#### Referrals

# **Policy**

**USDA Federal Regulations:** (b) Provisions of agreement. The agreement between the State agency and each local agency shall ensure that the local agency

- (5) Has a plan for continued efforts to make health services available to participants at the clinic or through written agreements with health care providers when health services are provided through referral.
- (b) Program referral and access. State and local agencies shall provide WIC Program applicants and participants or their designated proxies with information on other health-related and public assistance programs, and when appropriate, shall refer applicants and participants to such programs.
- (e) Nutritional risk data shall be documented in the participant's file and shall be used to assess an applicant's nutritional status and risk; tailor the food package to address nutritional needs; design appropriate nutrition education, including breastfeeding promotion and support; and make referrals to health and social services for follow-up, as necessary and appropriate.

## **Authority**

7 CFR Part 246.6(b)(5) 7CFR Part 246.7(b) 7CFR Part 246.7(e)*excerpt* 

### **Procedures**

Referrals will be made in private and the participant's acceptance of a suggested referral is voluntary. Referrals may be formal or informal.

- Formal referrals are for more urgent needs and are usually written and include a referral form with a release of information. An example can be found in the Certification, Eligibility and Coordination of Service forms folder and is called the Referral from the WIC Program form. A formal referral would also be when you call the organization or office on the participant's behalf to enroll them or make an appointment for them, whether or not they are still in the office with you when the call is made.
  - If the participant agrees to a formal referral, have the participant sign the release of information section on the referral form, and scan it into the participant's record before sending.
  - o A referral form/release of information must be signed by the WIC participant to

release any information, including the participant's name, to another agency, program, or individual. The exceptions to this are the named programs listed in the Confidentiality of Participant Information policy in which the director of the Iowa Department of Public Health has authorized the use and disclosure of limited WIC participant data, also detailed within that policy and Head Start and Early Head Start. This authorization is disclosed to participants in the document Your Rights and Responsibilities as a WIC Participant. A copy of this document can be found in the Certification, Eligibility and Coordination of Service forms folder.

- If the referral is related to substance abuse, HIV status, or mental health, the
  participant must check the box identifying the specific information released and
  sign the Authorization for Release of Information of the form as well. An example
  of this form can be found in the Certification, Eligibility and Coordination of
  Service forms folder.
- Informal referrals are when the intent is to provide basic information about an agency or program. WIC personnel are encouraged to provide appropriate print materials such as program brochures when such materials are available.

Assurances must be in place that all referrals (formal and informal) are documented in the participant's record.

WIC staff will follow up with the participant for all referrals (formal and informal) documented in their record. The outcome of the follow up will be documented in the Follow-up drop down box on the Referrals- Participant or Referrals- Family panel.

- For referrals about immediate concerns, the referring staff member will call the
  participant within a few days to see if the referral was completed and needed services
  obtained.
- For referrals of a less urgent nature, the referring staff member can follow up with the participant by phone or the follow up can be done at their next scheduled appointment by the staff person seeing them.

### **Best Practices**

Encourage all participants to follow-through on the referral(s) as soon as possible.

Referrals should be made whenever possible in order to:

- Ensure access to ongoing health care services, particularly prenatal care, well child services, and dental services;
- Assist WIC participants with current problems and prevent potential ones by utilizing available resources;
- Encourage positive approaches in working with families through focusing on strengths, promoting wellness, and integrating appropriate resource; and
- Develop and maintain linkages between agencies and health care providers serving WIC

participants.

Standard practice should be to complete a referral for an individual participant but a family referral may be completed when the entire family has the same need for assistance (e.g. Food pantry). Document an individual referral on the Referrals- Participant panel and a family referral on the Referrals-Family panel in the data system.

- Each agency should develop a plan to ensure that follow-up for more immediate concerns is completed.
- If you receive follow-up communication from the agency, program or provider, update the nutrition care plan in the WIC data system with the information. The paper documentation can then be shredded and discarded.

At the time the Referral From the WIC Program and/or the Release of Information form is signed, explain these terms to the participant:

- This release only allows WIC to contact the referral resource on the participant's behalf and transmit certain information supplied by the participant to that resource.
- Receipt of WIC benefits does not depend on the participant's consent for referral, nor does failure to sign this form in any way jeopardize program eligibility or participation.
- The participant may revoke the authorization to release this information at any time, but that information, once released, cannot be retrieved.

WIC contractors are encouraged to develop joint referral criteria with community agencies and programs to ensure that appropriate referrals are made, and that appropriate follow-through occurs. To make referrals which best serve the particular needs of the participant, you must be familiar with community resources. Obtain copies of community referral directories or develop an agency referral resource list including:

- Services provided
- Fees or other costs
- Contact name, address and phone
- Hours of business
- How long an appointment takes
- How to make an appointment
- Eligibility requirements, including whether Title XIX clients are accepted
- Special forms or information needed to apply

Each local agency can then maintain basic contact information in the WIC data system for agencies and programs to which referrals are frequently made. Contact information includes name, address, phone, fax, email, and contact person.