

From: [Brakes, Sherry L \(HSS\)](#)
To: [Brakes, Sherry L \(HSS\)](#)
Subject: FW: WIC Update May 6 in this issue Vit D drops, Medicaid Outreach report, New High Risk Reports in SPIRIT Utilities, National Farmers' Market Conf in Juneau, etc
Date: Friday, May 06, 2016 3:49:36 PM
Attachments: [image001.png](#)
[image005.wmz](#)
[image007.png](#)

Good afternoon

I apologize for missing the cut off for the Friday update- I have one more thing to add

WIC CPA Training KITS and BFPC Training KITS

Please take a look at your training kits and see if any items need replaced. The content list for both kits is attached. We have a small budget to replace items if needed. Please email any requests to replace items to drrybicki@uaa.alaska.edu. Also, if you feel your agency needs additional kits or items for the next fiscal year please let me know for planning purposes. Thank you.

From: Wayne, Kathleen A (HSS)
Sent: Friday, May 06, 2016 3:46 PM
To: HSS DPA WIC Coordinators; Welch, Scooter (HSS Sponsored); O'Gara, Kathy (HSS Sponsored); Bennis, Don
Cc: HSS DPA WIC Anchorage; HSS DPA WIC Juneau; 'Danielle Rybicki' (afdr@uaa.alaska.edu); Olejasz, Aimee M (HSS); Butcher, Clay (HSS)
Subject: WIC Update May 6 in this issue Vit D drops, Medicaid Outreach report, New High Risk Reports in SPIRIT Utilities, National Farmers' Market Conf in Juneau, etc

Hi Everyone,

Here is a special note from the National WIC Association, I can't say it any better.



Kathleen

As we head into the weekend,
we wish all of the mothers who work in WIC,
who are served by WIC,
and who have impacted WIC

1. Vitamin D- ACTION ITEM Due May 13

Please contact Sherry Brakes if you need a shipment of Vitamin D drops. We are determining how much and when to order. Send comments to Sherry by May 13.

2. Medicaid Outreach Report- Current one is available for you

The Outreach List will be more timely than it has been in the past. We are changing the way we pull the data which includes only Medicaid data. Medicaid data is available earlier in the month which makes the list more accurate. SNAP and TEFAP data will no longer be pulled for this outreach purpose.

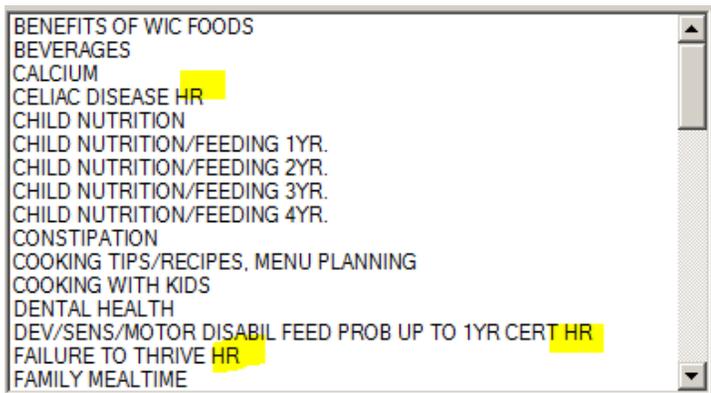
3. New High Risk Reports on the SPIRIT Utilities Site

Two new reports are now available on the SPIRIT Utilities site. These reports should make tracking HR participants much easier.

1. The Participant High Risk Clinic report shows all the currently certified high risk participants with contact information and other information about the high risks.
2. Participant High Risk Monitoring report shows a summary of high risks for participants with certifications in a date range.

Both reports can be downloaded into Excel and provide all the HR risk factors for each client.

Reports are tied into the Nutrition Education Tab in SPIRIT to indicate whether a participant received a HR consult or not. So when the RD does the HR consult, the corresponding HR Nutrition Education topic must be selected to be counted in the report as a HR consult. If a participant has more than one HR risk factor assigned to them, they will show up on the report multiple times. Make sure that each corresponding HR nutrition education topic is selected to receive credit for the HR consult. In order for this report to be meaningful for reviewing whether HR consults are being met, the Nutrition Education tab *must* be used in SPIRIT.



For more detailed information about your HR clients; use of a pivot table can be helpful to analyze which HR risk factors are most prevalent in your clinics and agencies or what percentage of HR participants are being contacted in a timely manner.

3. ACTION ITEMS: Due Date May 13

1. If you are interested in more information about Pivot Tables contact Dana Kent at dana.kent@alaska.gov or 465-5322.
2. Would arranging the HR risk factors together on the Nutrition Education tab be better than how they show up now? We could rename all the HR risk factors to start with HR, followed by the actual risk factor name.

Example:

HR Celiac Disease

HR Dev/Sens/Motor Disabil Feed Prob Up to 1 Yr Cert

HR Failure to Thrive

If you would like the HR nutrition education contacts be renamed, contact Dana Kent at dana.kent@alaska.gov or 465-5322.

4.

Issuing benefits to a “Some Breastfeeding” woman in the month the infant turns 6 months

SPIRIT will issue benefits if the PFDTU falls in the calendar month where the infant turns 6 months old
SPIRIT will not let you issue benefits whose FDTU is after the certification is over.

5. ACTION ITEM: Due Date May 13

Monthly LA Teleconference Times- Is it working well for you? Please let me know if you would like to change the time of the teleconference. Contact Dana Kent at 465-5322 or dana.kent@alaska.gov to suggest another time.

6.



The 2016 National Association of Farmers' Market Nutrition Programs (NAFMNP) Annual Conference will be held in Juneau, Alaska from September 7-10th! This is the first time Alaska will be the host state and we are excited to welcome the United States Department of Agriculture in addition to representatives from States, District of Columbia, Indian Tribal Organizations and US Territories to our beautiful backyard. To learn more about the Association and the conference please visit <http://www.nafmnp.org/>.

7. CPA Quarterly Teleconference:

This is a reminder that the CPAs Quarterly Teleconference will take place on May 10, Tuesday, at 9:00 AM. The link to the webinar and call in number will go out in a separate email to the CPAs. The topic is "Goal Setting" and CPAs will receive a link to the workbook, and the post-survey to use for a certificate. Please encourage staff to attend, and direct questions and suggestions to Jennifer Johnson at 465-8104

8. RD Working Meeting:

Coming up on May 19 at 8:30 AM. Webinar and dial in information will be coming in a separate email. Our speaker will be Julianne Power, a graduate student who's been working on texting as a method for delivering nutrition education messages. Please contact Jennifer Johnson with questions or suggestions at 465-8104. Here's Julianne's project summary:

Using Technology to Deliver Nutrition Education to Remote Populations in Alaska. *Low-income populations, especially in rural Alaskan communities, do not consume the recommended amounts of fruits and vegetables and are disproportionately impacted by nutrition-related diseases such as overweight and obesity. Most interventions to improve diet in such populations involve face-to-face nutrition counseling. However, low population density in rural and remote Alaskan communities (less than one person per square mile), combined with lack of affordable travel between these communities, makes delivering nutrition education to this population prohibitively expensive. There is an emerging field in public health that offers a promising new approach to nutrition education. Mobile Health, also called mHealth, refers to the delivery of healthcare through mobile communication devices, such as cell phones. mHealth is an ideal tool for health promotion programs because mobile technology is ubiquitous and widespread across income groups. To explore the potential for mHealth in Fairbanks Alaska, we developed an 11-week intervention, called Txt4HappyKids, to promote eating fruits and vegetables among parents with young children through fun and informative text messages. We found that the text messages created positive perceptions of changes in behavior among parents of young*

children. To further explore the potential for mHealth across the state, we partnered with the State of Alaska Family Nutrition Program to explore whether mobile technology can be used to deliver nutrition education to WIC program participants living in rural and remote Alaskan communities in the Yukon-Kuskokwim River Delta. Our goal is to improve the reach of WIC nutrition and health education by using a technology-based approach. Few technology-based nutrition education programs have been evaluated in Alaska Native populations, and use of technology among Alaska Native People living in rural Alaska is unknown. We surveyed 368 Alaska Native WIC participants living in the Yukon-Kuskokwim Delta to assess technology use. We found that technology use was exceptionally common, and use of mobile devices such as smartphones and tablets was comparable to that of the general U.S. population. Findings from this study will guide technology-based nutrition education efforts in Alaska, and improve the sustainability of such programs in rural and remote areas.