Memorandum

#21-038

TO: WIC Regional Directors
    WIC Local Agency Directors

FROM: Amanda Hovis, Director
      Nutrition Education/Clinic Services Unit
      Nutrition Services Section

DATE: May 19, 2021

SUBJECT: Revision to WIC Policy GA:14.0 – Staffing Standards

This memo announces revisions to Texas WIC Policy GA:14.0 – Staffing Standards. The revised policy has been reviewed by TALWD, approved by USDA and is effective June 1, 2021. At that time, it will be posted, and you may update your Policy and Procedures Manual by accessing the WIC Website at: https://hhs.texas.gov/doing-business-hhs/provider-portals/wic-providers/wic-policy-procedures-manual

Monitoring will begin on December 1, 2021. A Summary of Changes is below.

If you have any questions or require additional information regarding Texas WIC Policy GA:14.0 – Staffing Standards, please contact Tiffany Brown, Clinic Services Coordinator, Nutrition Education and Clinic Services Unit, at Tiffany.Brown@hhs.texas.gov.

Summary of Changes

General

Changed all “shall” to “must” throughout the policy.

Reformatted and modified flow of sections.

Removed “nutrition” from the Policy Statement
Procedures

Deleted “IV. Local agencies with only one certifying authority (CA) on staff shall have a written contingency plan for CA back-up coverage. Refer to policy CS:15.0 for the definition of a CA. Refer to GA: 20.0 Staff Fraud and Abuse for requirements on separation of duties.”

Reformatted Procedure V and it is now the New Procedure IV.

Removed “or an individual working towards IBCLC certification.

A. Individual working towards IBCLC certification shall:

1. Be a Department of State Health Services (DSHS) Trained Breastfeeding Educator (TBE), as defined by Policy BF:02.0, within one year of employment.

2. Receive one or more continuing education hours in lactation per year.”

Procedure V. C., removed “By October 1, 2018, all DBEs must be IBCLCs.”

Procedure V., removed “C. 1. When an IBCLC is not available to be on staff or on contract, the agency must submit a plan via a waiver request to their State Agency Partner for approval.”

Procedure V., moved “C. 2. The plan must demonstrate how IBCLC services will be provided at no charge to the WIC participant (e.g. through tele-consultations with WIC Lactation Support Centers or coordination with local IBCLC)” to new Procedure VI. D. and modified language.

Procedure V. D., moved D. to new Procedure IV., this is now Procedure IV. C., and removed “/DBE”

New Procedure IV, changed “Each LA shall have a Designated Breastfeeding Expert (DBE).” to “Each LA must employ or contract with a International Board Certified Lactation Consultant (IBCLC).”

New Procedure IV. A., changed to “The IBCLC will serve as the local agency’s Designated Breastfeeding Expert (DBE).”

New Procedure IV. B., changed “DBEs” to “IBCLCs”

New Procedure IV. B. 1.- 4., changed “DBE(s)” to “IBCLC(s)”
Procedure VI. is the new Procedure V., removed “to increase breastfeeding rates by use of peer influence and to assist in breastfeeding counseling in normal breastfeeding situations.”

   New Procedure V., added “The PC must comply with requirements outlined in Policy BF:03.0.”

Procedure VII., removed and reformatted section and it is now the new Procedure VI.

   New Procedure VI., changed “DBE” to “IBCLC”.
   New Procedure VI. A., added “waiver”, changed “their” to “the LA’s”
   New Procedure VI. C., removed “Note:”, changed “may be” to “are”

Procedure VIII., deleted section and added to new Procedure VI.

   New Procedure VI. D., changed “obtaining” to “requesting”, changed “from their State Agency Partner” to “for RD or IBCLC”, removed “High Risk Referrals”
   New Procedure VI. E., added statement from old Procedure V. C. 2. and modified statement language to
   “E. The IBCLC waiver request must include a plan that explains how IBCLC services will be provided at no charge to the WIC participant (e.g. through tele- consultations with WIC Lactation Support Centers or coordination with local hospital IBCLC).”

   New Procedure VI., added E. 1. and 2.
   “1. The IBCLC listed on the approved state waiver will serve as the DBE for the agency.
   "2. The minimum number of hours for consultations listed in Section IV.B.1.- 4. will not apply to agencies with a IBCLC waiver.”

Guidelines

   Removed “Resources:”

   Added “The following resources can assist LAs with meeting staffing standards.”

   Reformatted lettering

   A. added “/lactation consultant”
D. added “Advertise online on a job search engine.”
E. removed “for a nutritionist, RD or LD”

Updated weblink for Texas WIC Program

Added weblink for United States Lactation Consultant Association (USLCA)

Deleted weblinks for
- Academy of Nutrition and Dietetics  http://www.eatright.org/

This institution is an equal opportunity provider.
**Staffing Standards**

**Purpose**

To ensure the delivery of quality services meet the needs of WIC participants.

**Authority**

State Policy

**Policy**

Each local agency (LA) must ensure that qualified professionals are available to provide WIC services.

**Procedures**

I. Each LA must name a WIC Director as the person responsible for the overall day-to-day operation of the local WIC Agency. The WIC Director must comply with the training requirement outlined in [TR:02.0 Orientation/Training of Local Agency Directors](#).

II. Each LA must employ or contract with a registered or licensed dietitian (RD, LD, or RD/LD). Dietitians must be employed according to the following staffing standards:
   
   A. Local agencies with less than 3,000 participants are required to have an RD, LD, or RD/LD consultant(s) providing a minimum of 12 hours consultation per month.
   
   B. Local agencies with 3,000-6,000 participants are required to have an RD, LD, or RD/LD consultant(s) providing a minimum of 24 hours consultation per month.
   
   C. Local agencies with 6,000-10,000 participants are required to have an RD, LD, or RD/LD consultant(s) providing a minimum of 48 hours consultation per month.
D. Local agencies with more than 10,000 participants are required to have, at a minimum, one Full Time Equivalent (FTE) RD, LD, or RD/LD.

III. Each local agency must employ one FTE nutritionist. A nutritionist must have a Bachelor’s or Master’s degree in a nutrition related field, examples include: Nutrition Sciences, Human Nutrition or Dietetics, Community Nutrition, Public Health Nutrition, Clinical Nutrition, Home Economics with Food and Nutrition major with 24-semester hours credit in food & nutrition.
   A. Local agencies with more than 10,000 participants are required to have one FTE nutritionist per 10,000 participants.
   B. The full-time dietitian may also serve as a full-time nutritionist.

IV. Each LA must have an International Board-Certified Lactation Consultant (IBCLC).
   A. The IBCLC will serve as the local agency’s Designated Breastfeeding Expert (DBE).
   B. IBCLCs must be employed according to the following staffing standards:
      1. Local agencies with less than 3,000 participants are required to have a IBCLC(s) providing a minimum of 12 hours consultation per month.
      2. Local agencies with 3,000-6,000 participants are required to have a IBCLC(s) providing a minimum of 24 hours consultation per month.
      3. Local agencies with more than 6,000-10,000 participants are required to have a IBCLC(s) providing a minimum of 48 hours consultation per month.
      4. Local agencies with more than 10,000 participants are required to have, at a minimum, one FTE IBCLC(s).
   C. The FTE IBCLC may also serve as FTE RD as long as they have the qualifications for both and can meet the staffing standards.
V. Each LA must employ at least one Breastfeeding Peer Counselor (PC). The PC must comply with requirements outlined in Policy BF:03.0.

VI. LAs that are unable to meet the staffing standards (i.e. Registered Dietitian, Nutritionist, Peer Counselor, IBCLC, etc.) must request a waiver in the interim that includes justification regarding the inability to meet the staffing standards and a plan for satisfying the requirement.
   A. The waiver request must be submitted in writing to the LA’s State Agency Partner for approval no later than 30 days following the vacancy.
   B. The LA must maintain the written approval on file for the purpose of an audit monitoring review.
   C. Staffing Standard waivers may be approved for up to 1 year. LAs must request a renewal if needed beyond the initial approval period.
   D. LAs requesting a waiver for RD or IBCLC must have a plan for providing high-risk referrals and counseling within the waiver request. Please refer to Policy CS: 33.0.
   E. The IBCLC waiver request must include a plan that explains how IBCLC services will be provided at no charge to the WIC participant (e.g. through tele-consultations with WIC Lactation Support Centers or coordination with local hospital IBCLC).
      1. The IBCLC listed on the approved state waiver will serve as the DBE for the agency.
      2. The minimum number of hours for consultations listed in Section IV.B.1.-4. will not apply to agencies with a IBCLC waiver.
Guidelines

The following resources can assist LAs with meeting staffing standards.

A. Contact a local or regional hospital dietitian/lactation consultant.
B. Advertise in local or regional newspapers/newsletters.
C. Advertise at area universities or community colleges.
D. Advertise online on a job search engine.
E. Post a job at:
   
   Texas WIC Program [https://hhs.texas.gov/doing-business-hhs/provider-portals/wic-providers/wic-jobs](https://hhs.texas.gov/doing-business-hhs/provider-portals/wic-providers/wic-jobs)

   National WIC Association (NWA) [https://www.nwica.org/job-postings](https://www.nwica.org/job-postings)

   Texas Academy of Nutrition and Dietetics [https://www.eatrighttexas.org](https://www.eatrighttexas.org)

   United States Lactation Consultant Association (USLCA) [https://uslca.org/category/job-board](https://uslca.org/category/job-board)