# October 26, 2026, Advisory Group Meeting

## Notes:

### In attendance

Jenny Barta, Kirsten Lejonvarn, Terrie Jorgenson, Krista Early, Teresa Severson, Hillary Spray, Amy Wittnebel, Amanda Schueler, Jill Wilson, Katie Galloway, Somadee Cheam, Michelle Weberg, Maria Bernhardt, Amber Converse, Amy Bowles, Tammie Edmundson, Jessie Zins, Rebecca Gruenes, Tina Breitenbach.

Not able to attend: Kate Franken, Tami Matti

## Agenda

**Everyday Hero feedback** -Members liked redcap option for nominations. The timeline document was helpful, and some expressed they like NWA conference as part of the award. There were some suggestions for change, to clarify instructions when an advisory rep is nominated, give reminders on local agency call and regional meetings. It would be helpful to know sooner if there are no nominations for a region, and to add regional reps to redcap nomination forms.

**Need a new advisory group chair.** Encouraged any member interested in the position to reach out to Tina. If there is interest from more than one person, AG members can vote. After a new chair member is selected, we will update NWA local agency voting member reps. Consultants will discuss advisory group openings at upcoming November regional meetings.

**Is there interest in meeting in person for our April advisory meeting**. Wednesday, April 21, the day before the conference, was preferred.

**WIC data sharing efforts.** In 2023, U.S. Department of Agriculture's (USDA) Food and Nutrition Administration (FNA) published a policy memorandum WIC Policy Memorandum #2023-5: Data Sharing to Improve Outreach and Streamline Certification in WIC. The memo highlighted support to increase WIC retention and participation. Federal regulations require we protect applicant and participant information. WIC federal regulations in 7 C.F.R. Part 246 defines the necessary steps to be in place if a state agency chooses to move forward with a data sharing agreement including designation by chief

state health officer, written agreement developed at local level with program that defines the purpose, and notice given to applicants and participants before implementing data sharing. MDH also needs to update Minnesota Operations Manual (MOM) policies and the state plan to share procedures with USDA. About a year ago, we completed several of these steps to move forward including drafted MOM policies, communicating with and gaining support from various programs, and obtained the commissioner's letter designating approval.

However, all steps are on hold right now. We were encouraged by leadership to be thoughtful about implementing the next steps. Specifically given public charge changes, current trends in participation, fear among participants, and potential for possible further data sharing through other programs after WIC provides data.

If we take next steps to move forward, our communication to applicants and participants would inform them that data would be shared and they cannot opt out through a text message, letter for those that do not text and through the Rights & Responsibilities. This may cause concern among participants and further affect participation levels. Once we share data and it leaves WIC, we cannot control where that data goes. Question was asked if a staff member works for both WIC and family home visiting, is it still considered a separate program and is a release of information needed even though they may be in the same department at the local level. Answer is yes; and a release of information is needed. The key goal is to protect our participants' data and not create any potential harm for participants. We plan to reassess next year.

**Ideas shared on how to get pregnant women enrolled in WIC earlier.**

MDH WIC sends quarterly outreach texts to people newly enrolled in MA and SNAP, not enrolled in WIC/WIC eligible. AG members mentioned these ideas:

- Develop a partnership with medical clinics in your community.
  - Many local agencies receive referrals from their local clinics for new pregnancies, then follow up with a call or send a letter.
  - Local hospitals send lists of new deliveries, follow up with a call or mail WIC information. Some agencies receive a birth report.
- Many work with referrals from family home visiting programs and/or insurance agencies like Prime West, Blue Plus, Hennepin Healthcare.
- Other outreach opportunities include attending county fairs, community events, early childhood screenings, social media posting, breastfeeding locations, offer/send flyers to clinics and local businesses and hosting baby showers.
- Attend county meetings to offer WIC outreach such as with financial team and child protection team.
- Another note was that WIC receives a strong word of mouth referral system - many new mothers come to WIC because their sister, mom, or friend recommended the WIC program.

## References – complete listing of hyperlinks (optional)

WIC Policy Memorandum #2023-5: Data Sharing to Improve Outreach and Streamline Certification in WIC (https://www.fna.usda.gov/wic/data-sharing)

Minnesota Department of Health - WIC Program, 625 Robert St N, PO BOX 64975, ST PAUL MN 55164-0975; 1-800-657-3942, health.wic@state.mn.us, www.health.state.mn.us; to obtain this information in a different format, call: 1-800-657-3942.

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