

# Chapter Ten

## Emergencies and Disasters

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### Overview

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**Policy**

The State Agency will provide guidance for the WIC State Agency and Local Agencies' staff during periods of emergencies/disasters such as a flu pandemic or natural disaster

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**In This Chapter**

This chapter is divided into four (4) sections and four (4) appendices which detail actions to be taken by State Agency and Local Agencies' staff in case of an emergency situation or disaster.

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### Section A

#### Introduction

#### Purpose

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The purpose of this document is to provide guidance to WIC State and Local Agencies' staff during periods of emergencies/ disasters such as a flu pandemic or natural disaster in order to ensure the delivery of WIC program services to eligible women, infants and children within Arizona.

References:

Federal:

7CFR 246 – Special Supplemental Nutrition Program for Women, Infants and Children

USDA Western Region All States Policy Memorandum 03-31 – Allowable Costs of Bioterrorism Preparedness dated March 25, 2003 (Appendix A)

WIC Policy Memorandum #2007-5 – WIC Program Response to a Human Pandemic (Appendix A)

Department of Health & Human Services Letter dated June 2, 2006. Supporting and Funding Emergency Preparedness and Response Activities (Appendix A)

#### Assumptions

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A natural or man-made disaster, such as a flu pandemic, fire, flood or earthquake is likely to occur within the State of Arizona sometime in the future.

The disaster will affect some portion of the general population, government agencies (local, State, national), retail and wholesale grocery industry and other elements of the food system within the State.

Health and Human Services guidance indicates “in general, approximately 5% of an individual’s time is a reasonable amount of staff supported with grants funds to spend on non-categorical activities, including preparedness training and participation in drills and exercises in the pre-event time period”.

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The severity of the particular disaster or emergency will dictate the level of response that the Arizona WIC Program undertakes. A potential of four levels of severity are envisioned.

- Level 1** A small number of staff and WIC participants are affected. The retail grocery system remains operational. The program will continue normal operations at the State Agency and Local Agency levels with minor adjustments made for unavailable staff. Issuance procedures will be modified to limit exposure of unaffected staff and participants at clinic sites.
- Level 2** A significant number of staff (25% or more) are affected. Lack of staff at the State Agency and Local Agencies requires significant modification to procedures to ensure continued issuance of food instruments to participants. The retail grocery system continues to operate.
- Level 3** This level will be reached when 40% of staff are affected or there is a declaration of an emergency or disaster by the Governor of Arizona, U.S. Government, or in case of a pandemic, the World Health Organization. Only a very small number of staff at the State Agency and Local Agency levels are available. The retail grocery system remains somewhat intact. The State Agency and Local Agencies will operate under significantly modified procedures which allow for the issuance of food instruments. Not all WIC clinics will be operational, requiring the consolidation of clinic operations at a few central locations and/or batch printing of food instruments.
- Level 4** At this level, a declaration of an emergency or disaster by the Governor of Arizona, U.S. Government, or in case of a pandemic, the World Health Organization has been issued. The disaster results in the shutdown of the retail grocery system. At this point, the WIC Program will cease operations and participants will be directed to disaster feeding sites under the auspices of the Federal Emergency Management Agency (FEMA) and/or State disaster agencies. If the disaster agencies are unable to provide infant formula to program participants, the WIC Program will institute an alternate delivery system to provide necessary formula.
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### Section B

#### Policy

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#### Policy

In the case of an emergency or natural disaster, WIC State Agency and/or Local Agencies' staff may be required to assist in the execution of various disaster response plans. In response to a natural disaster, the affected WIC Local Agency assesses the impact on program operations and participants to determine the need to implement changes. Local WIC Agencies need to become familiar with the specific disaster preparedness plans within their local health department or agency. The response to a biological disaster or terrorist action, however, will be coordinated at a higher level.

The following guidance applies to these situations:

- WIC funds/employees used to staff State Biological Disaster Response Teams - With approval of the State Agency director, WIC employees may volunteer to be part of their State's Biological Disaster Response Team. If other reimbursement is unavailable, staff time for participating in team activities, such as planning and training, would be an allowable cost for the WIC Program because the employees would gain knowledge and experience that could assist the WIC Program in bioterrorism preparedness.
- National Smallpox Vaccination Program (NSVP) – Although WIC employees may be used to implement the NSVP, the WIC Program would need to be reimbursed for staff time spent on this initiative, because vaccinating health care workers and first responders is not an allowable cost under current laws and regulations governing the WIC Program. Before committing WIC staff to implement the NSVP, State and Local Agency directors should ensure that: 1) adequate staff remains available to provide WIC services to program participants; and 2) reimbursement will be provided for WIC staff time spent on the NSVP.
- WIC resources used in the event of an actual biological disaster - In planning its response to a potential biological disaster, each State must consider the use of all available resources within its jurisdiction. Consequently, the State may, without regard to the allowability of costs to the WIC

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Program, incorporate the use of its WIC Program resources (i.e., staff, facilities, equipment, and supplies) into its biological disaster plan. This does not authorize the diversion of WIC funds to non-WIC accounts. In the event of an actual biological disaster, WIC Program resources will be brought to bear in accordance with States' biological disaster plans.

Upon declaration of an emergency by the Governor, ADHS Director or their designee, the Arizona WIC Program will implement the following:

- Notify Western Region (WRO) United State Department of Agriculture, Food and Nutrition Service of the needs of Arizona.
- The Arizona WIC Program State Agency maintains the AIM database system with parallel servers to allow continued operation in case of the loss of any of the servers.
- The Arizona WIC Program State Agency will provide WIC Local Agencies with guidance and assistance during periods of emergency to enable the Local Agency to continue to serve program participants.
- The Arizona WIC Program State Agency and Local Agencies will facilitate access to WIC services in the State of Arizona for eligible families displaced by emergency conditions.
- The Arizona WIC Program considers infants on formula the most vulnerable WIC participants in cases of emergency. Often, WIC formula is their only available food source.
- The Arizona WIC Program will facilitate communication with infant formula manufacturers regarding the delivery of infant formula in instances where a retail grocery system is not available.
- The Arizona WIC Program is not a first responder in an emergency. It does not provide emergency food. It does not directly distribute food and will only provide for the distribution of infant formula, in cases where the retail grocery system is not available.

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- The Arizona WIC Program will maintain and/or re-establish program services during a period of emergency. The program will, to the greatest extent possible, continue to provide WIC food instruments to eligible participants.
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### Section C

#### Procedures

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#### Level 1 Procedures

In an emergency determined to be Level 1, the WIC State Agency will continue normal operations. The retail grocery system remains operational.

State Agency - the State Agency will perform the following activities:

- a.) Data System – The State Agency will continue to ensure the efficient operation of the AIM data system. No changes to the system are required in a Level 1 emergency.
- b.) Financial Operations – All financial activities associated with the Arizona WIC Program will continue as normal. These include:
  - 1.) Daily cash transfers to cover redeemed food instruments.
  - 2.) Financial projections and reporting.
  - 3.) Budget preparation and tracking of food funds and Nutrition Services and Administration funds (NSA).
- c.) Communication Plan
  - 1.) The State Agency will communicate information, policies, and guidance affecting services to WIC participants, vendors, and staff to the WRO and WIC Local Agencies.
  - 2.) The WIC Local Agencies will implement the communication strategies and direction provided by the State Agency.
- d.) Food Delivery – Vendor management and monitoring will continue as normal. This includes:
  - 1.) Technical assistance to WIC vendors
  - 2.) Monitoring of redemption patterns
  - 3.) Vendor Site Reviews
  - 4.) Vendor enrollment and disqualifications
  - 5.) Compliance buys
- e.) Staff Assignments – State Agency staff will continue with their normal assignments.

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### Local Agencies

#### Clinic Operations - Local WIC Agencies

- a.) will continue normal clinic operations.
- b.) will take steps to identify staff members or participants who are possibly infected. Once identified, staff members will be prohibited from working according to federal, State or local guidance
- c.) Participants who present at a clinic site and are identified as ill will be separated from others and provided with their benefits and rescheduled according to their risk.

### Level 2 Procedures

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In an emergency determined to be Level 2, a significant number of staff at the State and local level are affected (25% or more). Lack of staff at the State and Local Agencies requires modification to procedures to ensure continued issuance of food instruments.

State Agency - the State Agency will perform the following activities:

- a.) Data System – The WIC Project Control Manager or designee will determine the availability of qualified staff and make reassignments as necessary to ensure the continued operation of the AIM data system.
- b.) Financial Operations – The Bureau Financial Manager or designee will determine the availability of qualified staff and make reassignments as necessary to ensure the following financial activities are given priority:
  - 1.) Daily cash transfers to cover redeemed food instruments.
  - 2.) Financial projections and reporting.
  - 3.) Budget preparation and tracking of food funds and Nutrition Services and Administration funds (NSA).

All other activities are secondary to those listed above.

- c.) Communication Plan
  - 1.) The State Agency will communicate information, policies, and guidance affecting services to WIC participants, vendors, and staff to the WRO and WIC Local Agencies.
  - 2.) The WIC Local Agencies will implement the

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communication strategies and direction provided by the State Agency.

- d.) Food Delivery – The WIC Vendor Manager or designee will determine the availability of qualified staff and make reassignments as necessary to ensure that the following activities are accomplished:
  - 1.) Technical assistance to WIC vendors
  - 2.) Monitoring of redemption patterns
  
- e.) Staff Assignments – The State WIC Director or designee, in coordination with WIC team leaders, will determine the availability of staff to do the following:
  - 3.) Provide technical assistance to WIC Local Agencies
  - 4.) Monitor and report on the impact of the emergency on Local Agencies' WIC clinic operations.
  - 5.) Augment WIC ITS, Financial or Vendor teams as necessary.
  - 6.) Augment ADHS Agencies during the emergency.

All other activities are secondary to those listed above.

### Local Agencies

- a.) Clinic Operations -
  - 1.) Will continue to operate as practicable dependent upon the availability of clinic staff.
  - 2.) If the lack of available staff dictates, the Local WIC Director, with the approval of the State Director, may consolidate clinic operations to a limited number of sites.

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### Level 3 Procedures

In an emergency determined to be Level 3, only a very small number of staff at the State Agency and Local Agencies are expected to be available (60% or less). The State Agency and Local Agencies will operate under significantly modified procedures which allow for the issuance of WIC food instruments. It is assumed the retail grocery system remains somewhat intact.

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State Agency – The State Agency will perform the following activities:

- a.) Data System – The WIC Project Control Manager will assess the availability of qualified staff and will assign available staff to oversee operation of the AIM system. All other activities are secondary to this.
- b.) Financial Operations – The Bureau Financial Manager or designee will assign any available qualified staff to ensure the following tasks are accomplished:
  - 1.) Daily cash transfers to cover redeemed food instruments.
  - 2.) Financial tracking and reporting

All other activities are secondary to those listed above.

- c.) Food Delivery – The WIC Vendor Manager or designee will assign available qualified staff to perform the following functions:
  - 1.) Technical assistance to WIC Vendors
  - 2.) Monitoring and redemption patterns
- d.) Communication Plan
  - 1.) The State Agency will communicate information, policies, and guidance affecting services to WIC participants, vendors, and staff to the WRO and WIC Local Agencies.
  - 2.) The WIC Local Agencies will implement the communication strategies and direction provided by the State Agency.
- e.) Staff Assignments - The State WIC Director or designee, in coordination with WIC team leaders, will determine the availability of staff to do the following:
  - 1.) Provide technical assistance to Local Agencies
  - 2.) Monitor and report on the impact of the emergency on Local Agencies' WIC clinic operations.
  - 3.) As staffing allows, augment other WIC teams or ADHS Agencies.

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### Local Agencies

In Level 3 emergencies, staff availability at the Local Agency level will be very limited. In all probability, there will not be sufficient staff to operate all WIC clinics within the Local Agency's service area. In this case, after notification to and approval from the State Agency, the following actions may be taken:

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### Operations

- a.) Consolidation of Service Delivery:  
If the lack of available staff dictates, the Local WIC Director may consolidate clinic operations to a limited number of sites. (The Local Agency will ensure that affected program participants are informed of the change in location for receiving services).
  - b.) Mailing Food Instruments:  
If staffing does not allow for the operation of a clinic, the Local Agency, with authorization from the State Agency, may institute a process for the mailing of food instruments to participants or home delivery. Appendices C and D provide the procedures for the printing and mailing of food instruments to participants.
  - c.) Masks:  
If it is determined that masks are necessary for the safety and well-being of WIC Program participants and employees during the conduct of WIC Program operations, the purchase of such items would be allowed.
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### Certification

- a.) Physical Presence:  
Persons with a serious illness that may be exacerbated by coming in to the WIC clinic may be exempt from the physical presence requirement (this would also apply if applicant/family members are under a voluntary quarantine).  
Newborn infants and high risk applicants (i.e., 2 year old burn patient) will be enrolled for one (1) month via telephone interview and declaration of identity, residency, income, medical and risk documentation will be accepted.
- b.) Certification Periods:  
The Certification period may be extended for breastfeeding women, infants and children, by not more than 30 days, to accommodate difficulty in scheduling appointments, per All-State Memorandum (ASM) 07-27, WIC Program Response to a Human Pandemic.

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### Nutrition Education

Nutrition education can be by educational materials (e.g. pamphlets), telephone, or mail.

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### Food Delivery

- d.) Proxy Pickup:  
Participants who are unable to redeem their food instruments due to illness or voluntary quarantine can designate another person to pick up WIC foods at an approved vendor (Proxy – Chapter 2).
- e.) Ready-to-Feed:  
Ready-to-feed formula may need to be issued in circumstances where the water supply may be contaminated or is unavailable.

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### Level 4 Procedures

In a Level 4 emergency, a declaration of emergency or disaster has been made by the President and/or the Governor and the retail grocery system has shut down. At this point, the WIC Program will cease operations and participants will be directed to disaster feeding sites under the auspices of the Federal Emergency Management Agency (FEMA) and/or State and Local disaster agencies. In this case, the following statutes will govern:

- ARS 36-787(A) – authorizes the Arizona Department of Health Services (ADHS) to grant temporary waivers of health care licensure requirements necessary for implementation of any measures required to adequately address the state of emergency.

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- ARS 36-787(A) – during a state of emergency ...the ADHS shall coordinate all matters pertaining to the public health emergency response of the State. The Department has primary jurisdiction, responsibility and authority.
- ARS 36-787(B) in addition to the authority provided in Section A, the Governor, in consultation with the Director of ADHS, may issue orders that:
  - i. Mandate medical examinations for exposed persons.
  - ii. Ration medicine and vaccines.
  - iii. Provide for transportation of medical support personnel and ill and exposed persons.
  - iv. Provide for procurement of medicines and supplies.
- ARS 36-624 – allows county health departments to assume control of hospitals and other places where infectious or contagious disease exists. Also allows county health departments to provide temporary hospitals or places of reception for persons with infectious or contagious diseases.

If disaster agencies are unable to provide infant formula to program participants, the WIC State Agency will institute an alternate delivery system to provide the necessary formula to infants in the WIC Program. The State Agency will institute and maintain contingency contracts with formula suppliers to be utilized in periods of emergency.

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### Section D

#### Termination of Emergency

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#### Termination of Emergency

Emergency operations will cease upon the declaration of the Governor or designee. The State Agency will notify affected Local Agencies of the termination of the emergency. The State Agency and Local Agencies will, as soon as practicable, resume normal operations.

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### Appendix A Policy Memorandums



United States  
Department of  
Agriculture

Food and  
Nutrition  
Service

3101 Park  
Center Drive  
Alexandria, VA  
22302-1500

June 25, 2007

SUBJECT: WIC Policy Memorandum #2007-5  
WIC Program Response to a Human Pandemic

TO: Program Directors  
Supplemental Food Programs  
All Regions

The purpose of this memorandum is to provide guidance to WIC State agencies in planning, preparing for and responding to the possibility of a human pandemic.

#### Certification Policies

Current WIC Program regulations provide flexibility with regard to physical presence, adjusting certification periods and mailing of food instruments including:

- Persons with a serious illness that may be exacerbated by coming in to the WIC clinic may be exempt from the physical presence requirement (this would also apply if applicants/family members are under a voluntary quarantine);
- State agencies may extend the certification period for breastfeeding women, infants and children, by not more than 30 days, to accommodate difficulty in scheduling appointments; and,
- State agencies may mail food instruments to persons who are not scheduled for nutrition education or a second or subsequent certification.

#### Allowable Costs

In the case of a human pandemic, State agencies should follow general guidance in WIC Policy Memorandum #2003-4, Allowable Costs of Bioterrorism Preparedness, which includes the following:

- With the approval of the State agency director, WIC employees may volunteer to be part of their State's Biological Disaster Response Team. If other reimbursement is unavailable, staff time for participating in team activities, such as planning and training, would be an allowable cost for the WIC Program because the employees

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would gain knowledge and experience useful to assist the WIC Program in bioterrorism preparedness.

Program Directors  
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- In planning its response to a potential biological disaster, each State must consider the use of all available resources within its jurisdiction. Consequently, the State may, without regard to the allowability of costs to the WIC Program, incorporate the use of its WIC Program resources (i.e., staff, facilities, equipment, and supplies) into its biological disaster plan. This does not authorize the diversion of WIC funds to non-WIC accounts. In the event of an actual biological disaster, WIC Program resources will be brought to bear in accordance with States' biological disaster plans.

PATRICIA N. DANIELS  
Director  
Supplemental Food Programs Division

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DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service  
Centers For Disease Control  
and Prevention (CDC)

4 September 2009

**Subject:** Management of Federal Grant Funds awarded by the Centers for Disease Control and Prevention (CDC) While Responding to Public Health Threats Posed by H1N1 Influenza

**To:** State Health Officers  
Territorial Health Officials  
Local Governmental Grant Recipients

The CDC is aware that the response to the threats posed by the H1N1 Influenza may require that you mobilize public health capabilities including the reassignment of personnel from their normal duties including those funded by CDC grants.

The purpose of this correspondence is to clarify the flexibilities that CDC can extend pursuant to these grants. I recently sent an email to our CDC internal staff on flexibilities in our grants as a result of state budget shortfalls (State Funding Attachment). That communication is still viable, as is the 2006 CDC Procurement and Grants Office (PGO) communication addressing public health readiness for personnel funded by CDC grants and cooperative agreements (Staff Preparedness Training Attachment). Further guidance specifically geared to the H1N1 response is included herein.

A mobilization of personnel in support of the H1N1 response could have an affect on your employees currently engaged in and supported by grants or cooperative agreements awarded by the CDC. In some cases, depending upon the legal authority under which the funds were appropriated, your employees whose salaries are funded by the CDC through an assistance mechanism but who are reassigned to work on the H1N1 response can continue to be supported in part or wholly through the grant or cooperative agreement to which they are normally assigned. This will depend upon whether the legal authority permits this reassignment and if the scope of the existing grant and proposed H1N1 activities relate to the overall purposes of the grant. A list of the national grant programs where CDC has determined that the legal authority may allow for flexibility is included in this correspondence.

Because the legislation for each grant or cooperative agreement is unique, the continued CDC funding of your employees who are temporarily assigned to H1N1 response should be coordinated by state program staff to the maximum extent possible with the CDC's Grants Management Officer (GMO)\* and Project Officer (PO) assigned to the grant or cooperative agreement being considered. This will ensure that all parties are clear regarding the redirection of funding for these employees including the extent and duration of the planned reassignment.

\* The term GMO throughout this document also denotes the Grants Management Specialist

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There may be other grant programs not specified in this correspondence that also allow for flexibility. You need to contact the CDC GMO/PO to discuss these programs. In addition, the following guidance is provided for H1N1 activities not within the scope of the funded project:

*a. If the proposed H1N1 activities are not within the scope of the funded project then the state should call the CDC GMO/PO to determine whether the scope of the project could be expanded to permit the individual to carry out the H1N1 activities. The expanded scope must be within the limits allowed by the law authorizing the grant. Once the GMO/PO has verified whether or not the expanded scope is viable, a letter notification to the GMO/PO from the recipient addressing the expanded activities to be carried out is preferred, but in emergency circumstances an email or phone call notification is permissible.*

*b. If the H1N1 activities do not fall under the scope of the funded project, and expansion of the project would be outside the scope of the law authorizing the grant, then that individual's salary for carrying out H1N1 activities cannot be charged to that particular grant.*

*c. If you receive a grant that would authorize H1N1 response activities such as those for emergency preparedness or response, then a state or local employee could be reassigned from the non-H1N1 grant to the H1N1-related grant and the employee's salary to carry out the H1N1 activities could be charged against the H1N1-related grant. You should follow your internal cost accounting procedures to capture these changes, and a notification to the GMO/PO should follow as soon as practicable.*

We are also well aware that the H1N1 response might interfere with the progress made on grants and cooperative agreements and might delay the completion of deliverables and submission of reports. As a result, the management of our grants and cooperative agreements will be done with full consideration of the high priority given to the H1N1 response and in recognition of the difficulty of maintaining progress while reassigning resources. These delays will be treated on a case by case basis between the recipient and the CDC GMO/PO as they begin to occur so that any needed changes to budgets, milestones and progress/financial reporting can be modified accordingly.

If you have any questions regarding this correspondence please contact your Grants Management Officer, Project Officer or Mr. William Ryan in the Procurement and Grants Office at (770) 488-2717



Alan A. Kotch  
Director, Procurement and Grants office

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**List of CDC Grants/Cooperative Agreement Programs that may support some H1N1 activity.**

**National Center for Immunization and Respiratory Diseases (NCIRD)**

IP08-803, State Immunization Program

**The National Center for Preparedness, Detection, and Control of Infectious Diseases (NCPDCID)**

CI07-701, CI07-702, CI07-704, CI04-040, Epidemiology and Laboratory Capacity (ELC) Program

CI05-026, CI02-174, Emerging Infections Epidemiology and Prevention (EIP) Program

**National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)**

DP08-801, Improving Health and Educational Outcomes of Young People

DP09-901, Chronic Disease and Prevention

Block Grant, Preventive Health and Health Services Block Grants

DP06-002, Pregnancy Risk Assessment Monitoring System

**National Center for Environmental Health (NCEH)**

10. EH09-001, NCEH - Addressing Asthma

**National Institute for Occupational Safety and Health (NIOSH)**

PAR-09-184, State-Based Occupational Health and Safety Surveillance

**Coordinating Office for Terrorism, Preparedness, and Emergency Response**

TP-AA154, Public Health Emergency Preparedness (PHEP)

TP09-902, H1N109, Public Health and Social Services Emergency Funds - Public Health Emergency Response (PHER)

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United States Department of Agriculture  
Food and Nutrition Service

Western Region

Reply to  
Attn of:

WSN-1: SA-11 GEN  
WRO Policy Memo 807X/SFPD Policy Memo #2003-04

MAR 25 2003

Subject:

All States Memorandum 03-31  
Allowable Costs of Bioterrorism Preparedness

INFORMATION - X  
POLICY - X  
ACTION -

To:

Western Region State Agency WIC Directors

This policy memorandum provides clarification regarding the use of WIC Program funds and resources to support bioterrorism preparedness.

### Background

In 2002, the Administration launched two important initiatives to prepare the nation for a possible biological disaster. The first initiative is the National Smallpox Vaccination Program (NSVP). The goal of this initiative is "to increase the nation's smallpox preparedness capacity by: 1) offering vaccinations safely to volunteer public health teams (including vaccinators) to conduct investigations and outbreak control for the initial cases of a smallpox event; and 2) offering vaccinations safely to key volunteer healthcare workers who would treat and manage the initial smallpox cases and suspects." Funding for the planning and implementation of this initiative has been provided through the Public Health Preparedness and Response for Bioterrorism (PHPRB) Cooperative Agreement (Source: Centers for Disease Control and Prevention (CDC) Supplementary Guidance for Planning and Implementing the NSVP).

The second initiative is the establishment of comprehensive Bioterrorism Response Plans in all fifty states and U.S. territories. These plans include the assessment of available resources within each state to respond to a biological disaster and the establishment of Biological Disaster Response Teams. To fund these initiatives, the CDC has provided nearly \$1 billion in grants for bioterrorism preparedness to all States, U.S. territories and protectorates, and several major cities, including Washington, DC, Chicago, Los Angeles, and New York City. Additional funding for ongoing activities will be provided.

### Impact on WIC Program

In response to a natural disaster, the affected WIC State agency assesses the disaster's impact on program operations and participants to determine whether to implement a Disaster WIC Program in accordance with its disaster plan. The response to a biological disaster, however, will be coordinated at a higher level than the program level and be focused on identification and containment of the outbreak. Consequently, current State agency disaster plans for natural disasters are inadequate to address a biological disaster. Below are answers to questions that have arisen in this area.

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**Question 1: May WIC funds/employees be used to implement the National Smallpox Vaccination Program?**

Answer: Although WIC employees may be used to implement the NSVP, the WIC Program would need to be reimbursed for staff time spent on this initiative, because vaccinating health care workers and first responders is not an allowable cost under current laws and regulations governing the WIC Program. Before committing WIC staff to implement the NSVP, State and local agency directors should ensure that: 1) adequate staff remain available to provide WIC services to program participants; and 2) reimbursement will be provided for WIC staff time spent on the NSVP.

**Question 2: May WIC funds/employees be used to staff State Biological Disaster Response Teams?**

Answer: With the approval of the State agency director, WIC employees may volunteer to be part of their State's Biological Disaster Response Team. If other reimbursement is unavailable, staff time for participating in team activities, such as planning and training, would be an allowable cost for the WIC Program because the employees would gain knowledge and experience useful to assist the WIC Program in bioterrorism preparedness.

**Question 3: May WIC resources be used in the event of an actual biological disaster?**

Answer: In planning its response to a potential biological disaster, each State must consider the use of all available resources within its jurisdiction. Consequently, the State may, without regard to the allowability of costs to the WIC Program, incorporate the use of its WIC Program resources (i.e., staff, facilities, equipment, and supplies) into its biological disaster plan. This does not authorize the diversion of WIC funds to non-WIC accounts. In the event of an actual biological disaster, WIC Program resources will be brought to bear in accordance with States' biological disaster plans.

Please contact Mel Fong at (415) 705-1313 if you have questions regarding this correspondence.



CORDELIA FOX  
Regional Director  
Supplemental Nutrition Programs  
Western Region

cc: California Food Policy Advocates

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## Appendix B Modifications to Certification and Food Instrument Issuance Procedures

The screenshot displays the 'Arizona WIC Program - [Family Information]' window. The interface includes a menu bar (File, Edit, Item, Record, Query, Window, Help) and a toolbar with various icons. The main form area contains the following fields and options:

- Family ID:** 087405348
- WIC Clinic:** 15 ABRAMS WIC AND FOOD PLUS OFFICE
- CSF Only Family:**
- CSF Clinic:** 15 ABRAMS WIC AND FOOD PLUS OFFICE
- Authorized Representative:** A table with columns for Last Name, First Name, MI1, and MI2. The first row shows 'REP1' with a last name starting with 'GARCIA'.
- Street 1:** 758 W CALLE GARCIA
- Street 2:** (empty)
- City:** TUCSON
- County:** PIMA
- State:** AZ
- Zip:** 85706
- Proof of Addr:** 12 FORGOT DOCUMENTATION
- Marital Status:** 1 NOT MARRIED
- Disability:** (empty)
- Do you want to Register to Vote Today?:** NO NOT INTERESTED
- Pickup Interval:** 2 BIMONTHLY
- Education Level:** 12
- Buttons:** Communications, Phone/Confidentiality, Proxies, Referrals From, Health Care Payee, Languages

At the bottom of the form, there are radio buttons for: Family, Client Reg, Cert Action, Medical, Health, Nutr Quest, Care Plan, and Food Pkg. Below the form, a status bar shows 'Select the proof of address from the list of values.' and 'Record: 1/1'. The Windows taskbar at the bottom indicates the time is 7:59 AM.

Staff will select “Forgot Documentation” (Code 12) for Proof of Address.

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Arizona WIC Program - [Client Registration]

File Edit Item Record Query Window Help

9.0.12[Uattuc]1015

**Family**

Family ID: 087405348

Authorized Rep 1 Last Name: [Redacted]

Authorized Rep 1 First Name: [Redacted]

MI1: [Redacted] MI2: [Redacted]

Notes:

**Client**

Client ID: 15100158889

Birth Date: 09/22/2009

Age (Yrs.) (Months): 0

Gender:  Male  Female

Family Size: 5

WIC Family Size: 0

Proof of Identity:  FORGOT DOCUMENTATION

Application Date: 09/23/2009

Mother's ID: 15100133294

Adj. Elig.:  Inc. Elig.:  2116.87

Buttons: Farmers Market, Ethnicity/Race, Eligibility, Health Care, Other Programs, Transfer Info, Previous Names, Communications, Previous Families

Radio Buttons:  Family  Client Reg  Cert Action  Medical  Health  Nutr Quest  Care Plan  Food Pkg

Select the Code for Proof of Identity from the list of values.

Record: 4/4

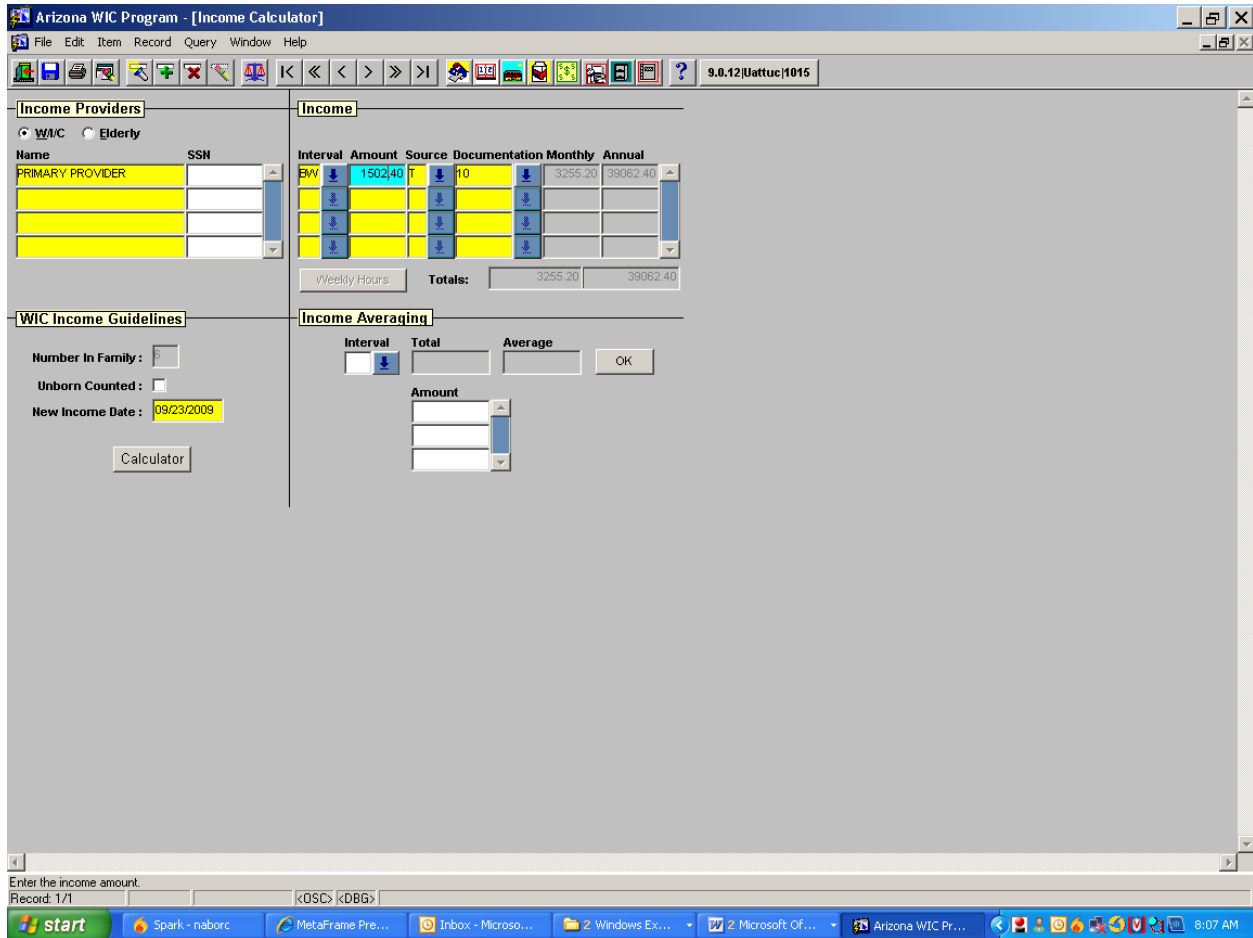
List of Values <OSC> <DBG>

start Spark - naborc MetaFrame Pre... Inbox - Microso... 2 Windows Ex... 2 Microsoft Of... Arizona WIC Pr... 8:04 AM

Staff will select “Forgot Documentation” (Code V) for Proof of Identity.

# Chapter Ten

## Emergencies and Disasters



Staff will select “self declared” (code T) for the source of income since the client is verbally disclosing the interval and amount. Staff will select “Forgot Documentation/Waiver” (code 10) for the documentation.

# Chapter Ten Emergencies and Disasters

The screenshot shows the 'Arizona WIC Program - [Certification (Cert Action)]' window. The client information includes Client ID 15100158889, Last Name, First Name, MI1, MI2, and Birth Date 09/22/2009. The Certification table has the following data:

WIC	CSF	Category	Description	Cert Start Date	Cert End Date	Duration	Client Present?	Wait	Cert Created	Termination
		PN	INFANT, BREASTFEEDING, F	09/23/2009	09/21/2010	52	No		WMCDIR10	Term
										Term
										Term
										Term
										Term

Below the table, there are input fields for 'Actual Delivery Date', 'Expected Delivery Date' (09/10/2009), 'Last Menstrual Period', 'CSF Distribution Site', 'Reason Client Not Present', and 'Comment'. There are also buttons for 'CSFP', 'Category Change', and 'Extend Cert Period'. At the bottom, there are radio buttons for 'Family', 'Client Reg', 'Cert Action', 'Medical', 'Health', 'Nutr Quest', 'Care Plan', and 'Food Pkg'. The status bar shows 'Record: 1/1' and 'List of Values <OSC> <DBG>'. The taskbar at the bottom shows the Start button and several open applications, including 'Spark - naborc', 'MetaFrame Pre...', 'Inbox - Microso...', 'Chapter 10', '2 Microsoft Of...', and 'Arizona WIC Pr...'. The system clock shows 8:29 AM.

Staff will select "NO" for the question "Client Present?"

# Chapter Ten Emergencies and Disasters

**Client**

Client ID: 15100158889  
 Last Name: [Redacted]  
 First Name: [Redacted]  
 MI1: [Redacted] MI2: [Redacted] Birth Date: 09/22/2009

**Certification**

WIC	CSF	Category	Description	Cert Start Date	Cert End Date	Duration	Client Present?	Wait	Cert Created	Termination
							No	Yes	List By	Date
<input checked="" type="radio"/>	<input type="radio"/>	PN	INFANT, BREASTFEEDING, F	09/23/2009	09/21/2010	52	<input type="radio"/>	<input type="radio"/>	WMCDIR10	Term
<input type="radio"/>	<input type="radio"/>						<input type="radio"/>	<input type="radio"/>		Term
<input type="radio"/>	<input type="radio"/>						<input type="radio"/>	<input type="radio"/>		Term
<input type="radio"/>	<input type="radio"/>						<input type="radio"/>	<input type="radio"/>		Term
<input type="radio"/>	<input type="radio"/>						<input type="radio"/>	<input type="radio"/>		Term

**Actual Delivery Date:** [Redacted]  
**Expected Delivery Date:** 09/10/2009  
**Last Menstrual Period:** [Redacted]

**CSF Distribution Site:** [Redacted]

**Reason Client Not Present:** A SERIOUS ILLNESS

**Comment:** [Redacted]

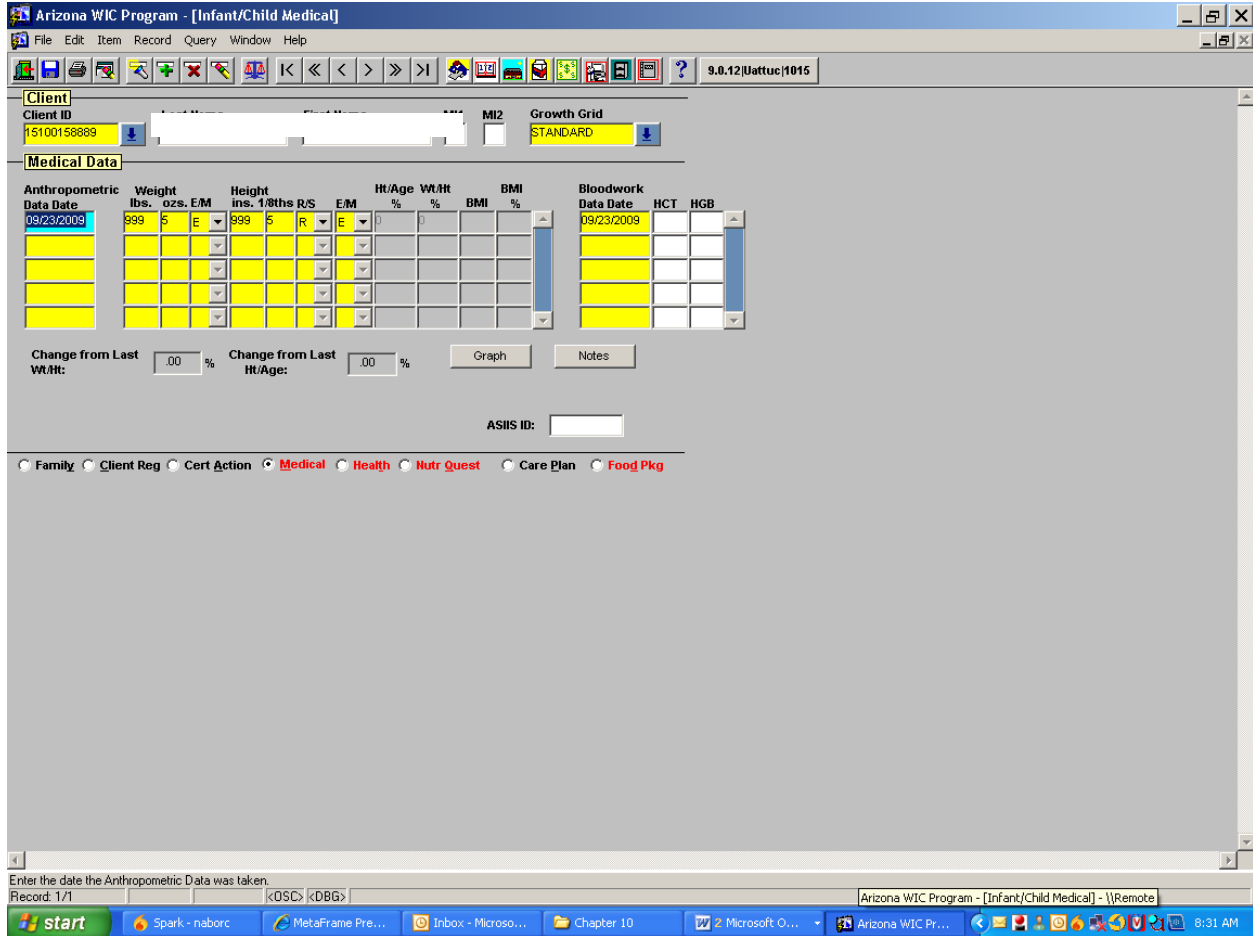
Family  Client Reg  Cert Action  Medical  Health  Nutr Quest  Care Plan  Food Pkg

The client ID. Double click or press F2 to go to client / family lookup for an existing client.  
 Record: 1/1

When “NO” is selected for physical presence, staff are required to select “serious illness” (code A) as the reason the client is not physically present.

# Chapter Ten

## Emergencies and Disasters



Staff will document 999 (lbs.) 5 (ozs.) for weight and 999 (ins.) 5 (1/8ths) for height.

# Chapter Ten

## Emergencies and Disasters

Arizona WIC Program - [Infant/Child Medical]

Client ID: 15100133995    Growth Grid: STANDARD

Anthropometric Data		Weight		Height		Ht/Age		Wt/Ht		BMI		Bloodwork Data		
Date	lbs.	ozs.	E/M	Ins.	1/8ths	R/S	E/M	%	%	BMI	%	Date	HCT	HGB
09/23/2009	99	5	E	99	5	R	E	7	56			09/23/2009		99.5
11/22/2008	17	11	E	27	2	R	E	38	56					
05/10/2008	7	9	E	19	0	R	E	34	96					

Change from Last Wt/Ht: -56.00%    Change from Last Ht/Age: -88.00%

ASIS ID:

Medical Data Table:

Enter the Hemoglobin measurement: 5.0 - 24.1 or 99.5 - pending, 99.6 - medical, 99.7 - not required, 99.8 - safety. Record: 1/1

For the certification of a participant requiring a hemoglobin test, the staff will enter 99.5.

# Chapter Ten

## Emergencies and Disasters

Arizona WIC Program - [Women Medical]

File Edit Item Record Query Window Help

9.0.12[Uattuc1015]

Client ID: 15100145904

Last Name: Ar... First Name: ... MI1: A MI2: Category: FN

**Medical Data**

Anthro. Data Date	Blood Pressure	Weight lbs. oz.	Prepreg WT lbs. oz.	Height in. 1/8ths	Wks Gest.	Weight Gain	Wt at Delivery lbs. oz.
06/16/2009		167 0 E	158 0 E	64 0 E			
05/09/2009		185 0 E	158 0 E	64 0 E	37		
03/19/2009		188 12 E	158 0 E	64 0 E	30		
01/15/2009		171 8 E	158 0 E	64 0 E	21		
11/15/2008		162 12 E	158 0 E	64 0 E			

**Bloodwork**

Data Date	HCT	HGB	Wks Gest.
11/15/2008		12.8	12
08/23/2009		99.5	
09/23/2009		99.7	

Graph Notes

Family Client Reg Cert Action **Medical** Health Nutr Quest Care Plan Food Pkg

Enter the date the Anthropometric Data was taken.  
Record: 5/5

start 2 Spark MetaFrame Prese... Inbox - Microsoft... Chapter 10 Chapter 10 Scree... 2 Citrix ICA Cle... 9:19 AM

Staff will enter 99.7 (not required) for a participant that has a previous pending hemoglobin test (99.5).

# Chapter Ten Emergencies and Disasters

The screenshot displays the Arizona WIC Program software interface. At the top, the window title is "Arizona WIC Program - [Women Medical]". The menu bar includes File, Edit, Item, Record, Query, Window, and Help. The status bar shows the date and time: 9.8.12|Uattuc|1015.

**Client Information:**

- Client ID: 15100145904
- Last Name: [Redacted]
- First Name: [Redacted]
- MI1: A
- MI2: [Redacted]
- Category: PN

**Medical Data Tables:**

Anthro. Data Date	Blood Pressure	Weight lbs. oz.	Prepreg WT lbs. oz.	Height in. 1/8ths	Wks Gest.	Weight G.L. Weight	Wt at Delivery lbs. oz.
06/16/2009		167 0	158 0	64 0			185 0
05/09/2009		185 0	158 0	64 0	57		
03/19/2009		188 12	158 0	64 0	50		
01/15/2009		171 8	158 0	64 0	51		
11/15/2008		162 12	158 0	64 0			

Bloodwork Data Date	HCT	HGB	Wks Gest.
09/23/2009		99.7	
08/23/2009		99.5	
06/16/2009		12.3	

Buttons: Graph, Notes

**Notes Section:**

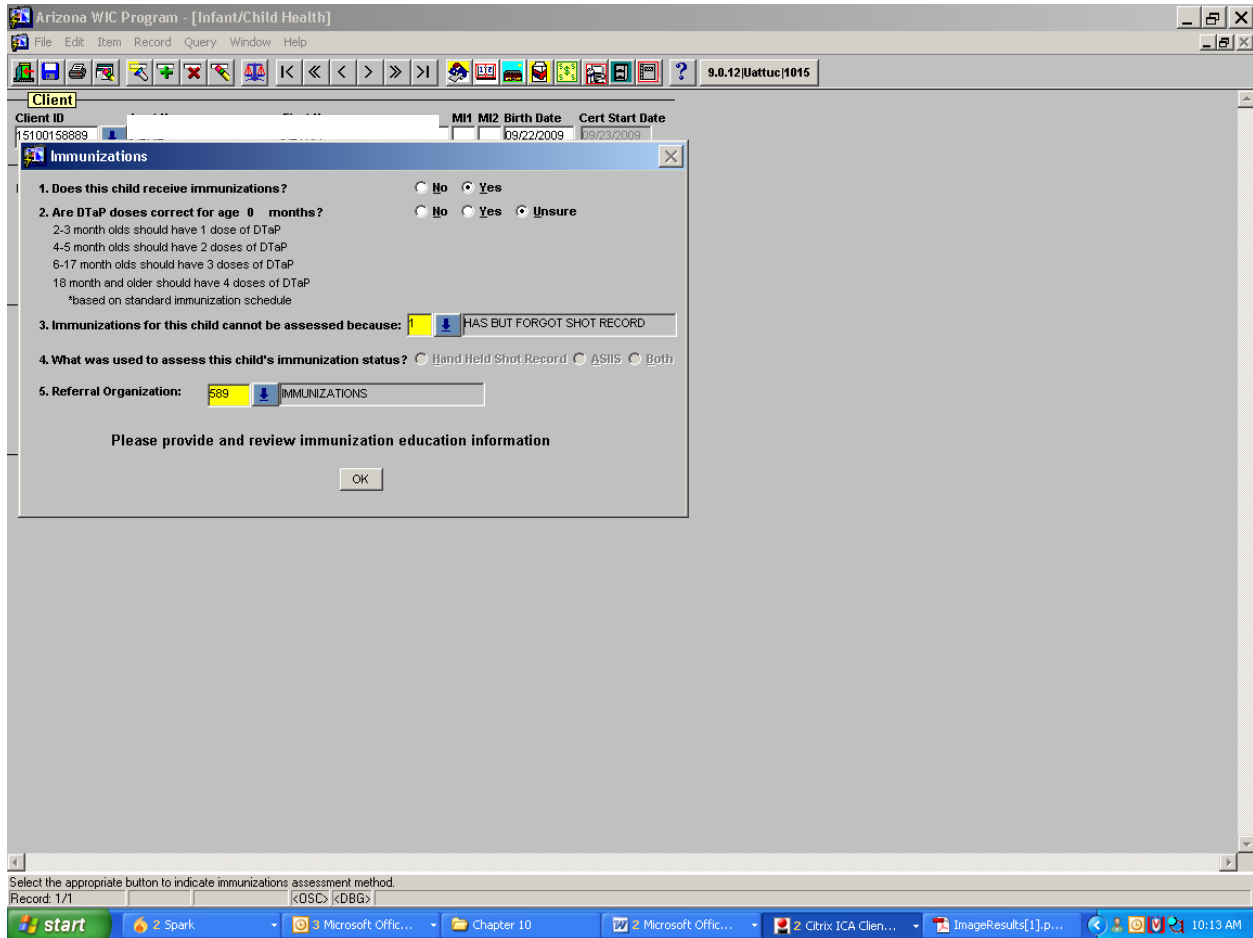
Date	Note	Nutritionist
05/09/2009	Mom PN and doing well. She is also pumping and storing	LSALAIS
06/16/2009	Mom PN and having some problems with sore nipples.	LSALAIS
09/23/2009	Client needs a hemoglobin test in October 2009	WCDIR10

Bottom status bar: Enter the Date the note was created. Record: 1/3. Taskbar shows Windows Start button, 2 Spark, 3 Microsoft Office, Chapter 10, 2 Microsoft Office, 2 Citrix ICA Client, ImageResults[1].p..., and system tray with time 10:01 AM.

When staff override a 99.5 with a 99.7, a reminder must be documented in the notes section and warning notes (red checkmark box) to follow up with an actual test the following month.

# Chapter Ten

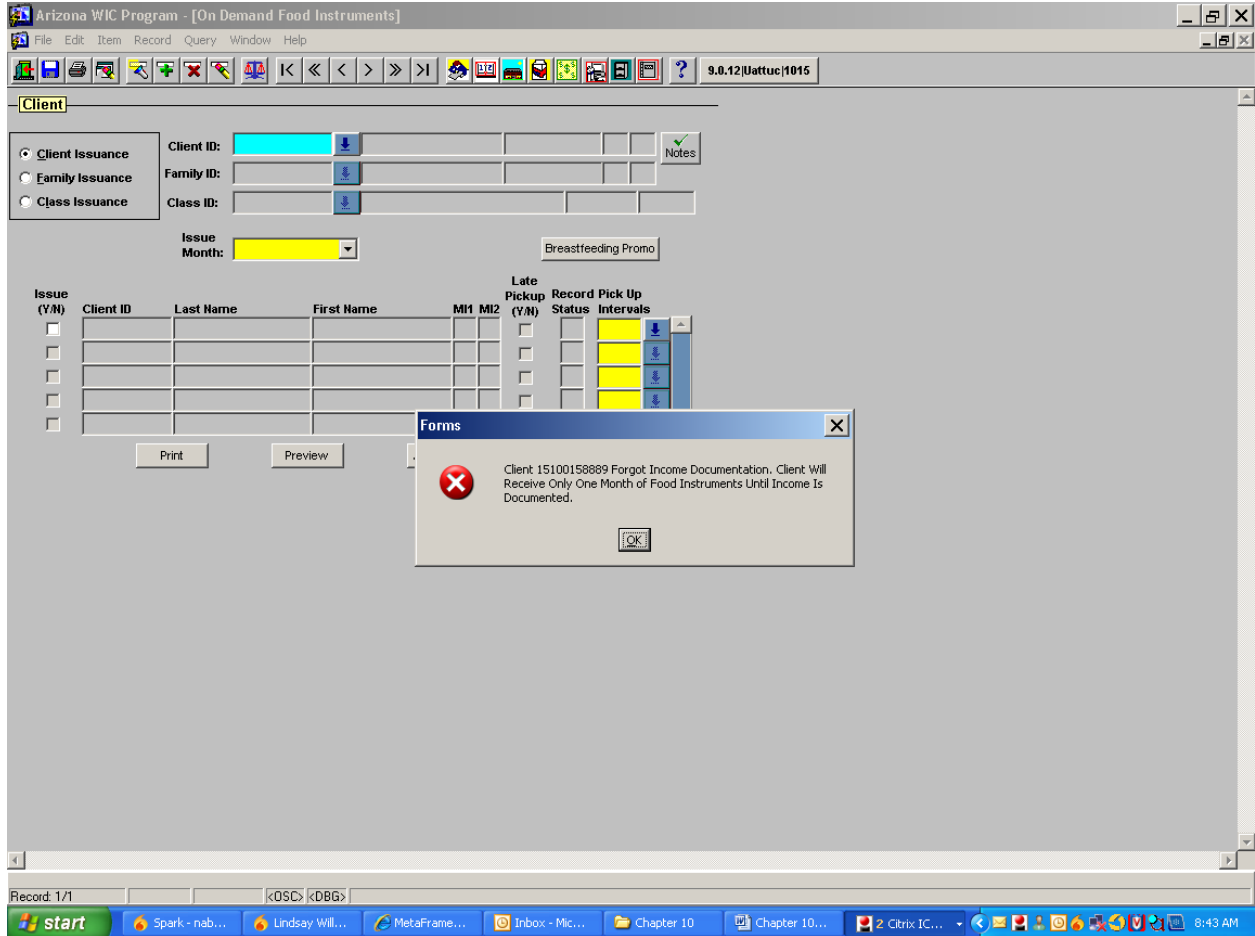
## Emergencies and Disasters



Staff will select “Unsure” for the question “Are DTaP doses correct for age?” Staff will select “Has but forgot shot record” (code 1).

# Chapter Ten

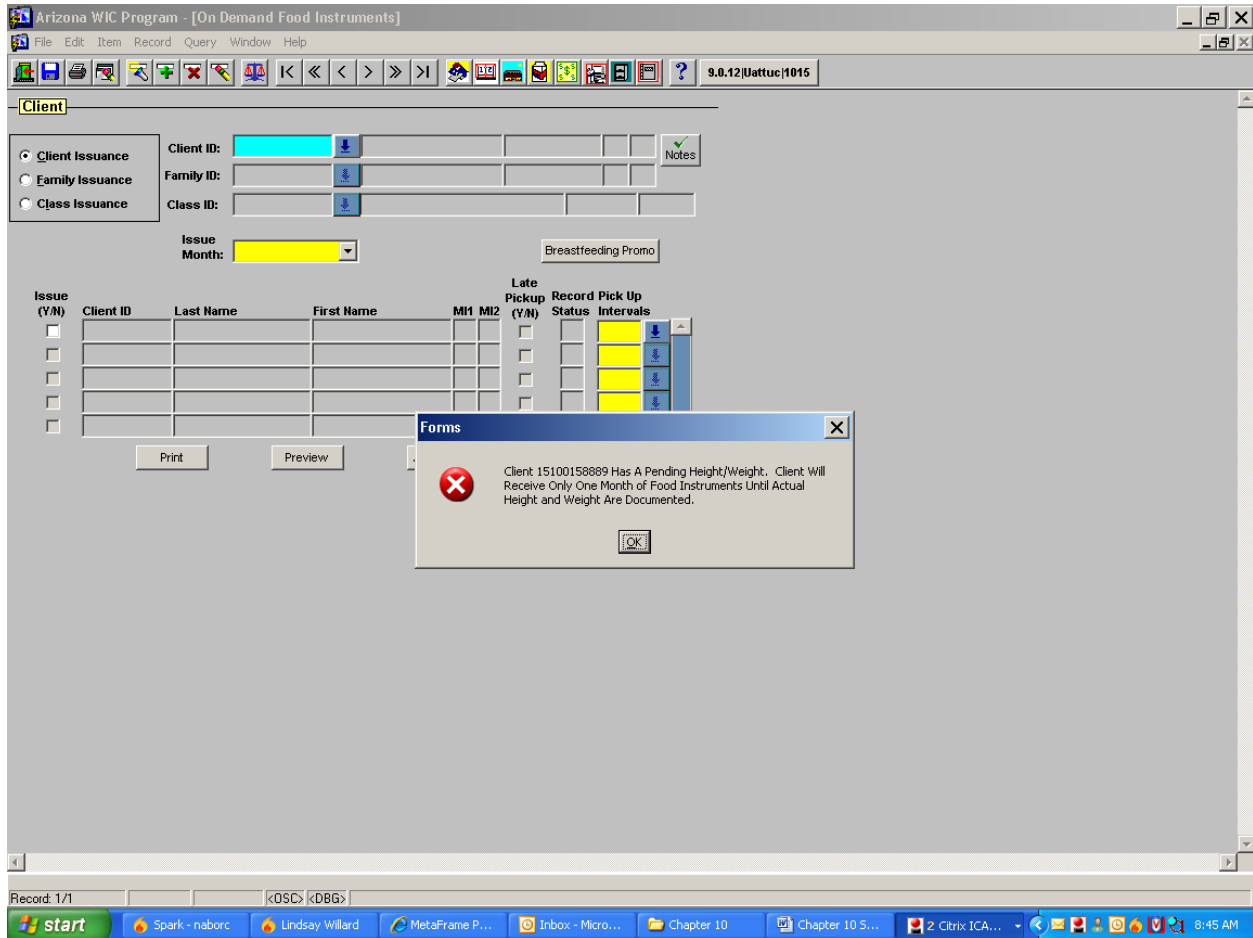
## Emergencies and Disasters



Staff will select "OK" to the forgot documentation reminder; as a result, the client(s) will only be eligible to receive one month of food instruments.

# Chapter Ten

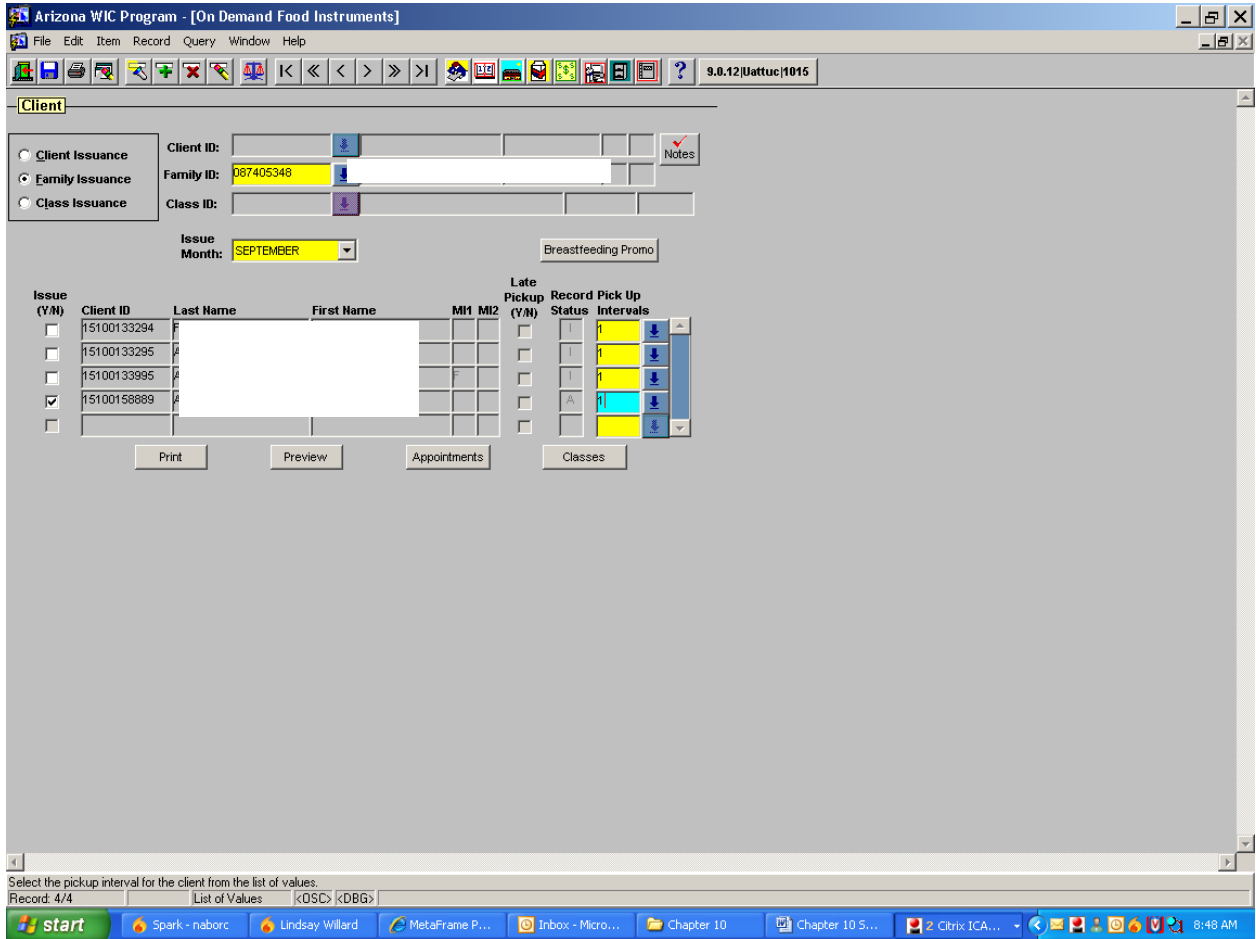
## Emergencies and Disasters



Staff will select "OK" to the pending height/weight reminder; as a result, the client(s) will only be eligible to receive one month of food instruments until an actual height and weight are documented.

# Chapter Ten

## Emergencies and Disasters



Staff will select one month for the pick up interval. Staff will schedule the client(s) to return in one month to collect the appropriate documentation and anthropometrics.

# Chapter Ten

## Emergencies and Disasters

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### Appendix C

#### Instructions for the Mailing of WIC Food Instruments During Disasters or Emergencies

#### Policy

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The Local Agency will have State Agency-approved policies and procedures in place for mailing food instruments and replacement of food instruments if lost or stolen when sent by mail.

The Local Agency will maintain adequate documentation/inventory of all food instruments issued and sent by certified mail by keeping a copy of the food instrument receipt.

To ensure nutrition education and certification contacts, not more than three (3) sets of food instruments will be mailed to a participant.

#### Procedures

- 
- a.) When an emergency or disaster situation has reached Level 3 and requires the closure of WIC clinics:
- 1.) The Local Agency director will notify the State Agency of the necessity to close WIC clinic(s).
  - 2.) The State Agency will coordinate with the AIM data system contractor to enable the system to allow a one month extension or Certification for participants.
  - 3.) The Local Agency director will assign the Superintendent roles to specified Local Agency staff to enable them to batch process food instruments.
- b.) Batch Processing Procedures
- 1.) Batch processing by staff assigned the Superintendent role will be done in accordance with the procedures outlined in Appendix B. Food instruments will be produced only for active clients of the clinic who have not been issued food instruments for that month.
  - 2.) Local Agency staff will document the reason for mailing the food instruments in the participant's AIM record. The following information will be documented in the "Care Plan Follow-Up/Nutrition Education" field of the participants AIM record: food instrument serial number, certified mail number, the reason for mailing, and the date of mailing.
  - 3.) The Local Agency staff will document on the food instrument receipt that the food instrument was mailed and the initials of the person that mailed the
-

## Chapter Ten

### Emergencies and Disasters

---

food instruments.

- c.) Mailing Procedures – The following procedures will be used when mailing food instruments:
  - 1.) Food instruments will be sent via certified mail.
  - 2.) Delivery will be restricted to person(s) authorized to receive the food instruments.
  - 3.) Items will be sent “return receipt requested”.
  - 4.) Food instruments will be sent in an envelope which prevents the identification of the food instruments and is sturdy enough to hold multiple food instruments.
  - 5.) The envelope will be stamped clearly, “DO NOT FORWARD-RETURN TO SENDER”.
  - 6.) The return address will not identify the Local Agency or clinic as the sender.
  
- d.) Security Procedures:
  - 1.) A two party system will be utilized. One staff member will prepare the envelopes and another will review them prior to mailing.
  - 2.) A limited number of staff should have access to the process.
  - 3.) The mailing of food instruments will be documented on the food instrument receipt. This should include the date mailed and the initials of the person who mailed them.
  
- e.) Records – The following information will be recorded and maintained:
  - 1.) Serial numbers of the food instruments mailed.
  - 2.) Date mailed.
  - 3.) Certified mail number.
  - 4.) Participant and clinic name.
  - 5.) Name of staff member who entered the certification information.
  - 6.) Date “certified return receipt” (green card) was received and name of staff member who logged it in and the date.
  - 7.) Date and name of staff member who followed up on receipts not received.
  - 8.) Disposition of food instruments – certified receipt was received, food instruments were returned as undeliverable or food instruments were reported as lost to the State Agency.

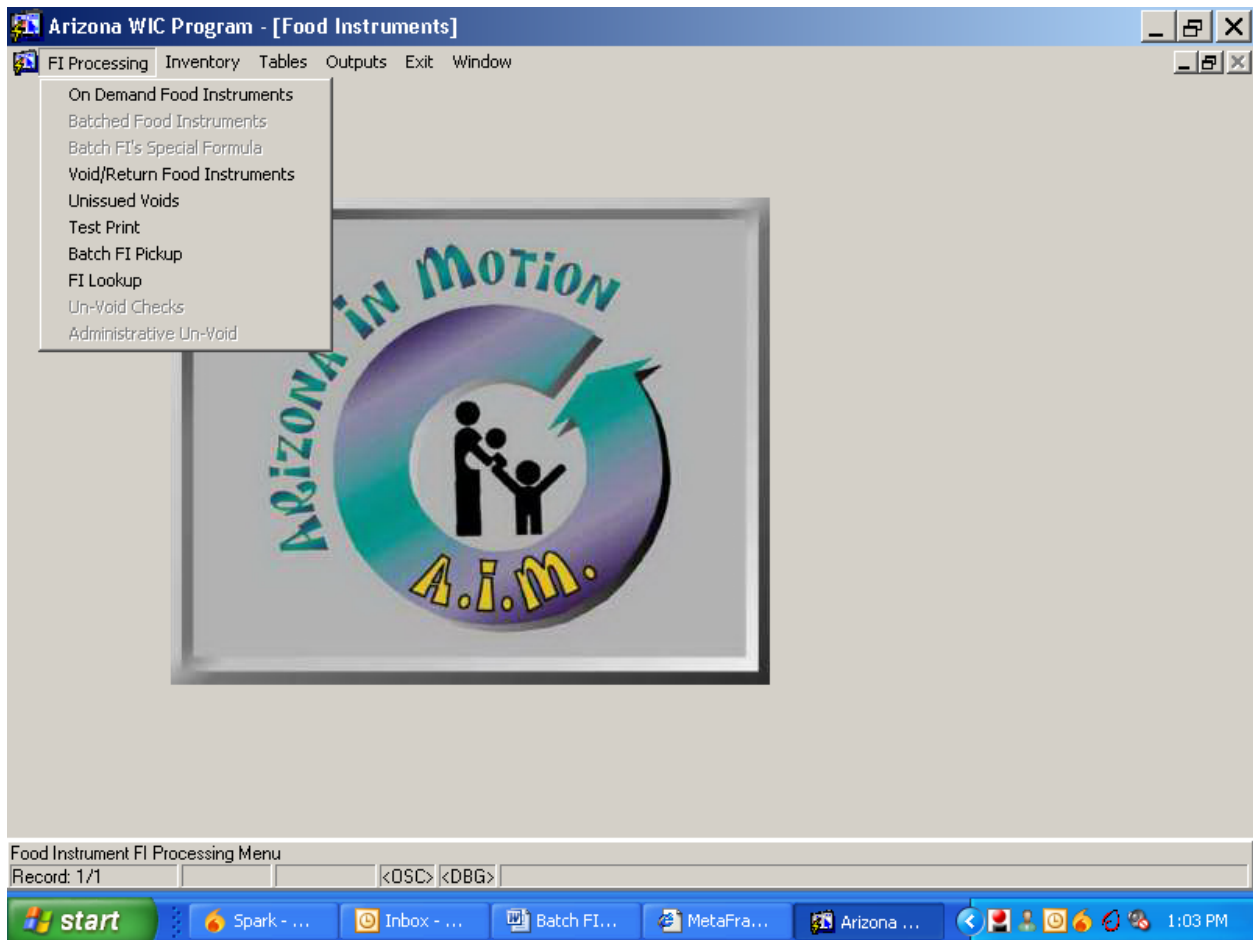
# Chapter Ten

## Emergencies and Disasters

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### Appendix D

#### Batched Food Instruments in AIM

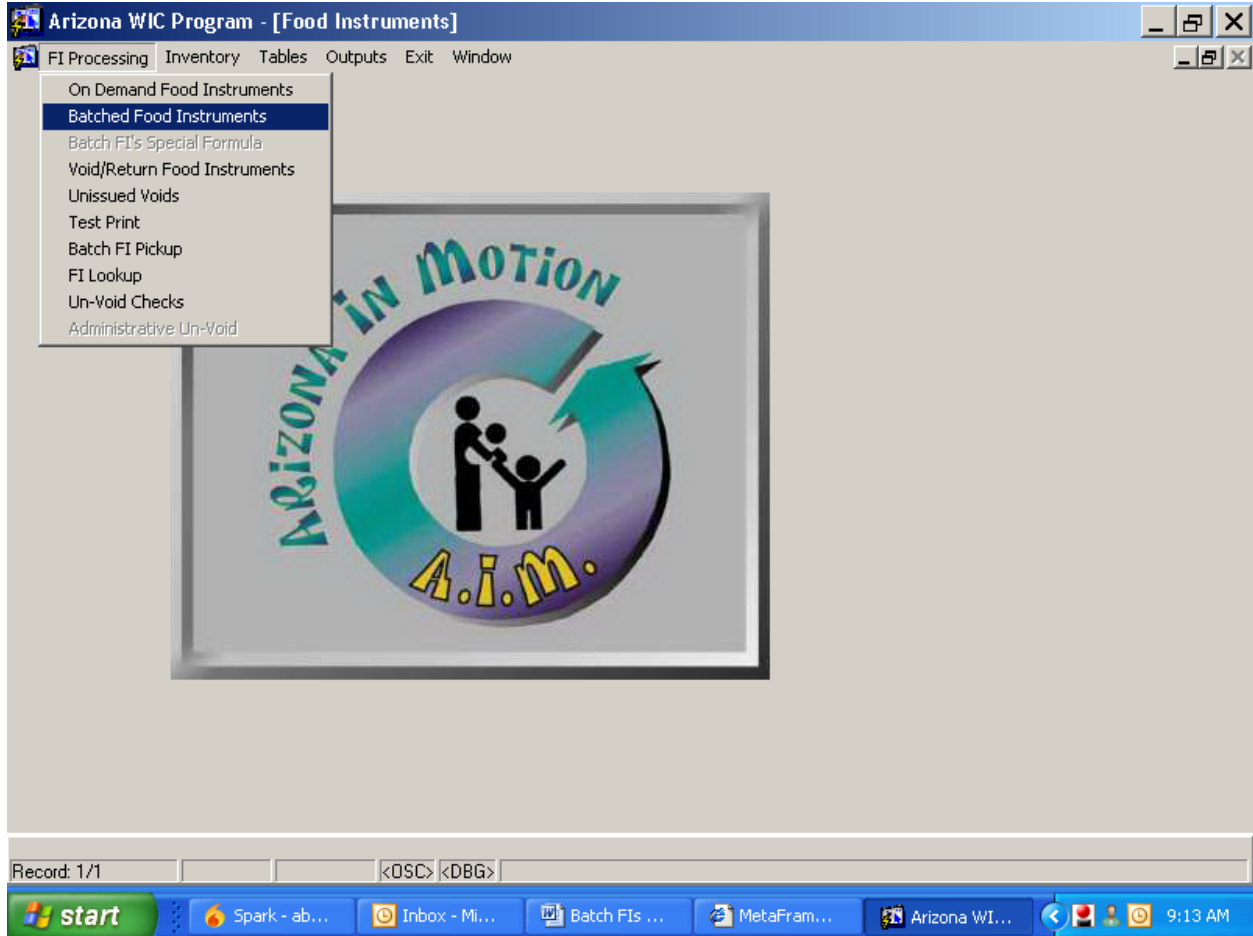


Staff without the Superintendent role will not have access to the Batched Food Instruments screen in AIM.

# Chapter Ten

## Emergencies and Disasters

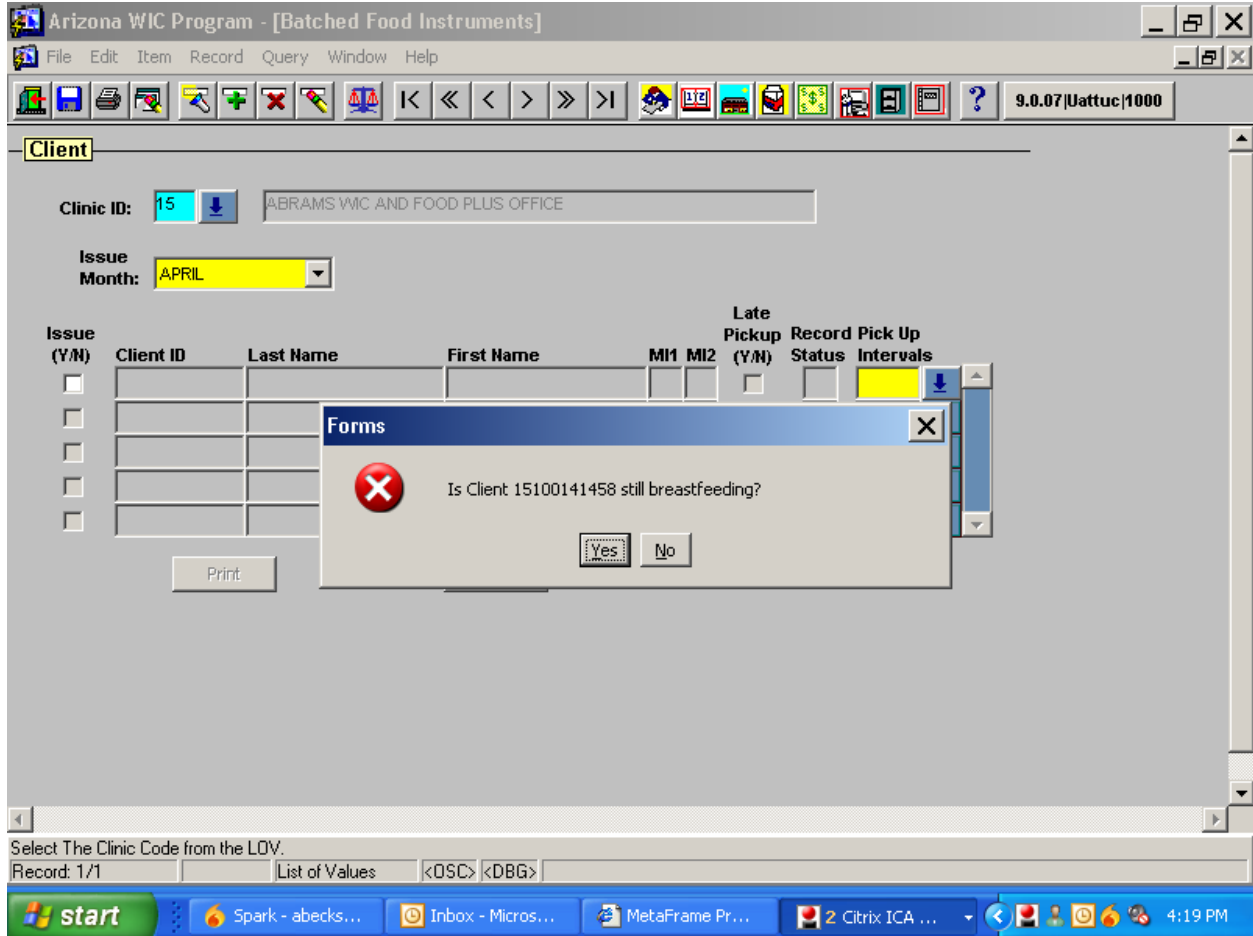
---



Staff with the Superintendent role have access to the Batched Food Instruments screen in AIM.

# Chapter Ten

## Emergencies and Disasters



Staff will need to check the status of breastfeeding women to be sure they are still breastfeeding before they answer "Yes / No" to this pop-up.

# Chapter Ten

## Emergencies and Disasters

The screenshot shows a Windows XP desktop environment. The active window is titled "Breastfeeding Surveillance" and is part of the "Arizona WIC Program - [Batched Food Instruments]". The window title bar also shows "Window" and "9.0.07|Uattuc:1000". The form contains the following fields and questions:

**Client**  
ID: 1290139486 | Name: B/G LOPEZ

1. Is this infant/child currently breastfeeding?  No  Yes

2. Has this infant/child ever breastfed?  No  Yes

3. How old was this infant/child when he/she completely stopped breastfeeding?  
Days:  Weeks:  Months:

4. Why did you stop breastfeeding?  [Yellow dropdown arrow]

5. How old was this infant/child when he/she was first fed something other than breast milk?  
 Not Applicable, Nothing Given  
Days:  Weeks:  Months:

OK

Staff must answer the BF Surveillance questions for exclusively nursing infants. At a minimum, questions 1 and 5 must be answered.

# Chapter Ten

## Emergencies and Disasters

The screenshot shows a Windows XP desktop environment. The active window is titled "Breastfeeding Surveillance" and contains the following form fields and questions:

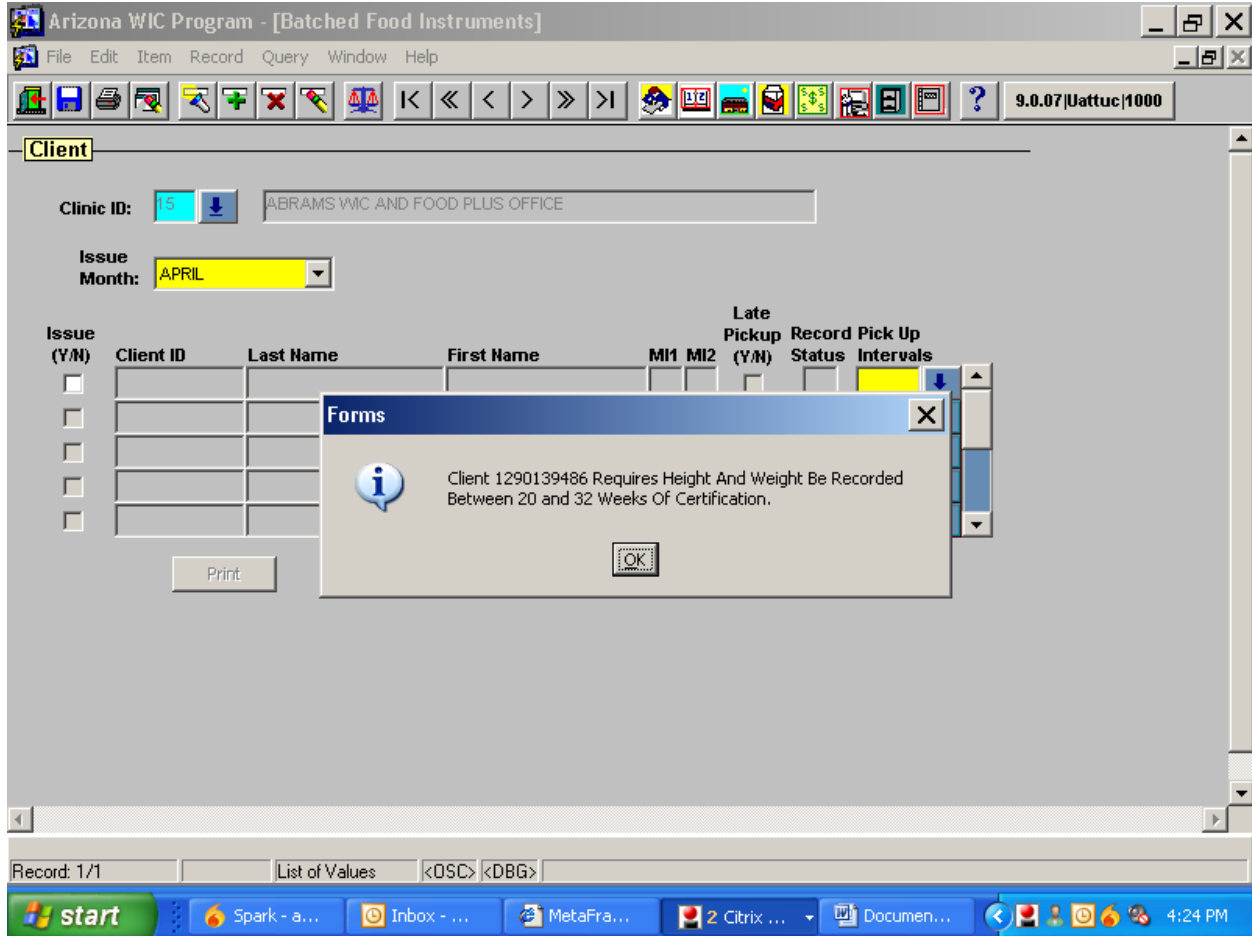
- Client:** A text box containing the number "15100133995".
- 1. Is this infant/child currently breastfeeding?** Radio buttons for "No" and "Yes".
- 2. Has this infant/child ever breastfed?** Radio buttons for "No" and "Yes".
- 3. How old was this infant/child when he/she completely stopped breastfeeding?** Three input boxes labeled "Days", "Weeks", and "Months".
- 4. Why did you stop breastfeeding?** A dropdown menu (currently showing a yellow box) and a text input box.
- 5. How old was this infant/child when he/she was first fed something other than breast milk?** A checkbox labeled "Not Applicable, Nothing Given" and three input boxes labeled "Days", "Weeks", and "Months".

An "OK" button is located at the bottom of the form.

BF Surveillance questions must also be answered for partially nursing infants. If question 1 is answered "No", then questions 3 and 4 must be answered.

# Chapter Ten

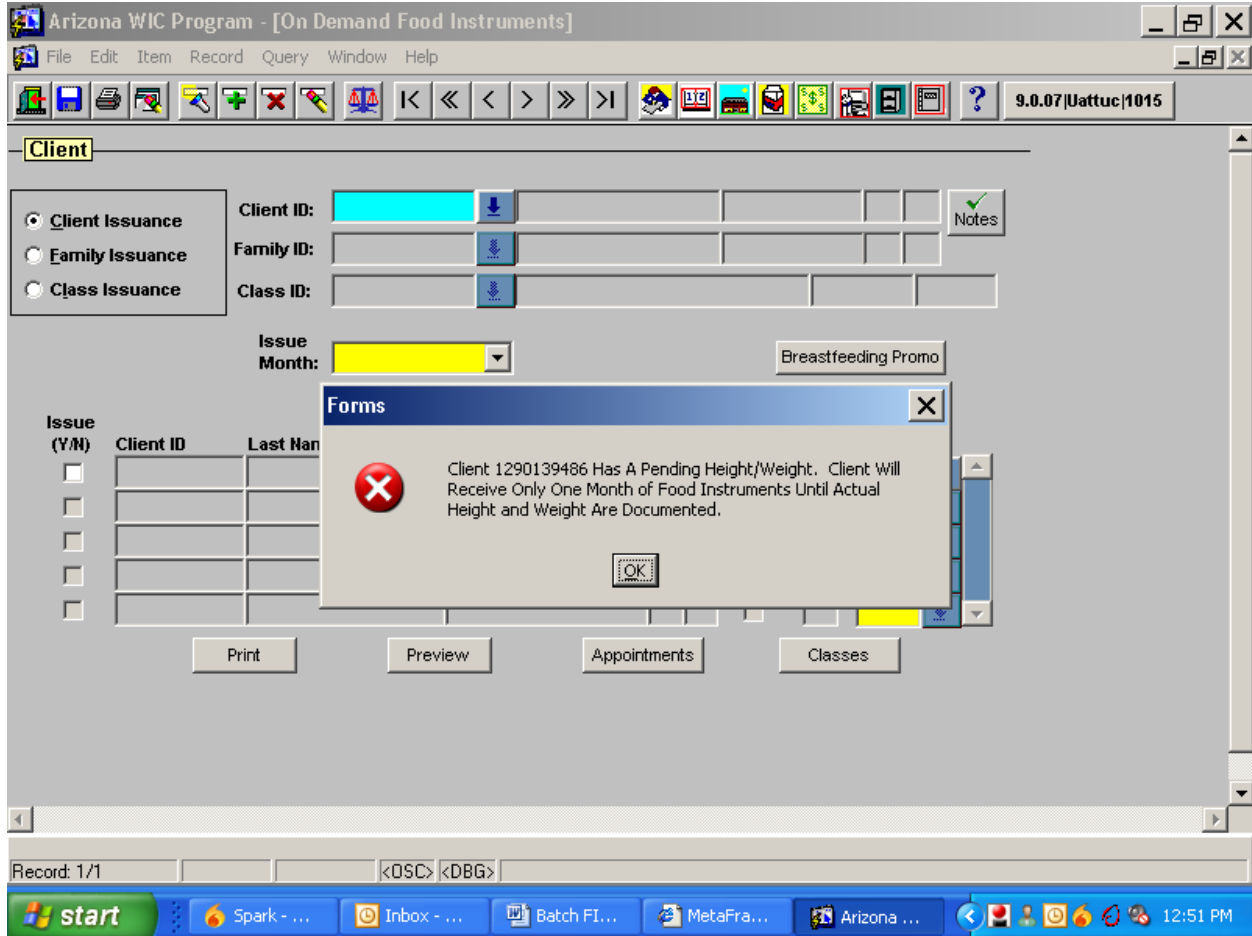
## Emergencies and Disasters



Infants who have not had ht/wt entered between 20 and 32 weeks since Certification must have height and weight recorded.

# Chapter Ten

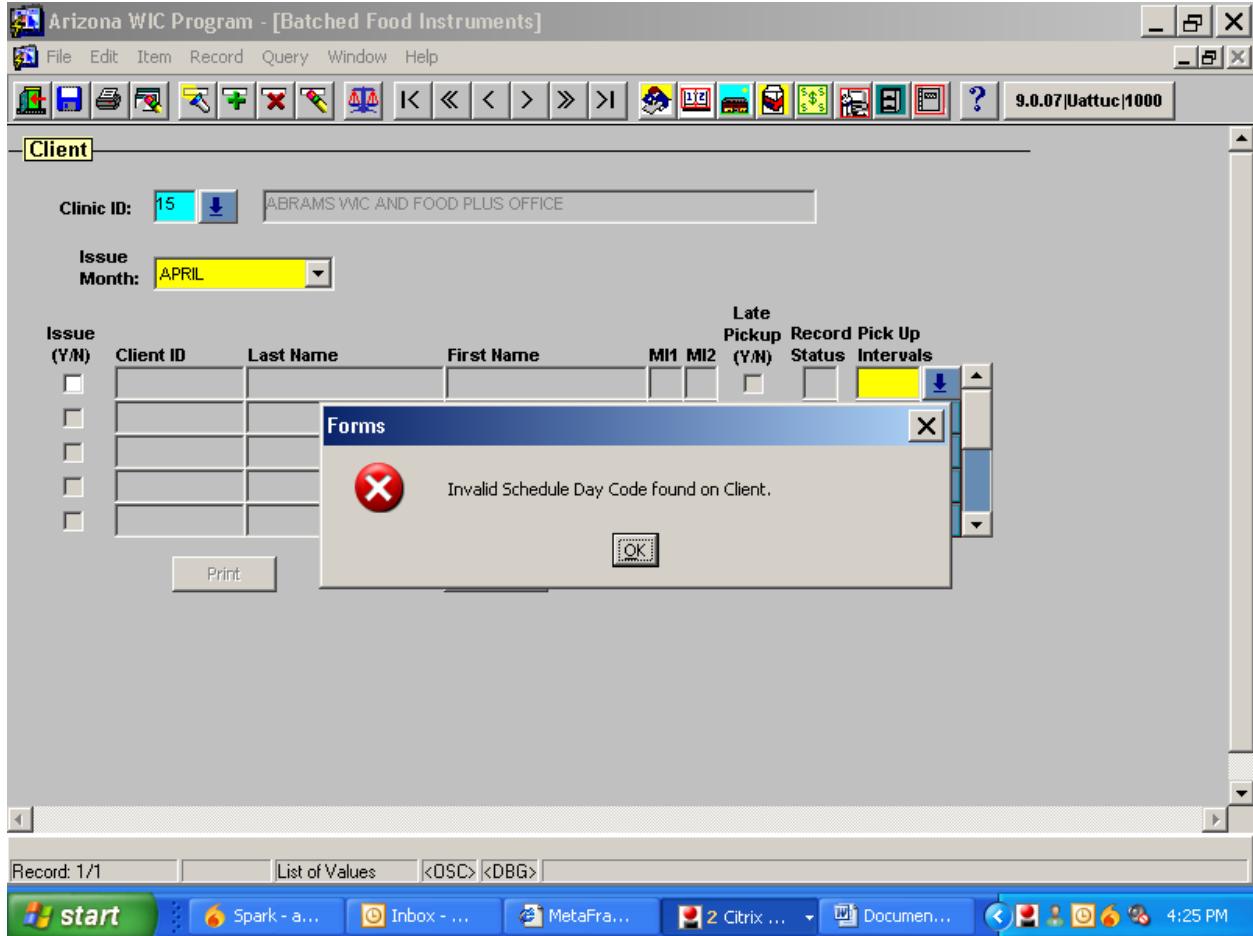
## Emergencies and Disasters



Weight/height can be entered as 999 and the participant will be able to receive one month of food instruments.

# Chapter Ten

## Emergencies and Disasters



If a client's pick up day is not the same as today's date, this pop-up will come up.

# Chapter Ten

## Emergencies and Disasters

Arizona WIC Program - [Batched Food Instruments]

File Edit Item Record Query Window Help

9.0.07|Uattuc|1015

**Client**

Clinic ID: 15 ABRAMS WIC AND FOOD PLUS OFFICE

**Preview**

ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon. - Fri. 8 AM - 6 PM Call 1-800-2626-WIC		MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED	
AGENCY 10	CLINIC 15	PARTICIPANT ID 1290139486	PARTICIPANT NAME LOPEZ, B/G
15 JAR (4.0 OR 4.2 OZ EACH) PLAIN WIC INFANT FRUIT JUICE (NO ORGANIC OR YOGURT BLEND) 24 OZ (UP TO 24 OZ) PLAIN WIC DRY INFANT CEREAL		DRAFT TYPE 000596	DRAFT NUMBER 31674016
		ACTUAL \$ AMOUNT \$	DATE OF USE 04/28/2009
			LAST DATE TO USE 04/30/2009
PAY TO THE ORDER OF:			
SIGNATURE AT CLINIC			
SIGNATURE AT STORE			
MUST MATCH CLINIC SIGNATURE ABOVE			

:071100324: 7132963251

OK

Press this button to close the preview window and return to the On demand food instruments window.

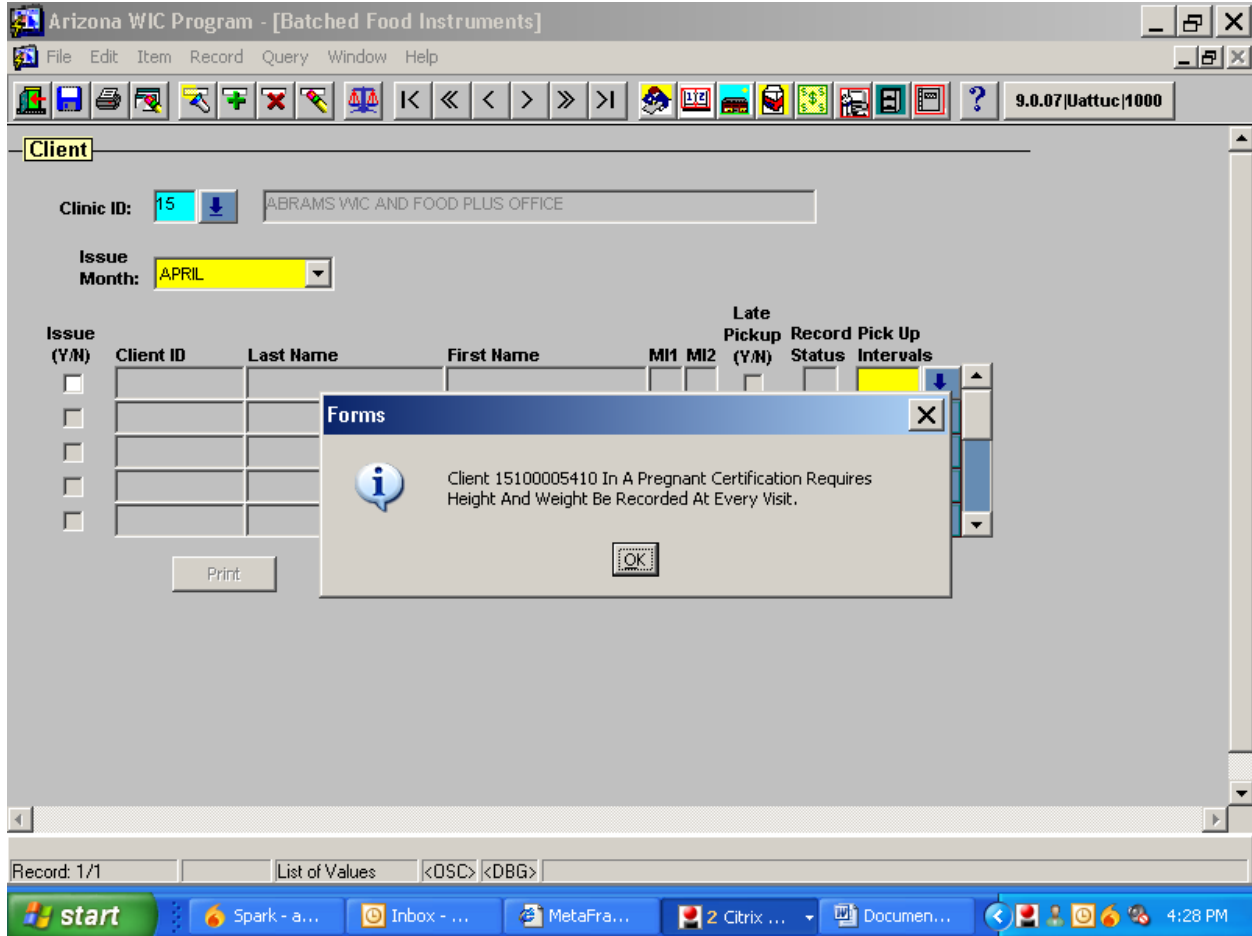
Record: 7/659 <OSC> <DBG>

start Spark - a... Inbox - Mi... Batch FIs ... MetaFram... Arizona ... 2:02 PM

Clients with an Invalid Schedule Day code will be issued FIs, however; they will have less than 30 days in which to use the FIs.

# Chapter Ten

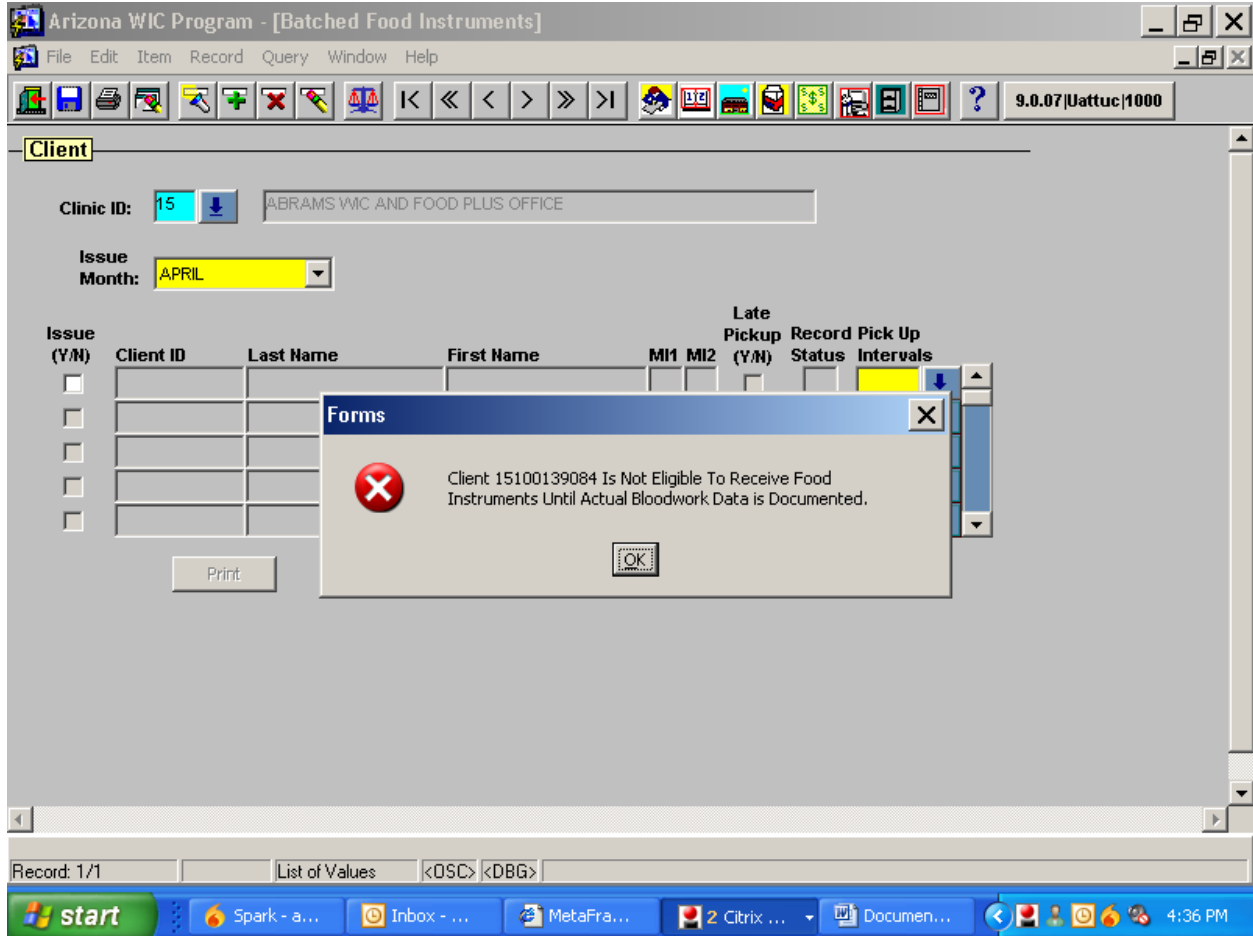
## Emergencies and Disasters



Pregnant women must have medical data entered at every visit. Weight can be entered as 999 and client can be issued FIs.

# Chapter Ten

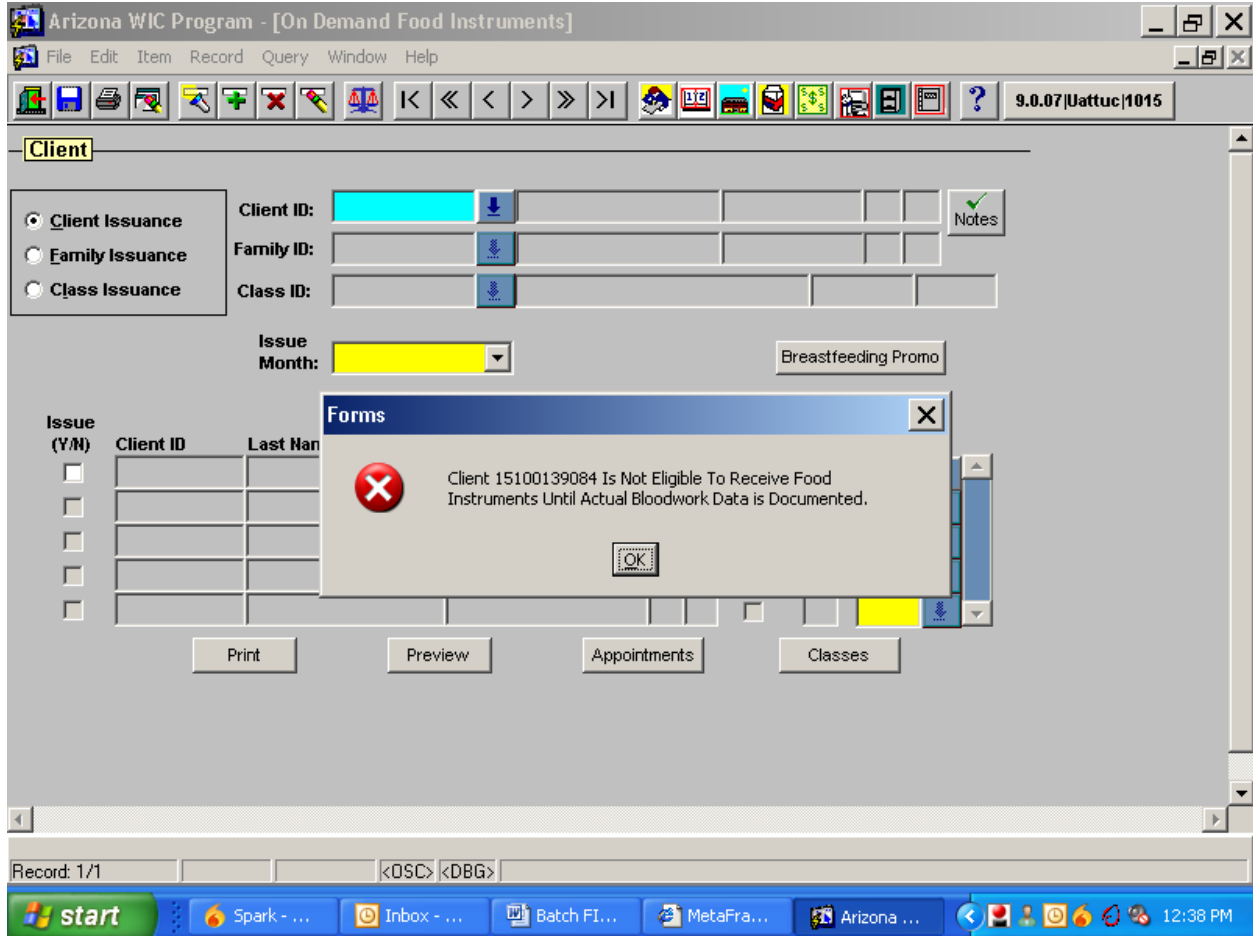
## Emergencies and Disasters



Participants with pending blood work (99.5) cannot receive FIs until data is entered.

# Chapter Ten

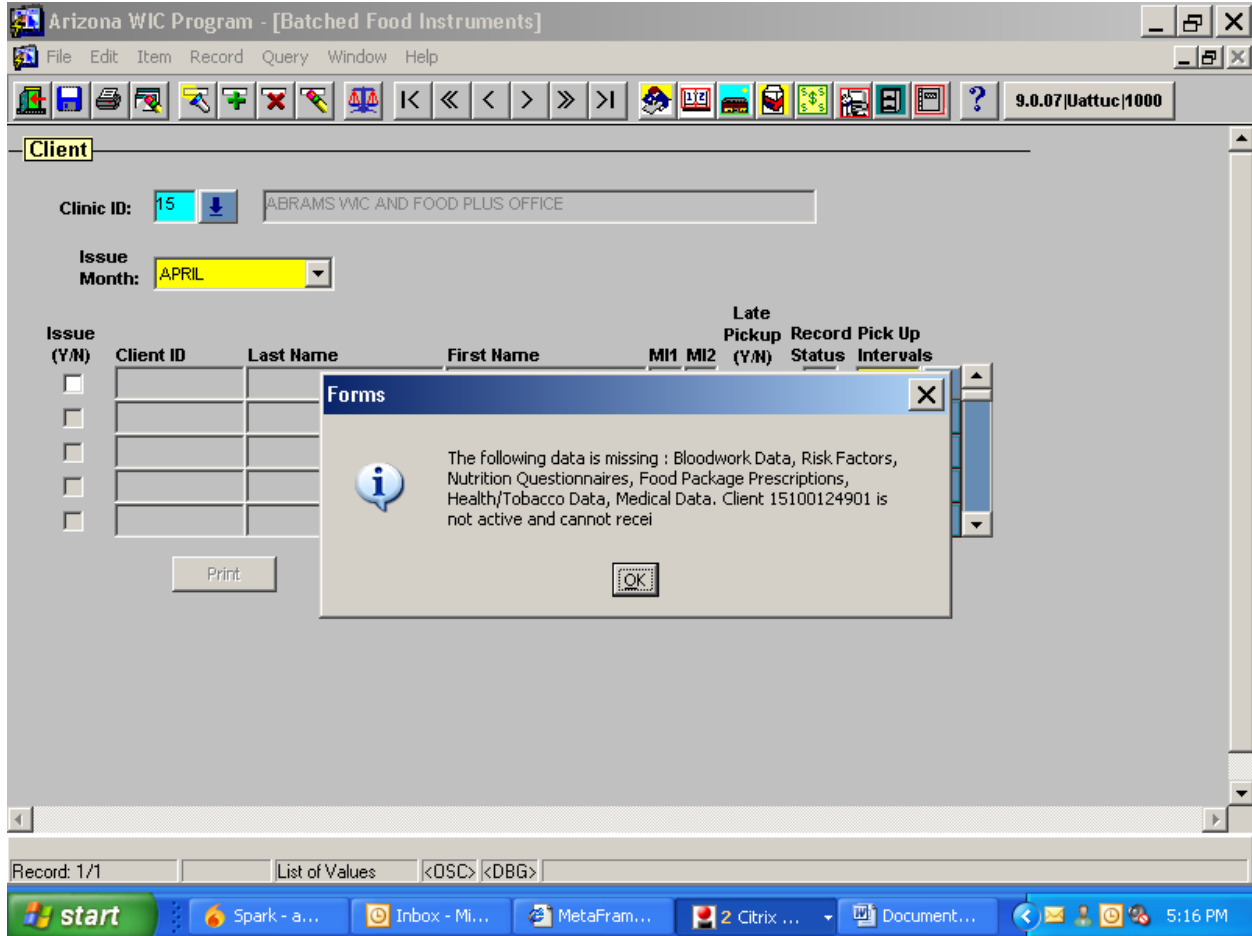
## Emergencies and Disasters



When logging into LA 10 Clinic 15, 99.5 was entered again for this client's blood work. After saving the screen and going to "On Demand", this error popped up.

# Chapter Ten

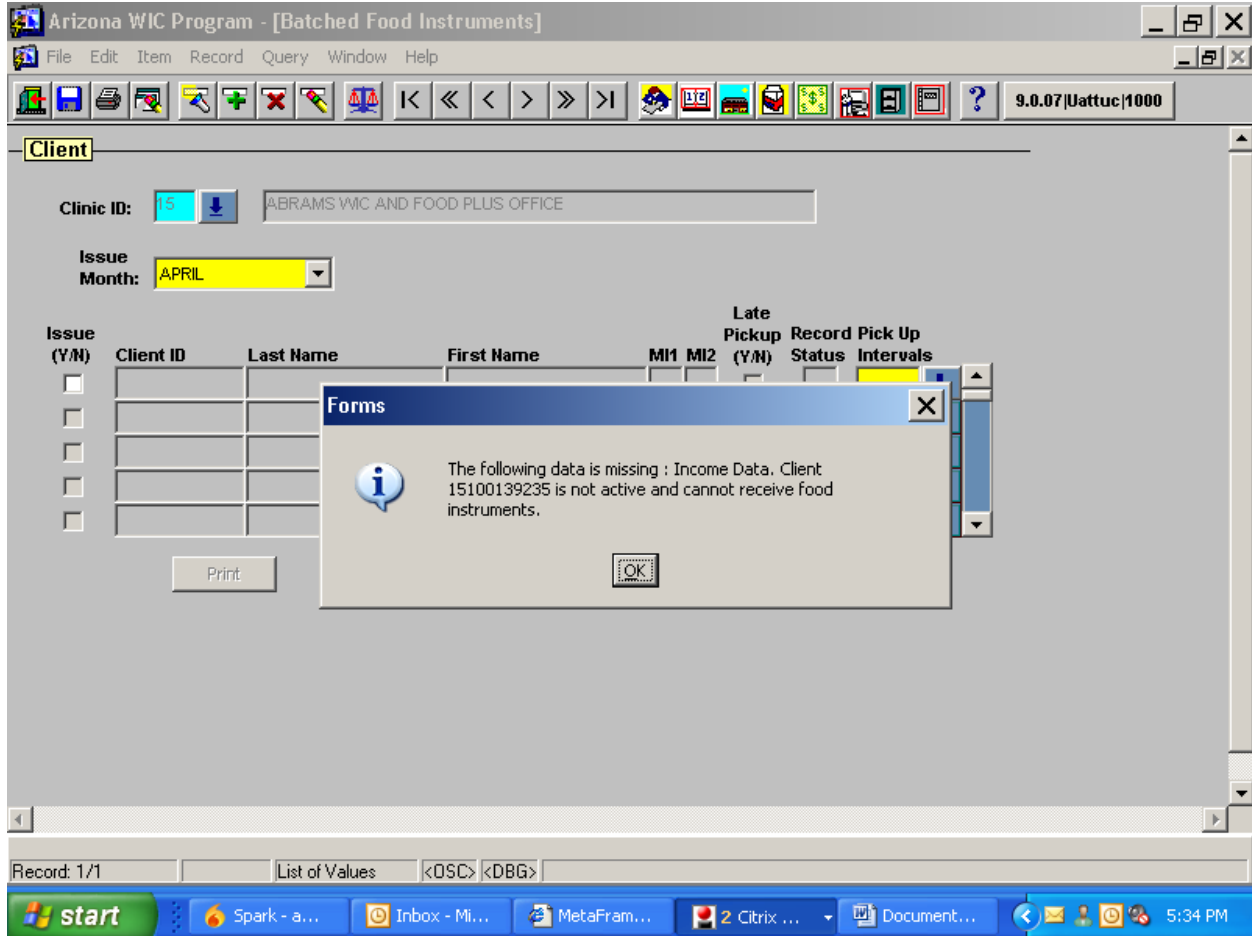
## Emergencies and Disasters



This message will come up for post-partum women on CSFP.

# Chapter Ten

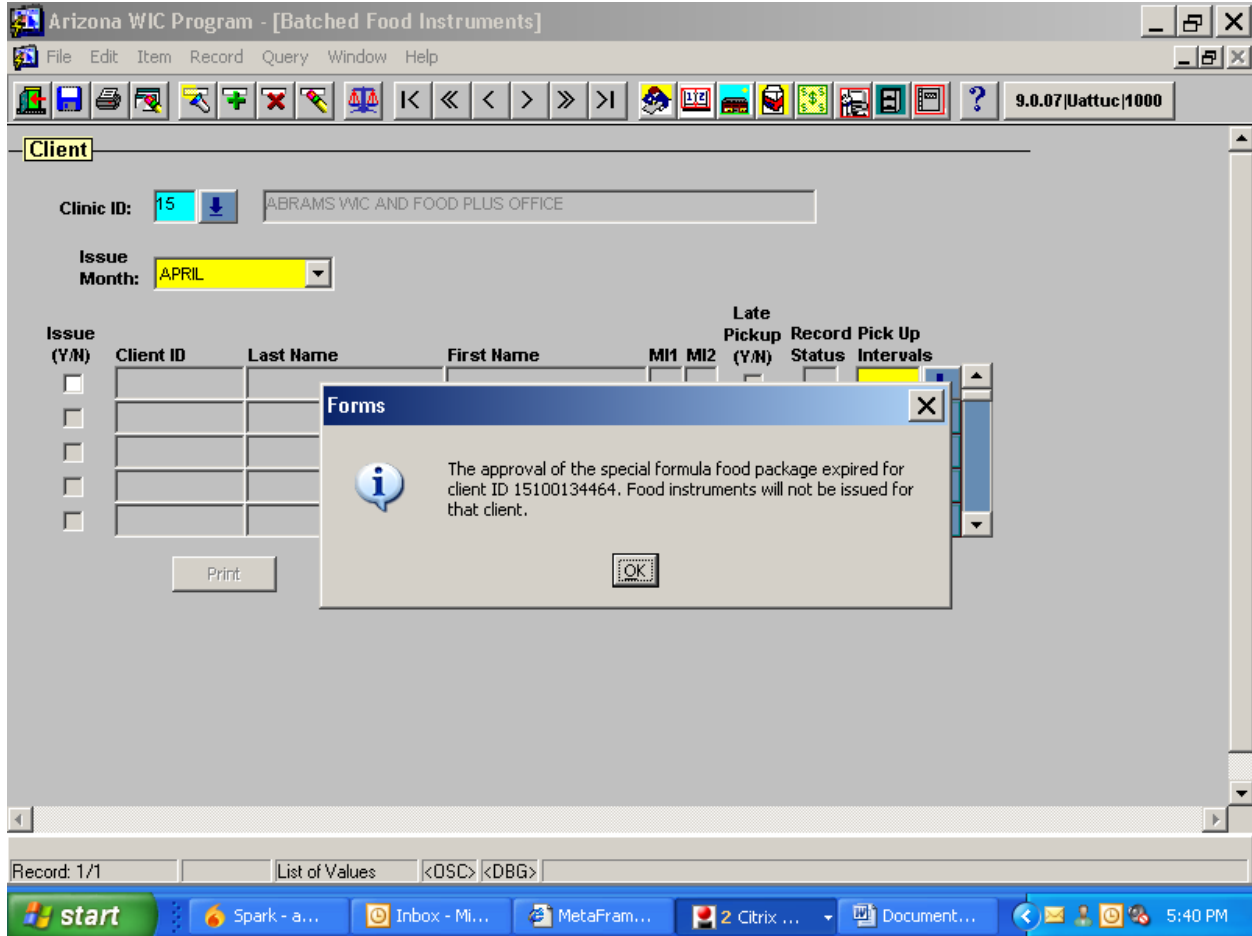
## Emergencies and Disasters



Participants with Income Code 10 (Forgot Documentation/Waiver) cannot receive FIs until new income data is entered.

# Chapter Ten

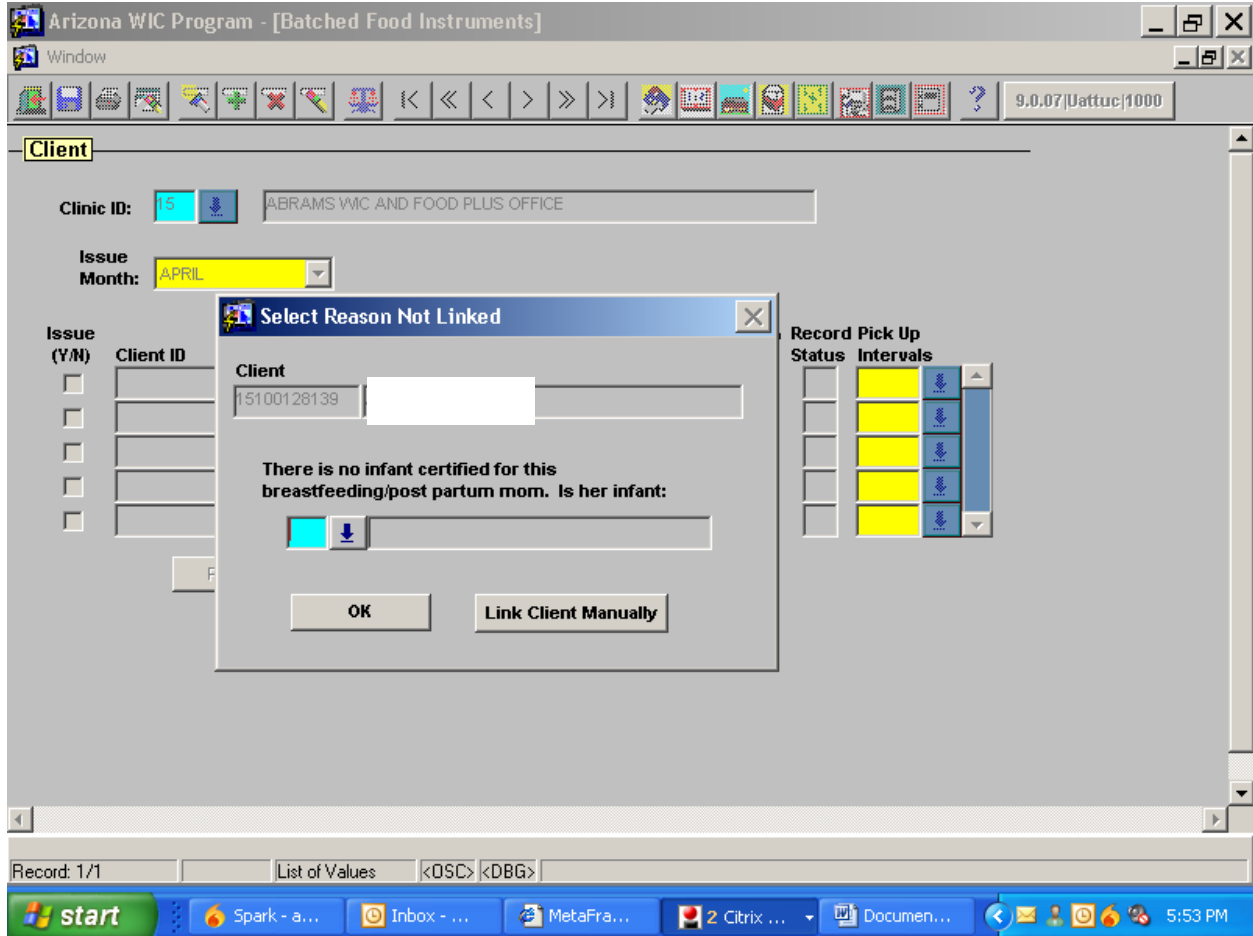
## Emergencies and Disasters



Clients on special formula cannot be issued FIs if the approval has expired. A new food package can be selected and approved if necessary so that FIs can be issued.

# Chapter Ten

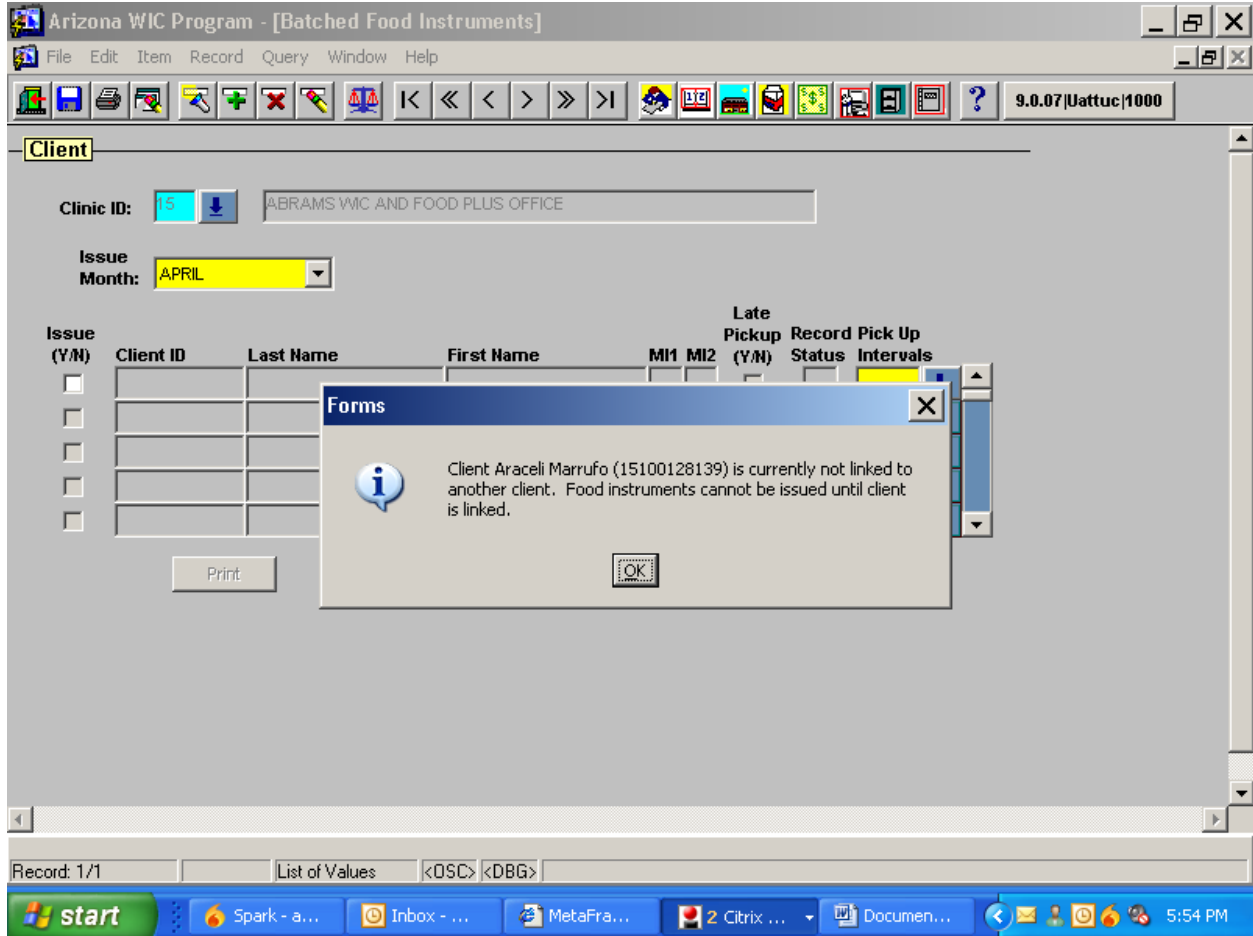
## Emergencies and Disasters



Clients who are not linked can receive FIs once the Reason Not Linked has been documented or the clients are linked.

# Chapter Ten

## Emergencies and Disasters



There are two pop-ups for clients who are not linked.