Chapter 10
Caseload Management

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Local agencies should actively implement strategies to maintain or increase caseload. It is the responsibility of all WIC staff, regardless of their role in the clinic, to engage in outreach activities that can extend the reach and effectiveness of the WIC Program. The purpose of this chapter is to provide policy and guidance on managing caseload, understanding barriers to participation, conducting outreach activities, creating referral agreements; developing an outreach plan and documenting outreach efforts.

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*Electronic versions of all attachments are available on the NC WIC Program website at https://www.nutritionnc.com/wic/outreach-resources.htm.
Caseload Management

Caseload management involves using the tools and resources available to make decisions that maintain and grow caseload. Caseload management evaluates program operations that are aimed at retaining those participants already enrolled in the program, encouraging active participation, and reaching new families and participants.

Caseload reflects the average participation over time. Caseload allocation to local agencies is made by the Nutrition Services Branch annually by examining participation rates. Local agencies are required to maintain active participation in the WIC Program, which is at least 97% of the base caseload.

- **Participation**
  
  Active participation means the sum of:

  1. The number of persons who received supplemental foods or food instruments during the reporting period;
  2. The number of infants who did not receive supplemental foods or food instruments but whose breastfeeding mother received supplemental foods or food instruments during the report period; and
  3. The number of breastfeeding women who did not receive supplemental foods or food instruments but whose infant received supplemental foods or food instruments during the report period.

  Participation is tracked and monitored monthly. Funding may be reduced if the average monthly participation falls below 97% of the base caseload. Likewise, additional funding may be provided to the local agency if the average monthly participation rises above 100% of the base caseload assignment, at which time the base caseload assignment will also increase through the issuance of an Agreement Addendum Revision.

- **Caseload Management Strategies**
  
  All staff in the local agency should be involved in caseload management. Strategies used to manage caseload include:

  - Monitor trends in participation: Not only is it important to track for the current year, but local agencies should track their participation from year to year.
  - Monitor changes in participant characteristics: Changes in participant category and race and ethnicity should be identified to guide recruitment and retention efforts.
  - Evaluate your agency’s appointment schedule: Evaluating your clinic’s appointment characteristics may provide information useful in making decisions that will impact participation.
Monitor No-show Rates: No-show rate is the percentage of applicants and participants that failed to attend their WIC appointment scheduled in Crossroads. No-show rates do not include walk-ins. Staff should utilize the no-show rates displayed on the master calendar and/or the Participant Appointment Show Rate Report in Crossroads to monitor no-show rates monthly. Local agency staff must evaluate current practices and implement strategies to reduce no-show rates. These strategies may include, but are not limited to:

- Appointment reminders via telephone, email or text to participants prior to their scheduled appointments.
- Call, email, text participants to reschedule missed appointments after their missed appointment.
- Routinely send optional notices in the mail in addition to notifications required by WIC program policy (refer to Chapter 6D).
- Survey participants to assess reasons for missed appointments.
- Implement a more flexible appointment process like open-access or same-day scheduling.
- Schedule extra appointments to account for no-shows.

Utilize Crossroads Reports: Use Crossroads reports to assess caseload trends and develop strategies to increase participation. The following reports may be helpful in managing caseload:

- Total Participation by Category and Priority
- Participation by Category, Priority, and Age for Children
- Participation Report by Race-Ethnicity
- Summary of Actions Due Listing
- Participants Who Fail to Pick Up Benefits
- Issuance Due Report
- Participant Appointment Show Rate Report
- Initial Certification Appointments Made Outside of Processing Standards
- Daily Appointments to be Rescheduled

Utilize Additional Community Data: Use community demographic data to target outreach efforts to potentially eligible groups in your community and to determine how well your agency is serving the WIC-eligible population in your community. The following data may be helpful in managing caseload:

- WIC Agreement Addenda Data by Process Outcome Objectives
- Population at Risk Reports
- Community Health Assessment Data
- Reports available through reputable sources like: The State Center for Health Statistics, US Census, USDA’s Economic Research Service

Assess Clinic Environment and Flow: Use clinic observation tools to assess your clinic environment to ensure that all applicants and participants have a more positive and welcoming experience. Identify ways to create a clinic environment that is participant-centered. Evaluate wait times and clinic flow efficiency and look for areas that need improvement or change.
• Evaluate Participant Access to and Satisfaction of WIC Services: Utilize customer surveys to collect information identifying barriers or potential barriers to participation. Local agencies should make every effort to reduce barriers when possible.

• Strategically Plan Retention and Outreach Activities: Local agencies must develop an outreach plan that involves all staff with the intention of building and sustaining caseload and improving service delivery.
Participant Retention

Eliminating Barriers To Participation
WIC Programs should actively assess and work to eliminate any potential barriers to program participation. Local agencies should review their procedures, survey current participants, identify any potential barriers to participation, and work toward solutions to eliminate or reduce these barriers. Local Agencies should take steps to ensure clients do not have excessive wait times and provide appointment times for clients who work or are in school. The table below outlines some common barriers to participation and offers approaches to resolving them.

<table>
<thead>
<tr>
<th>Potential Barriers</th>
<th>Possible Solutions to Reducing Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inconvenient appointment times and/or limited hours of operation</td>
<td>▪ Offer lunch time, evening, and/or weekend clinic hours.</td>
</tr>
<tr>
<td></td>
<td>▪ Recommend that participants assign a Parent/Guardian 2 and Caretaker to complete WIC services.</td>
</tr>
<tr>
<td></td>
<td>▪ Recommend that participants assign proxies to attend Nutrition Education and Food Benefit Issuance appointments.</td>
</tr>
<tr>
<td></td>
<td>▪ Offer online nutrition education and remote issuance options for low risk nutrition education.</td>
</tr>
<tr>
<td>Difficulty keeping appointments</td>
<td>▪ Accommodate walk-in applicants and participants, when possible.</td>
</tr>
<tr>
<td></td>
<td>▪ Coordinate appointments with other family members.</td>
</tr>
<tr>
<td></td>
<td>▪ Coordinate appointments with other clinics, when possible.</td>
</tr>
<tr>
<td></td>
<td>▪ Ensure participants do not have excessively long appointments.</td>
</tr>
<tr>
<td></td>
<td>▪ Consider “Open Access” appointment scheduling.</td>
</tr>
<tr>
<td></td>
<td>▪ Routinely provide appointment reminders.</td>
</tr>
<tr>
<td></td>
<td>▪ Survey participants to determine why they do not keep appointments to better understand barriers.</td>
</tr>
<tr>
<td>Transportation difficulties</td>
<td>▪ Establish satellite sites.</td>
</tr>
<tr>
<td></td>
<td>▪ Recommend that participants assign Parent/Guardian 2 and Caretaker to complete WIC services.</td>
</tr>
<tr>
<td></td>
<td>▪ Recommend that participants assign proxies to attend Nutrition Education and Food Benefit Issuance appointments.</td>
</tr>
<tr>
<td></td>
<td>▪ Schedule appointments to facilitate transportation arrangements for individual.</td>
</tr>
<tr>
<td></td>
<td>▪ Work with client’s schedule to accommodate their needs.</td>
</tr>
<tr>
<td></td>
<td>▪ Offer online nutrition education and remote issuance options for low risk participants.</td>
</tr>
</tbody>
</table>
| Language barriers                                                                 | • Recruit bilingual staff (add preference for bilingual qualification to all job postings).  
|                                                                                   | • Include commonly spoken languages on clinic signage.  
|                                                                                   | • Offer staff training in cultural competence.  
|                                                                                   | • Support staff efforts to learn/improve non-native language skills.  
|                                                                                   | • Utilize language lines when interpreters are not available.  
| **Limited coordination of WIC Program with other agencies**                      | • Schedule WIC clinic visits to coincide with prenatal, postpartum family planning, or well child clinic visits, when possible.  
|                                                                                   | • Use medical information from other sources when available, but do not require it.  
|                                                                                   | • Coordinate nutrition education contacts.  
|                                                                                   | • Build a WIC Outreach Network to better understand where coordination can be strengthened and ensure staff from other agencies encourage continued WIC participation.  
| **Negative WIC experience**                                                     | • Ensure all staff are practicing good customer service.  
|                                                                                   | • Utilize “Customer Satisfaction” surveys to determine areas that need improvement.  
|                                                                                   | • Provide staff training in customer service.  
|                                                                                   | • Offer extended hours of service.  
|                                                                                   | • Review local agency policies to ensure the policy places no undue barrier on the participant.  
|                                                                                   | • Establish a child-friendly waiting room and clinic area.  
|                                                                                   | • Crosstrain staff to improve clinic flow.  
|                                                                                   | • Clearly explain the WIC program policy to participants as needed.  
|                                                                                   | • Educate participants about the WIC program benefits including what to expect during their certification appointments.  

**Expanding Certifications Outside Of The Local Agency**

To increase access to WIC services, local agencies may consider expanding services to different parts of their county or to partnering agencies that serve WIC-eligible families. Conducting WIC services in partner agencies that serve WIC-eligible families like Head Start, hospitals, and Department of Social Services (DSS) expands the local agency’s reach.

Prior to establishing procedures for certifying individuals outside of the local agency, staff must decide if it is an efficient and effective utilization of agency resources. When making this decision, staff should consider the following:

- **Staffing:** Does the local agency have enough staff to expand services?
- **Equipment:** Does the agency have the additional equipment needed?
Cost: Is there additional cost associated with opening another site? And if so, is it in the agency’s budget?

Return: How many additional participants will you be able to serve? Is the site located in an agency that serves the WIC-eligible population?

Local agency staff should meet with staff in the identified partnering agency to discuss the proposal and its implementation.

Discussion topics must include:

- WIC Program integrity requirements
- Collection of medical and nutritional information
- Provision of program benefits (i.e., food benefit issuance, nutrition education and breastfeeding support)
- Space requirements
- Internet needs
- Confidentiality issues
- Liability issues
- Client access
- Roles and responsibilities of the staff of both agencies

WIC staff will need to complete an agreement or Memorandum of Understanding (MOU) between the agencies involved that describes how WIC services will be provided. The MOU must be approved in writing by the local agency’s Regional Nutrition Consultant before any WIC Program services may be provided. Changes to any existing MOU must be reviewed and approved in writing by the local agency’s Regional Nutrition Consultant. See Attachment 1 for a MOU template.

Additionally, before a local agency opens a new site, a New Site Request Form for each new site where WIC services will be performed must be submitted to the NSB Customer Service Desk (CSD).
Outreach

Local Agencies are responsible for conducting outreach activities within its respective area to promote and advertise the WIC Program and assure that potentially eligible individuals are aware of the WIC Program. Outreach involves a multi-layered approach and should be approached with considered intention.

■ Purpose Of Outreach

The purpose of outreach is to:

› Increase program caseload,
› Increase public awareness of the benefits of the WIC Program,
› Reduce common misconceptions about eligibility,
› Inform potentially-eligible persons and encourage participation in WIC,
› Educate health and social agencies about WIC eligibility criteria for participation and solicit referrals, and
› Encourage coordination between WIC and other health care providers and agencies to reduce barriers to participation.

■ Methods Of Outreach

› Publicize the availability of the WIC Program. This may include media-related activities like news releases, newspaper feature stories, and public service announcements, digital advertisements.

› Build a WIC Outreach Network. Connecting with community agencies, organizations, and businesses that serve the same population in your community can lead to referral partnerships, increased visibility of the WIC Program and provides the opportunity to educate your community about WIC benefits and eligibility. Agencies that may make up a WIC Outreach Network may include but are not limited to (See Attachment 2):
  • Employers of potentially eligible clients
  • Health and medical organizations
  • Hospitals, clinics, and physicians’ offices
  • Community assistance and unemployment agencies
  • Social service agencies
  • Religious organizations/advocacy groups
  • Early education/child care programs
  • Educational institutions
  • Agencies serving homeless individuals
Once the outreach network is established, local agencies should provide continual updates regarding the WIC Program to the agencies/organizations. This can be accomplished by routinely visiting the agency, through telephone contacts, sending personal update letters, and/or arranging to provide short presentations on the WIC Program at a staff meeting. Each agency/organization should be contacted at least once a year, and more often if a major change in the Program occurs. Local agencies should maintain documentation of their WIC Outreach Network that includes the name of the organization, contact person and information, and description of connection made.

Maintain a social media presence. Local agencies are encouraged to use social media to engage with WIC participants and eligible families. Social media guidelines may vary. Consult with your public affairs officer or designee for guidance on using social media to promote WIC. See Attachment 3.

Community involvement. Participating in community events like health fairs, festivals, and coalitions increases the visibility of the WIC Program and provides the opportunity to educate your community about WIC benefits and eligibility.

Targeted Outreach
WIC services should be targeted to those who would benefit the most from the program. Targeting services to the highest priority groups is particularly helpful in ensuring that those who would benefit most from the program receive WIC services if an agency initiates a wait list.

High priority populations include:
- Pregnant women, with emphasis on reaching and enrolling eligible women in the early months of pregnancy
- Breastfeeding women
- Infants and Children in Foster Care, CPS or Child Welfare
- Migrant families
- Homeless families

Plan For Outreach
Local agencies must approach outreach with intention, which would include developing a plan that will guide their outreach efforts. Local agencies serving >97% of their base caseload are not exempt from developing an outreach plan and conducting outreach activities. Refer to WPM Chapter 10, Section 5 for details regarding the required Local Agency Retention and Outreach Plan.

Outreach Materials Developed By The Local Agency
Local agencies are encouraged to develop their own outreach materials that fit the needs of their community. Outreach materials developed by the local agency must contain the local agency’s contact information and the nondiscrimination statement (see Chapter 5). Locally developed materials should reflect the culture, ethnicity, and languages of the community served. It is best practice to have local agency developed materials reviewed by their RNC.
Outreach Materials Available From The Nutrition Services Branch
The Nutrition Services Branch (NSB) provides local agencies with a variety of outreach materials in English and Spanish. These materials are described on the NSB website, www.nutritionnc.com/wic/outreach-resources.htm. The outreach materials may be ordered using the NSB requisition form. Most of the materials are customizable. Local agencies can customize these materials by including local agency contact information (phone number, address and local agency website). For one-sided printed materials, agencies can customize the blank side with information about clinic hours, promote walk-in or late clinics, and documentation needed to apply.
Annual Media Release

It is a program requirement that on an annual basis, each Local WIC Agency send a media release or general advertisement to relevant print, online and/or broadcast media.

Requirements of the Annual Media Release
The following information must be included in the annual media release:

- WIC eligibility criteria

- Program benefits, including:
  - Nutrition education and counseling
  - Breastfeeding promotion and support
  - Referrals to other health and community resources
  - Healthy foods

- Physical address of the local agency

- The USDA Nondiscrimination Statement: See Chapter 4 for the complete statement and proper use when space prohibits use of the full statement, the shortened statement can be used.

Annual Media Release Examples
The following are examples of print, online, and broadcast media to utilize for your Program’s Outreach efforts.

- Print Media
  - newspapers, including weekly community papers
  - periodicals, including magazines published in your area
  - community newsletters
  - trade association journals

- Online News Media
  - Online news sites
  - Online community newsletters
  - Online community pages

- Broadcast Media
  - radio stations, including community college and university radio stations
  - television stations, including network affiliated stations, Spanish stations, cable-access stations, and community-access stations

Sample Press Release and WIC Advertisement
Refer to Attachment 4, Appendix A and B for a sample press release and an example of a WIC advertisement. Digital copies of the WIC advertisements in English and Spanish can be
found on the Nutrition Services Branch website at https://www.nutritionnc.com/wic/outreach-resources.htm. Local Agencies can design their own, but it must include all of the required elements.

- **Non-English Media Releases**
  If your area has a substantial number of residents who speak a language other than English, translate the annual media release into the appropriate language(s).

- **Documentation Of The Annual Media Release**
  The local agency must maintain documentation of the annual media release which includes:
  - A copy of the submitted and printed media release;
  - A copy of a broadcast schedule for radio or television, or a printout/screen shot of an online advertisement/article.

- **Working With The Media**
  Refer to Attachment 4: Guidelines for Building Media Relations.
Local Agency Retention and Outreach Plan

Local agencies must develop an annual outreach plan that involves all staff to build and sustain caseload and improve delivery of service. Because outreach is an active process, the Local Agency Retention and Outreach Plan can be continuously updated throughout the year.

- **Local Agency Retention And Outreach Plan Components**
  - The Local Agency Retention and Outreach Plan must contain goals related to the following:
    - Informing high priority populations about the availability of program benefits.
    - Improving access to services and/or reducing barriers to participation.
    - Engaging the community and increasing program awareness.
    - Establishing and/or maintaining an outreach and/or referral network.
    - Improving customer service.
    - Advertising local agency WIC Program Services.
    - Encouraging continued program participation.
  - Components of the outreach and retention plan must include:
    - Goal (s): Define your objective(s).
    - Identify Target Audience: Identify group(s) you want to reach.
    - Method of Outreach: Describe the strategies you will use, and outreach tools needed.
    - Place: Describe where the activity will take place.
    - Timeframe: Provide a timeframe for implementation and follow up if needed.
    - Evaluation: Explain your method of evaluation.
  - See Attachment 5 for the Local Agency Retention and Outreach Plan Template. The Local Agency Retention and Outreach Plan must be maintained at the local agency and made available during onsite monitoring.

- **Maintaining Documentation Of Retention And Outreach Activities**

Local WIC Agencies must maintain documentation of all agency retention and outreach efforts including the who, what, when, and where of all activities, and evaluation of the effort. Refer to Attachment 6: Outreach Log. Documentation should reflect the local agency’s Retention and Outreach Plan. Documentation may include but is not limited to the following information:

- **Program Marketing Efforts (Print, Broadcast, Social Media and Public Advertising Campaigns)**
  These may include locally developed outreach materials and materials developed for public advertising campaigns: Retain copies of any materials your agency has produced for outreach and public advertising (bus wraps, billboards, shopping carts, etc.). Describe the target audience and how these materials are used.
Local Agency WIC Program Website.
Document changes made to your agency’s website to ensure it communicates current information and is participant friendly. Local Agency WIC Program websites must include the full nondiscrimination statement or a link to it.

Social Media.
Retain a copy of your agency’s plan to use social media including; who is responsible for maintaining the local WIC agency’s social media marketing efforts and how your agency’s social media presence is promoted and utilized.

Print and Broadcast Media Releases.
Retain a copy of all media releases (such as press releases, newspaper ads, radio and television public service announcements), including the following information:
- list of media organizations who received the releases;
- a copy of the submitted media release;
- a copy of the printed or online media release with publication date(s); and
- a copy of the broadcast schedule for radio or television.

Caseload Management Strategies.
Describe procedures that are in place to track participation, facilitate continued program participation, and follow up with participants who miss appointments. Examples of these activities may include:
- appointment reminder calls;
- birthday card mailings;
- sending missed appointment letters to all missed appointments;
- evaluating appointment show rates; and
- managing the master calendar.

Efforts to Build a WIC Outreach Network.
Maintain a list of agencies and organizations contacted for outreach. Describe agency staff’s participation on community coalitions or advisory boards or in information sessions with potential partners.

Community Outreach Activities that Increase Program Awareness.
Maintain a list of community events attended and describe how the WIC Program was represented and how efforts directed potential participants to apply for WIC.

Efforts to Improve Customer Service and Increase Program Accessibility.
Describe any procedures in place to improve the participant’s experience and accessibility to the program. Examples could include:
- new sites opened or being considered;
- assistance with transportation;
- extended hours of service; and
- staff training regarding customer service.
Established Referral Agreements.
Maintain a description of all referral agreements. Include the following information in the file for each referral agreements:

- name of group and their contact information;
- brief description of agreement, including copies of any Memorandum of Understandings (MOUs); and
- description of provisions to protect participant confidentiality.
Sample Memorandum of Understanding Template

Memorandum of Understanding

Between

(Partner)

and

(Partner)

This Memorandum of Understanding (MOU) sets the terms and understanding between the (partner) and the (partner) to (insert activity).

Background
(Why partnership is important)

Purpose
This MOU will (purpose/goals of partnership)

The above goals will be accomplished by undertaking the following activities:
(List and describe the activities that are planned for the partnership and who will do what)

Reporting
(Record who will evaluate effectiveness and adherence to the agreement and when evaluation will happen)

Funding
(Specify that this MOU is not a commitment of funds)

Duration
This MOU is at-will and may be modified by mutual consent of authorized officials from (list partners). This MOU shall become effective upon signature by the authorized officials from the (list partners) and will remain in effect until modified or terminated by any one of the partners by mutual consent. In the absence of mutual agreement by the authorized officials from (list partners) this MOU shall end on (end date of partnership).
Contact Information
Partner name
Partner representative
Position
Address
Telephone
Fax
E-mail

Partner name
Partner representative
Position
Address
Telephone
Fax
E-mail

________________________ Date:
(Partner signature)
(Partner name, organization, position)

________________________ Date:
(Partner signature)
(Partner name, organization, position)
Outreach Activity Guide for Local Agencies

The purpose of this guide is to provide local agencies with a variety of options for outreach activities. It is by no means a list of activities that local agencies must complete, but merely a broad list of ideas for outreach. In fact, some of the suggested activities may not be applicable to your agency. However, many of the ideas listed here may serve as a springboard for developing your agency-specific outreach plan.

This checklist covers:

- Person-to-person outreach.
- Targeting specific groups, such as Head Start or Migrant organizations.
- Creating referral systems.
- Utilizing media.
- Increasing program accessibility.
- Potential partner organizations

Encourage person-to-person outreach.

- Ask participants to bring friends and family members who may qualify for WIC benefits. Provide written materials for them to hand to a friend or relative.

- Host special contests like "Bring A Friend to WIC." The participant who refers the most eligible people to WIC in a specified time wins prizes that have been donated.

- Hire WIC clients or volunteers to be outreach workers to recruit women from local communities.

- Remind clients of appointments ahead of time. Make special efforts to get women who missed appointments back, including making phone calls or mailing letters.

Target specific groups and families.

- Create targeted messages to include in the agency’s annual media release. Target children to keep them on the program after one year.

- Create targeted messages for pregnant women to get them on the program as soon as possible.
• Seek out places where these target audiences may be including, churches, social services offices, doctor’s offices, daycares, schools, and community organizations. Provide outreach material and training to staff for referral opportunities.

Create intra-agency referral systems.

• Ask local Medicaid staff if you can set up a table in their office once a week to make appointments while their clients wait. Provide literature for potential participants and well as Medicaid staff. Then reciprocate; invite Medicaid staff to take applications at WIC offices.

• Care Coordination for Children Services (CC4C), and Pregnancy Care Management (PCM) workers routinely work with clients who may be WIC-eligible. Provide them with information and materials on WIC and discuss their role in getting potential eligible participants into WIC.

• Hold a brown bag or potluck lunch honoring staff in another department. Give a short presentation about WIC and thank them for working so closely with you and your program.

• Provide in-service or lunch and learn presentation on WIC to immunization staff, public health nurses, school lunch staff, and community and migrant health workers.

Ask the medical community to refer.

• Meet with doctors who are Medicaid providers or manage large practices, such as obstetricians, pediatricians, and family practice physicians.
  o Explain the eligibility criteria, the benefits of the WIC Program, and how they can refer people to WIC.
  o Provide them with outreach materials and your agency’s contact information.

• Share WIC information with childbirth educators, midwives, and maternity and childbirth centers.

• Ask local pharmacists to include WIC information with prenatal and Medicaid prescriptions.

• Talk about WIC with local hospital staff such as social workers, OB and emergency-room nurses and physicians, and administrators. Tell them about WIC and ask them to refer potential clients. Leave outreach materials with your address and telephone number. Some agencies perform in-hospital certifications to new mothers upon delivery.

• Talk with pediatricians, OB/GYN, and family practice physician’s offices about the WIC Program. Provide WIC brochures, bookmarks, and WIC Program fact sheets so they can educate their clients about the WIC Program. Provide outreach posters to clinics. Use the
sample outreach letter to physicians in your outreach efforts. Visit [https://www.nutritionnc.com/wic/outreach-resources.htm](https://www.nutritionnc.com/wic/outreach-resources.htm) to utilize outreach resources.

**Build community partnerships that include referral systems.**

- Place a booth at a local store or shopping mall to explain WIC, who it serves, and how to make appointments. Ask permission from the store manager.

- Send information home with students who participate in the school lunch or summer feeding program.

- Create an in-school program for teen moms or develop a way to bring these young women to WIC regularly without missing school.

- Establish a relationship with local university and community college’s student health services.

- Ask churches and other faith-based groups to spread the word about WIC. Make sure all churches in your area have WIC flyers or brochures for potential clients.

- Work with Head Start, child care centers, Smart Start coalitions and other agencies that serve potential WIC applicants.

- Establish a WIC Growth Task Force for the community. Task Force members should include key leaders from the community who serve potential WIC clients, the medical community, and women who are WIC-eligible. Address infrastructure issues and better integration of community resources related to WIC growth.

- Join community coalitions or advisory boards in your community. Make known that you work for the WIC Program. Share information about WIC to let other board members know about the services the Program offers.

- Present WIC information to many different organizations, businesses, and clubs. Offer training to appropriate personnel to inform about WIC which includes a description of the WIC Program, eligibility criteria, the location of local agency and outlying sites (including addresses and telephone numbers), civil rights statement, and a contact person.

- Send thank-you notes to all who refer potential clients to WIC. Let them know they are performing an important community service.

- Talk to your public affairs officer about utilizing social media. Establish a Facebook page or Twitter account for your agency. Reach out to different social service organizations on these social media sites. Their participants may be potential participants for your program. Try to update or post to the social media site one time per week.
Produce print and broadcast media pieces.

- Put posters, flyers, or brochures where participants will be. Consider grocery stores, laundromats, child care centers, resale and thrift shops, maternity shops, church fellowship halls, university student centers and employment offices. Please refer to Chapter 4 in the WIC Program Manual for information about the required non-discrimination statement.

- Use bus cards that travel targeted routes or billboards. They have worked well in many locations.

- Ask local newspapers, television, local cable access stations, and radio stations to play public service announcements and cover stories about your clinics. Get the WIC story in the news. If you expand your hours, open a Saturday clinic, or hire new staff, let people know. Emphasize that WIC is a nutrition program for working families! Make your clinics accessible to working families. Please refer to Chapter 10, Attachment 2, in the WIC Program Manual for more information about working with the media.

Make WIC user friendly and accessible.

- Provide waiting room toys or activities for children. Ensure a routine for cleaning the toys and the area where toys are kept.

- Minimize waiting time to get an appointment and during clinic visits.

- Encourage staff to attend customer service training at local community colleges

- Ask clients, “What time works best for you?” when scheduling return appointments

- Provide extended hours during lunch, the evening, early morning, or on the weekend.

- Increase the number of sites that offer WIC services.

- Recommend that participants use proxies to pick up food benefits.

- Refer participants to transportation resources.

Organizations for Outreach and Referral

- Community Care of North Carolina/Carolina ACCESS (Medicaid managed care network)

- Child Development Agencies

- Children’s Developmental Services Agency (CDSA)
• Community Action Agencies

• Cooperative Extension: Expanded Foods and Nutrition Education Program (EFNEP).

• Healthcare Services:
  o Care Coordination for Children Services (CC4C)
  o Family Planning
  o Immunization Services
  o Pregnancy Care Management (PCM)
  o Prenatal Care
  o Well Child Care
  o Pediatric Dental Offices
  o Physicians
  o Rural Health Centers

• Department of Social Services
  o Eligibility Intake Workers
  o Work First Counselors
  o Child Support Enforcement
  o Food and Nutrition Services
  o Medicaid Program NC Health Choice

• Domestic Violence Shelters

• Employment Security Commission

• Faith Based Organizations

• Farmers Markets

• Food Bank

• Food Pantries / Meal Programs

• Head Start

• Child Care Centers

• Health Maintenance Organizations (HMO’s)

• Homeless Shelters

• Hospital Birth Center Staff

• Hospital Outpatient Clinics
• Housing Authorities
• Hunger Network / Food Security Organizations
• Indian Tribal Organizations
• Legal Services
• Low-Income Citizen Organizations
• Mental Health Centers
• Migrant and Seasonal Farmworker’s Association
• Organizations that support breastfeeding women
• Substance Abuse Treatment and Counseling Centers
• Smart Start Partnerships
• Urban Indian Organizations
• University or community college student health center
Social Media

Social media collectively are websites and applications that enable users to create and share content or to participate in social networking. Social media can be a low-cost and effective communication tool for WIC Programs.

Social Media integrates technology, social interaction, and content creation, to collaboratively connect online information. Through social media, people or groups can create, organize, edit, comment on, combine, and share content.

Social Networking sites are online communities where people can interact with friends, family, coworkers, acquaintances, and others with similar interests. Most social networking sites provide multiple ways for their users to interact such as chat, email, video, voice chat, file sharing, blogging, and discussion groups.

Some popular social networking sites include:

- **Facebook**
  - Facebook is a community. Individuals become friends, sharing information about themselves, what they're doing and their interests. Facebook users can upload photos, videos, send direct emails to other Facebook users, comment on what others have said, play games, support causes, and more. Security can be set so that anyone can see postings, or just friends, or friends of friends. Organizations or groups have "fans" rather than "friends".
    - Utilizing social media is inexpensive way to reach potential and existing participants.
    - Post messages, upload pictures and videos for free
    - Facebook can help create a community. WIC participants on Facebook may feel they are part of the WIC community and it may be further incentive to stay with the program.
    - Examples for local agency’s may include posting recipes, nutrition and/or breastfeeding information, clinic closures, sharing interesting information from other WIC/social service organizations and sharing community events.

- **Twitter**
  - Twitter is a micro-blog. Postings are called "tweets". Each one is limited to 140 characters. Typically, postings include links to more information. The benefit of Twitter is that you can quickly scan announcements to find those that are of interest to you. Then you can click the link for more information.
- Examples for local agencies may include, posting healthy recipes, clinic information, breastfeeding information, community information, and information about WIC partnership organizations.

- **YouTube**
  YouTube is a video sharing website and can also be a way to provide outreach to your community. Establish a channel to upload videos for the public to view. Specific government pages can be created as well. Send the following information to government@youtube.com:
  - The name of your government, government department, agency
  - Your .gov website URL
  - The account name you have registered on YouTube (i.e., your YouTube username)
  - The email address you are using to manage the account
  - What type of content you plan to post

Adopting social media into your WIC Program’s Outreach plan is not for everyone. Staff and work time must be devoted to creating and posting content, monitoring site activity, and responding to site users. Consult with your public affairs officer or designee for guidance on the use of social media.

**Social Media Best Practices**

1. Consult with your public affairs officer or designee to obtain information and guidance on your county’s social media policy.

2. Become familiar with multiple sites before deciding upon which one your agency would like to use. There are hundreds of social networking sites available, each with distinct targets, purposes, and functions. Visit the sites to gain an understanding of the participants, the culture, and the functionality.

3. Consider the overall communications strategy and objectives. Before launching a page, make sure social networking activities mesh with the communication strategy and objectives.

4. Be thoughtful about resources. Ensure that adequate resources (time and staff) are available to support ongoing maintenance of the page to keep content fresh and fans engaged.

5. Provide engaging posts and communication material on the site. Incorporate videos, quizzes, games, images and other materials to actively and repeatedly engage users.

6. Create a comment policy. Develop a policy that covers the response to inappropriate or derogatory comments.

7. Collect and store comments. Develop a system to archive comments.
8. Develop a promotion plan. Establish a promotion plan before launching the page; encourage fans to share and cross promote using other social media channels and web pages.

9. Develop an evaluation plan. Have an evaluation and metrics plan in place prior to launch to determine if efforts are successful. For example, it will be helpful to:

- Determine how participation will be measured. Evaluation can include simple measures of user engagement (e.g. How many followers/fans/friends does the account have? How many users commented on recent posts?

- Take advantage of the analytic packages available on the social networking sites. These can be utilized to determine the number of people (“fans”) participating in the activity and observe how users engage with the site. For example, Facebook Insights are available to users (administrator) who maintain a page for an organization. Facebook Insights allows the administrator to see demographic information and fan interactions with the page over time.

Be sure to check with your local agency’s public affairs officer before utilizing any type of social media.
WIC OUTREACH:
GUIDELINES FOR BUILDING
MEDIA RELATIONS
WIC Outreach: Guidelines for Building Media Relations

One way to gain public awareness and support for the WIC Program is through your local media – newspapers, radio and television. Working with the media can also help reach potential clients who may not be aware of the important services provided by WIC. Having good relationships with the media can markedly improve the effectiveness of using them for outreach purposes.

Local WIC agencies can facilitate establishing and maintaining positive relations with media personnel by remembering certain guidelines. This publication has been designed to outline several of these guidelines to assist agencies with media interactions. Although the topics in this publication were not written in the format of sequential steps, it might be helpful to consider them roughly in the order as they appear. Also, please note that as you read these guidelines, it is important to take into account any media rules and regulations specific to your local WIC agency. This includes any social media and internet usage. Be sure to check with your public affairs officer before utilizing any type social media.

As an overview, the guidelines briefly describe the following eight topics.

- Preparing a list of key media personnel
- Characteristics of a newsworthy story
- How and why to prepare a media kit
- How to build media relationships
- How to prepare a fact sheet
- How to write a news release
- Guidance for holding a news conference
- Tips for hosting media visits or interviews

Establish social media tools to help promote your Program. Social media sites include:

- Facebook
- Twitter
- YouTube

Refer to Attachment 3 for more information on incorporating social media into your outreach efforts.
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1. Preparing a Media List

Compile a list of the following local media. Organize each list by market served. Some publications or stations are appropriate for some types of news, but not all.

- **Print Media** – newspapers, magazines, “shoppers” and other giveaways, and entertainment magazines

- **Broadcast Media** – radio and television stations

News staff decides what is newsworthy based on what they believe interests or affects their audiences. So, in your list, include the names, titles, addresses, and telephone numbers of the following key players. Update your media list every four to six months.

- Editors for city desk, city/county government, health, lifestyle decide what goes into newspapers and edit the news.

- Reporters on relevant beats for city/county government, health, lifestyle (at small papers, these might be the same person) write the stories.

- TV and Radio producers decide who goes on shows/programs.

- News directors decide what goes on the air.

- Assignment editors decide what goes in the story. They are supervised by news directors.

- Public service directors review and decide which community groups, programs, or projects to promote. Serve as publication or station’s liaison to community.

- Post news stories to your WIC Program’s Facebook page or YouTube account.
2. **What News is Newsworthy?**

Before you contact the press to cover a story, you must have something newsworthy to say. Remember your main objective for media coverage related to outreach is to raise public awareness of WIC and to increase WIC enrollment.

What is newsworthy? Something that is…..

- News that no one has ever said or heard before.
- Timely—yesterday’s news is old news.
- That involves a public figure, celebrity, or well-known organization.
- That affects a large number of people.
- With a human-interest angle. (Success stories with women and children always score high). Include pictures (with consent) with personal stories.
- Visual (for television and news photography).
- That centers on an event or happening.
- That is “good news” such as lower, statewide anemia rates that can be directly tied to WIC.
- That is a variation of a theme already receiving media attention.
- Accessible to the media—give location, time, and other important information.
- Interesting on what would otherwise be a slow news day.
- Unusual or ironic.
3. Preparing a Media Kit

Media kits are the primary tools used to attract the media. They provide media personnel with newsworthy and background information in a clear and concise fashion. Their specific purposes are:

- To start conversation with reporters, editors, or radio/TV staff when making initial contact or requesting time on a talk show, airing of a PSA, or story coverage.

- To distribute at a media event, such as a press conference or charity drive.

Media kits usually consist of a 9” by 12” two-pocket folder and contain any or all of the following:

- News/press release (see page10 – Writing a News Release)

- Biographical sketch of the WIC director and/or other key personnel

- Fact sheet (see page 9 – Preparing a Fact Sheet)

- Photographs

- Graphs and charts

- Collateral and miscellaneous items

- Contact information

The outreach folder titled, “Health Care Provider Outreach and Referral Packet” (NSB #0068) may provide a starting point for the media kit. Add the pertinent elements from the list above that support your story. Remove any inserts from the folder that may distract from the focus of your story.
4. Meeting the Local Media

It is a good idea to get to know the local reporters and editors. You learn what they consider newsworthy, who to call when you have a story idea, timing of deadlines, and other useful information. In return, they learn who you are and that you are a source of good story ideas and information about the WIC Program.

Try to establish yourself as friendly to the media, but remember, a reporter’s job is to seek news. Answer their questions accurately and quickly and offer your services as a “background source” to provide information about public health programs, including WIC. Also, offer to direct questions about other public health issues to the appropriate health department personnel. The key to developing good media relationships is availability and credibility.

Consider the following tips when developing your relationships with reporters.

- A reporter is never completely off duty. If you say something newsworthy, it could show up in the news.
- Offer to review any technical material for accuracy prior to publication or airing.
- Don’t try to buy reporter’s attention with gifts or flattery. Good reporters can’t be bought.
- Don’t tell reporters how to do their jobs or ask to see a story before it is printed.
- Don’t expect reporters to think something is newsworthy just because you do.
- Don’t play favorites among reporters by giving one reporter a story before the others. You may alienate too many people and get less coverage overall.

When making **initial contact** with media personnel, consider the following:

- Make an appointment to introduce yourself to the appropriate reporter, editor, or the public service director, although this may be more difficult in a larger town. Mid to late morning is the best time to visit reporters and editors. They are very busy in the afternoons.
- Tell the reporter or editor about the WIC program and provide a media kit. Hand-deliver your media kit to the editor/s of the section’s in which you wish to publicize your information.
- Depending on time available, offer one or two story ideas for consideration.
- Leave business card with your name, phone number, and email address.
Once you have made initial contact with local reporters and editors, it is important to establish an **ongoing relationship**. The best way to do this is through sending out periodic press releases and holding press conferences when you have important news. Be open to visits from the media.

When you have a story you would like covered, consider the following steps:

- Identify the media personnel who handle your issue and send them a media kit.
- Call media personnel in advance of sending your information or place a follow-up call to make sure they received it. Fax the information immediately if they have not received it.
- After they have had time to review the information, re-contact the reporter or editor to determine their interest in placing a story.
- Do not hesitate to re-send the information if they have not received it or say they have not seen it.
- Refer to the NSB materials entitled, “Tips for Talking with Reporters” and “Media Talking Points”, both of which can be found on our website, [https://www.nutritionnc.com/wic/outreach-resources.htm](https://www.nutritionnc.com/wic/outreach-resources.htm).
5. Preparing a Fact Sheet

Fact sheets should be included in media kits. They contain information about the WIC Program in general and about your project or clinic. The details on a fact sheet may depend on the focus of your press release or PSA. See the WIC outreach folder, “Health Care Provider Outreach and Referral Packet” (NSB #0068), for information on the program. All fact sheets should contain the following:

- Name, location, hours, and services provided at your WIC clinic, including any recent changes, agencies website and social media sites if any.

- Key dates for special events, such as walk-in blitz clinics.

- A brief summary of the WIC Program as well as its mission and successes. (Include Medicaid savings associated with the WIC Program.)

- Information about WIC services (i.e. nutrition education, WIC foods, referral to other health and community resources, and breastfeeding support), the importance of these services for good health, and the means by which participants obtain them.

- Statistics (e.g., number of participants served last month and any recent changes, amount of food dollars spent in the community last year, number of people potentially eligible for the WIC Program, etc.).

- Eligibility requirements for the WIC Program.

- The civil rights statement. (See the WIC Program Manual, Chapter 4.)

- Contact information including names, addresses, phone numbers as appropriate, and program’s/health department’s website.
6. Writing a News Release

News releases must be…..

- Timely – News is now. Something that happened yesterday, last week, or last month is old news. If a story isn’t timely, hold off. You don’t want to get a reputation for wasting reporters’ time.

- Urgent – Use interesting information and attention-getting facts to put the story in perspective.

- Brief and focused – Length should be 1 ½ to 2 ½ pages maximum. Hook the assignment editor or reporter quickly, or you may lose him or her – and your chances of coverage. Isolate the message you want to share and make it clear.

- Important to people – Tell the practical importance of your announcement. What impact will your news have on people’s lives? Include a description of the WIC Program, eligibility criteria, location of the local agency (including addresses and telephone numbers), civil rights statement, and a contact person to handle future questions.

- Authoritative – Quote appropriate experts.

- Easy to understand – Use lay terms. Scrap bureaucratic, scientific, and medical terminology when possible. If you must use any term, define it simply and concisely. Don’t assume that non-health professionals understand terms that are commonplace to you.


- Formatted properly – Put the subject of the press release and the contact person’s name and telephone number at the top of the first page. If the press release takes more than one page, write “more” on the bottom of each sheet but the last one. For subsequent pages, repeat the contact person’s last name, the topic and page number in the upper left corner. Avoid splitting sentences or paragraphs between pages, even if it means leaving excessive empty space. Type ### centered at the end on the last page. Remember to double-space the text (See Appendix A for a sample press release).

- Photo friendly – Suggest photographic possibilities. Remember to obtain consent form/s when you arrange a photo session. The media representative (newspaper, magazine, or TV station) will obtain his or her own consent forms for photos he or she takes.

**NOTE:** Remember to include the current nondiscrimination statement at the end of all press releases.
7. **Holding a News Conference**

News conferences follow a certain style. Remember to…..

- Open with a short statement, lasting no more than 30 to 60 seconds. State the reason for the news conference and give the basic story. Say who you are and why you are there.

- Introduce key speakers. Never have more than three speakers at a press conference.

- Don’t be surprised by questions. Reporters are there to ask questions. It’s their job. Be sure to allow plenty of time for questions and answers. Always answer honestly and directly. If the reply requires some thought, stop and take the time to think it through. Do not brush aside a reporter’s question.

- Listen closely and respond to each question. If you don’t know the answer, don’t speculate. Write down the question and the reporter’s phone number and respond as soon as possible on that and other related information.

- Share media kits. Include vital facts or statistics, staff biographies, the text of the opening remarks.

Carefully select the location and time of the press conference. Consider:

- Location: Are the building and room easy to find?

- Timing: Is the time convenient for reporters? Mid to late morning is usually best to give reporters enough time to write their stories by deadline. Try to avoid a schedule conflict with other events.

- Parking: Is there enough?

- Space: Is the room large enough for all the reporters and their equipment?

- Electricity: Is there sufficient power for reporters’ tape recorders, lighting, and sound equipment?
8. Hosting a Media Visit/Providing Interviews

When a news reporter asks to visit the WIC clinic and/or to interview you….

- Be prepared! Provide supplemental information such as media kits, fact sheets and research reports. Reporters may need the information to more fully understand your program. Prior to any interview, make a list of all possible questions (including negative) the reporter may ask and develop answers carefully. This will result in conveying the information correctly and concisely, helping you avoid damaging misstatements and making you a more effective spokesperson.

- Be accessible and accommodating. Have professional experts and program recipients available for interviews and photos. Meet reporters at the door and show them where to go. Offer information as requested.

- Know media deadlines. News crews have rigid daily deadlines. If they need something, they generally need it quickly. Mid to late morning is usually convenient for a media visit or interview.

- Be concise. When you are interviewed, speak in brief, focused sentences. Use layman’s terms. Stick to the subject – you need not tell everything you know, particularly if it involves proprietary or confidential information.

- Admit to bad news, if you must, but emphasize any positive aspects. Point out what has been done to rectify the negative. Use it as an opportunity.

- Never speak “off the record.” Don’t say anything you don’t want to see in the news.

- Don’t say “no comment.” It is perceived as an indication of guilt and/or dishonesty. Tell them you will get the information and get back to them. Ask for their deadline.

- Don’t take reporter’s insulting questions personally. It could be a tactic to get you to react angrily. Stay calm and continue to make points rationally.

- Don’t argue with reporters or lose your temper. They’re only doing their jobs.

- Make sure you understand the exact question being asked. Reporters don’t always ask the right questions. Ask them to repeat the question if you’re not sure.

- Be honest even it hurts. It is much better than lying to a reporter. They may find out. If you don’t know the answer to a question, say so. Defer to another source or offer to find out and call with an answer as quickly as possible. Don’t let reporters press you into answers you don’t know.

- Above all, RELAX. Advise your staff in advance when the media is coming. Ask them to act naturally and to cooperate.
Television Interviews

If your local health department receives coverage by a television station and they request an interview, remember to…

• Prepare by selecting your “must air” points and stressing them in the interview. Write them out and be sure to watch the time so they all get said. Script the interviewer. Although they may not use all of it, it may help get some of your questions asked.

• First impressions are critical – establish your likableness. Smile and thank the interviewer; call the interviewer by name.

• Maintain eye contact with the interviewer – the “crossover” moment between question and answer is critical to credibility on tough questions. To lose contact could indicate evasion, dishonesty, or anxiety.

• Speak up clearly and distinctly. Maintain an even pace to word delivery. Words should not slur together, nor go too fast or too slowly.

• Color important words – Go up the scale to a higher note. This is a good way to underscore major points. Then, take a slight pause to reinforce the importance of what you’ve said.

• Do not swivel or lean to one side in the chair. Sit fairly erect with a slightly forward tilt. This will help your energy level and make you look more attentive.

• Keep your answers short, simple, and free of unfamiliar jargon. Get to the conclusion first, and then explain. (e.g., Good nutrition results in having healthier babies with fewer developmental problems. WIC contributes to good nutrition by providing…)

• Work the name of your organization into your answers, but make the interjections logical and unobtrusive (e.g., “We at the Monroe County Health Department believe…”).

• Offer to bring appropriate visual materials that could illustrate your points. Film or videotape clips are especially desirable

• Refer to “Tips for Talking with Reporters” and “Media Talking Points”. These items are available on the Nutrition Services Branch website at https://www.nutritionnc.com/wic/outreach-resources.htm.
Radio and Telephone Interviews

Frequently radio interviews are conducted by telephone. When providing radio interviews, remember to…..

- Ask whether the interview is to be aired live, live-taped, or taped. Turn off any “noise” makers in your office. Cut other telephone calls. Close office door.

- To sound alert, sit up straight in the chair or stand up.

- Don’t shout or whisper. Speak in normal tones over the telephone mouthpiece.

- Tilt mouthpiece slightly away from your mouth to avoid “popping” or “hissing.”

- Make sure you have a clear telephone line.

- Watch pauses. “Uh” sounds worse on radio than anywhere else. Silence is better.

- Avoid using numbers unless absolutely necessary. If numbers are needed, use rounded numbers.
Appendix A: Sample Press Release

Use agency letterhead

RELEASE: IMMEDIATE (or date, month, year, and time)  DATE: (date distributed)

Contact: (Name and telephone number of contact person for more information)

WIC PROGRAM PROVIDES ASSISTANCE FOR ELIGIBLE WOMEN, INFANTS, AND CHILDREN

(CITY) – WIC or the Special Supplemental Nutrition Program for Women, Infants and Children provides supplemental nutritious foods, nutrition education, breastfeeding support, and referrals to health care and community resources to participants. The WIC Program is available at (insert name and location of local WIC agency). You may apply for the WIC Program on (insert days of the week) from (insert times of day).

To be eligible a person must:

• Be a pregnant woman; a breastfeeding woman who has had a baby in the last 12 months; a woman who has had a baby in the last six months; an infant; or a child up to the fifth birthday;

• Reside in North Carolina;

• Meet income eligibility requirements: The gross annual household income cannot exceed 185% of the Federal poverty income guidelines; All Medicaid, Food and Nutrition Services (food stamps) and Work First recipients meet the WIC income eligibility criteria; and

• Have an identified nutritional risk as determined by a health professional.

-MORE-
WIC Program Provides Assistance
Contact: (Name and telephone number of contact person for more information)

For more information about WIC or to make an appointment please visit (insert local agency name and location) or call (insert local agency phone number). Or, visit www.nutritionnc.com.

This institution is an equal opportunity provider.
Appendix B: Sample of WIC Advertisements

Digital copies of the WIC advertisements in English and Spanish can be found on the Nutrition Services Branch website at https://www.nutritionnc.com/wic/outreach-resources.htm.

WHAT IS WIC?
The Women, Infants and Children (WIC) Program is a nutrition program that helps families stay healthy.

WHAT DOES WIC PROVIDE?
WIC provides access to:
• Healthy foods
• Breastfeeding support
• Nutrition education
• Resources for families

WHO IS WIC FOR?
You can participate in WIC if you:
• Are pregnant, a new mom, breastfeeding or have an infant or child under age 5.
• Live in North Carolina.
• Receive Medicaid, Food Stamps, Work First or have a family income less than WIC income guidelines.
• Have a nutritional need determined by the WIC Nutritionist.

FOR MORE INFORMATION, CONTACT:
This institution is an equal opportunity provider.

¿QUÉ ES WIC?
El Programa para Mujeres, Bebés y Niños (WIC) es un programa de nutrición que ayuda a las familias a mantenerse saludables.

¿QUÉ SERVICIOS OFRECE WIC?
WIC le ofrece acceso a:
• Alimentos saludables
• Apoyo a la lactancia
• Educación sobre nutrición
• Recursos para las familias

¿PARA QUIÉN ES WIC?
Usted puede participar en WIC si:
• Está embarazada, es madre reciente, amamanta a su bebé o tiene un bebé o un niño menor de 5 años.
• Vive en Carolina del Norte.
• Recibe Medicaid, Cupones de Alimentos, asistencia de Work First o bien, si los ingresos de su hogar son menores a los guías de ingresos de WIC.
• Tiene una necesidad de nutrición determinada por un nutriólogo de WIC.

PARA MAYORES INFORMES, COMUNÍQUESE A:
Esta institución es un proveedor que ofrece igualdad de oportunidades.
Assessment of Caseload:

Trends in Overall Participation

<table>
<thead>
<tr>
<th>Participation</th>
<th>24 months ago</th>
<th>12 months ago</th>
<th>6 months ago</th>
<th>Current Participation</th>
<th>% of Base Caseload Currently Serving</th>
<th>% of Population At Risk Currently Serving</th>
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Trends in Participation by Category

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<thead>
<tr>
<th></th>
<th>Pregnant Women</th>
<th>Fully Breastfeeding Women</th>
<th>Partially Breastfeeding Women</th>
<th>Postpartum Women</th>
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<tbody>
<tr>
<td></td>
<td>Fully Breastfeeding Infants</td>
<td>Partially Breastfeeding Infants</td>
<td>Fully Formula Feeding Infants</td>
<td>Children</td>
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<td>24 months ago</td>
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<td>12 months ago</td>
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<td>6 months ago</td>
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<td>Current</td>
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Note any factors that may have contributed to the trends seen in participation:
**Strategic Retention and Outreach Plan**

Goal: **Target WIC Services to Highest priority groups.**

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<thead>
<tr>
<th>Target Audience</th>
<th>Staff Responsible</th>
<th>Method(s)</th>
<th>Where</th>
<th>Timeline</th>
<th>Evaluation</th>
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Goal: ________________________________________________________________

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NC WIC Program Manual
### Agency Name

**WIC Program Outreach Activity Log**  
**FFY _____________**

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<tr>
<th>Date</th>
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