

Subject: Referrals

Item: Referral Requirements

PURPOSE:

To ensure applicants/participants are aware of other health, community, or public assistance services and programs for which they may be eligible.

POLICY:

- I. Local agency (LA) staff must:
 - A. Provide applicants, participants, family representatives, and caretakers with written information about Medi-Cal and other health-related or public assistance programs at each certification/recertification if not currently participating in those services.
 - B. Offer referrals during initial certification and recertification if programs are identified that would benefit the applicant/participant.
 - C. Document each referral in the WIC Web Information System Exchange (WIC WISE). LAs are encouraged to maintain a list of commonly used referrals in the WIC WISE Referral Organization screen in the Admin module.

PROCEDURES:

- I. Written Referrals
 - A. LA staff must:
 1. Provide written information about the Medi-Cal Program to the family representative/caretaker at initial certification and recertification if not currently participating in Medi-Cal.
 2. LA staff may use their own LA-developed materials or the *Ask WIC for Referrals* pamphlet to refer applicants who are not currently participating in the following services, when appropriate:
 - Medi-Cal.
 - CalFresh (SNAP).
 - California Work Opportunity and Responsibility to Kids (CalWORKs).
 - Substance abuse programs for alcohol, drugs, smoking or other harmful substances.
 - Child Health and Disability Prevention Program (CHDP), if appropriate.
 - Child Support Enforcement Program.
 - Domestic Violence.

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II. Screenings and screening-related referrals

A. Immunization screening and referral

1. LA staff must:

- a. Screen for immunizations for all infants and children at initial certification and recertification between 3 and 23 months of age. LA staff must use either a documented source (e.g., immunization record, digital record) or the California Immunization Registry (CAIR) interface in WIC WISE when documenting immunization status.
- b. Provide immunization schedules as well as referrals to health care providers, health departments, or community clinics when children are under-immunized or when the family representative/caretaker does not present proof of immunization. Refer to WPPM 970-100.

B. Blood lead test screening and referral

1. LA staff must screen and refer for blood lead testing at each child's one year recertification or at the child's initial certification (if child is initially certified when older than age one). Refer to WPPM 210-11.

- a. When the child has not had a blood lead screening test or if it is not known whether the child has had a test, LA staff must:
 - i. Advise the family representative/caretaker that blood lead screening test results are requested as part of the certification and health screening process but are not required to obtain WIC benefits.
 - ii. Encourage the family representative/caretaker to obtain the test through the child's health care provider.
 - iii. Provide referral services to a program where the screening can be completed in situations where a screening through the child's health care provider is not an option.
- b. When blood lead test information provided confirms that the lead level meets the criteria for lead poisoning (≥ 3.5 mcg/dl), the LA staff must:
 - i. Verify that the lead poisoning biochemical risk factor has been assigned on the Nutrition Risk screen in WIC WISE (risk code #211).
 - ii. Make referrals for treatment for lead exposure (if not already in treatment).
 - iii. Provide information on (and emphasize) the importance of diet in the treatment of lead exposure.

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- iv. Offer an appointment with the Registered Dietitian/Degreed Nutritionist (per LA protocol) to assist in developing an appropriate nutrition intervention plan.

C. Depression

1. Screening for depressive symptoms

- a. LA staff must screen all pregnant and postpartum applicants for maternal depression at initial certification and recertification by completing the Health Information screen in WIC WISE.
- b. Manually assign nutritional risk code 361 - Depression, on the Nutrition Risk screen, only if the applicant was diagnosed with clinical depression by a health care provider.

2. Post-screening requirement

- a. LA staff must provide a referral for further assessment by a mental health professional or health care provider if the applicant responds to one or both questions regarding depression in WIC WISE with either:
 - More than half the days
 - Nearly everyday
- b. Document depression referral on the Referral screen.

D. Smoking, alcohol, and drug screening and referral

1. Screening for current status

- a. LA staff must screen all pregnant and postpartum applicants for smoking, alcohol, and drug use at initial certification and recertification by completing the Health Information screen in WIC WISE. Refer to 400-13 for drug and substance use education requirements.

2. Post-screening requirements

- a. If LA staff determines that an individual is at risk for smoking, alcohol, or drug use, LA staff must provide:
 - i. Information on the dangers of engaging in such harmful activities.
 - ii. Referrals to local programs that provide counseling and advice on the prevention and treatment for the appropriate substance abuse.
 - 1) LA staff may use their own LA-developed materials or the *Ask WIC for Referrals* pamphlet.

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E. Food Assistance Program Referrals

1. LA staff may provide information about local food assistance programs to the family representative/caretaker, especially in situations where these individuals cannot be served because the LA is operating at or above its maximum caseload allocated by CDPH/WIC.

III. Referrals

A. Where appropriate and beneficial to applicants and participants, LA staff may provide referral information regarding programs including, but not limited to:

- Other FNS nutrition programs such as the Food Distribution Program on Indian Reservations (FDPIR).
- Head Start, Early Head Start, or Migrant Head Start programs.
- Maternal and child health programs.
- Family planning programs.
- Teen parent programs.
- HIV prevention, testing, and treatment programs.
- Child Protective Services.
- School breakfast and lunch programs.
- Public and private foster care agencies.
- Homeless shelters.
- Early and Periodic Screening Diagnostic and Treatment Services (EPSDT).
- Expanded Food and Nutrition Education Program (EFNEP).
- Dental/oral health services.
- Organizations providing lactation support and breastfeeding assistance.
- Behavioral/mental health services programs.
- Alcohol, tobacco, and substance abuse treatment programs.

IV. Documenting Referrals in WIC WISE

A. LA staff must document each referral given to or declined by the participant in WIC WISE.

1. Documenting Referrals on Referrals Screen
 - a. WIC WISE automatically populates federal and state required referrals and those selected by the LA or site into the Referral Grid of the Referrals screen during each certification.

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2. For each referral listed in the Referral Grid, LA staff must ensure that the following items are properly recorded in WIC WISE:
 - a. Whether or not the referral was made.
 - b. Whether or not the referral was declined.
 - c. LA staff comments regarding any specific referral.

AUTHORITY:

[7 C.F.R. §246.7\(b\)\(1\) and \(3\)](#)

[7 C.F.R. §246.7\(e\)](#)

[7 C.F.R. §246.7\(n\)](#)

[7 C.F.R. §246.11\(a\)\(3\)](#)

[WIC Nutrition Services Standards, August 2013, Standards 6 and 11](#)

[USDA Policy Memo #2001-7 Immunization Screening and Referral in WIC](#)

CROSS-REFERENCE:

WPPM 210-11 Determining Nutritional Risk – Biochemical

WPPM 400-13 Drug and Substance Use Education

WPPM 970-100 Minimum Immunization Screening and Referral Protocol

CDPH/WIC Program pamphlet, “Ask WIC for Referrals”

Depression Screening Staff Training materials