfeeding policies and practices.

Under the leadership of Magdalena Estrada, IBCLC, Eisner has been an early adopter, taking key steps over several years to become breastfeeding-friendly. Central to their success has been clinic leadership support of breastfeeding care as part of the clinic culture.

Breastfeeding education is provided methodically to staff, including physicians, midwives, nurse practitioners, perinatal health workers and medical assistants. In a busy clinic, effective training strategies include using small increments of time and partnering with local WIC training opportunities.

Recognizing that staff with a range of expertise is the most strategic approach to quality care, Medical Assistants trained as certified lactation educators help with patient education in the Pediatric department, and then triage more complex problems to the IBCLC. Comprehensive Perinatal Health Workers are also trained to support patients’ breastfeeding efforts.

In fact, trained professionals serve mothers throughout their pregnancy and postpartum period, while pediatric support continues the care. Phone operators provide information on breastfeeding services, health providers give prenatal breastfeeding support during CPSP assessments, clinic outreach staff visit mothers in the hospital, clinic staff support moms postpartum, and pediatric support is available for as long as needed.

Establishing and consistently using infant feeding data fields in electronic medical records provides evaluation data. As the chart shows, breastfeeding rates have improved!

Working with the billing staff, lactation support is billed through the Comprehensive Perinatal Health Services Program and at the clinic’s rate as a Federally Qualified Health Plan to make these services sustainable – a critical component to ongoing breastfeeding support.

The clinic environment promotes breastfeeding, too, with breastfeeding posters and information available and no formula marketing. Human resources staff was instrumental in establishing worksite lactation support for employees with both a policy and a space to express milk or breastfeed.

And lastly, community relationships have been key to establishing the continuum of care. Eisner works closely with California Hospital Medical Center, neighborhood WIC clinics, and health plans to ensure referral systems are in place and services provided.

Taken together, these comprehensive efforts form the community breastfeeding safety net for Eisner patients and provide a model for other communities.

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Carl Coan, Eisner President and CEO (now retired), recognizes the lactation training of clinic staff.

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Breastfeeding Rates, EPFMC, 2013

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Every Drop Counts! Celebrating World Breastfeeding Week

World Breastfeeding Week is celebrated during the first week of August every year in more than 170 countries around the world – and in many California WIC agencies. At Community Medical Centers WIC in Stockton, staff celebrated the 2014 event with their First Annual Breastfeeding Celebration as a way to further their mission: “to help mothers in our community breastfeed by providing support, encouragement and education both during and after their pregnancy.”

Activities for WIC participants ranged from food demos to education stations to raffles and certificates. A diverse group of WIC professionals provided information on extended breastfeeding, baby wearing, milk banking, and returning to work or school – to name just a few topics. Community Medical Centers Clinic staff from Health Education and the Comprehensive Perinatal Services Program (CPSD) also shared information on nutrition and prenatal classes.

WIC staff sent posters and balloons to all surrounding WIC and clinic sites to help celebrate World Breastfeeding Week. All were grateful to Breastfeeding Coordinator Olivia Millan, IBCLC, for organizing this fantastic event for the WIC community …and look forward to another successful celebration next year!

Energy, enthusiasm, and education: that’s how Community Medical Centers’ WIC staff approached their First Annual Breastfeeding Celebration.

Festive décor turned each WIC office into a busy hub for breastfeeding education.
Changing Wellness Norms in San Diego

The SDSU Research Foundation WIC Program began their journey toward Well WIC Worksite certification in 2008, using the Healthy Habits for Life campaign as the platform. Many of these “healthy habits” have remained, becoming standing agenda items in meetings. In the years since, they have experienced many transitions—in staffing and leadership—and yet the commitment to wellness has survived, enabling them to build a Well WIC Worksite that perpetuates itself. In other words, the norms—or standard health behaviors—of employees have changed.

As the photos here show, a Well WIC Worksite at SDSU Research Foundation looks like...

- Sharing healthy foods at potlucks and cooking demonstrations, from the Veggie Queen to the Mystery WIC Foods Recipe Contest (go to http://calwic.org/focus-areas/wic-worksite-wellness/agency-sharing-center for details!)
- Earning Healthy Bucks for a variety of nutrition activities: bring a healthy snack; grocery receipt analysis; try a new vegetable; whole grain recipe contest; and more.
- Physical activity breaks at every all-staff meeting, whether taking walks together and striking a yoga pose, holding their own WIC Olympics, or dancing together!
- Partnering with other Community Health programs to bring information relevant to staff health and a referral for WIC participants, such as the March for Babies event with March of Dimes.

With the addition of a “Biggest Loser” weight loss challenge from January-July each year and regular wellness-oriented blog posts on their intranet for employees, SDSU Foundation has a pretty good recipe for a Well WIC Worksite.

SDSU celebrates Worksite Wellness and the 40th Anniversary of WIC - together!
Scholarship News

CNC Scholar: Mai Yee Thao

“Education is the greatest achievement,” Mai Yee Thao’s father told her since she was young. He and her mother emigrated from Laos in the early 1980s, fleeing persecution. As one of the first in her family to receive advanced education, Mai Yee first thought of becoming a pharmacist. But her desire to connect with and educate clients directly—plus her first college nutrition class—changed all that.

WIC has helped shape Mai Yee’s life and career path in more ways than one. “I remember my mom talking about going to her WIC appointment as if it were the most important thing in the world! It made her feel important in a world that she had become so little in.” WIC also provided Mai Yee’s first job as a nutrition professional and a chance to do what she loves most: teach. More recently, receiving the 2014 Stefan Harvey California Nutrition Corps Scholarship will help her complete the Central Valley WIC Dietetic Internship in December.

Her work experiences at Merced County Community Action Agency WIC—from WIC Nutrition Assistant to Degreed Nutritionist to Site Manager—have steered her ambitions more recently toward administration. Yet she still finds time and energy to become a Certified Lactation Educator, encourage her coworkers in wellness activities, supervise MCCAA’s Summer Lunch site, and bridge socioeconomic and cultural differences among staff and clients. After becoming a Registered Dietitian, Mai Yee hopes to earn Diabetes Educator certification, specifically so she can help meet the growing demand for professionals serving the Hmong community.

Someday, Mai Yee may pursue advanced degree(s) in Public Health, in order to address population-based prevention strategies for diseases like cancer, which claimed her father’s life and afflicts her mother. Noting the huge role nutrition plays in health, she says, “We are all accountable for our health. Ignorance is not bliss. My career goals may be ambitious, but I am even more ambitious for the goals that I want others to be able to achieve through health education.”

Coming Soon: 2015 CNC Scholarships!

The California Nutrition Corps scholarship fund supports employees of California local WIC programs who are advancing their professional careers within the WIC program. Applicants must be currently employed in a WIC program for at least six continuous months and enrolled in a dietetic internship, undergraduate, or graduate program. Important dates:

- November 1, 2014 ............... Applications available online
- January 15, 2015 .................. Completed applications due
- February 27, 2015 ............... Awardees notified

For full details, visit http://www.calwic.org/focus-areas/cnc-scholarships.

Questions? Contact Meghan Saddler at msaddler@calwic.org or (530) 750-2280.
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Say hey, what’s new?

Read this and past issues of the WIC Watch online at http://calwic.org/news-a-publications/wic-watch.

Share the link with colleagues, family & friends!

READY TO RECERTIFY?

If your agency has been a certified Well WIC Worksite for at least three years, it’s time to join your colleagues at Community Resource Project, The Resource Connection, and Community Bridges—all agencies that were recertified this year as Well WIC Worksites. A few more local WIC agencies need to fulfill just one more requirement. Complete and submit the recertification form found on the CWA website to keep your WWW certification current!