WIC Futures Study Group

Tuesday, October 23, 2012
Gallatin City/County Health Department, Bozeman, MT

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Introduction

In response to financial, structural, and operational challenges within the Montana Women, Infants, and Children (WIC) nutritional program, the WIC Futures Study Group met to discuss the WIC service delivery system. The goal of the Study Group is to develop a statewide delivery system to provide effective, efficient, and high quality services to the greatest number of participants possible.

The meeting was held on Tuesday, October 23, 2012. The following is a report of the meeting activities.

Participants included:

Mary Beth Frideres	MPCA
Paula Block	MPCA
Joan Bowsher	DPHHS/WIC
Carrie Reynolds	DPHHS/WIC
Mark Walker	DPHHS/WIC
Chris Fogelman	DPHHS/WIC
Glade Roos	DPHHS/WIC
Leah Steinle	DPHHS/WIC
Denise Higgins	DPHHS
Bill Hodges	Big Horn County HD
Heidi Nielson*	Deer Lodge HD
Terri Hocking*	Butte HD
Debbie Hedrick	RiverStone Health
Jeannie Siefert	Dawson County HD
Cynthia Grubb	Pondera County HD
Gillian Brown	HRDC6 (Lewistown)
Gayle Espeseth (o)	RiverStone Health
Shawn Hinz (o)	RiverStone Health
Jill Steeley (o)	Gallatin HD
Darcy Hunter (0)	Gallatin HD
Mandy Zanto (o)	Lewis and Clark HD

(o) = observer
* = on the phone

The meeting was facilitated by Mary Beth Frideres of the Montana Primary Care Association.

Opening Comments

Opening comments were made by Joan Bowsher, DPHHS WIC Director. Joan thanked the participants for coming. After introductions and a review of the agenda, Joan gave the WIC Program update.

WIC Program Update

Joan gave the group a review of what happened at the Regional Annual WIC Directors meeting in Nebraska. Here are the major points:

1. Funding – the national program administrators have no idea what will happen with funding and the forecast is not good. The state program took a 5-7% cut last year but was able to carry 3.5% forward, so Joan thinks it will be ok for this year. The national program administrators predict another sizeable cut. Sequestration (forced cuts) could happen January 1, 2013 – up to 8.5% cut on top of what budget is proposed. The biggest concern is that breast feeding peer counseling will get cut.
2. OA funding priorities will be caseload maintenance and EBT. The state program will not be asking for funding for special projects this year but will ask for $800,000 – $900,000 for caseload maintenance. Last year the state received only caseload maintenance for $800,000.
3. SPIRT roll-out is closed. Leah is on a special task force to write up a spirit enhancement RFP, so we may get a new SPIRIT contractor. Enhancements of SPIRIT to improve the system have been implemented. How is it going? Is it making things easier? You can still request enhancements but it takes about 2 years to get done since we work with a group of other states and everyone must agree. MT does not put any money into the group for enhancements but we benefit from changes to the system paid for by other states.
4. EBT – RFP for a contractor to roll out EBT for WIC, SNAP, and TANF is being developed. Hope to have a contractor by summer 2013. EBT implementation is about 18 months or longer out.
5. Integrity – this is being stressed by the Feds. Integrity of the program, staff, and retailers to program rules and regulations.
6. Final food package rule – hope to have this by the end of the year. Don't be surprised if potatoes go back on the program. Also the restrictions on whole milk only for children under 2 years of age may change.
7. No Kid Hungry – applications are being requested for mini grants for outreach. Also asking for applications for a pilot texting project. The application is a short letter. We encourage an evaluation process to be added so we can determine if the project was successful.
8. Spring Training – will be April 16th, 17th, and 18th with an opening keynote in the afternoon on Tuesday will be held at the at the Missoula Holiday Inn.

Quality Improvement/Quality Assurance and Measurement 101

Paula Block from the Montana Primary Care Association walked the group through a PowerPoint presentation entitled, "Quality and WIC – Quality Improvement/ Quality Assurance and Measurement 101". (This presentation is available on the WIC Futures Study Group website.) Real examples from the Community Health Center program were shown and a video featuring Dr. Don Berwick was shown, as well. The model for improvement proposed by the Institute for Health Care Improvement was reviewed with the group:

Aims - What are we trying to accomplish?
Measures - How will we know that a change is an improvement?
Changes - What change can we make that will result in improvement?
Tests of Change - PDSA (Plan, Do, Study. Act) cycles

Paula and Mary Beth showed the group a report on Clinical Quality Measures from a Montana Community Health Center (CHC) that identifies the health center's measures compared to state CHC's average measures, national CHC's average measures, and Healthy People 2020 goals. WIC clinics could have similar reports on measures that everyone agrees to follow.

Review Healthy People 2020 Objectives, the WIC System, and State Data

Denise Higgins, DPHHS, reviewed progress on the State Health Improvement Plan (SHIP) for the group. She identified measures that the state has identified to assess the top ten health issues in Montana. This data will become a plan of focus for DPHHS over the next five years. For example:

Objective: To increase the percent of women who report entering prenatal care in the first trimester from ____% to ____%.

Objective: To decrease the percent of women who report smoking during pregnancy from _____ % to _____%.

There will be a stakeholder meeting on November 8 when all participants will receive the information presented today and will be asked to participate in further development of the plan and its implementation.

Leah gave a review of the HP2020 mission.

Mark told the group that the state WIC program had been looking at some measurements in HP2020 in regard to what is being gathered by the SPIRIT system. He cautioned the group that it is not an easy thing to get meaningful data out of a system that was not set up to collect and organize meaningful data. Adjustments in collecting the data may be needed if the group chooses measures that are not set up in the appropriate way.

Selection of Statewide WIC Measures to Follow

After lunch, the group brainstormed measures that they would like to see followed by the WIC Futures Study Group. The state staff provided their guess as to whether a method could be found for tracking (Is it do-able? Yes or No?) The group then took those that were do-able and came up with a prioritized list for the state staff to take back to the office to discuss. Hopefully, they can discover ways where either the SPIRIT system or other state data repositories can be used to develop a method for tracking each measure.

Here is a summary of their work (in order of priority):

1. (five votes) Food security – cashing rates for benefits
2. (four votes) Smoking when pregnant
3. (three votes) WIC moms and birth weight of babies and carrying to term
4. (each received 2 votes) –
   Anemia rate
   Immunization rates of WIC children (who wasn't immunized when first came on WIC, who was referred, and who was immunized after they came on WIC and is up to date)
5. (one vote) Losing children from the program after one year
6. (one vote) Could we link retention to a risk factor?
7. (one vote) Entry into prenatal care

These proposed measures received no votes from study group members: Number of nutrition education visits, BMI, number of people on WIC who are employed.

Evaluation (+/△)

In regard to things that participants liked, here are their comments:

- Liked quality measurement talk
- Leaving with something tangible today
- Liked "quality is everyone's job"

- Appreciated the participation
- This topic was timely – great!
- If we need to defend WIC, this process gets us on the right track!
- Liked the food.
- Like WIC and WIC people
- Liked the brainstorming process
- We were depressed but came through that
- Appreciate patience of the group
- The process has been safe and validating – like a partnership

In regard to things that could be improved:

- Could you try WebEx so that people who are participating long distance could see?
- Again, we are missing the Native American participation

The next meeting will be held January 22, 2013 in Helena.