



## **Policy 621**

### **Providing WIC Services During Home Visits**

September 24, 2020

#### **POLICY**

WIC services provided during home visits will meet the same criteria as activities that take place in the WIC clinic.

#### **PURPOSE**

To assure that WIC services are delivered appropriately when completed outside of the WIC clinic setting.

#### **RELEVANT REGULATIONS**

§246.7 ¶—Certification of participants

#### **OREGON WIC PPM REFERENCES**

- ◆ [440—Staff Training Requirements](#)
- ◆ [510—WIC Cardholder Requirements](#)
- ◆ [595—Program Integrity: Separation of Duties](#)
- ◆ [596—Program Integrity: Acknowledgment of Employee Responsibilities](#)
- ◆ [600—Certification Overview](#)
- ◆ [610—Required Proofs – Identity, Residency, Income](#)
- ◆ [611—Income Eligibility: Determining Income Eligibility](#)
- ◆ [620—Certification and Issuing Benefits or eWIC Cards to Themselves, Co-workers, Relatives and Friends](#)
- ◆ [625—Risk Assessment](#)
- ◆ [635—Participant Notification: Eligibility and Rights & Responsibilities](#)
- ◆ [640—Documentation Requirements for Certification](#)
- ◆ [641—Documentation Requirements for Certification in the Absence of TWIST](#)
- ◆ [660—Competent Professional Authority: Requirements](#)
- ◆ [661—Competent Professional Authority: Appropriate Counseling for Risk Levels](#)
- ◆ [670—Overview of Risk Criteria and Priorities](#)
- ◆ [713—Breastfeeding: Use of Supplemental Formula](#)
- ◆ [810—Nutrition-Focused Education and Counseling](#)
- ◆ [820—Quarterly Nutrition Education Contacts](#)
- ◆ [830—Nutrition Counseling and Services for High-Risk Participants](#)
- ◆ [880—Referrals](#)

## DEFINITIONS

**Home visit:** Delivery of services to an individual in the residence of that individual.

## PROCEDURE

### Certification criteria

- 1.0 Local WIC agencies must follow WIC program requirements, policies and procedures as described in USDA regulations and the Oregon Policy and Procedure manual regardless of the location where the services are delivered. See [◆600—Certification Overview](#).

### *Certifying staff*

- 1.1. Certifications must be completed by a qualified Competent Professional Authority (CPA). See [◆660—Competent Professional Authority Requirements](#). Health professionals that are not paid by WIC funds and who meet CPA qualifications may conduct certifications in a participant's home once the required CPA training modules have been completed. Health professionals may test out of required training modules as determined appropriate by the local agency training supervisor. See [◆440—Staff Training Requirements](#).

### *Proofs*

- 1.2. When a certification is completed during a home visit, proof of income, identity and residency must be screened in the same manner as when the certification is completed in the WIC clinic. See [◆610—Required Proofs: Identity, Residency, Income](#) and [◆611—Determining Income Eligibility](#).

### *Participant notification*

- 1.3. Applicants, participants or caretakers must be informed of their rights and responsibilities during home certifications. A copy of "My Rights and Responsibilities" needs to be offered at each certification before the "Participant Signature Form" is signed and dated to indicate receipt and agreement with the information provided. Completed signature forms must be returned to the WIC clinic and kept on file for the required retention period. See [◆635—Participant Notification: Eligibility and Rights & Responsibilities](#).

### *Risk assessment*

- 1.4. Participants must be screened for nutrition risk prior to receiving benefits. Accurate and complete anthropometric, biochemical, dietary, and health information must be gathered by home visiting staff for evaluation. Data from health care providers can be used to avoid duplication of medical procedures. See [◆625—Risk Assessment](#) and [◆670—Overview of Risk Criteria and Priorities](#).

### *High risk referral*

- 1.5. High risk participants must be referred to the RDN/WIC Nutritionist for two contacts during a one-year certification. See [◆661—CPA: Appropriate Counseling for Risk Levels](#). Telephone contacts by the RD may be used to

provide second nutrition education to high risk participants who are receiving services in the home and are unable to come to the WIC clinic due to medical reasons. [See ♦830 Nutrition Counseling and Services for High Risk Participants](#). It is recommended that consultation with the RD occur for all high risk participants who receive services in the home to assure appropriate coordination of care.

### **Nutrition education**

- 1.6. Nutrition education must be offered during the home certification process. The nutrition education provided should match the participant's needs and interests. [See ♦810— Nutrition-Focused Education and Counseling](#)

### **Referrals**

- 1.7. Mandatory referrals, including referrals to OHP, will be made when certifications are completed in the home. All referrals that are made need to be documented in TWIST. [See ♦880—Referrals](#).

### **Quarterly nutrition education**

- 2.0 Home visits where individual nutrition education and follow up are provided by a CPA during a certification period may be counted as quarterly nutrition education contacts. [See ♦ 820—Quarterly Nutrition Education Contacts](#)

### **Documentation**

- 3.0 Documentation of services provided during home visits must be entered into the participant's record in the data system. Data entry and benefit issuance should be completed within 48 hours of the visit. Information may be gathered electronically and entered directly into the data system on site or gathered manually by using a form such as Certification Data Entry document (see [https://www.oregon.gov/oha/ph/HealthyPeopleFamilies/wic/Documents/615\\_cert\\_ded.pdf](https://www.oregon.gov/oha/ph/HealthyPeopleFamilies/wic/Documents/615_cert_ded.pdf)) or an alternate form developed by the local agency. Documentation requirements are the same for both home visits and contacts that occur in the WIC clinic. In addition, home visiting staff must document that the visit took place outside of the clinic setting. [See ♦640—Documentation Requirements for Certification](#) and [♦641—Documentation Requirements for Certification in the Absence of TWIST](#).
- 3.1. The participant's record must reflect the date of the contact, who conducted the visit and who entered the data if data entry is completed by someone other than the staff who conducted the visit. [See ♦830—Nutrition Counseling and Services for High-Risk Participants](#).

### **Benefit issuance**

- 4.0 Benefits may not be issued until the certification or second nutrition education contact in the home has been completed and entered into the data system. Home visiting staff that assess income and assign risks during a certification will be monitored according to Policy [♦595—Program Integrity: Separation of Duties](#).
- 4.1. Home visiting staff may not take on the role of cardholder for a WIC participant. In the situation where the participant is a friend or family member of the home visitor, WIC services may not be provided by the visiting staff. [See ♦620—Certification and Issuing Benefits or eWIC Cards to Themselves, Co-workers, Relatives and Friends](#).

- 4.2. At least one cardholder must be identified and shopper education must be provided when benefits are issued. Shopper information and eWIC card(s) may be provided during the home visit by visiting staff or in the WIC clinic by WIC staff. The initial issuance of eWIC cards for the first and second cardholder may be provided in person or they can be mailed. Home visiting staff will keep cards secure when transporting cards to a participant's home. See [◆510—WIC Cardholder Requirements](#) and [◆635—Participant Notification: Eligibility and Rights & Responsibilities](#).
- 4.3. Issuance of formula is not allowed for breastfeeding infants less than one month of age. Review [◆713—Breastfeeding: Use of Supplemental Formula](#) for Guidance on Supporting Breastfeeding Mothers Who Request Formula.

### **Confidentiality**

- 5.0 All staff providing WIC services in the home must review this policy and sign the WIC Program Employee Responsibilities Form assuring that confidentiality is maintained at all times. See [◆596—Program Integrity: Acknowledgment of Employee Responsibilities](#)

### **Local agency procedure**

- 6.0 A written local agency procedure is required to identify processes for providing WIC services in the home when this option is made available by the local agency. The procedure must address the following items:
- How will home visits be scheduled?
  - Who will conduct home visits?
  - Who will assure that home visitors are appropriately trained?
  - Who will assure that home visitors receive appropriate updates on policies or procedures?
  - How will visit documentation be entered into the data system?
  - How will RD referrals and follow up be handled?
  - How will future appointments be identified?
  - How will benefit and eWIC card issuance occur?
  - How will participants be notified that their benefits have been issued?

**6.1** Home visiting staff providing WIC services are to be included on the personnel summary sheet submitted for biennial local agency reviews.

**If you need this in large print or an  
alternate format, please call 971-673-0040.**

**This institution is an equal opportunity provider.**

## POLICY HISTORY

Date	* Major Revision, Minor revision
9/24/2020	Minor revisions

The date located at the top of the policy is the implementation date unless an “effective date” is noted on the policy. Policies will become compliance findings 6 months from the implementation date.

Release notes can be found in the corresponding document on the [Policy and Procedure Manual page](#).

**\*Major Revisions:** Significant content changes made to policy.

**Minor Revisions:** Minor edits, grammatical updates, clarifications, and/or formatting changes have occurred.

**Date of Origin:** Date policy was initially released