

# Training New WIC Staff: Guidance for Coordinators/Preceptors

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#### Introduction

Training new staff is one of the most important functions in establishing and maintaining a quality WIC program. WIC is a multifaceted program and learning the knowledge and skills necessary to provide quality WIC services takes time. This training guide provides a comprehensive outline of training necessary for staff to attain minimum competencies within WIC. It is intended to be completed over a 12–18-month time period (18 mo. for part-time staff). The timeline will vary depending on the new staff person's duties in WIC.

This outline can be modified as necessary to meet your agency's needs; however, new staff need to be trained in all areas and meet the competencies listed within the outline.

This applies to all full, part-time, and very part-time WIC staff.

#### **Administrative Tasks**

There are administrative tasks that need to be completed when a new staff person starts in WIC. The coordinator/preceptor will need to ensure these have been completed **prior** to beginning the training process.

- 1. WINNIE training:
- The <u>WINNIE training</u> modules are a comprehensive review of all the functions in WINNIE. Staff can use them to support learning as needed based on their role within the WIC clinic.
  - Users should view the <u>WINNIE training</u> modules that are pertinent to their role (CPA, Peer, Support Staff, etc.) within the clinic environment.
- Users can access the WINNIE Training Environment to practice performing certification activities and benefit issuance in a non-production desensitized environment. This environment is best used after the <u>WINNIE training</u> modules have been viewed.
  - Users should review the <u>WINNIE Training Environment Access Info</u> to gain access into the WINNIE training environment.

#### 2. WINNIE access:

 Determine what types of access the new staff person should have. See <u>WIC Information</u> <u>System User Roles & Definitions</u>.

- An "authorized staff member" must submit a WIC Information User Requests form to obtain a username. (Only authorized staff have access to the private link to request user access.)
  - Note: If the new staff person is a Coordinator, they should first submit a <u>Request to</u> <u>Submit WIC User Access Changes</u> form to obtain the private link. Once access has been granted, the new Coordinator may submit a WIC Information User Requests form to request access to WINNIE.
- When the new staff person's username has been created and sent to them, they should log in as soon as possible.
- The new staff person's password will be set to the default password; the user is then prompted to create a new password. If not sure what the default password is, contact the help desk (1.800.488.8799; press 2, 2 or <u>mnhelpdesk@gainwelltechnologies.com</u>).
- 3. <u>MN WIC Local Agency Directory</u> on the state WIC website: if the staff person should be listed on the directory, submit <u>Change WIC Staff on MDH Website</u> form to update/add the name AND **email your State WIC Consultant** to alert them of this change.
- 4. Weekly Update: All WIC staff are eligible to receive the <u>WIC Weekly Updates</u>. To receive the weekly email, enter the staff members email: <u>Subscribe to Minnesota WIC Updates</u>.
- 5. **Nutrition Education Plan** update the Staff Information section of your Nutrition Education Plan.

# What is a Preceptor?

A Preceptor is a designated person who has expertise in WIC who will oversee the training of a new staff person and provide practical experience and mentoring. The preceptor will guide the new staff person to work though the New Staff Training (NST) outline and *offer additional resources for learning and developing skills as needed*. This may be the WIC Coordinator, or another designated CPA with experience and expertise.

It is recommended that a primary preceptor be designated for each trainee to provide continuity and coordination to the training process. The primary preceptor may designate others to assist in specific training roles. For example, a CPA that has expertise in PCS skills may assist in that portion of the training, but ultimately the primary preceptor will be responsible for ensuring that the trainee has mastered all skills necessary for working as a WIC CPA or in another WIC role. (See section on Support Staff training below.)

#### **Preceptor Responsibilities**

#### The responsibilities of the preceptor include:

- 1. Mentor trainees through the training process as outlined.
- 2. Answer questions and provide direction and advice.

- 3. Provide opportunities for observational learning.
- 4. Evaluate and discuss hands-on learning activities and discussion questions outlined in training modules.
- 5. Use the Module Answer Keys to review trainee responses for training module activities.
- 6. Perform reviews and observations of certifications, nutrition education, and related work performed by the trainee during the training process.
- 7. Certify that the completion and competency of each WIC Function/Training Activity has been achieved by initialing the training outline.
- 8. Provide additional practice/information/training beyond the standard outline if needed for trainee to reach competencies.
- 9. Monitor progress and assure that training time is allowed, so trainee can complete the trainings and attain competencies in a timely manner.
- 10. Continue to mentor the trainee beyond the NST.

# **Overview of New Staff Training for CPAs**

The NST guide is comprised of four phases, each building on the next and providing the training needed to perform functions in WIC. The time required for a new staff person to progress through the training guide will vary depending on several factors, including previous experience in WIC, academic training, whether they are full-time or part-time, etc. The guide is intended to be flexible, and staff must demonstrate proficiency before performing tasks independently.

**Before the trainee begins a Phase, review the outline with them.** Check-in with your trainee as they proceed through the training outline. There are activities and observations that you will need to complete with your trainee in each Phase. When a Phase is completed, take the opportunity to do a thorough check in with the trainee, and determine any additional training/support that may be needed before they proceed to the next phase.

The final phase, Phase 4, is focused on additional skill development. This training phase is intended to be completed over a 12-18-month period. It is important that this phase not be overlooked or delayed, as it contains opportunities for developing many of the skills necessary for providing *quality* WIC services, beyond a "knowledge" basis.

**NOTE:** If your agency's training plan and resources vary significantly from the New Staff Training Guide, you must maintain a copy of your training plan and documentation of completion for each new staff trained, for review at Management Evaluations.

#### **NST Phase 1**

Phase 1 of the New Staff Training focuses on the immediate skills and competencies needed for a new staff person to begin navigating the WIC Information System and performing certain tasks in clinic. Phase 1 also introduces breastfeeding support and skill development.

After finishing Phase 1, the staff person is qualified to complete *demographics, income assessment, height/weight/hematological measurements, and some Information System functions*. Staff who do not meet the education requirements of a CPA may be trained to perform all Phase 1 tasks if desired by the agency.

We recommend that after completing Phase 1, CPAs be given the opportunity to observe appointments while practicing WINNIE functions and completing the Height/Weight/Blood portions of appointments, along with additional mentoring.

## **NST PHASE 2**

Phase 2 introduces the nutrition assessment and education portions of certification appointments, including Information System procedures along with continuing breastfeeding skills and development. It also introduces the food prescription and food package education.

After completion of Phase 2, the CPA is qualified to independently assign the food package and educate the participant on WIC foods and shopping, *under the supervision of another CPA* who will perform the nutrition assessment and nutrition education portions of the certs/midcerts/additional education visits, *while completing Phase 3.* 

#### **NST Phase 3**

Phase 3 focuses on competencies in nutrition assessment and education by participant category. Breastfeeding skills and developments continue based on staff role in the clinic and Participant Centered Education skills are also introduced. Competencies in Nutrition assessment and education by participant category are evaluated through observation of certification and additional education appointments. It is suggested that a new staff person focus on one participant category until competencies are attained and demonstrated, and then move on to another category. This may not always be possible. Trainees can utilize the education resources as needed to develop competencies while practicing with participants.

Once competencies are demonstrated, the staff person is qualified to see that category of participant *independently, through the entire certification process*. Observations by the preceptor to evaluate competencies may count towards the **required observations** in the first year of employment. (See the MN WIC Program <u>Staff Monitoring Plan</u> for specific requirements.)

**The Basic Nutrition modules are required for those without a degree in nutrition** (*i.e., nurses*). They are optional for those with a nutrition degree but *are recommended as a review*. Additional training resources are available under the "**Training**" section of the MN WIC Local Agency website. We encourage staff to look through the many resources available.

## **NST Phase 4**

Phase 4 focuses on additional skill development, specifically in the areas of High-Risk Counseling, Breastfeeding education and support, PCS skills, and Baby Behavior Education. The training areas can be completed in any order or even simultaneously. These trainings should be completed within 12 months of a new staff's start date (18 months for part-time staff) because developing skills in these areas is an integral part of providing quality WIC services.

As a reminder to preceptors, *staff need time and opportunities for training and mentorship* to continue to develop their skills in these areas.

## **Required Training for All Staff**

Refer to the **Required Training by Classification and WIC Staff Role** chart to determine which trainings are required based on staff role.

**NOTE:** Save the NST Guide Documentation for each phase (1-4) that was completed for review at Management Evaluations.

## **Support Staff Training**

Support staff roles vary widely from agency to agency. All required trainings must be completed; plus, the preceptor should determine what optional trainings will be completed based on support staff's role in clinic. For example, if a person will be completing anthropometric measurements, they must complete that section of the training. If they will have WIC Information System responsibilities, determine which modules, and practice activities need to be completed, etc. Utilize this **New Staff Training Documentation** to track training completion for support staff too.

## **High-Risk CPA Training**

Refer to <u>Minnesota Operations Manual (MOM)</u> Section 6.6: High Risk Individual Nutrition Care for the qualifications needed for individuals to see high-risk participants. Advanced training is required for CPAs who will be counseling participants with high-risk conditions. This training is outlined in Phase 4 of the New Staff training. It can be completed earlier or later in the training process. This outline can also be used to train an existing staff person to see participants with high-risk conditions.

A CPA should be able to demonstrate competencies in the certification process and in counseling all categories of WIC participants prior to being trained as a high-risk CPA. Utilize **Exhibit 6-A** <u>High-Risk and Medical Referral Criteria</u> as a reference guide and resource for all high-risk conditions. High-risk CPAs will also be seeing infants who may need medical formula. High-Risk CPA training may need to include procedures for ordering medical formula and working closely with health care providers. Also, make sure all high-risk policies outlined in this section are reviewed.

## **Breastfeeding Coordinators**

The Breastfeeding Coordinator is the point person for breastfeeding in the agency. Responsibilities include planning and coordinating local breastfeeding promotion and support activities. Exact responsibilities will vary based on agency size and other staff roles. The Breastfeeding Coordinator, WIC Coordinator, and other lead staff in the agency should work to define roles.

The role of the Breastfeeding Coordinator often includes identifying breastfeeding materials, development and dissemination of local breastfeeding policies and the breastfeeding component of the nutrition education plan, training new staff in breastfeeding support and counseling based on their role in the WIC clinic, assuring all CPA staff have completed the WIC Breastfeeding Curriculum level appropriate for their role, keeping up to date with current breastfeeding information and sharing knowledge with staff, and serving as a liaison with other community breastfeeding programs/coalitions. (See **MOM** <u>Section 4.4: Breastfeeding</u> <u>Coordinator</u>)

The agency should have a <u>Designated Breastfeeding Expert</u> (DBE) (a CPA who has at least one year of experience in counseling breastfeeding women, has completed the **USDA Breastfeeding Curriculum** training through level 4, and provides breastfeeding support, including more complex breastfeeding situations.) If the Breastfeeding Coordinator is not the DBE, another individual should be identified to fill this role.

#### **Paraprofessional CPAs**

In addition to the training activities outlined in the NST Guide, Paraprofessional CPAs have additional training requirements. Refer to **MOM** <u>Section 4.3: Competent Professional Authority</u> (CPA) Qualifications and Responsibilities.

## **Documentation of Training**

Once the trainee has completed a phase (1-4) of the New Staff Training as outlined and the preceptor has indicated that competencies in each WIC function have been attained, the trainee and the preceptor will complete the NST Phase (1-4) *documentation for that phase*.

#### Maintain this documentation for review at your agency's next Management Evaluation.

Continue to mentor your trainee as they develop WIC knowledge and counseling skills. Ongoing staff continuing education requirements are outlined in the Staff Training policy **MOM** <u>Section</u> <u>4.5: Staff Training</u>.

#### A few notes:

*Skill Checks* and Information System *Practice Exercises* are included in the training modules unless otherwise noted.

<u>WIC Module Answer Keys</u> are found on the <u>WIC New Staff Training</u> page.

Modules are from MDH WIC unless otherwise noted.

# **Reference – Complete Listing of Hyperlinks**

WINNIE training (https://www.health.state.mn.us/people/wic/localagency/winnie/training.html) WINNIE Training Environment – Access Info (https://www.health.state.mn.us/docs/people/wic/localagency/winnie/trainenviron.pdf) MN WIC Local Agency Directory (https://www.health.state.mn.us/forms/cfh/wicdirectory/index.html?localAgency) Change WIC Staff on MDH Website (https://redcap.health.state.mn.us/redcap/surveys/?s=AX4E84PMLR) WIC Weekly Updates (https://www.health.state.mn.us/people/wic/localagency/wedupdate/index.html) Subscribe to Minnesota WIC Updates (https://public.govdelivery.com/accounts/MNMDH/subscriber/new?topic\_id=MNMDH\_677) WIC Information System User Roles & Definitions (https://www.health.state.mn.us/docs/people/wic/localagency/winnie/roles.pdf) **Request to Submit WIC User Access Changes** (https://redcap.health.state.mn.us/redcap/surveys/?s=WXHYATKLRF) WIC Module Answer Keys (https://www.health.state.mn.us/people/wic/localagency/training/answerkeys.html) Staff Monitoring Plans (https://www.health.state.mn.us/docs/people/wic/localagency/program/mom/exhbts/ex4/4g. pdf) Required Training by Classification and WIC Staff Role (https://www.health.state.mn.us/docs/people/wic/localagency/training/nutrition/nst/required .pdf) Section 6.6 High Risk Individual Nutrition Care Plans (https://www.health.state.mn.us/docs/people/wic/localagency/program/mom/chsctns/ch6/sct n6\_6.pdf) Exhibit 6-A High-Risk and Medical Referral Criteria (https://www.health.state.mn.us/docs/people/wic/localagency/program/mom/exhbts/ex6/6a. pdf) Section 4.4 Breastfeeding Coordinator (https://www.health.state.mn.us/docs/people/wic/localagency/program/mom/chsctns/ch4/sct n4\_4.pdf)

<u>Qualifications and Roles: WIC-Designated Breastfeeding Expert</u> (https://wicworks.fns.usda.gov/node/qualifications-wic-designated-breastfeeding-expert)

#### TRAINING NEW WIC STAFF: GUIDANCE FOR COORDINATORS/PRECEPTORS

Section 4.3.1 Competent Professional Authority (CPA) Qualifications and Responsibilities (https://www.health.state.mn.us/docs/people/wic/localagency/program/mom/chsctns/ch4/sct n4\_3.pdf)

Section 4.5 Staff Training

(https://www.health.state.mn.us/docs/people/wic/localagency/program/mom/chsctns/ch4/sct n4\_5.pdf)

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

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