

**Indiana WIC Program
Indiana State Department of Health
State Disaster Plan**

Purpose

Although the WIC Program is not designed to be a disaster assistance program, and therefore is not considered a first line of defense, WIC policies are designed to allow State agencies flexibility in program design and administration to support planning and preparation for continuation of benefits to clients during times of natural or other disasters or public health emergencies. No additional funds are designated by law for WIC disaster relief, and WIC must operate in disaster situations within its current program context and funding (WIC Policy #MWSSNP 95-7, WIC Disaster Policy and Coordination).

In the event of a disaster or emergency, the State and Local Agency will work cooperatively to arrange for minimal disruption of services. This plan will guide Indiana WIC State and Local Agencies activities during an emergency situation. "Disaster" is used in the broad sense that includes closure due to power outages, tornadoes, and other inclement weather, system destruction, fire, and pandemic disease outbreak.

Covansys IT Disaster Recovery Plan for Indiana WIC minimizes system downtime to 24 hours in the event of a disaster at the hosting facility in Kansas. The Indiana Emergency Action Plan (EAP), Continuity of Operations Plan (COOP) and the Pandemic Influenza Plan, identify and define the responsibility of Indiana State Department of Health (ISDH) during emergencies.

Scope

The plan applies to any WIC entity affected by a disaster and unable to continue to provide necessary services in the area. If state offices are affected, WIC staff may work from home or other remote location designated by the State Health Commissioner. If local services are affected, alternate service delivery locations may be set up or clients may be referred to other programs such as food banks or American Red Cross. Key elements of the plan include:

State Agency Procedures

- Communicating with USDA and State Officials
- Obtaining laptops and program information stored offsite
- Fielding calls from vendors and local agencies
- Deploying to locally affected areas

Local Agency Procedures

- Communicating early and often with the State of Indiana
- Communicating with local disaster relief partners
- Finding temporary facilities
- Expediting disaster victims in need of services
- Replacing lost or destroyed unredeemed WIC Checks and Cash Value Vouchers (CVV)

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- Replacing lost or destroyed breastfeeding pumps and supplies

Policy

1. Emergency Response – To the extent possible, local agencies shall continue to provide services to clients during a public health emergency or disaster situation.
 - a. Local agencies shall provide for the safety of WIC personnel, clients and equipment.
 - b. Records, equipment and supplies shall be secured.
 - c. Services shall be restored as soon as possible following such incidents.
 - d. Clients shall be notified of disruption or relocation of services.

2. Disaster Plan
 - a. The local agency shall develop a disaster plan that will include:
 - i. A copy of the parent agency’s disaster preparedness plan, if applicable.
 - ii. Local governmental/community agency emergency contact information.
 - iii. State and local WIC staff contact information.
 - iv. A plan for notifying clients of service disruption, relocation and availability of WIC services. This includes referral to the nearest clinic, agency or health system that local agencies can refer participants to in the event of a disaster.
 - b. Local agencies may use WIC funds to provide essential equipment to administer the WIC Program in an emergency, e.g. cell phone, air card, etc.
 - c. The local agency shall review with staff on an annual basis the contingency plans for delivery of services in a disaster.
 - d. In the event that WIC services cannot be provided in a timely manner due to a public health emergency/disaster, the local agency shall contact the State WIC Program for allowable options. The local agency shall provide any available information on the following:
 - i. WIC services that are disrupted.
 - 1) Clinic operations/building structure (physical damage, availability of electricity and water).
 - 2) Temporary facility (if applicable), computer, internet service and food instrument availability.

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- 3) Availability of staff.
- 4) Report of availability of WIC grocery stores and food.

- ii. The potential number of clients who are affected.
- iii. Damaged/destroyed WIC records, equipment and/or property.
- iv. The extent of time the local agency will be inoperable.
- v. Recovery/restoration plan.

- e. The State agency shall make decisions related to waiver of policy and procedure requirements upon request of the local agency.
- f. The local agency shall establish communication with the local health department hospitals, and the American Red Cross for direction in the event of a disaster/public health emergency.

3. Certification

- a. Homeless disaster victims seeking WIC services shall be considered at special nutritional risk and certified within 10 days of their request for WIC services.
- b. The income, residency and identity documentation requirements do not apply to individuals for whom documentation is not available.
- c. Displaced individuals who are temporarily residing with another family shall be considered a separate family.
- d. Hemoglobin measurements may be deferred up to 90 days for clients.
- e. In cases of emergencies/disasters, local agencies may use flexibility in scheduling WIC appointments when required because of staffing shortages or inability of clients to attend the clinic.
- f. Persons with a serious illness that may be exacerbated by coming into the WIC clinic may be exempt from the physical presence requirement for certification visits.

4. Food Benefits

- a. Breastmilk shall be promoted as the safest milk for infants and young children during an emergency or disaster situation. Local agencies may replace lost or destroyed breast pumps and supplies to categorically eligible clients on a case by case basis when certification is not possible until supplies run out. Encourage fresh breast milk to be used within 6 hours when refrigeration is not possible.
- b. WIC food benefits, including formula, may not be used for purposes other than providing benefits to categorically eligible clients.

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- c. Local agencies may replace lost/destroyed benefits on approval of the local agency WIC Coordinator.
 - d. If able, local agencies shall immediately replace Indiana WIC CVV's that have been lost or destroyed during a disaster.
 - e. Local agencies shall be aware of, and refer clients to, emergency feeding locations.
 - f. Local agencies may modify infant food packages to include Ready-to-Use or powdered infant formulas in instances where water supply or refrigeration is inadequate.
 - g. Exempt Infant Formula/WIC-Eligible Medical Foods.
 - i. Disaster victims transferring into Indiana WIC clinics with a food instrument (coupon or voucher) that specifies an exempt infant formula or WIC-eligible medical food may be issued benefits for the specified item up to the end date of the coupons/vouchers presented.
 - ii. Persons seeking WIC benefits who were not participants prior to the disaster must obtain medical documentation prior to issuing the exempt infant formula or WIC-eligible medical foods.
 - h. In the event of a disaster that results in discontinuation of WIC services or unavailability of food in retail stores, local agencies must refer clients to other emergency food programs such as food banks, emergency feeding sites, Red Cross or other disaster relief agencies.
5. Nutrition Education and Outreach
- a. Local agencies shall encourage mothers to initiate, continue or resume breastfeeding their infants or young children if possible during emergency or disaster situations. Mothers with formula-fed infants less than one month old and mothers who recently discontinued breastfeeding shall be encouraged to relactate. Breastfeeding pumps and supplies may be provided to categorically eligible clients on a case by case basis when certification is not possible until supplies run out. Hand expression will be taught and encouraged, especially during power outage.
 - b. Attention should be given to providing nutrition education related to food preparation and safety or special medical needs for high risk clients. Topics may include:
 - i. Limited or no access to safe water supply.

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- ii. Handling and storage of breastmilk or infant formula.
 - iii. Keeping food safe during an emergency.
 - c. During human pandemics, clients shall be encouraged to use self-directed nutrition education via wichealth.org for secondary nutrition education, if available. Clients who complete nutrition education via wichealth.org may have benefits loaded without presenting at the clinic.
 - d. Local agencies are encouraged to maintain a nutrition education lesson plan related to food safety.
 - e. Local agencies may post "Cover Your Cough" and "Washing Your Hands" or related posters in clinic areas.
6. Biological Emergencies/Pandemics
- a. The Local Agency WIC Coordinator shall follow local health department recommendations for suspension of clinics or other precautions to be taken in WIC clinics.
 - b. Staff shall be encouraged to stay home when ill during a human pandemic. In the event that WIC services cannot be maintained due to staff absence, contact the State WIC office for allowable options.
 - c. With the approval of the State agency, local WIC resources may be incorporated into the local agency Biological Disaster Response plan.
 - d. Local agencies may work with their local health department or other community agencies to participate in preparedness planning.