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United States  
Department of  
Agriculture

SUBJECT: Commodity Supplemental Food Program (CSFP): Collaboration Between  
WIC and CSFP State and Local Agencies

Food and  
Nutrition  
Service

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This memorandum is intended to provide Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Commodity Supplemental Food Program (CSFP) State agencies with guidance for more effective management of these programs in areas where both WIC and CSFP operate. The recent expansion of CSFP into five new States—Mississippi, Montana, Ohio, Texas, and Vermont—makes this guidance especially timely. Our goal is to ensure active collaboration in order to serve low-income women, infants, and children most effectively in the two programs. Following are several recommendations for accomplishing this important goal. Administrators in both programs should keep in mind that their primary objective is to provide the best, most appropriate service possible to the women, infants, children, and elderly individuals who are eligible for either program. We are convinced that collaboration is the key to accomplishing this objective.

#### **Development and Implementation of State Plans**

We encourage State WIC and CSFP agencies to collaborate in the development of State Plans for their respective programs. Likely areas of collaboration include:

- the formulation of plans for serving women, infants, and children in common areas of service;
- determination of caseload needs in both programs;
- plans for either program to expand or increase service in specific areas;
- program outreach and nutrition education, including sharing nutrition education materials; and,
- other aspects of program management where joint planning can improve service to eligible women, infants, and children, such as combined staff training to maximize each program's resources.

Collaboration between WIC and CSFP agencies in the areas of program service and outreach will also yield more efficient use of resources provided in both programs. State WIC and CSFP agencies should communicate plans to each other for the initiation or

expansion of either program at the State or local agency level at the earliest possible time to ensure that effective referral and dual participation procedures are put in place.

Once the State Plans for both programs have been developed and approved, periodic updates and modifications may be needed to ensure that the best possible service continues to be provided to WIC and CSFP participants and applicants. These changes should be shared between WIC and CSFP to be sure that both programs are aware of the most recent developments. State and local agencies should also inform each other about events that may have an effect on program participation levels, such as factory closings, disasters, etc.

### **Program Referrals**

#### **Referral of women, infants, and children to WIC.**

In areas where both programs operate, local agencies can best serve the interests of women, infants, and children by referring them to the appropriate program. Because of the greater accessibility of health care and nutrition education, WIC is more appropriate for women, infants, and children who are categorically eligible. For this reason, local agencies should refer these applicants to WIC—especially those individuals who appear to be at high risk. This process also allows CSFP to maximize services to the growing low-income elderly population, which does not enjoy a choice between the two programs. Applicants will usually accept referrals that include an adequate explanation, but they must still be allowed to choose between the two programs where both are offered.

Because individuals may choose to participate in CSFP, and WIC locals may temporarily reach capacity or experience service delays, CSFP locals need to maintain the capacity to serve infants. This entails stocking at least a minimal supply of infant formula. In order to determine how much infant formula to order and maintain in inventory, State and local CSFP agencies should closely track infant participation and keep informed of possible changes in the capacity of the WIC Program to serve infants. In areas where infant participation in CSFP is minimal, use of powdered formula is also recommended, as it has a much longer shelf life than the liquid formula.

#### **Referral of WIC “graduates” to CSFP.**

State and local WIC and CSFP agencies should determine the best means of ensuring that WIC “graduates”—children who have reached their 5<sup>th</sup> birthday and non-breastfeeding women beyond their sixth month postpartum—are referred to CSFP, for which they remain categorically eligible. WIC local agencies may, for example, address this need by taking the following actions:

- 1) Including a referral to CSFP with the notification at the end of the WIC certification period.

- 2) Providing a list of imminent WIC “graduates”, with appropriate contact information, to the local CSFP office for follow-up. (Combining 1) and 2) has been found to be particularly effective.)
- 3) Allowing and encouraging WIC “graduates” to complete a CSFP application at the WIC office, and forwarding the completed applications to the appropriate CSFP office for processing.

#### **Other Opportunities for Referral.**

- 1) WIC applicants who are categorically eligible but determined not to be at medical or nutritional risk should be referred to CSFP.
- 2) Women, infants, and children who cannot be served promptly in one program because of a waiting list, or an unforeseen delay in service, should be referred to the other program. Local WIC agencies may wish to contact women, infants, and children referred to CSFP for the above reasons when they can again be served in WIC.
- 3) Elderly persons and five-year-old children who are members of WIC households should be referred to CSFP, and CSFP households with WIC-eligible family members should be referred to WIC, if the intake worker at the local WIC/CSFP agency is aware that they are living in that household.

#### **Sharing of WIC/CSFP Information**

Both WIC and CSFP regulations mandate referrals to other health and nutrition programs, and permit the exchange of participant information with these programs with certain limitations. State WIC and CSFP agencies may allow the exchange of participant information to assist in outreach, in the determination of eligibility for another program, or for the prevention and detection of dual participation (see below), if the two programs have a signed agreement to limit the use of the information to this purpose. A copy of this agreement should be included with the WIC and CSFP State Plan documents. When WIC shares information with other programs along with the referrals it makes, the WIC application process must notify applicants that information they provide may be utilized for this purpose (246.7(i)(9)). The CSFP application process should provide similar notification to applicants.

#### **Preventing Dual Participation**

Preventing and detecting dual participation helps maximize the number of persons that WIC and CSFP can serve. Positive interactions between the two programs in other areas, such as referrals, should facilitate development and maintenance of systems which effectively combat dual participation. In fact, both WIC (246.4(a)(15)) and CSFP (247.5(a)(10)) regulations require that a written agreement between the WIC and CSFP

State agencies be included in State Plans and maintained on file at State agency offices. Good communication mechanisms between WIC and CSFP are critical to ensure that, if individuals are found to be participating simultaneously in both programs, appropriate follow-up takes place to enhance program integrity in both WIC and CSFP. The five State agencies commencing CSFP operations this year have an excellent opportunity to work with their WIC counterparts to develop effective detection and prevention systems as part of a larger effort to jointly provide the best service to their common eligible populations.

Where possible, computer systems should be designed to facilitate the detection and prevention of dual participation between WIC and CSFP applicants or participants.

A Best Practices Guide to Preventing and Resolving Dual Participation in the WIC Program is available upon request from the Supplemental Food Programs Division. This document was developed in 1999 by the Southwest Region Program Integrity Workgroup to assist State agencies by offering prototype agreements and procedures for resolving potential dual participation cases.

We appreciate your cooperation in this important endeavor. Please let us know if you believe there are other ways that WIC and CSFP can collaborate to better serve our eligible populations, or if we can do something else at the federal level to facilitate this collaboration.

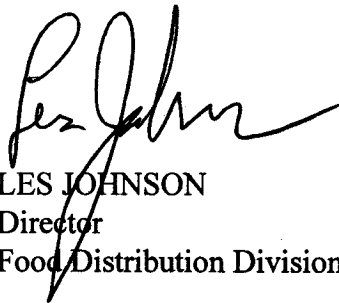
If you have any questions on this document, please contact the appropriate FNS regional office.



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