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Bureau of WIC Nutrition 1992-1993 Biennial Report
Texas Department of Health
Special Supplemental Food Program
for Women, Infants and Children

Mission Statement



The primary mission of the Texas WIC Program is to give our most vulnerable children the best possible start by providing optimal nutrition during the critical stages of fetal and early-childhood development.

To this end, we are committed to serving as many eligible women, infants and children as we possibly can with the funds provided.

Pregnant women who eat nutritious foods and receive nutrition education and prenatal care are more likely to deliver full-term, healthy babies. Breastfed infants, babies who receive iron-fortified formula and children who eat appropriate nutritious foods build a foundation for lifelong health and increased intellectual potential.

The combination of WIC's nutrition education, healthy foods and access to medical and social programs promotes a better quality of life for Texas children today and supports their growth and development into fully functioning human beings with a choice and a future.



Bureau of WIC Nutrition 1992-1993 Biennial Report
Texas Department of Health
Special Supplemental Food Program
for Women, Infants and Children



Texas Department of Health



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FY92-93

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WIC is an equal-opportunity program. If you believe you have been discriminated against because of race, color, national origin, age, sex or disability, immediately call the Texas WIC office at 1-800-942-3678.

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Cover art: "Moon Mother" by Diana Bryer.

Bureau Chief's Message



The past two years have been a time of unprecedented growth for the Texas WIC Program and for me.

This report documents many accomplishments and statistics that the state program achieved during the biennium. However, we in the state WIC office never lose sight of this fact: No statistics or compilation of achievements can tell the true story of WIC. The real success of WIC is always created by the 1,800 local-project staff—the project directors, the nutritionists, the nurses, the clerks, the breastfeeding counselors. They are the true heroes of WIC who, day in and day out, provide services to 580,000 women, infants and children. Our job at the state level is to support the efforts of these frontline employees.

While we are proud of the achievements chronicled in this report, we recognize that WIC is a very personal kind of program that has a dramatic im-

pact on the lives of individuals. No statistic can tell the story of the infant whose life was saved by a WIC referral. Or the pregnant teen who carries her baby to full term because of the nutrition education and counseling she received at her WIC clinic. Or the toddler who is saved from a disabling or even fatal illness by the immunization she had received at a WIC clinic.

It has been my privilege to work for the WIC program almost from its inception 19 years ago and as bureau chief from 1985 until the end of this biennium. As I assumed my new role as associate deputy commissioner on Sept. 1, 1993, I had mixed feelings.

It is hard to leave the day-to-day operations of a program that has been such an important part of my personal and professional life. However, I believe that my new position will enable me to support the Texas WIC Program in new ways. I look forward to assisting the

new bureau chief during the next months and years—a time that promises to be a continuation of expansion and challenges as Congress seriously considers fully funding WIC for the first time.

I would like to take this opportunity to thank the many people I have worked with on the federal, state and local levels for all they have done for the Texas WIC Program. I shall always have a commitment to them and the women and children of Texas.

Debra Stabeno

Introduction



WIC is a federally funded program administered by the U.S. Department of Agriculture (USDA). WIC is part of the Supplemental Food Programs Division under USDA's Food and Nutrition Service. The official name of our program is the Special Supplemental Food Program for Women, Infants and Children (WIC).

USDA's seven regional offices work with state health departments and Indian tribal organizations in delivering WIC services

to participants.

The Texas Department of Health (TDH) administers WIC in Texas. During FY92-93, the Bureau of WIC Nutrition was part of the TDH Associateship of Family Health Services.

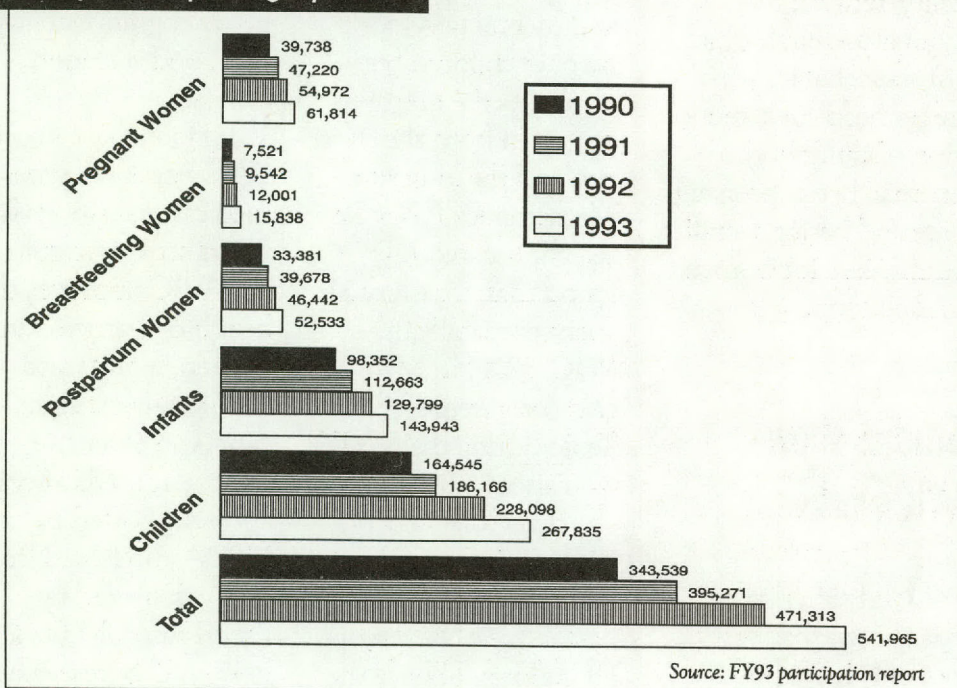
During the period covered by this report, the WIC Bureau had four divisions. They are Nutrition, Education, Outreach and Training; Local Agency and Vendor Management; Contracts and Financial Management; and Automation. These four divisions worked with

contracted local agencies and with grocery stores to deliver WIC services to the women, infants and children participating in Texas.

On the local level, WIC services are delivered primarily by clinics in city/county health departments. In some cases, local services are provided directly by state health-department facilities or private health-care providers. Texas has 76 WIC projects which oversee nearly 600 clinics staffed by about 1,800 field personnel. Approximately 2,300 grocery stores have contracts to redeem WIC cards.

This report covers activities in the fiscal year 1992 (FY92), which covers the period of Sept. 1, 1991, through Aug. 31, 1992, and FY93, which covers the time period of Sept. 1, 1992, through Aug. 31, 1993. During this biennium, the Texas WIC Program expanded from serving 450,000 clients to serving almost 600,000 women, infants and children each month.

Participation by category



What is WIC?



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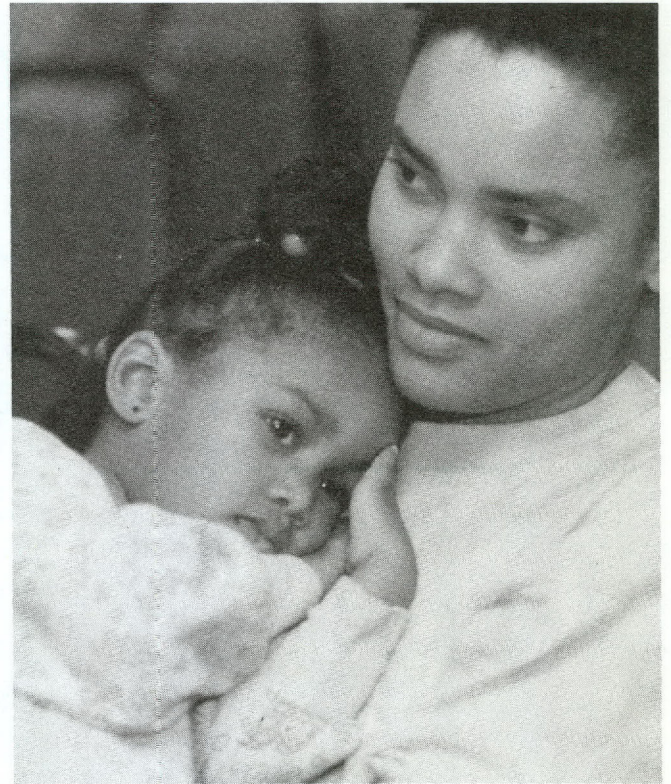
WIC has a major impact on reducing anemia among children. The *Journal of the American Medical Association* (Sept. 25, 1987) reported findings from the Centers for Disease Control and Prevention's data on pediatric-nutrition surveillance that showed a two-thirds reduction in childhood anemia over a 10-year period. The study indicated that WIC contributed markedly to the decline. The study found that low-income children not enrolled in WIC have a significantly higher prevalence of anemia than those who are enrolled.

The WIC program promotes a public policy that children need good nutrition to grow healthy bodies and strong minds. For the past 20 years, WIC has improved the nutritional well-being of thousands of the nation's most vulnerable children. WIC is an investment in our future because it is an investment in our children's health.

WIC has been shown to have a dramatic impact on such maternal- and child-health issues as the decrease in infant mortality, reduction of premature births, having more babies with larger head sizes, reduction of childhood anemia, better prenatal care and better overall health care for women and children.

Studies show WIC works

Study after study has shown that WIC not only has a positive



effect on the physical and mental development of children but also saves the taxpayer money in both the short run and the long run. Mathematica Policy Research, Inc. recently found that, for every \$1 spent prenatally in WIC, \$2.44 in Medicaid costs were saved in Texas during the first 60 days after birth.

Everyone benefits when children are better nourished. It is in the best interest of everyone for children to have the

healthier bodies and better cognitive ability that good nutrition fosters.

How do we know WIC works? A series of medical evaluations has found striking results that WIC improves the health of participating women, infants and children. Most significant is an extensive, multi-year medical evaluation supported by USDA and issued in 1986. Directed by David Rush, M.D., a leading U.S. researcher



in nutrition and epidemiology, the evaluation found that:

- ❖ WIC contributed to a 20 percent to 33.33 percent reduction in the late fetal death rate.
- ❖ WIC significantly increased the head size of infants whose mothers received WIC foods during pregnancy. Head size normally reflects brain growth.
- ❖ Women who participated in WIC had longer pregnancies, leading to fewer premature births. There was a 23 percent decrease in prematurity among white women with less than a high school education and a 15 percent decrease among African-American women with less than a high school education. Premature births are one of the leading causes of death among infants.
- ❖ WIC participation resulted in a significant increase in the number of women seeking prenatal care early in pregnancy and a significant drop in the proportion of women with too few prenatal visits to a health facility. Early and adequate prenatal care is one of the major factors affecting the health of newborn infants.
- ❖ WIC participation also appears to lead to better cognitive performance. Four- and 5-year-olds whose mothers participated in WIC during pregnancy had better test scores in vocabulary. Children who participated in WIC after their first birthday had better test scores in digit memory.
- ❖ Women enrolled in WIC consumed more key nutrients such as iron, protein, calcium and vitamin C.

Pregnant women served per month

- ◆ August 1992  60,181
- ◆ August 1993  69,940

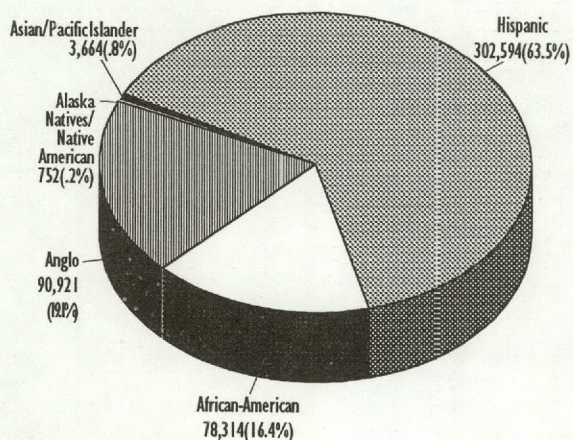
Source: August 1992 & 1993 participation reports

Babies born to WIC mothers

- ◆ Fiscal Year 1992  92,105
- ◆ Fiscal Year 1993  108,105

Source: WIC certification records

Participants by ethnic origin



Source: USDA Racial/Ethnic Group Participation, 4/92



- ❖ WIC also improved the diets of infants by increasing the average intake of iron and vitamin C and significantly diminishing the frequency of low consumption of iron and vitamins A and C. WIC improved the diets of older preschool children by increasing average consumption of iron, vitamin C, thiamine and niacin and by significantly decreasing the frequency of low intake of vitamins A and B and riboflavin.
- ❖ The greatest dietary benefits were among those people at highest risk: minority women, women with less education and children who are very poor, short, African-American or in female-headed families.
- ❖ Children participating in WIC were better immunized and more likely to have a regular source of medical care.



Clearly, WIC accomplishes the purpose for which it was designed: healthier kids and mothers. It works so well, in fact, that other programs want to capitalize on WIC's success. In FY93, the Texas Department of Health asked WIC clinics to begin providing free immunizations on the spot, rather than referring participants to other health-care providers. And WIC clinic staff have also been asked to refer participants for help with substance abuse, family violence and other issues.

WIC kids learn about the value of vitamin C by coloring their *WIC-4-U* newsletter, produced by the nutrition education section.



WIC is more than food

WIC is more than just good food . . . it is nutrition education, health assessment, breastfeeding counseling and referral to other health-care programs. But because WIC serves women and chil-

dren in the lower-income brackets, people sometimes think WIC is a welfare program.

It isn't.

Several things make WIC different from programs such as Medicaid and food stamps. One is funding. Welfare and entitlement programs are funded in such a way that every-

Funding

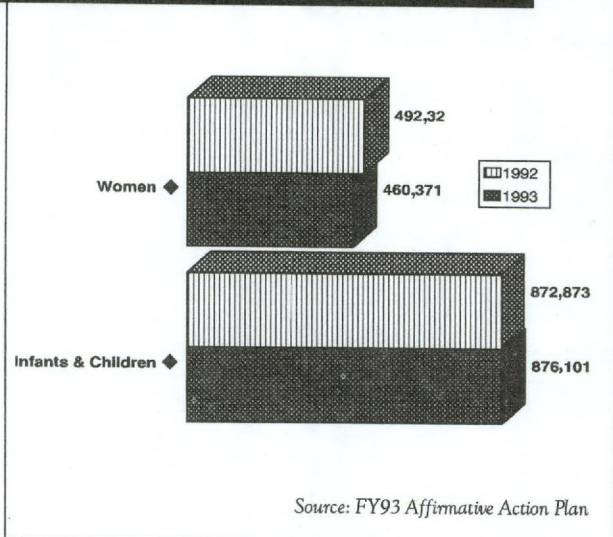
Grant Amounts	FY91	FY92	FY93
Federal Food	\$127,853,497	\$142,957,812	\$173,731,386
FY90, 91 Spent			
Forward Food	664,279	599,370	0
Federal Admin.	37,113,852	49,114,085	63,763,223
FY 91,92 Spent			
Forward Admin.	461,742	1,050,303	1,920,719
Rebates 54,198,839	68,743,707	83,657,282	
Total Federal funds	\$220,292,209	\$262,465,277	\$323,072,610
State	<u>\$5,452,204</u>	<u>\$2,965,029</u>	<u>\$2,682,413</u>
Grand Total	\$225,744,413	\$265,430,306	\$325,755,023
Expenditures	FY91	FY92	FY93
Federal Food Gross	\$177,102,083	\$206,016,590	\$249,826,143
Federal Food Net**	122,467,634	137,236,534	166,168,861
Federal Admin.	36,525,291	44,893,287	53,564,980
State Food	0	2,328,862	0
State Admin.	0	515,504	0
Cost/Participant	FY91	FY92	FY93
Food Pre-Rebate	\$37.34	\$36.83	\$38.41
Food Post-Rebate	25.82	24.67	25.56
Administration	7.70	8.03	8.24

**Food expenditures net of rebates, vendor collections, participant collections.

Source: Contracts & Financial Management Fact Sheet (4/1/94)



Potentially eligible women & children



Income eligibility

Effective 4/1/92-3/31/93

No. of people in household	Monthly income before taxes
1	\$1,075
2	\$1,454
3	\$1,843
4	\$2,213
5	\$2,592
etc.	etc.

Source: USDA WIC Policy Manual

one who qualifies and applies for benefits must be served. The WIC program receives a limited amount of money each year and must work within a budget. In Texas, approximately half of the babies born annually -- about half a million -- are eligible to receive WIC benefits. But WIC has never had funding to serve everyone eligible. In FY93, Texas WIC served around 40 percent of eligible women, infants and children, according to figures compiled monthly by the Contracts and Financial Management Division.

Another way WIC differs from entitlement programs is eligibility. Income level is only one of the qualifying factors. Women, babies and young children get into the WIC program because they have a dietary deficiency. To qualify, a woman or child must first be certified by a health-care worker as having a nutrition-related problem.

Income becomes a factor only after nutritional risk is determined. WIC serves women and children in families with incomes below 185 percent of the federally defined poverty level. Many WIC mothers work full time or part time. Because they do not qualify for food stamps or Medicaid, many moderate- or low-income families do not realize they qualify for WIC.

Another difference is the kind of help WIC provides. WIC food vouchers are not food stamps. The vouchers are like a prescription. Unlike food stamps, WIC vouchers buy only foods that increase iron, calcium, protein and vitamins A and C in the diet. WIC vouchers provide milk, eggs, real cheese, peanut butter, 100 percent fruit juice, beans, iron-fortified cereals, infant cereals and formula. These "prescriptions" are based

Continued on p. 14



Immunizations Where would you start if you wanted to immunize the most Texas children in the shortest amount of time? David R. Smith, M.D., Texas commissioner of health, saw an opportunity through the WIC program to reach about 400,000 children younger than 5.

Mothers across the state are already bringing their kids younger than 5 to their local WIC clinics on a regular basis for assessment of nutritional risk. Until the summer of 1993, WIC clinics had to refer their clients for immunizations to other health-care providers. Often, the infants and children got one or two, but not all, of the vaccines they needed, leaving them vulnerable to preventable diseases.

Dr. Smith worked with Debra Stabeno, then the WIC Bureau Chief, to bring about a system to deliver free immunizations at WIC clinics. A pilot project in El Paso in the spring of 1993 kicked off the effort. Within five months, WIC clinics around the state had delivered a total of 42,380 vaccines. The WIC initiative is just one of several efforts to achieve the commissioner's goal of having every Texas child fully immunized by age 2.



This Texas toddler is among the first to receive free immunizations at a WIC clinic.



A WIC mother receives counseling to help her successfully breastfeed her infant.

on the participant's nutritional need, not on income level.

Although it is not a welfare program, WIC works in tandem with Medicaid, food stamps and Aid to Families with Dependent Children. To save time, money and red tape, families that already qualify for these other programs do not have to go through an additional income certification for WIC.

But the most striking difference between WIC and other programs is the extensive nutrition education that takes place in WIC clinics. Women and children attend classes

every other month when they come in to receive their food vouchers.

In today's atmosphere of health-care reform, WIC has proven that it is a program that makes sense. WIC is a preventive health-care program that creates a win-win situation for taxpayers and for the women, infants and children who participate.

A WIC Appointment



What happens when a woman comes to a WIC clinic for the first time?

Of course, much depends on what her situation is. Is she the mother of a 3-year-old? Is she pregnant? Has she just delivered a baby?

The answers to these and other questions will determine what the clinic staff does. In general, however, the staff will next determine if the applicant meets the eligibility criteria.

The first step is determining if the family

lives in the clinic's service area and has an income that falls within WIC guidelines. Next, clinic staff checks for a nutritional risk. The applicant is interviewed by a nutritionist to find out what kind of diet the woman and/or child is eating. The participant's blood is tested for hematocrit or hemoglobin levels to detect anemia.

A medical and health history is also obtained. If warranted, staff will refer the applicant to other programs. If the woman is pregnant, she would be

referred to Medicaid and other county health programs so that she receives prenatal care. If the participant is a child who lacks immunizations, the WIC staff will administer the appropriate shots and set up an immunization schedule for the child.

After nutritional risk has been established and eligibility determined, the participant or parent/guardian receives nutrition counseling and a food package which meets the participant's specific needs. She then receives a set of food vouchers for two months and instructions on their use.

The outcome of this assessment will determine the kind of counseling and referrals received by the participant.

For instance, a pregnant teenager who has not gained enough weight will be counseled on proper nutrition during pregnancy. The mother of a 2-year-old who is a picky eater will be counseled on creative ways to coax the child to

WIC staffers take a blood sample from a young applicant to test for anemia.





A WIC referral story Little Ramon Lopez Jr., a South Texas baby, celebrated his first birthday in February — healthy and happy — thanks to the alertness of the staff at Project 88 in Hallettsville. ❖ When Ramon's parents brought in the 3-week-old infant for his WIC certification, public health nurse Theresa Kostelnik, R.N., noticed that the baby's head was enlarged. "The mother didn't realize that anything was wrong," said Kostelnik. No one in the infant's family had noticed the problem. Kostelnik measured the baby's head circumference to confirm her suspicion of hydrocephalus, commonly known as "water on the brain." ❖ "We don't normally do head circumferences," said Rosa Carillo, director of Project 88, noting that the Hallettsville WIC clinic is part of an integrated city clinic. She praised the staff for being alert to a serious problem that needed further referral. ❖ Kostelnik referred the family to a medical doctor. Ramon was rushed to Santa Rosa Hospital in San Antonio. Without treatment, he could have suffered permanent damage. ❖ This story had a happy ending because the staff was concerned about the infant's overall well-being, not just about his WIC certification.

Texas WIC News, June 1993

eat from all food groups. A breastfeeding mother with sore nipples would be counseled on proper positioning while nursing.

Every two months, the participant will return to her clinic to attend a nutrition education class and receive her next packet of food vouchers. About every six months, the participant is recertified for nutritional risk and receives additional individual nutrition counseling.

At the semi-annual recertification visit, children are weighed and measured to determine if they are growing enough. The participant's blood is again tested for anemia. A child's immunization schedule is checked. The participant's diet is reviewed by a nutritionist.

In general, this two-month and six-month cycle continues until the participant is no longer eligible for WIC.

Program Update: FY92 & FY93



The WIC Divisions

- ❖ Nutrition,
Education,
Outreach
& Training
- ❖ Local Agency
& Vendor
Management
- ❖ Contracts
& Financial
Management
- ❖ Automation

According to a 1993 USDA study, WIC participation resulted in a significant increase in the number of women seeking prenatal care early in pregnancy. Early and adequate prenatal care is one of the major factors affecting the health of newborn infants.



Nutrition, Education, Outreach & Training



When a woman comes into the WIC clinic to receive her benefits, she attends a nutrition education class. She may also receive one-on-one nutrition counseling for herself, her baby or her child.

Nutrition education is the aspect of the WIC program that sets it apart from other programs. Federal regulations require that each state spend about 17 percent of its administrative budget on nutrition education.

Participants are receiving WIC benefits because they are found to have a nutritional risk, such as anemia or an inadequate diet. But it is not enough just to give people food. WIC works to help women understand how diet can improve their health and the health of their children. WIC is a *supplemental* food program. Participants need to know how WIC foods fit into a healthy diet.

The Nutrition, Education, Outreach and Training Division

provides participant education materials and staff development to local agencies. Not only is nutrition education for WIC participants important, but keeping WIC program staff updated on health and nutrition research is also vital. This division is also responsible for marketing and outreach efforts.

Another important task is coordinating WIC education efforts with other Department of Health programs that work in the area of nutrition and maternal and child health. WIC often works with other Health Department divisions in joint efforts to promote good health among children and pregnant women.

The division accomplishes these tasks through six sections: Nutrition Education, Research, Breastfeeding Promotion, Training, Outreach and Production.

The Nutrition Education section performs research and develops nutrition education

materials that will be used by participants in their local clinics. The education materials include information for nutrition classes, videos, slide shows and pamphlets.

Nutritionists in this section also obtain participant feedback through surveys, focus groups and reports from local-agency staff. This feedback helps WIC design materials that will be well received by the women and children. For example, the WIC program tailors lessons for pregnant women, teenagers, children and breastfeeding mothers. Most materials are available in English and Spanish—and often other languages, such as Vietnamese and German.

The Research section standardizes the nutrition information provided by the state office. This section also researches policy and new products, networks with other health and nutrition organizations and oversees the immunization initiative.



The Training section focuses on developing educational materials for staff in local agencies and personnel in food outlets. This section provides training in both nutrition and operations. The goal is to help local agencies train their staff to deliver the best possible service to WIC participants. The training section also assists grocers in training checkout clerks and other staff to process WIC food vouchers.

In 1990, USDA handed down a policy that WIC clinics would promote breastfeeding as the optimum way to nourish infants. Promoting breastfeeding has become a major focus of nutrition education in WIC. The staff in the Breastfeeding Promotion section assist local agencies in encouraging WIC participants to breastfeed. Breastfeeding has been found to promote better infant health, both in nutrition and immunization. And breastfeeding produces a stronger




bond between the infant and mother.


The Outreach staff develops materials to help publicize the WIC program. Since WIC is a growing program, outreach is vital to increase the number of Texans served. This section also produces a nationally recognized monthly newsletter for WIC staff around the state.

The Production section works with all other sections to produce videos, slide shows and publications. Most local WIC clinics have TVs and VCRs in their nutrition education

Across the state, WIC staffers present nutrition-education lessons each time women come to the clinics.

Breastfeeding women served

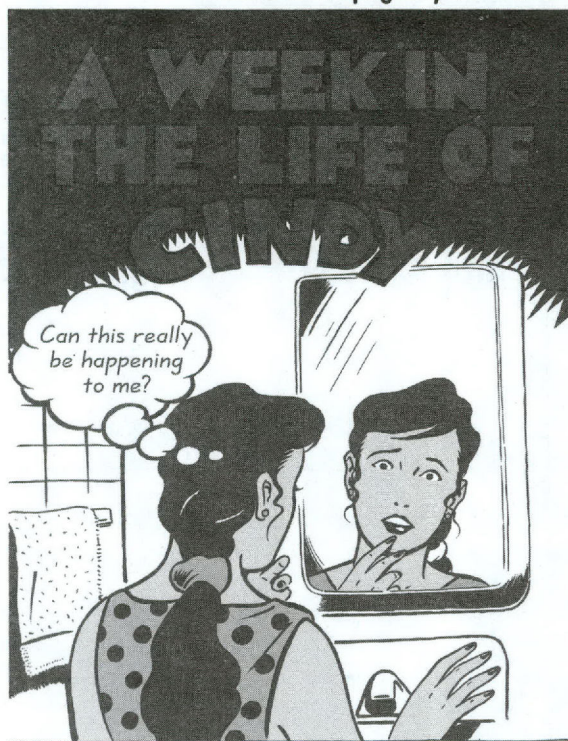
◆ August 1992  12,835/10.79%

◆ August 1993  17,765/12.68%

Source: August 1992 and 1993 participation reports.



A Week in the Life of Cindy addresses teen pregnancy and nutrition.



Texas Department of Health
Bureau of WIC Nutrition
Illustrations by
A. J. Garces

classrooms. Videos play an important part in nutrition education and other training efforts. WIC videos are often used by other divisions of the Health Department and other state agencies.

FY92-93 Program Highlights Nutrition, Education, Outreach & Training

Nutrition Education

- ❖ Conducted more than 30 focus groups with WIC participants to obtain feedback to help staff prepare nutrition education materials that are more effective and that meet the needs of the participants. For instance, based on information obtained from pregnant teenagers, the staff produced a comic book designed to help pregnant

teens eat right and get prenatal care.

- ❖ Revised old lessons and wrote new lessons.

- ❖ Arranged for local agencies to receive data on participants so local staff can focus nutrition education classes to meet the needs of local participants.

- ❖ Began working more with the county extension services; received two joint grants. One grant provides staff training. The second grant funds an interactive video for waiting rooms in WIC clinics.

- ❖ Created nutrition fact sheets to accompany lessons so that local staff would be better informed when conducting nutrition education classes.

- ❖ Began conducting one-on-one interviews with the homeless to better understand how to provide WIC services to this group.

- ❖ Worked with the Production section to create nutrition education videos for local-agency classrooms.

Research

- ❖ Assisted with implementing the WIC immunization initiative.

- ❖ Began developing a paraprofessional training program for local WIC staff. The purpose of the training is to define roles, upgrade the quality and consistency of service and provide a career track for paraprofessional employees.

- ❖ Staff served on a national committee that is developing ethnic-food WIC packages.

- ❖ Established internships with Central Texas universities in order to attract potential nutritionists to the WIC program.

Outreach

- ❖ Received USDA funding for a marketing study designed to gather information from participants and local-agency staff to improve delivery of WIC services. The study began in FY93. The study and implementation will continue through FY94.

- ❖ Hosted meeting

for large agencies to address their outreach and support needs for expansion.

- ❖ Sponsored the "WIC: Grow for It" contest. Seventy WIC projects participated in a three-month contest to increase caseload.

- ❖ Sent letters to local health department directors from TDH Commissioner David R. Smith, M.D., letting them know about growth possibilities for the WIC program and asking for their support.

- ❖ Sent letters, signed by Gov. Ann Richards, to county commissioners and mayors informing them about WIC in their city/county or region and asking for their support in helping WIC to grow.

- ❖ Provided public-service announcements (PSAs) to all Texas television stations; provided camera-ready newspaper advertisements to all WIC projects.

- ❖ Purchased television time for WIC PSAs to support expansion efforts. The ads aired

from mid-May to mid-June 1993 in Houston, and for the month of June 1993 in Dallas on prime time and broadcasts during soap opera times.

- ❖ Mailed more than 1.3 million fliers through Department of Human Services to newly certified Medicaid mothers (average 25,000 per week).

- ❖ Publicized WIC's new service of providing immunizations with a video news release on beginning immunizations at WIC.

Also provided a statewide news release and new immunization fliers.

- ❖ Provided new materials in English and Spanish for clinics including posters, brochures, banners and coloring sheets for children.





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Partners in Growth

In September 1992, the Nutrition, Education, Outreach and Training Division hosted the Partners in Growth conference, attended by WIC clinic staff from five states. The conference, held in El Paso, offered 23 training sessions on topics ranging from Stephen Covey's Seven Habits of Highly Successful People, to using humor in the workplace, to the power of social marketing. The Production section audiotaped and videotaped the sessions and made them available to conference attendees and staff who were unable to attend. Information from the conference was also made available through articles on the sessions published in the *Texas WIC News*.

.....

- ❖ Provided VISTA training on the WIC program for volunteers doing community outreach for immunizations and WIC in mid-1993.

- ❖ Sent promotional postcards to all Texas family practitioners, pediatricians and obstetricians thanking them for referring pregnant women and young children to the WIC program, and encouraging them to continue referrals.

- ❖ Produced 22 issues of *Texas WIC News*, a monthly newsletter to inform and support local-agency staff.

- ❖ Produced referral sheets and directories for all WIC clinics to ease local referrals to Medicaid, Food Stamps, AFDC and Child Support Enforcement.

- ❖ Attended or exhibited at 17 statewide conferences to present WIC information to referral groups and provide information about how WIC can work with their organization.

- ❖ Publicized the 1-800 WIC information

line, which averages about 3,500 callers per month.

Training

- ❖ Developed and distributed three self-paced nutrition-based training modules for local-agency staff. The modules covered basic nutrition, infant nutrition and preschool nutrition.

- ❖ Provided vendor training for grocery personnel around the state on a regular basis.

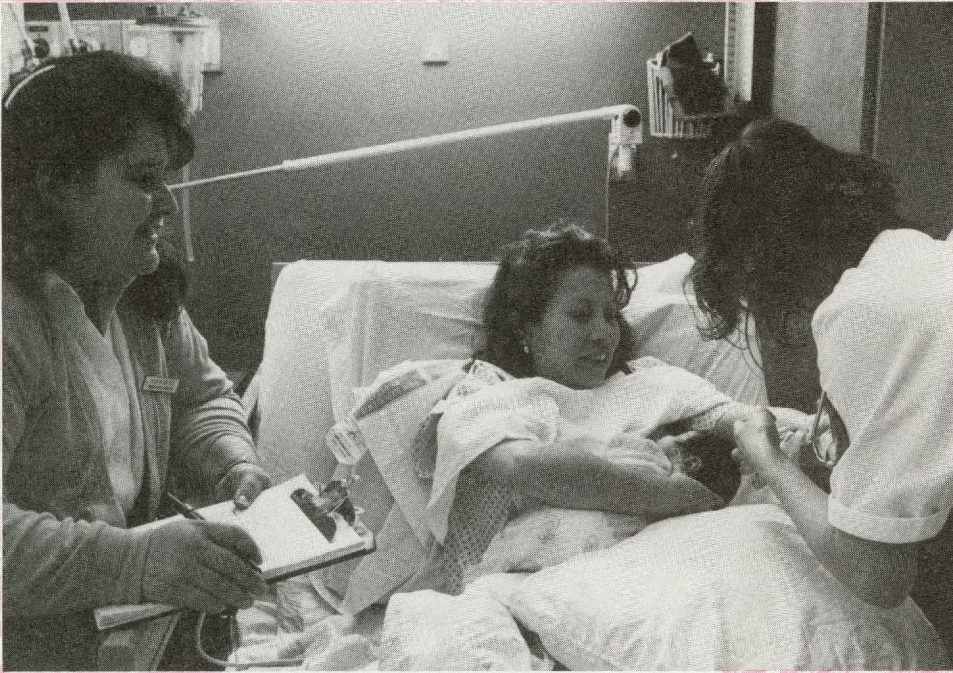
- ❖ Provided civil rights training for state staff.

- ❖ Initiated a new orientation for local-agency directors, offered semi-annually.

- ❖ Established a training program for "competent professional authority" personnel (health professionals who work with WIC participants to determine eligibility, prescribe food packages and provide referrals to other health-care organizations.)

- ❖ Working with the Production section,

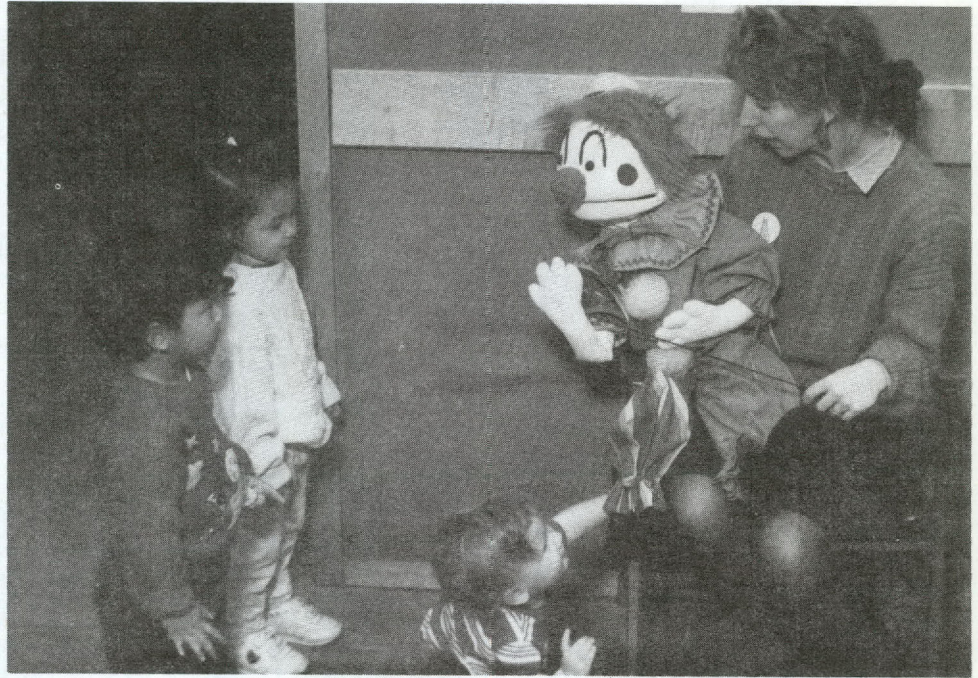
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A WIC mom herself, Julia Valdez, left, assists a new mother with nursing her newborn.

WIC mom honored by community Julia Valdez, a WIC participant at Austin's Project I, is admired by many people, including her three young daughters, and now she's getting some richly deserved recognition. ❖ She won a Five Who Care award from an Austin TV station, KVUE, and was featured in an annual program honoring local volunteers. ❖ At Project I, Valdez was trained as a breastfeeding peer counselor in the program's first class. "She's a good role model for other participants," says Sherree Scudder, breastfeeding coordinator. ❖ "She's intelligent and professional. She's involved in training our new peer counselors." ❖ As a peer counselor, Valdez stays busy at Austin's Brackenridge Hospital and Seton Medical Center visiting new mothers and encouraging them to breastfeed their infants. She also volunteers at El Buen Samaritano Episcopal Center, feeding the homeless, collecting clothing for the needy and advising clients on nutrition and health. ❖ Valdez also stays busy as a student. "I'm continuing my schooling," says Valdez, who's enrolled in the nursing program at Austin Community College. ❖ A former nurse's aide, she earned her G.E.D. recently. "I plan to get my LV.N., then work for about a year and go back and get my R.N.," she says. "I'm taking a pretty hard course now in anatomy and physiology." Her grade point average is 3.25. ❖ Valdez's plans for the future? "I'd like to work on the maternity floor," she says.

Texas WIC News, March 1993



Chuckles the Clown helps children learn good nutrition. He visits nutrition education classes at WIC clinics and appears in educational videos for kids.

produced a video and manual for local-agency staff instructing them in correct procedures for measuring hematocrit and hemoglobin and another video and manual explaining correct procedures for weighing and measuring participants.

Breastfeeding Promotion

- ❖ Developed a breastfeeding-educator training program for local-agency staff.

- ❖ Provided local agencies with educational videos, posters

and PSAs to help field staff educate themselves and participants on the advantages of breastfeeding.

- ❖ Developed a breastfeeding peer counselor program and training. This program enables WIC mothers who have successfully breastfed an infant to counsel new WIC mothers to achieve the same success. During the biennium, 23 local agencies began breastfeeding peer counselor programs.

- ❖ Planned and

coordinated the Southwestern Region Breastfeeding Conference.

- ❖ Conducted breastfeeding education and practicum programs for field staff around the state.

- ❖ Developed and conducted a breastfeeding peer counselor "train-the-trainer" conference.

- ❖ Coordinated World Breastfeeding Day activities.

- ❖ Printed a door hanger for women to use when pumping breastmilk in the work-



place. The door hanger is placed on the door-knob to alert fellow employees that the mother needs privacy.

Developed the National Breastfeeding MediaWatch, which creates a system for professionals and individuals to monitor the positive and negative portrayals of breastfeeding in print, radio and television.

Production

Produced a number of videos for nutrition education and training. For example, two videos featuring Chuckles the Clown help children learn about healthy snacks and how to take care of their teeth. A video and manual for training local staff in the correct procedures for measuring hematocrit and hemoglobin were also produced. Another video created during the biennium showed correct procedures for weighing and measuring participants.

Produced televi-

sion PSAs. When WIC began providing immunizations in local clinics in FY93, the Production section created two PSAs on this topic. A video news release announcing WIC's new immunization services was also distributed. The section also produced PSAs to promote breastfeeding and to encourage lower-income working women to apply for WIC benefits.

Produced several slide/tape shows on topics such as how to use WIC cards and how to change types of formula.

Assisted with media relations by writing press releases.



Local Agency & Vendor Management



Making sure that local agencies and local grocery stores deliver WIC services properly is a big job. With about 2,300 grocery stores and about 600 local clinics providing these services to more than half a million Texas women and children every month, it is important to have an effective system of monitoring what is happening at the local level. The Local Agency and Vendor Management Division handles this task.

This division is charged with ensuring that WIC participants are receiving proper service at local clinics and that food outlets are providing food to participants in the correct way. In addition, Local Agency and Vendor Management staffers answer questions, handle complaints and coordinate the development of policies and procedures for the bureau. Two sections, Compliance Management and Information and Response Management, perform these tasks.

Information & Response Management

This section serves as a communications conduit between the state agency and its contracted local agencies and as a contact for our WIC applicants and participants as well as the general public. IRM liaison staff provide technical assistance to local-agency staff who have policy or procedure questions and provide general information about the program to any inquiring person. These same staff members accept complaints from applicants or participants and then work together with the appropriate local-agency staff to resolve these complaints as quickly as possible. USDA regional staff commented last year that Texas WIC had the best system to respond to complaints in the five-state region.

In addition, IRM is responsible for the operation of the state agency's 1-800 line. About 3,500 calls per month are received

from callers statewide who are interested in applying for WIC services. The IRM operators do preliminary screening to ensure the caller is categorically eligible and then refer the caller to the clinic in their area.

Another responsibility of IRM is coordination with the other WIC divisions and the bureau chief for the preparation of the annual state plan of operations. Each state agency desiring to administer the WIC program must submit a state plan annually to USDA. The state plan must describe the state's objectives and procedures for all aspects of the WIC program administration for the coming fiscal year. The plan must be approved annually in order for Texas WIC to receive its federal funding.

The development or revision of policies and procedures is also coordinated by this section. IRM ensures that all policies are reviewed by the appropriate state-agency staff prior to being sent to USDA for

approval. IRM also ensures that policies are approved by USDA and subsequently provided to each local agency for implementation.

Compliance Management

This section consists of three units with different, but often overlapping, responsibilities of compliance monitoring.

The Vendor Compliance unit monitors WIC-authorized grocery vendors statewide for compliance with policies and procedures for the proper redemption of WIC food cards and for proper treatment of WIC participants. The vendor-compliance staff are the only people in the state agency who regularly have face-to-face contact with WIC grocery vendors in all parts of the state. They frequently help vendors with on-the-spot training and help grocery-store personnel make immediate changes to correct their procedures.

The Vendor Monitoring unit visits certain



Grocery clerk checks a WIC participant's I.D. card before processing her food cards.

high-risk vendors in each local project area. The visit is based on the vendor's pricing structure, volume, previous history of abuse or any complaints. Selected vendors are then checked using any or all of the following methods:

- ❖ on-site evaluation reviews.
- ❖ covert compliance buys.
- ❖ invoice audit.

The evaluation review, which is most commonly used, is a relatively simple open visit in which the moni-

tor meets with the store management, announces his or her intent to do a regular price review and checks to see if there are any problems or training questions that could be answered on the spot. The monitor then proceeds to go through the store, writing down the current shelf prices on all authorized WIC items. If there are WIC participants in the store, they are observed during checkout to ascertain that checkers are using proper card-redemption procedures. The monitor then does an exit



conference with the manager in which he or she reviews any WIC food cards on hand and discusses any problems that may have been noted during the visit.

The monitor may accumulate 20 to 30 of these reviews during a week-long trip. Upon return to the office, the monitor reviews the most current WIC vouchers submitted by the vendor during the past month or two. Then, an intensive review of all the vouchers is done, noting any discrepancies, such as a voucher priced higher than the shelf price, no countersignature, missing data, etc. When the voucher review is complete, the monitor writes to the store informing the vendor of the outcome of the review, reducing a current claim for any discrepancies noted. A discrepancy-free voucher audit earns the vendor a "well done" letter.

If either the review or the voucher audit reveals any flat-rate pricing or shortage of stock,

the monitor may request the vendor's purchase invoices for a whole year. These are studied to substantiate that the vendor's redemption matches the vendor's purchases of authorized WIC foods for the same time period. If the vendor's invoices fail to show sufficient purchase of authorized WIC foods to match the store's redemption of food vouchers, the vendor is billed for the difference and disqualified for a period of up to three years. If the vendor refuses to produce the requested invoices, the store is terminated from the program.

The third monitoring method, undercover "compliance purchases" with monitoring staff posing as WIC participants, is used primarily for vendors who have had complaints filed against them or who have multiple high-risk factors or other identifications of specific vendor abuse. If the store follows correct procedures and sells the correct foods at the marked

shelf prices, there is no problem. But if complaints of overpricing or wrong issuance are substantiated by the compliance buy, the vendor may be fined, disqualified from participation in WIC for up to three years or, in some cases, have their WIC contract immediately terminated.

The vendor-compliance unit is also responsible for monitoring the WIC-authorized farmer's markets during the short season when WIC farmers' market coupons are available to participants.

Vendor monitors perform on-site reviews of farm products and voucher-redemption procedures and conduct compliance buys to test if the farmers know the proper procedures. Invoice audits are not conducted on farmers' markets. Farmers can be suspended from participation in WIC if they sell unauthorized products or if they charge the state more for a product than they charge the general public.



Vendor-compliance specialists also record, track and follow up on all vendor-related complaints. These complaints frequently result in on-site reviews or compliance buys on individual vendors. Even if the store cannot be visited immediately, the vendor is notified by phone or in writing, calling attention to the complaint and requesting that it be resolved.

FY92-93 Program Highlights Local Agency & Vendor Management

Vendor Monitoring

❖ During FY92, 572 stores were monitored with 277 compliance buys and 346 on-site reviews, which precipitated 60 invoice audits.

❖ During FY93, 600 stores were moni-

tored with 39 compliance buys and 561 on-site reviews, which precipitated 57 invoice audits.

Vendor Relations

A third unit, the Vendor Relations unit, acts as the contracting and price-containment unit of the division. Its staffers answer questions from grocers, local agencies and participants about the WIC program.

This unit is responsible for contracting with 2,300-plus vendors on a semi-annual and annual basis. The unit receives and logs requests from grocers for WIC information packets and evaluations, forwards new-store evaluation requests to local agencies, processes evaluations and gives approval for grocery stores to become WIC vendors.

Vendor-relations staffers provide information on average-unit cost comparison to vendors in order for them to stay

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1991 & 1992 Projects of the Year The two projects that were recognized as projects of the year during the biennium exemplify the challenges and accomplishments of local agencies. Under the direction of Pat Smithwick, Project 27 (South Plains Community Action Agency), which serves 10 counties around Lubbock, was recognized for 1991. Staff at this medium-sized project in a primarily rural area covered 10,000 square miles using traveling teams, outreach and a good referral system. Under the direction of Vickie Bowie, Project 48 (Harris County Health Department) in Houston was named 1992 Project of the Year. Using teamwork and a dedication to maintaining quality service, the project expanded its participant base by 60 percent in one year.

Project 48 Director Vickie Bowie, left, receives the 1992 Project of the Year award from TDH Commissioner of Health David R. Smith, M.D., and WIC Bureau Chief Debra Stabeno.





in compliance with WIC policies. This unit assists vendors by providing the necessary vouchers, by submitting WIC claims and by processing voucher-trace requests to determine the status of vendor claims. This unit is also responsible for updating the mainframe and computer systems when needed in order to efficiently process vendor claims.

Local Agency Compliance

The Local Agency Compliance unit is composed of teams which include a clinic monitor and a monitor for fiscal food delivery. These teams communicate and coordinate with other WIC divisions to develop and implement state and federal policies and procedures pertinent to local agencies. In order to ensure compliance to these requirements, teams travel to local agencies to conduct coordinated on-site reviews.

Concerns addressed at the local

agencies are standards of administration, nutrition education and clinical operations, adherence to financial policies and procedures and accountability for food delivery. Local agencies are reviewed once in a period of two years. The monitoring process encompasses eight components: management evaluation, certification, nutrition education, immunization, civil-rights compliance, accountability, financial management systems and food-delivery systems.

Reviews are scheduled on a rotating basis to ensure that each local agency is seen once every two years. Agencies are contacted by a monitor to inform them of the review, and arrangements are made for an entrance conference. A confirmation letter is sent detailing all the arrangements.

At the local agency, a lead monitor will discuss, in detail, the areas to be covered in the review with staff involved in the clinical and fiscal aspects of the agency.

Once this is accomplished, the clinical monitor and the fiscal monitor will proceed to review his or her area.

During the on-site review, all areas of the monitoring components are reviewed, and technical assistance is provided where needed.

The clinical monitor reviews all policies and procedures pertaining to clinical operations and plays an active part at the clinic by sitting in on nutrition education classes and monitoring and observing the certification and immunization process. At a minimum, 20 percent of the sites are reviewed and each working team is observed at each project.

The fiscal monitor conducts an audit of the financial billings and required reports to ensure compliance with policies and procedures. All backup documentation is verified, and areas of noncompliance are discussed and clarified. In the food-delivery area, an inventory of equip-

Continued on p. 32



Expansion challenge In the spring of 1993, Texas WIC challenged California WIC to a competition to see which state would have the largest percentage increase in participants during May. Although California dropped out of the competition, local agencies in Texas competed for prizes and additional funding by boosting enrollment in WIC.

They offered Saturday clinics, special events and evening hours. They went to the malls in search of eligible WIC participants. State employees joined in the effort by traveling to local clinics to help with the promotion.

Texas WIC added 12,385 participants in May 1993—an overall increase of 6.64 percent. Project 73 (San Antonio's Centro del Barrio) led with a 7.91 percent increase, followed by Project 7 (Dallas) with 7.85 percent. Project 46 (Brazoria County) came in in third place with 7.48 percent.



In May 1993, 70 of the 76 Texas WIC local agencies participated in the 'WIC: Grow for It' contest to expand the number of WIC participants.



ment, sample formula and food cards is conducted. Automation duties are verified, and procedures for food-card issuance are observed.

At the completion of all monitoring duties, the clinical and fiscal monitors compile the results of the review. The results are presented at the exit conference at which each monitor discusses his or her section, reviews areas of non-compliance, gives recommendations for improvement and points out exceptional qualities of their project. The local-agency staff is informed that a written report stating all findings, recommendations and commendations will follow at a later date.

After the local agency receives the report, it has a period of 30 days in which to respond. If the response is adequate to resolve all findings, written notification is submitted to the local agency that the review is closed. If the response is not adequate, an additional pe-

riod of 15 working days is granted for completion.

In addition to regular monitoring reviews, this section conducts follow-up reviews as needed, technical-assistance visits and covert investigations. Clinical monitors also assist local agencies during staff shortages or periods of transition.

Since the onset of the Local Agency and Vendor Management Division, the local-agency compliance area has revised all the work papers and report format. Monitors are conducting a more in-depth review and offering technical assistance where required. Monitors are also making an effort to change the image of local-agency monitoring reviews from a negative experience to a positive one, and to help motivate local agencies toward more efficient services.

All required clinical and fiscal reviews for each fiscal year have been conducted on schedule with a follow-

up review, as needed, conducted within a reasonable time after the initial review.

Local Agency Compliance

❖ Monitors completed 33 coordinated monitoring reviews during the biennium. Clinical monitors conducted three special investigations. Fiscal follow-up reviews were conducted at two local agencies.

❖ Monitors completed 42 coordinated monitoring reviews. Clinical monitors conducted two covert investigations and assisted at four clinics. Fiscal follow-up reviews were conducted at three local agencies, and clinical follow-up reviews were conducted at two local agencies.

❖ During FY94, the local-agency compliance section is scheduled to perform 38 monitoring reviews.

Contracts & Financial Management



When a WIC family visits its local grocery store to exchange food cards for milk, eggs and other WIC foods, a chain reaction of paperwork is set off. The grocer gathers the food vouchers into bundles and submits a claim to the state WIC office. Every month, grocers bundle more than 3 million WIC food cards into 16,000 claims totaling \$22 million.

The Contracts and Financial Management

Division is the part of WIC that processes this paperwork and performs many other tasks related to the business operation of the program. This section prepares the monthly, quarterly and annual reports required by USDA and the Texas Department of Health.

The bureau enters into contracts with more than 2,300 food outlets in Texas. In addition to handling the claims of the food ven-

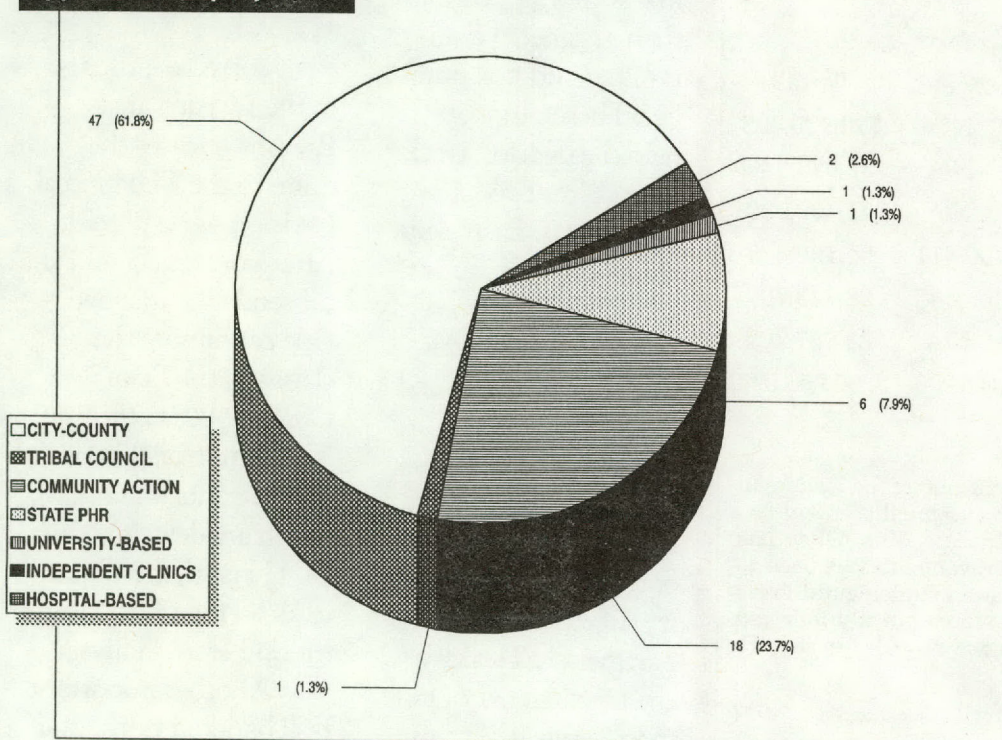
dors, this division also is responsible for establishing contracts with the 76 local agencies around the state. These may be city, county or private health-care providers. Each local agency signs a contract that includes the caseload WIC expects the agency to serve. The agency is paid a fee on a sliding scale for the number of participants served. Each month, Contracts and Financial Management processes claims from the local agencies for payment for serving WIC participants.

Contracts and Financial Management also handles claims for reimbursement from food vendors.

The division is divided into three sections — Contracts and Administration, Claims Processing and the Funds Management and Reporting section.

Contracts and Administration provides support services for the bureau. Visitors and incoming phone calls are processed

Types of WIC projects





through the Administration section. Administration also oversees travel requests and claims. The administration section houses the centralized files for the whole bureau and initiates contracts with the local agencies.

The Claims Processing section handles the food vouchers that have been redeemed by WIC participants at Texas grocery stores. After the claims are pro-

cessed, payment to the grocery store is made. The section also processes claims from the 76 local agencies.

The Incoming Claims, Error Corrections and Payruns section is a very labor-intensive operation because each of the several million food vouchers used by WIC participants must be processed here each month. These claims are time-sensitive because stores have submission deadlines. Incoming claims are first sorted by postmark, then assigned a claim number and box number. These numbers help the division track each claim throughout the process. Each claim is also checked against the contract file to verify that the store submitting the claim is a valid WIC contractor.

After these steps have been taken, the boxed claims go to data entry at a computer facility shared by the Department of Health and the Department of Human Services. At this

point, each claim is entered into the WIC computerized system. This system is programmed to analyze the claims. Claims that are correct are sent to the Payruns staff. If the claim is out of balance, the computer will make certain adjustments automatically. For instance, the computer will reduce a claim that contains an overcharge. If a claim is significantly out of balance, the computer will kick it out. These problem claims are handled by Error Corrections staff.

When claims have been corrected, they go to the Payruns area. Payruns releases the claim to the TDH Fiscal Division to be posted. After posting, TDH Fiscal sends the magnetic tape containing the claims to the State Comptroller's office. The comptroller issues the warrants (or checks), which are delivered to TDH Fiscal, then back to WIC for a final verification before mailing.

Another important task handled by the staff

Summary of rebates

FY	Infant formula	Infant cereal	Total
'88	\$10,920,323	N/A	\$10,920,323
'89	32,073,346	N/A	32,073,346
'90	41,402,030	N/A	41,402,030
'91	53,798,228	\$400,611	54,198,839
'92	67,938,219	805,488	68,743,707
'93	83,657,282	N/A	83,657,282
Total	\$289,789,428	\$1,206,099	\$290,995,527

The Texas WIC Program was among the leaders in pioneering the competitive procurement of infant formula and cereal products. To date, this policy has generated **\$290.9 million** in revenue that is used to provide nutrition education and supplemental foods for WIC participants. Other states quickly followed Texas' lead, and USDA amended its rules to require this method of procurement.

Source: Contracts & Financial Management Fact Sheet, 5/1/94

in this area is food-voucher reconciliation. Federal regulations require that every food voucher issued be accounted for and matched with the local agency's inventory records. The Reconciliation staff also compare the number of redeemed food vouchers against the number issued. The redemption rate (the difference between the number issued and the number redeemed) is always less than 100 percent because WIC participants do not always take all the food on their vouchers. Fluid milk has the highest redemption rate, evaporated milk the lowest.

The third major section of the Contracts and Financial Management Division is the Funds Management and Reporting section. Staff in this area perform several important tasks for the bureau. The section is divided into these two units: the Reporting, Caseload Management and Budgets area and

Clinic Management and Equipment Inventory.

The Reporting, Caseload Management and Budgets unit prepares all the monthly, quarterly and annual reports required by USDA and state government. Texas WIC meets the USDA requirement that the bureau be within one percent of projecting what we spend. This section also determines the number of caseload slots required by all local agencies during the fiscal year and directs distribution of new slots when necessary.

In this same section, food-voucher I.D., inventories and rebate billing tasks are performed. This unit orders the millions of food vouchers and the hundreds of thousands of participant I.D. cards used in Texas WIC throughout the year. These orders literally amount to truckloads of paper forms. The unit also handles the infant-formula and infant-cereal rebate billing. This is the part of the



WIC participants can now get the good nutrition of fresh fruits and vegetables in the summer months.

Farmers' Market In 1989, the Texas WIC Program received funding from USDA for a demonstration project to show that WIC could work with farmers' markets. The purpose of the project was to add fresh fruits and vegetables to the diet of WIC families during the summer months.

The project proved successful, and USDA has approved funding for farmers' market programs. The idea has since been adopted by other states. In Texas, every WIC clinic that has a farmers' market in its community issues vouchers which participants can redeem for fruits and vegetables.

In FY93, the Texas farmers' market program federal grant totaled \$700,286, plus \$300,122 in state matching funds.



program that contracts with a single food manufacturer to provide a WIC food. Since this amounts to a huge contract, the manufacturer gives the WIC program a rebate on the product. Texas WIC recovers more than \$80 million annually through the rebate program, money that is used for serving more women and children.

The Purchasing and Service Contract unit in this section provides a centralized purchasing function for the entire bureau. The Equipment Inventory section handles equipment inventory of any equipment costing \$500 or more. This unit receives the material, assigns serial numbers and sends it to the WIC office or local agency for whom it was purchased.

Under the Clinic Management section, two program specialists serve as consultants for local agencies in the use of patient-flow analysis. Patient-flow analysis is a computer system which documents personnel

utilization and the flow of participants through clinics. It is used to identify bottlenecks and to decrease the amount of time participants wait for services. It enables the clinic to serve more participants more efficiently, creating a more pleasant atmosphere for both clients and staff.

FY92-93 Program Highlights Contracts & Financial Management

❖ Mandatory double issuance caused huge growth during this year. Double issuance is the policy of having participants come into clinics every other month to receive nutrition education and two months' issuance of food cards.

❖ Using magnetic tape for submitting grocer claims speeded up claims processing.

❖ Representatives from all 76 local agen-

cies have participated in patient-flow analysis training and have implemented changes to improve the efficiency of clinic operations.

❖ In the summer of 1993, WIC clinics began offering free immunizations.

❖ Ross Laboratories won the infant-formula bid for FY94. This means WIC now has rebates on all types of formula (powdered, concentrated, soy-based and milk-based).

Automation

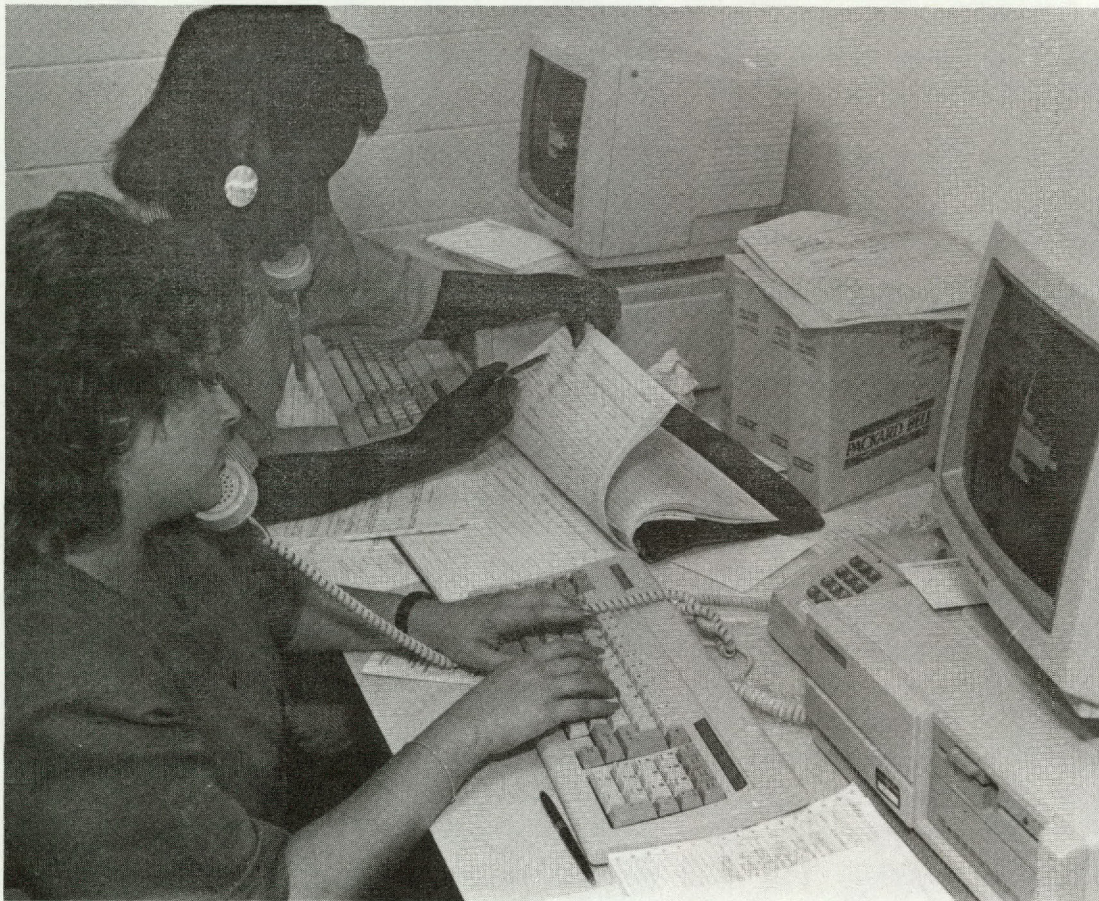


To a program like WIC, computers offer the opportunity to cut costs, to share information among local agencies and other state agencies and to process claims more efficiently. One of the most important goals of the WIC program is to automate as much of the work as possible. The Automation Division handles the task of managing

and supporting the existing computer system and of developing a new automated system for local agencies.

The division supports both state staff and local agencies around the state. Staff in this division work with the other three WIC divisions to help streamline and lower the cost of processing information. For in-

Local-agency staff are able to access information from the state office through the automation system.





stance, staff in this division are developing a new voucher system for WIC participants. The new system will be faster and easier to use for participants, local-agency staff and grocery stores. Four main sections perform the automation duties. They are Systems Development, System Training and Support, Network Management and Database Administration.

The Systems Development section creates software. WIC is currently involved in a five-year automation project which will make the WIC program more convenient for participants, reduce stress for local-agency staff, speed up grocery checkout and provide statistics that will help improve the program.

The System Training and Support section is responsible for training all state employees on computers. These staffers conduct classes in areas such as word processing, spreadsheets and electronic mail. Trainers in this section

also travel to local agencies to conduct software training.

The Network Management section develops and maintains the computer networks used by state staff and those that connect WIC with local agencies around the state. By using computers that are networked, WIC saves money on software because staff can share programs and files. On a statewide basis, the network allows WIC to share information with local agencies.

The Database Administration section's primary function is to centralize all WIC data into an easily maintainable and accessible system. This includes design and approval of all WIC data bases and administering the systems and staff's accessing that data to ensure consistency between systems and accuracy of the data.

This developing system will enable WIC to analyze information on participants and how they use their food

vouchers. The new software will also provide information on vendors. Staffers in this area work on finding the best way to structure files and information. They solve problems in order to provide staff with access to information while maintaining a secure computer system.

Commendations



USDA's Food and Nutrition Service conducted a management evaluation on the Texas WIC Program at the end of FY93. Among the matters discussed in USDA's report were the following commendations:

tool in ensuring that mothers consider beginning or continuing to breastfeed their babies.

- ❖ Developing and adhering to its system for allocating Farmers' Market Nutrition Program funds.

- ❖ Significantly increasing caseload. Three new local agencies and 43 new clinic sites had been or were scheduled to be added this year. As an incentive to expand caseload, local agencies were given an increase in their sliding-scale reimbursement.

- ❖ Initiatives undertaken to enhance training, particularly of local staff, and for the training manuals which are being developed for state and local staff.

- ❖ The February 1993 issue of *Texas WIC News*, which was an exceptionally useful document providing recent civil-rights information.

- ❖ Videos developed by the state which now include captioning for hearing-impaired individuals.

- ❖ Producing all materials in both English and Spanish to fit the needs of participants.

The breastfeeding peer counselor program was selected for commendation by USDA.



- ❖ Targeting benefits to high-risk participants by providing administrative funding incentives to local agencies.

- ❖ Spending approximately 96 percent of its food funds in FY93.

- ❖ The success of the breastfeeding peer counselor program. USDA found that peer counseling was a good

Continued on p. 40



❖ Development of nutrition education lesson plans and accompanying materials such as Chuckles the Clown videos and other nutrition education videos.

The Local Agency & Vendor Management Division was commended for:

❖ Vendor-training efforts of the Compliance Management section and for the excellent informational materials and handbooks provided to vendors.

❖ Vendor-monitoring efforts of the Training section, especially in the identification and monitoring of high-risk vendors. The actions to collect monies from vendors for overcharges and to disqualify vendors for program abuse are noteworthy.

❖ Conscientiousness of the Information and Referral Management (IRM) staff in assisting clients and local-agency staff by satisfactorily and expeditiously responding to

issues. IRM is providing a valuable service to all levels of the program.

Two Dallas clinics commended for:

Lancaster-Kiest clinic

(Project 7, Dallas)

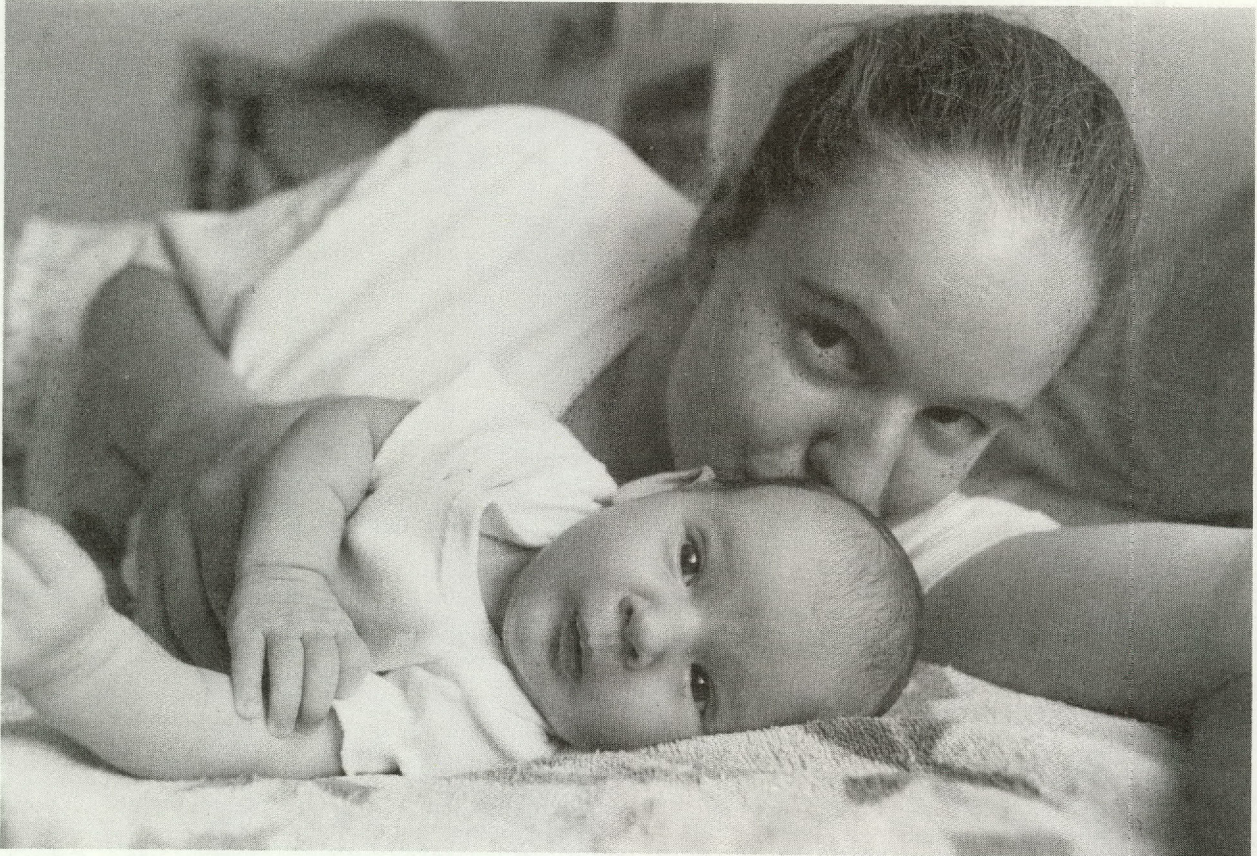
❖ The efficiency of Bridget Washington, the food-delivery clerk at this clinic site. Even though she had been employed by the clinic for a very short time, she had a thorough knowledge of all food-delivery procedures. The nutritionist did a good job in one-on-one high-risk counseling, and the breastfeeding peer counselor did a good job in one-on-one counseling.

❖ Kathy Davis, the clinic supervisor, was also commended for managing to triple-issue food cards with minimal delays to participants. USDA requested that this clinic become the orientation training site for new FNS employees.

**Martin Luther King clinic
(Project 7, Dallas)**

❖ Doing an admirable job in training new employees.

Appendix



According to a University of California School of Public Health study, women who participated in WIC for an extended time during the postpartum period had higher mean hemoglobin levels and a lower risk of maternal obesity at the onset of the next pregnancy. Their infants had higher mean birthweights and were at a lower risk of having a low birthweight than were the infants of women who did not participate in the WIC program for an extended time during the postpartum period.

FY92 PROJECT SUMMARY: WIC Dollars Paid To Vendors & Local Agencies

PROJECT NUMBER	AVG MO. PARTICIPATION	FOOD EXPENDITURES	PRE-REBATE FOOD COST PER PART.	ADMIN. EXPENDITURES	ADMIN. COST PER PART.
1 AUSTIN-TRAVIS COUNTY HEALTH DEPT.	15,090	\$6,027,897.06	\$33.29	\$1,198,729.17	\$6.62
3 CAMERON COUNTY HEALTH DEPT.	20,384	9,097,082.33	37.19	1,163,246.79	4.76
4 SU CLINICA FAMILIAR	1,617	709,713.39	36.57	155,959.95	8.04
5 DRISCOLL FOUNDATION CHILDRENS HOSPITAL	2,687	1,147,940.07	35.61	232,942.50	7.23
7 CITY OF DALLAS DEPT. OF HEALTH & HUMAN SVCS.	29,929	14,666,373.58	40.84	1,773,037.50	4.94
9 COMMUNITY ACTION COUNCIL OF SOUTH TEXAS	6,069	2,870,681.93	39.42	461,373.62	6.33
10 GRAYSON COUNTY HEALTH DEPT.	1,978	810,647.18	34.15	179,963.24	7.58
11 GALVESTON COUNTY HEALTH DISTRICT	2,886	1,278,353.90	36.92	239,988.92	6.93
12 HIDALGO COUNTY WIC PROGRAM	36,664	16,446,159.16	37.38	1,689,284.20	3.84
13 CITY OF LAREDO HEALTH DEPT.	8,845	3,949,743.54	37.21	509,497.34	4.80
14 LUBBOCK CHILDRENS HEALTH CLINIC	6,295	2,747,157.19	36.37	369,768.10	4.89
15 MONTGOMERY COUNTY HEALTH DEPT.	3,196	1,339,635.94	34.93	291,606.96	7.60
17 UT HEALTH SCIENCE CENTER AT HOUSTON	10,447	4,689,220.10	37.40	719,735.65	5.74
18 COMMUNITY COUNCIL OF BEE COUNTY	1,676	710,145.67	35.30	183,684.79	9.13
19 VIDA Y SALUD-HEALTH SYSTEMS, INC.	4,049	1,673,447.51	34.44	356,107.57	7.33
20 SO. PLAINS HEALTH PROVIDER ORGANIZATION, INC.	6,376	2,880,819.51	37.65	472,055.83	6.17
21 WICHITA FALLS CITY-COUNTY HEALTH DISTRICT	3,233	1,350,539.54	34.81	241,602.77	6.23
22 WACO-McLENNAN COUNTY HEALTH DISTRICT	4,502	1,816,690.92	33.63	358,791.62	6.64
23 WALKER COUNTY HEALTH DEPT.	1,139	415,972.87	30.43	102,764.59	7.52
24 UNITED MEDICAL CENTERS	3,517	1,569,884.83	37.20	198,520.60	4.70
25 FT WORTH DEPT. OF PUBLIC HEALTH	10,641	4,925,992.75	38.58	629,734.29	4.93
26 HOUSTON HEALTH & HUMAN SVCS. DEPT.	42,634	20,679,233.44	40.42	2,297,373.86	4.49
27 SO. PLAINS COMMUNITY ACTION AGENCY, INC.	4,431	1,975,312.10	37.15	414,267.21	7.79
28 CENTRO DE SALUD FAMILIAR LA FE	1,627	698,537.16	35.78	164,318.09	8.42
29 FT BEND FAMILY HEALTH CENTER, INC.	4,448	1,904,256.93	35.68	440,080.20	8.24
30 PORT ARTHUR CITY HEALTH DEPT.	3,625	1,513,122.04	34.78	294,017.24	6.76
31 BELL COUNTY HEALTH DEPT.	8,629	3,544,736.85	34.23	602,733.09	5.82
32 BRAZOS VALLEY COMMUNITY ACTION AGENCY	3,043	1,312,802.45	35.95	263,883.26	7.23
33 EL PASO CITY-COUNTY HEALTH DISTRICT	36,059	16,167,043.20	37.36	2,200,122.14	5.08
34 ABILENE-TAYLOR COUNTY PUBLIC HEALTH DIST.	3,369	1,411,017.43	34.91	299,256.24	7.40
35 DENTON COUNTY HEALTH DEPT.	2,963	1,233,326.78	34.69	280,118.09	7.88
36 CITY OF SAN MARCOS	6,452	2,599,124.75	33.57	493,413.17	6.37
37 VICTORIA CITY-COUNTY HEALTH DEPT.	3,725	1,628,018.27	36.42	335,224.37	7.50
38 CORPUS CHRISTI/NUECES CO. PUBLIC HEALTH DIST.	8,650	3,662,127.24	35.28	530,542.44	5.11
39 TYLER-SMITH COUNTY HEALTH DISTRICT	3,398	1,436,565.76	35.23	286,410.14	7.02
40 BEAUMONT CITY HEALTH DEPT.	3,579	1,430,847.46	33.31	317,755.84	7.40
41 SAN ANTONIO METRO. HEALTH DISTRICT	31,024	12,906,610.43	34.67	1,602,537.44	4.30
42 WILLIAMSON COUNTY HEALTH DEPT.	1,448	569,210.98	32.76	135,519.04	7.80
43 GONZALES COMMUNITY HEALTH CENTER	955	388,246.07	33.89	89,343.08	7.80
44 CITY OF DEL RIO WIC PROGRAM	2,256	952,234.09	35.18	147,559.99	5.45
45 CROSS-TIMBERS HEALTH CLINIC INC.	894	365,831.02	34.09	91,184.08	8.50
46 BRAZORIA COUNTY HEALTH DEPT.	2,298	962,298.27	34.90	200,120.86	7.26
47 DALLAS INTER-TRIBAL CENTER	2,626	1,144,220.23	36.30	276,403.90	8.77
48 HARRIS COUNTY HEALTH DEPT.	9,608	4,777,085.23	41.43	642,976.14	5.58
49 FRIO COUNTY WIC PROGRAM	1,012	418,947.12	34.50	100,854.00	8.30
51 SAN PATRICIO COUNTY HEALTH DEPT.	2,545	1,101,645.51	36.07	258,785.10	8.47
52 CAUSE, INC.	1,659	697,841.00	35.05	171,360.69	8.61
53 ATASCOSA HEALTH CLINIC, INC	1,334	564,069.65	35.23	135,393.89	8.46
54 TARRANT COUNTY HEALTH DEPT.	9,562	4,070,276.59	35.47	641,272.82	5.59
55 AMARILLO BI-CITY COUNTY HEALTH DEPT.	4,968	2,187,836.41	36.70	394,695.81	6.62
56 SAN ANGELO-TOM GREEN COUNTY HEALTH DEPT.	3,790	1,664,571.85	36.60	339,230.80	7.46
57 COMMUNITY HEALTH SERVICE AGENCY	1,362	575,844.52	35.23	124,942.73	7.64
58 ANGELINA COUNTY & CITIES HEALTH DISTRICT	1,894	809,514.08	35.61	186,352.48	8.20
59 BARRIO COMPREHENSIVE FAMILY HLTH. CARE CTR.	3,035	1,249,138.30	34.30	226,059.60	6.21
60 MATAGORDA COUNTY HOSPITAL DISTRICT	1,320	545,626.12	34.45	127,173.23	8.03
61 JASPER-NEWTON COUNTY PUBLIC HEALTH DIST.	2,205	879,453.56	33.23	233,653.67	8.83
62 PARIS/LAMAR COUNTY HEALTH DEPT.	1,275	529,412.34	34.60	123,240.04	8.05
63 HARDIN COUNTY WIC	1,081	433,292.89	33.39	120,384.86	9.28
64 MEDINA COUNTY WIC	945	393,700.32	34.71	111,306.17	9.81
65 TEXARKANA-BOWIE COUNTY FAMILY HEALTH CENTER	1,469	651,032.31	36.92	121,602.21	6.90
66 ORANGE COUNTY HEALTH DEPT.	1,313	513,862.15	32.62	111,764.49	7.09
67 CORSICANA-NAVARRO COUNTY HEALTH DISTRICT	1,021	393,723.75	32.15	93,854.04	7.66
68 COMMUNITY COUNCIL OF SW TEXAS INC.	317	131,636.11	34.62	62,908.97	16.55
69 COMMUNITY COUNCIL OF SC TEXAS INC.	1,295	535,679.39	34.46	129,098.89	8.31
70 CHAMBERS COUNTY HEALTH DEPT.	408	183,676.16	37.52	56,913.67	11.63
71 COLLIN COUNTY HEALTH CARE SERVICES	1,297	568,133.93	36.51	107,332.05	6.90
72 PEOPLE FOR PROGRESS	593	251,663.40	35.38	67,016.30	9.42
73 CENTRO DEL BARRIO INC.	1,721	713,672.78	34.55	118,285.83	5.73
74 BROWNWOOD-BROWN COUNTY HEALTH DEPT.	996	406,633.01	34.03	113,665.14	9.51
SUBTOTAL LOCAL AGENCY	417,381	\$184,856,789.80	\$36.91	\$28,210,703.39	\$5.63
81 REGION 1 WIC PROGRAM	4,227	\$1,683,183.35	\$33.19	\$624,852.10	\$12.32
82 REGION 2 WIC PROGRAM	3,546	1,555,427.60	36.55	589,087.60	13.84
83 REGION 3 WIC PROGRAM	11,434	5,290,339.09	38.56	1,430,371.95	10.43
84 REGION 4 WIC PROGRAM	3,266	1,389,898.39	35.46	475,529.28	12.13
85 REGION 5 WIC PROGRAM	10,954	4,836,455.74	36.79	1,608,748.46	12.24
87 REGION 7 WIC PROGRAM	16,058	6,704,278.36	34.79	1,603,490.51	8.32
88 REGION 8 WIC PROGRAM	4,449	1,983,300.21	37.15	529,719.30	9.92
SUBTOTAL REGION	53,933	\$23,442,882.74	\$36.22	\$681,799.20	\$10.60
98 STATE AGENCY			9,430.09	10,336,288.77	
GRAND TOTAL	471,314	\$208,309,102.63	\$36.83	\$45,408,791.36	\$8.03

FY93 PROJECT SUMMARY: WIC Dollars Paid To Vendors & Local Agencies

PROJECT NUMBER	AVG MO. PARTICIPATION	FOOD EXPENDITURES	PRE-REBATE FOOD COST PER PART.	ADMIN.** EXPENDITURES	ADMIN. COST PER PART.
1 AUSTIN-TRAVIS COUNTY HEALTH DEPT.	15,900	\$6,770,243.33	\$35.48	\$1,502,406.39	\$7.87
3 CAMERON COUNTY HEALTH DEPT.	22,513	\$10,375,598.02	\$38.41	\$1,326,584.36	\$4.91
4 SU CLINICA FAMILIAR	1,733	\$795,474.47	\$38.25	\$183,493.65	\$8.82
5 DRISCOLL CHILDRENS HOSPITAL	2,811	\$1,269,802.68	\$37.64	\$375,110.07	\$11.12
7 DALLAS CITY DEPT. OF HEALTH & HUMAN SVCS.	38,823	\$19,324,810.18	\$41.48	\$2,581,488.64	\$5.54
9 COMMUNITY ACTION COUNCIL OF SOUTH TEXAS	6,668	\$3,234,133.07	\$40.42	\$537,348.73	\$6.72
10 GRAYSON COUNTY HEALTH DEPT.	2,255	\$1,004,912.39	\$37.13	\$224,268.17	\$8.29
11 GALVESTON COUNTY HEALTH DISTRICT	3,319	\$1,470,840.72	\$36.93	\$266,100.70	\$6.68
12 HIDALGO COUNTY WIC PROGRAM	40,927	\$18,555,194.06	\$37.78	\$2,084,446.17	\$4.24
13 CITY OF LAREDO HEALTH DEPT.	10,460	\$4,971,154.94	\$39.60	\$640,462.32	\$5.10
15 MONTGOMERY COUNTY HEALTH DEPT.	3,445	\$1,512,636.98	\$36.59	\$326,633.10	\$7.90
17 UT HEALTH SCIENCE CENTER AT HOUSTON	11,917	\$5,519,517.21	\$38.60	\$884,000.40	\$6.18
18 COMMUNITY COUNCIL OF BEE COUNTY	1,673	\$740,096.55	\$36.87	\$207,978.54	\$10.36
19 VIDA Y SALUD-HEALTH SYSTEMS	4,307	\$1,832,857.42	\$35.46	\$414,856.10	\$8.03
20 SO. PLAINS HEALTH PROVIDER ORGANIZATION, INC.	7,094	\$3,416,002.42	\$40.13	\$551,811.96	\$6.48
21 WICHITA FALLS-WICHITA COUNTY PUBLIC HEALTH DIST.	3,443	\$1,543,074.07	\$37.35	\$266,731.57	\$6.46
22 WACO-McLENNAN COUNTY PUBLIC HEALTH DISTRICT	5,031	\$2,136,813.04	\$35.40	\$386,350.59	\$6.40
23 WALKER COUNTY HEALTH DEPT.	1,190	\$460,837.69	\$32.27	\$128,256.02	\$8.98
24 UNITED MEDICAL CENTERS	4,299	\$1,957,313.63	\$37.94	\$259,075.33	\$5.02
25 FORT WORTH DEPT. OF PUBLIC HEALTH	13,211	\$6,286,538.96	\$39.66	\$798,296.01	\$5.04
26 HOUSTON HEALTH & HUMAN SVCS. DEPT.	48,400	\$23,754,921.89	\$40.90	\$3,513,587.27	\$6.05
27 SO. PLAINS COMMUNITY ACTION AGENCY, INC.	4,491	\$2,129,945.64	\$39.52	\$495,279.71	\$9.19
28 CENTRO DE SALUD FAMILIAR LA FE, INC.	1,708	\$791,066.49	\$38.60	\$187,722.16	\$9.16
29 FORT BEND FAMILY HEALTH CENTER, INC.	5,341	\$2,327,108.84	\$36.31	\$570,847.05	\$8.91
30 PORT ARTHUR CITY HEALTH DEPT.	3,919	\$1,732,235.55	\$36.83	\$343,021.71	\$7.29
31 BELL COUNTY HEALTH DEPT.	10,546	\$4,691,761.72	\$37.07	\$770,869.44	\$6.09
32 BRAZOS VALLEY COMMUNITY ACTION AGENCY	3,451	\$1,544,317.17	\$37.29	\$367,749.89	\$8.88
33 EL PASO CITY-COUNTY HEALTH DISTRICT	40,985	\$20,001,892.18	\$40.67	\$2,829,588.58	\$5.75
34 ABILENE-TAYLOR COUNTY PUBLIC HEALTH DEPT.	3,847	\$1,706,744.56	\$36.97	\$386,032.67	\$8.36
35 DENTON COUNTY HEALTH DEPT.	3,495	\$1,517,503.10	\$36.19	\$332,646.52	\$7.93
36 CITY OF SAN MARCOS	7,500	\$3,171,718.82	\$35.24	\$663,519.57	\$7.37
37 VICTORIA CITY-COUNTY HEALTH DEPT.	4,290	\$1,957,979.80	\$38.04	\$392,659.58	\$7.63
38 CORPUS CHRISTI-NUECES CO. PUBLIC HEALTH DIST.	9,342	\$4,244,149.25	\$37.86	\$634,554.50	\$5.66
39 SMITH COUNTY PUBLIC HEALTH DISTRICT	3,753	\$1,659,768.37	\$36.86	\$321,222.08	\$7.13
40 BEAUMONT CITY HEALTH DEPT.	3,848	\$1,659,519.26	\$35.94	\$343,652.21	\$7.44
41 SAN ANTONIO METRO. HEALTH DISTRICT	37,669	\$16,489,157.17	\$36.48	\$2,109,761.24	\$4.67
42 WILLIAMSON COUNTY AND CITIES HEALTH DIST.	1,977	\$842,538.65	\$35.51	\$196,902.76	\$8.30
43 GONZALES COUNTY HEALTH AGENCY, INC.	1,013	\$416,480.48	\$34.27	\$120,894.44	\$9.95
44 CITY OF DEL RIO-WIC PROGRAM	2,579	\$1,120,207.94	\$36.20	\$180,889.88	\$5.84
45 CROSS TIMBERS HEALTH CLINIC INC.	880	\$390,072.96	\$36.94	\$93,020.76	\$8.81
46 BRAZORIA COUNTY HEALTH DEPT.	3,027	\$1,316,339.67	\$36.24	\$281,775.94	\$7.76
47 DALLAS INTER-TRIBAL CENTER, INC.	2,701	\$1,259,002.23	\$38.84	\$319,214.02	\$9.85
48 HARRIS COUNTY HEALTH DEPT.	14,504	\$6,963,316.46	\$40.01	\$1,032,148.24	\$5.93
49 FRIO COUNTY WIC	1,034	\$457,983.43	\$36.92	\$120,786.45	\$9.74
51 SAN PATRICIO COUNTY HEALTH DEPT.	2,781	\$1,215,856.01	\$36.43	\$343,018.00	\$10.28
52 CAUSE, INC.	1,959	\$857,887.13	\$36.49	\$274,855.98	\$11.69
53 ATASCOSA (RHI) HEALTH CLINIC	1,376	\$609,508.72	\$36.91	\$151,120.59	\$9.15
54 TARRANT COUNTY HEALTH DEPT.	11,132	\$4,970,029.94	\$37.21	\$776,375.43	\$5.81
55 AMARILLO BI-CITY COUNTY HEALTH DIST.	3,695	\$1,488,769.90	\$33.58	\$332,536.98	\$7.50
56 SAN ANGELO-TOM GREEN COUNTY HEALTH DEPT.	4,257	\$1,921,609.46	\$37.62	\$420,285.59	\$8.23
57 COMMUNITY HEALTH SERVICE AGENCY, INC.	1,560	\$677,917.00	\$36.21	\$167,572.55	\$8.95
58 ANGELINA COUNTY & CITIES HEALTH DISTRICT	2,016	\$835,767.26	\$34.55	\$216,623.31	\$8.96
59 BARRIO COMPREHENSIVE FAMILY HLTH. CARE CTR.	3,267	\$1,416,506.77	\$36.14	\$273,032.55	\$6.97
60 MATAGORDA COUNTY HOSPITAL DISTRICT	1,302	\$555,493.65	\$35.54	\$135,099.85	\$8.64
61 JASPER-NEWTON COUNTY PUBLIC HEALTH DIST.	2,364	\$993,907.94	\$35.04	\$312,111.67	\$11.00
62 PARIS/LAMAR COUNTY HEALTH DEPT.	1,283	\$541,223.69	\$35.14	\$147,097.93	\$9.55
63 HARDIN COUNTY HEALTH DEPT.	1,108	\$467,465.66	\$35.15	\$141,944.07	\$10.67
64 MEDINA COUNTY HEALTH DEPT.	937	\$399,628.78	\$35.54	\$128,295.80	\$11.41
65 TEXARKANA-BOWIE COUNTY FAMILY HEALTH CENTER	1,773	\$802,592.05	\$37.73	\$133,615.33	\$6.28
66 ORANGE COUNTY HEALTH DEPT.	1,829	\$781,050.50	\$35.58	\$207,379.48	\$9.45
67 CORSICANA-NAVARRO COUNTY PUBLIC HEALTH DIST.	1,145	\$483,588.51	\$35.19	\$115,201.75	\$8.38
68 COMMUNITY COUNCIL OF SW TEXAS, INC.	327	\$143,232.53	\$36.46	\$55,264.57	\$14.07
69 COMMUNITY COUNCIL OF SC TEXAS, INC.	1,398	\$596,629.04	\$35.56	\$141,232.93	\$8.42
70 CHAMBERS COUNTY HEALTH DEPT.	440	\$209,763.24	\$39.69	\$61,023.17	\$11.55
71 COLLIN COUNTY HEALTH CARE SERVICES	1,776	\$818,889.27	\$38.42	\$143,793.26	\$6.75
72 PEOPLE FOR PROGRESS, INC.	543	\$243,170.38	\$37.31	\$61,595.20	\$9.45
73 EL CENTRO DEL BARRIO	2,470	\$1,051,185.97	\$35.47	\$227,661.96	\$7.68
74 BROWNWOOD-BROWN COUNTY HEALTH DEPT.	1,048	\$443,670.43	\$35.28	\$118,429.05	\$9.42
75 LUBBOCK CITY HEALTH DEPT.	1,755	\$1,059,701.97	\$50.33	\$133,120.98	\$6.32
76 OUTREACH HEALTH SERVICES	2,109	\$680,199.57	\$26.88	\$556,490.56	\$21.99
78 AMARILLO HOSPITAL DISTRICT	1,885	\$1,133,884.91	\$50.12	\$129,446.01	\$5.72
SUBTOTAL LOCAL AGENCY	478,854	\$220,722,713.74	\$38.41	\$36,458,270.04	\$6.34
81 REGION 1 WIC PROGRAM	4,820	\$2,014,350.83	\$34.83	\$666,233.01	\$11.52
82 REGION 2 WIC PROGRAM	7,196	\$3,224,087.52	\$37.34	\$904,921.61	\$10.48
83 REGION 3 WIC PROGRAM	13,342	\$6,645,319.60	\$41.51	\$1,669,937.13	\$10.43
84 REGION 4 WIC PROGRAM	4,082	\$1,788,290.62	\$36.50	\$584,250.98	\$11.93
85 REGION 5 WIC PROGRAM	10,524	\$5,198,023.89	\$41.16	\$1,224,244.55	\$9.69
87 REGION 7 WIC PROGRAM	18,182	\$7,915,799.19	\$36.28	\$1,914,739.61	\$8.78
88 REGION 8 WIC PROGRAM	4,965	\$2,296,016.81	\$38.54	\$638,571.96	\$10.72
SUBTOTAL REGION*	63,111	\$29,081,888.46	\$38.40	\$7,602,898.85	\$10.04
98 STATE AGENCY		\$21,540.80		\$9,506,730.00	
GRAND TOTAL	541,965	\$249,826,143.00	\$38.41	\$53,567,898.89	\$8.24

*Note: Although the region project numbers remain the same (project 81-88) the region numbers reported above are the old region numbers. New region numbers have been adopted to match the 11 Health and Human Service regional designation, which will be reflected in FY94.

**Net of admin expenditures paid on the Immunization budget

Directory of Projects

Counties served by each project

County	Project	County	Project	County	Project	County	Project	County	Project
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Andrews	83	Culberson	83	Hemphill	82	Mason	83	Schleicher	83
Angelina	58			Henderson	87	Matagorda	60	Scurry	76
Aransas	88	Dallam	82	Hidalgo	12	Maverick	24	Shackelford	76
Archer	76	Dallas	7, 47	Hill	52	McCullough	83	Shelby	87
Armstrong	82	Dawson	27	Hockley	27	McLennan	22	Sherman	82
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		Denton	35	Houston	87	Menard	83	Starr	9
Bailey	20	Dewitt	37	Howard	83	Midland	83	Stephens	76
Bandera	36	Dickens	27	Hudspeth	83	Milam	81	Sterling	83
Bastrop	36	Dimmit	19	Hunt	57	Mills	45	Stonewall	76
Baylor	76	Donley	82	Hutchinson	82	Mitchell	76	Sutton	83
Bee	18	Duval	9			Montague	76	Swisher	20
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Brazos	32	Falls	81	Jim Wells	88	Newton	61	Tom Green	56
Brewster	83	Fannin	57	Johnson	76	Nolan	72	Travis	1
Briscoe	82	Fayette	81	Jones	76	Nueces	5, 38	Trinity	87
Brooks	88	Fisher	76			Ochiltree	82	Tyler	87
Brown	74	Floyd	20	Karnes	69	Oldham	82	Upshur	87
Burleson	81	Foard	76	Kaufman	76	Orange	66	Upton	83
Burnet	81	Fort Bend	29	Kendall	36			Ulvade	19
		Franklin	87	Kennedy	4	Palo Pinto	76		
Caldwell	36	Freestone	52	Kent	76	Panola	87	Val Verde	44
Calhoun	37	Frio	49	Kerr	36	Parker	76	Van Zandt	87
Callahan	76			Kimble	83	Parmer	20	Victoria	37
Cameron	3	Gaines	27	King	27	Pecos	83		
Camp	87	Galveston	11	Kinney	24	Polk	87	Walker	23
Carson	82	Garza	27	Kleberg	88	Potter	78	Waller	84
Cass	87	Gillespie	36	Knox	76	Presidio	83	Ward	83
Castro	20	Glasscock	83			Rains	87	Washington	81
Chambers	70	Goliad	37	Lamar	62	Randall	78	Webb	13
Cherokee	39	Gonzales	43	Lamb	20	Reagan	83	Wharton	29
Childress	82	Gray	82	Lampasas	81	Real	68	Wheeler	82
Clay	21	Grayson	10	LaSalle	19	Red River	87	Wichita	21
Cochran	27	Gregg	87	Lavaca	88	Reeves	83	Wilbarger	76
Coke	83	Grimes	32	Lee	81	Refugio	88	Willacy	4
Coleman	56	Guadalupe	36	Leon	32	Roberts	82	Williamson	42
Collin	71			Liberty	84	Robertson	32	Wilson	69
Collingsworth	82	Hale	20	Limestone	52	Rockwall	57	Winkler	83
Colorado	84	Hall	82	Lipscomb	82	Runnels	56	Wise	76
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Comanche	45	Hansford	82	Llano	81				
Concho	83	Hardeman	76	Loving	83	Sabine	61	Yoakum	27
Cooke	76	Hardin	63	Lubbock	75	St. Augustine	61	Young	76
Coryell	31	Harris	17, 26, 48	Lynn	27	San Jacinto	87	Zapata	9
Cottle	76	Harrison	87			San Patricio	51	Zavala	19
Crane	83	Hartley	82	Madison	32				
Crockett	83	Haskell	76	Marion	87				



Project 1

Austin Health and
Human Services-Travis County
Health Department
327 Congress, Suite 500
Austin, TX 78701
Phyllis Day, R.D., L.D.,
WIC Program Director
Phone: (512) 476-0634
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Project 10

Grayson County Health
Department
515 North Walnut
Sherman, TX 75090
Jo Ellen Ticknor, R.D.,
WIC Director/Nutritionist
Phone: (903) 893-0131
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Project 18

Community Council
of Bee County
510 West Crockett
Beeville, TX 78102
Mary J. Cano,
WIC Project Director
Phone: (512) 358-1865
Fax: (512) 358-8800

Project 3

Cameron County Health
Department
186 North Sam Houston Blvd.
San Benito, TX 78586
Yvette Salinas,
WIC Director/Nutritionist
Phone: (210) 399-0187
Fax: (210) 399-0183

Project 11

Galveston County Health
District
1207 Oak Street
P.O. Box 939
La Marque TX 77568
Theresa Bette, L.V.N.,
WIC Program Manager
Phone: (409) 938-2257
Fax: (409) 643-8325

Project 19

Vida y Salud-Health Systems
722 East Crockett
Crystal City, TX 78839
Ofelia Juarez,
WIC Project Director
Phone: (210) 374-2349
Fax: (210) 374-3364

Project 4

Su Clinica Familiar
131 FM 3168
P.O. Box 839
Raymondville, TX 78580
Mona Hollander, WIC
Coordinator/Nutritionist
Phone: (210) 689-2196

Project 12

Hidalgo County Health
Department
1422 East University Dr.
Edinburg, TX 78539
Norma L. Longoria, L.D.,
WIC Project Director
Phone: (210) 381-4646

Project 20

South Plains Health Provider
Organization, Inc.
2807 West 7th
Plainview, TX 79072
Barbara Khaleeq, M.S., R.D.,
WIC Director
Phone: (806) 293-0182
Fax: (806) 293-7354

Project 5

Driscoll Childrens Hospital
400 East Main St.
Robstown, TX 78380
Monica Stender, M.A., R.D.,
L.D., WIC Project Director
Phone: (512) 387-9036

Project 13

City Of Laredo Health
Department
P.O. Box 2337
Laredo, TX 78044
Elisa R. Perez, WIC Director
Phone: (210) 723-2051
Fax: (210) 726-2632

Project 21

Wichita Falls-Wichita County
Public Health Dist.
1700 Third Street
Wichita Falls, TX 76301
Sue Zubiak, R.D., L.D.
WIC Project Director
Phone: (817) 761-7809
Fax: (817) 761-8877

Project 7

Dallas City Department of
Health and Human Services
Lancaster-Kiest
Shopping Cntr.
3200 Lancaster Rd, Suite 230-A
Dallas, TX 75216
Marie Zaczkowski, M.S., R.D.,
L.D., WIC Manager
Phone: (214) 670-1971
Fax: (214) 670-7539

Project 15

Montgomery County Health
Department
701 East Davis
Conroe, TX 77301
Kathy Bennett,
WIC Director/Nutritionist
Phone: (409) 525-2800
Fax: (409) 539-4668

Project 22

Waco-McLennan County
Public Health District
225 West Waco Drive
Waco, TX 76707
Carolyn Scott, PhD., R.D., L.D.,
WIC Director
Phone: (817) 750-5474
Fax: (817) 750-5663

Project 9

Community Action Council of
South Texas
111 Pete Diaz, Jr. Avenue
P.O. Drawer 98
Rio Grande City, TX 78582
Joe A. Salinas,
WIC Director
Phone: (210) 487-2585
Fax: (210) 487-2871

Project 17

UT Health Science Center
at Houston
2525 Murworth, Room 208
Houston, TX 77054
Karen Gibson, R.D., L.D.,
WIC Director
Phone: (713) 432-1296
Fax: (713) 432-1978

Directory of Projects



Project 23

Walker County Health
Department
119 Highway 75 N., Suite 15
Huntsville, TX 77340
Carolyn Hanselman,
Administrator of WIC Program
Phone: (409) 295-7046
Fax: (409) 295-4257

Project 24

United Medical Centers
P.O. Box 921
Eagle Pass, TX 78853
Guadalupe Fuentes, L.V.N.,
WIC Director
Phone: (210) 773-1105
Fax: (210) 773-1419

Project 25

Fort Worth Department
of Public Health
1800 University Drive
Fort Worth, TX 76107
Louella J. Williams, R.D.,
WIC Director/Nutritionist
Phone: (817) 871-7215
Fax: (817) 871-7335

Project 26

Houston Health and Human
Services Department
8000 North Stadium
Houston, TX 77054
Faye Walker, R.D., L.D., M.S.,
WIC Program Director
Phone: (713) 794-9096
Fax: (713) 794-2903

Project 27

South Plains Community
Action Assoc., Inc.
411 Austin Street
P.O. Box 610
Levelland, TX 79336
Pat Smithwick,
*WIC Program Director/
Nutritionist Coordinator*
Phone: (806) 894-6104
Fax: (806) 894-5349

Project 28

Centro de Salud Familiar
La Fe, Inc.
700 South Ochoa Street
P.O. Box 10640
El Paso, TX 79996
George Villarreal
Acting WIC Director
Phone: (915) 545-4550
Fax: (915) 545-2564

Project 29

Fort Bend Family Health
Center, Inc.
400 Austin Street
Richmond, TX 77469
Betty Hill,
Director of WIC Services
Phone: (713) 342-4530
Fax: (713) 342-3832

Project 30

Port Arthur City Health
Department
603 East Fifth St.
Port Arthur, TX 77640
Barbara Queen,
WIC Director/Nutritionist
Phone: (409) 983-8824

Project 31

Bell County Health Department
116 West Ave. G
Temple, TX 76504
Evelyn Jez, *WIC Program
Manager/Nutritionist*
Phone: (817) 778-1511

Project 32

Brazos Valley Community
Action Agency
301 North Main St.
Bryan, TX 77803
Barbara Sample,
WIC Director
Phone: (409) 779-7420

Project 33

El Paso City-County
Health District
222 South Campbell
El Paso, TX 79901
Donna T. Seward,
WIC Director
Phone: (915) 543-3592
Fax: (915) 543-3541

Project 34

Abilene-Taylor County Public
Health Department
P.O. Box 6489
Abilene, TX 79608
Rita Portlock,
WIC Director
Phone: (915) 692-1680
Fax: (915) 692-8300

Project 35

Denton County Health
Department
300 North Carroll Blvd., Suite B
Denton, TX 76201
Bryanne Jones, R.N.,
WIC Director
Phone: (817) 565-8666
Fax: (817) 565-8621

Project 36

City of San Marcos
630 East Hopkins
San Marcos, TX 78666
Eddie Ortega,
WIC Director
Phone: (512) 353-5303
Fax: (512) 396-7471

Project 37

Victoria City-County Health
Department
2205 East Lone Tree Road
Victoria, TX 7901
Patricia Patterson, L.V.N.,
WIC Administrator
Phone: (512) 578-2884
Fax: (512) 578-6627

Project 38

Corpus Christi-Nueces Co.
Public Health District
P.O. Box 9727
Corpus Christi, TX 78416
Debbie Escobar, Mina Golson
Acting WIC Supervisors
Phone: (512) 855-0531

Project 39

Smith County Public
Health District
P.O. Box 2039
Tyler, TX 75710
Cassi Boucher, *WIC Project
Director/Nutritionist*
Phone: (903) 592-7635
Fax: (903) 531-1166



Project 40
Beaumont City Health
Department
950 Washington
P.O. Box 3827
Beaumont, TX 77704
Fern Roberts,
Acting WIC Director
Phone: (409) 832-4000
Fax: (409) 832-4270

Project 41
San Antonio Metropolitan
Health District
2322 Buena Vista
San Antonio, TX 78207
Charles Pruski,
WIC Program Manager
Phone: (210) 225-1870

Project 42
Williamson County and Cities
Health District
100 West 3rd Street
P.O. Box 570
Georgetown, TX 78627
Tina Horkey, R.D., L.D.,
WIC Program Director
Phone: (512) 869-4386
Fax: (512) 869-3110

Project 43
Gonzales County Health
Agency, Inc.
11 St. Joseph
P.O. Box 1890
Gonzales, TX 78629
Emma Garza,
WIC Coordinator
Phone: (210) 672-7083
Fax: (210) 672-6430

Project 44
City of Del Rio-WIC Program
P.O. Box 4239
Del Rio, TX 78841
Esther Giron
WIC Director
Phone: (210) 774-8605
Fax: (210) 774-8542

Project 45
Cross Timbers Health
Clinic, Inc.
1100 West Reynosa
P.O. Box 30
DeLeon, TX 76444
Theresa L. Aguerro,
WIC Project Director
Phone: (817) 893-5895
Fax: (817) 893-5222

Project 46
Brazoria County Health
Department
1108-C East Mulberry
Angleton, TX 77515
Debbie Dunn, L.V.N.,
WIC Director
Phone: (409) 849-9741

Project 47
Dallas Inter-Tribal Center, Inc.
209 East Jefferson
Dallas, TX 75203
Sharon Belindo, R.D., L.D.,
Director of Nutrition Services
Phone: (214) 941-1050
Fax: (214) 941-6537

Project 48
Harris County Health
Department
P.O. Box 25249
Houston, TX 77265
Victoria Bowie, M.S., R.D.,
WIC Program Director
Phone: (713) 620-6820
Fax: (713) 620-6897

Project 49
Frio County - WIC
P.O. Box 1225
Pearsall, TX 78061
Esperanza Zapata,
*WIC Co-Director/
Office Manager*
Judy Weiblem,
WIC Co-Director/Nutritionist
Phone: (210) 334-8652
Fax: (210) 334-8658

Project 51
San Patricio County
Health Department
313 North Rachal Street
Sinton, TX 78387
Evelyn Sinast, R.N.,
WIC Director/Coordinator
Phone: (512) 364-6204
Fax: (512) 364-4518

Project 52
Cause, Inc.
233 East Elm
P.O. Box 438
Hillsboro, TX 76645
Rita Taylor, L.V.N.,
WIC Director
Phone: (817) 582-3319
Fax: (817) 582-8266

Project 53
Atascosa (RHI) Health Clinic
310 West Oaklawn Road
Pleasanton, TX 78064
Rey Ramirez, P.h.D.,
Acting WIC Program Director
Phone: (210) 569-2388
Fax: (210) 569-8538

Project 54
Tarrant County Health
Department
1800 University Drive, Rm 108
Fort Worth, TX 76107
Ann Salyer-Caldwell,
M.P.H., R.D.,
WIC Director
Phone: (817) 871-7577
Fax: (817) 871-7335

Project 56
San Angelo-Tom Green
County Health Department
72 West College
San Angelo, TX 76903
Nancy Escalante
WIC Program Director
Phone: (915) 657-4396
Fax: (915) 658-7180

Directory of Projects



Project 57

Community Health
Service Agency, Inc.
2822 Washington
P.O. Box 1908
Greenville, TX 75401
Viola Ozuna, L.V.N.,
WIC Director
Phone: (903) 455-5994
Fax: (903) 454-4621

Project 58

Angelina County and Cities
Health District
917 Ellis Avenue
Lufkin, TX 75901
Angela Quillin,
WIC Director
Phone: (409) 637-7242

Project 59

Barrio Comprehensive Family
Health Care Center
1102 Barclay Street
San Antonio, TX 78207
Gloria Muniz,
WIC Director
Phone: (210) 434-3122
Fax: (210) 434-0402

Project 60

Matagorda County
Hospital District
1115 Avenue G
Bay City, TX 77414
Mildred Hawkins, L.D.,
WIC Director
Phone: (409) 245-9848
Fax: (409) 245-1525

Project 61

Jasper-Newton County Public
Health District
Administrative Office
139 West Lamar Street
Jasper, TX 75951
Ann Williams, L.V.N.,
WIC Director
Phone: (409) 384-6829
Fax: (409) 384-7861

Project 62

Paris-Lamar County Health
Department
740 S.W. 6th Street
P.O. Box 938
Paris, TX 75460
Barbara Francis, R.N.,
WIC Director
Phone: (903) 784-1411
Fax: (903) 784-1442

Project 63

Hardin County Health
Department
Hardin County Courthouse
P.O. Box 2079
Kountze, TX 77625
Mary Adams, L.V.N.,
WIC Director
Phone: (409) 246-5191
Fax: (409) 246-3277

Project 64

Medina County Health
Department
3103 Avenue G
Hondo, TX 78861
Linda Fillinger, R.N.,
WIC Director
Phone: (210) 426-4393
Fax: (210) 426-4493

Project 65

Texarkana-Bowie County
Family Health Center
902 West 12th Street
Texarkana, TX 75504
Candis Mauldin, L.V.N.,
WIC Coordinator
Phone: (903) 798-3289
Fax: (903) 793-2289

Project 66

Orange County Health
Department
2014 North 10th Street
Orange, TX 77630
Cynthia Wilhoit, R.N.,
WIC Director
Phone: (409) 883-6119
Fax: (409) 882-7843

Project 67

Corsicana-Navarro County
Public Health District
508 North Main Street
P.O. Box 518
Corsicana, TX 75110
Emily Carroll, R.N.,
WIC Director
Phone: (903) 874-6731
Fax: (903) 872-7215

Project 68

Community Council of
Southwest TX, Inc.
411 South Nueces
P.O. Box 115
Campwood, TX 78833
Sharon Pannell, L.V.N.,
WIC Director
Phone: (210) 597-2181

Project 69

Community Council of South
Central Texas, Inc.
205-A East Court Street
Seguin, TX 78155
Susan Murphy,
WIC Director
Phone: (210) 372-3690
Fax: (210) 372-5354

Project 70

Chambers County Health
Department
Courthouse Annex
1222 Main Street
P.O. Box 670
Anahuac, TX 77514
Glenda Pearce, R.N.,
WIC Director
Phone: (409) 267-8357
Fax: (409) 267-3962

Project 71

Collin County Health Care
Services
825 North McDonald
McKinney, TX 75069
Denise Wolf,
*WIC Coordinator/
Nutritionist*
Phone: (214) 548-5500
Fax: (214) 548-5579



Project 72
People For Progress, Inc.
301 West Arkansas
Sweetwater, TX 79556
Elaine Rascoe, L.V.N.,
WIC Director
Phone: (915) 235-8455
Fax: (915) 235-4950

Project 78
Amarillo Hospital District
411 South Austin
Amarillo, TX 79106
Margaret Payton, R.D., M.B.A.,
WIC Director
Phone: (806) 371-1121
Fax: (806) 372-3941

Project 87
Region 4 and 5N WIC Program
Texas Department of Health
1517 West Front Street
Tyler, TX 75 702
Susan Bennett, R.D., L.D.
Phone: (903) 595-3585
Fax: (903) 593-4187

Project 73
El Centro Del Barrio
123 Ascot
San Antonio, TX 78224
Karen Finstuen, R.D.,
WIC Director
Phone: (210) 924-6004
Fax: (210) 977-9326

Project 80
East Texas Community
Health Services, Inc.
1401 South University Drive
Nacogdoches, TX 75961
Anita Humphreys
Financial Director
Phone: (409) 560-5413
Fax: (409) 560-3928

Project 88
Region 11
601 West Sesame Drive
Harlingen, TX 78552
Cindy Moore, R.D., L.D.
Phone: (512) 888-7762
Fax: (512) 888-7766

Project 74
Brownwood-Brown County
Health Department
P.O. Box 1389
Brownwood, TX 76804
Georgia Harris,
WIC Director
Phone: (915) 646-1514
Fax: (915) 646-0938

Project 81
Region 7 WIC Program
2408 South 37th Street
Temple, TX 76504
Jackie McLaughlin
WIC Director
Phone: (817) 778-6744
Fax: (817) 778-4066

Project 75
Lubbock City Health
Department
1902 Texas Avenue
P.O. Box 2548
Lubbock, TX 79405
Stephanie Steger-Doyle,
WIC Director
Phone: (806) 767-2929
Fax: (806) 762-5506

Project 83
Regions 9 and 10
WIC Program
Administrative Headquarters
2301 North Big Spring,
Suite 300
Midland, TX 79705
Judith Harden
WIC Program Director
Phone: (915) 683-9492
Fax: (915) 683-4751

Project 76
Outreach Health Services
724 S. Polk, Suite 700
Amarillo, TX 79101
Frannie Nuttall, R.D.
WIC Director
Phone: (806) 371-9446
Fax: (806) 371-9515

Project 84
Region 5S and 6 WIC Program
10500 Forum Place, Suite 423
Houston, TX 77036
Veronica Brown, M.S., R.D.,
L.D., *WIC Program Director*
Phone: (713) 995-1112
Fax: (713) 851-3102

Project 77
University of Texas Medical
Branch at Galveston
2503 South Main, Suite B
Stafford, Texas 77477
Bonnie Horton, R.D., L.D.
Phone: (713) 499-3004
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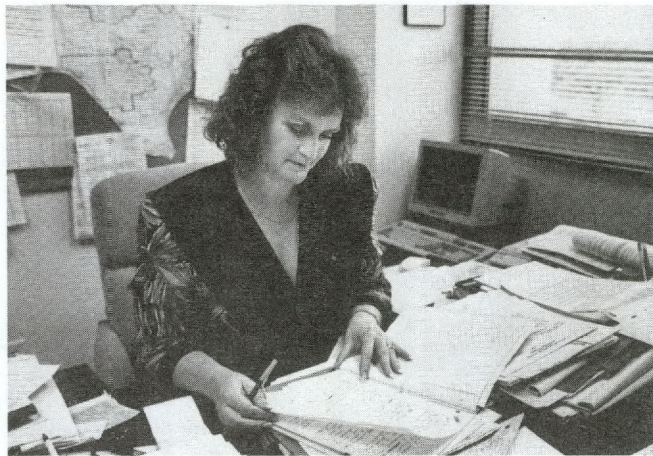
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This report is dedicated to Debra Stabeno for her outstanding service to the Texas WIC Program.

History of WIC

In the late 1960s during the presidency of Lyndon B. Johnson, a great deal of attention was focused on creating programs to help lower-income Americans. The 1967 National Nutrition Survey revealed that many lower-income children suffered from anemia and inadequate growth. These are conditions that can adversely affect brain size and cognitive ability.

The study showed that children were getting off to a poor start both physically and mentally because they didn't have enough to eat or the right foods on their plates. Some also suffered because mothers were not getting adequate nutrition during pregnancy.

In 1972, Congress passed a bill sponsored by the late Sen. Hubert H. Humphrey, D-Minn., to create the Special Supplemental Food Program for Women, Infants and

Children.

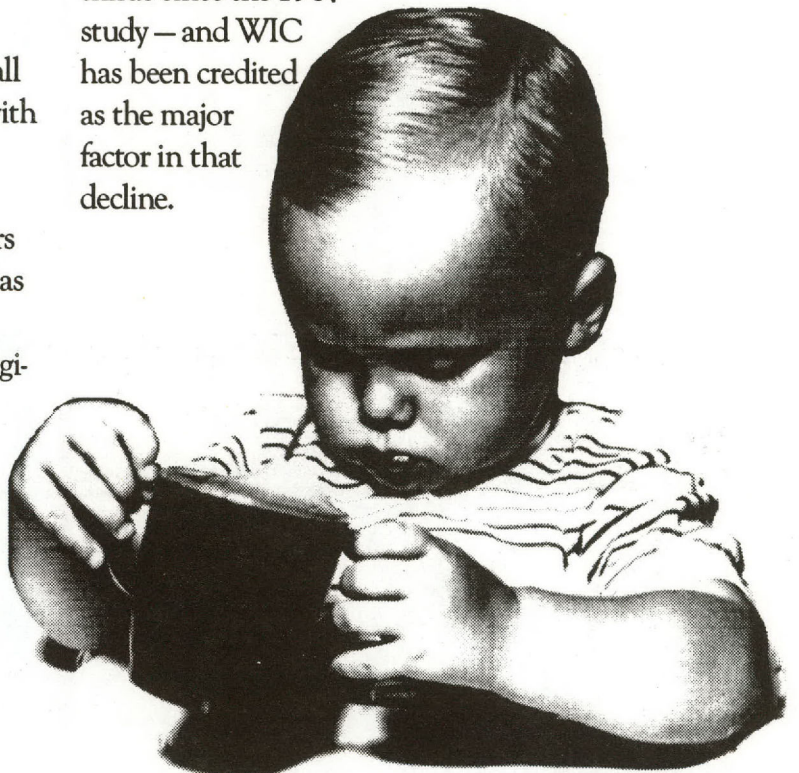
Congress funded the program for two years and put the U.S. Department of Agriculture in charge of the WIC program.

The first WIC office opened in Kentucky in January 1974. Two months later, the Texas Department of Health started its first WIC program in Conroe. In that first year, 18 WIC projects served more than 42,000 Texans with a budget of \$4 million dollars. Today, more than 76 local WIC agencies serve all 254 Texas counties with a budget more than \$300 million.

Over the 19 years WIC has existed, it has changed and grown. Certifying income eligibility has been streamlined for families already receiving other assistance. Breastfeeding education and promotion has been added. In Texas, families that live in

communities with farmers' markets receive vouchers for fruits and vegetables during summer months. In 1993, Texas WIC clinics began providing free immunizations.

This year, WIC will celebrate 20 years of providing good food, nutrition education and referrals to health-care for women and children. It will be an occasion worth celebrating. Childhood anemia has dropped by two-thirds since the 1967 study – and WIC has been credited as the major factor in that decline.





**Texas Department of Health
Bureau of Nutrition Services**

1100 49th Street
Austin, Texas 78756
(512) 458-7444

WIC is an equal-opportunity program. If you believe you have been discriminated against because of race, color, national origin, age, sex or disability, immediately call the Texas WIC office at 1-800-942-3678.