# Rights and Responsibilities of Applicants and Participant Policy No. CT- 860.03

Effective Date: October 1, 2016 No. of Pages: 4

## **Policy**

At every certification and recertification each participant, guardian, parent, or caretaker must sign that they have read, or have had read to him or her, and understand the <u>WIC Rights and Responsibilities</u> to:

- 1. acknowledge an understanding of his/her rights and responsibilities,
- 2. authorize release of information; and
- 3. consent to anthropometric measurements and blood work.

The Rights and Responsibilities form must have a parent/WIC Caregiver/Alternate Caregiver signature and date before staff complete a certification or issue WIC checks. If multiple family members are being certified on the same day, staff members are to indicate all the names on the Rights and Responsibilities Form so the parent/WIC Caregiver/Alternate Caregiver is only required to sign once.

## **Purpose**

To ensure that WIC applicants and participants or their parents or caretakers are fully informed of and understand their program rights and responsibilities and eligibility status in the program.

#### **Procedures**

The Local Agency Must:

- I. Provide the participant, parent, or caretaker with a WIC Identification Folder and explain the Rights and Responsibilities statement is contained on the inside of the WIC Identification Folder at initial certification.
- II. Allow time for the participant, parent, or caretaker to read, or have read to them, the Rights and Responsibilities Statement. Ensure that the Rights and Responsibilities are explained to the applicant or participant if the individual cannot read or does not understand English
- III. Allow a new caregiver to read, or have read, and sign a <u>Caregiver Statement of Change</u> form when the caregiver changes.
- IV. Issue the Rights and Responsibilities form using the following guidelines:
  - A. Enter the current date on the Rights and Responsibilities form.
  - B. Obtain the participant's, parents, or caretaker's signature on the Rights and Responsibilities form to document that they received and understand their rights and responsibilities.

Revised June 2018 Page 1 of 3

# Rights and Responsibilities of Applicants and Participant Policy No. CT- 860.03

Effective Date: October 1, 2016 No. of Pages: 4

- C. Provide the participant, parent, or caretaker with a copy of the signed Rights and Responsibilities form.
- D. File the signed and dated Rights and Responsibilities form in the participant's health record.
- E. Retain the signed and dated Rights and Responsibilities form for five years, or until all issues related to any litigation, claim, negotiation, audit, or other action involving the participant, parent or caretaker is resolved, whichever is later.
- V. The LA must emphasize the following items in conjunction with the Rights and Responsibilities Statement:
  - A. <u>The illegality of dual participation:</u> All participants must have dual participation explained, including the consequences of being identified as a dual participant.
  - B. <u>Food Delivery System in the Local Area:</u> The local food delivery system must be explained to the adult applicant/participant or the parent/caregiver/guardian/spouse or alternate-proxy of an infant or child applicant/participant, including an overview of the Approved Food List and the local WIC authorized vendors in the area. To access a listing of WIC authorized vendors by District and County, visit <a href="http://dph.georgia.gov/clinic-listing">http://dph.georgia.gov/clinic-listing</a>, and select the link, "Clinics in Georgia".
  - C. How to File a Complaint: Applicants/Participants are to be informed of their right to file a complaint, how to file a discrimination complaint, and the complaint process (See Policy, Complaint Handling). Applicants/Participants must also have explained to them that reports of discrimination alleged in a complaint will be investigated by the Office of Program Integrity and Strategy and/or the Office of Vendor Management at the State WIC Office.
  - D. Explain the reason for the participant's visit to the program and the purpose of the program, example: "The goal of the WIC program is to improve the health and nutrition of families. Today we are going to talk about your child's health and diet to see if s/he is eligible for WIC and how WIC can help."
    - a. If eligible, inform the participant of their eligibility and the length of the certification period.
    - b. Inform the participant that they will need to be recertified at the end of their certification period to determine if WIC benefits may continue past that period.

Revised June 2018 Page 2 of 3

## Rights and Responsibilities of Applicants and Participant Policy No. CT- 860.03

Effective Date: October 1, 2016 No. of Pages: 4

- c. Explain the reason the participant is being enrolled on the program by stating a connection between their eligibility and the desired health outcome. This does not mean every risk must be reviewed, but rather is intended to summarize the reasons the participant is being enrolled. EXAMPLE: "Your child is being enrolled in WIC so we can help with his good nutrition and watch his growth and weight gain over the next six months."
- E. Explain that the food provided by the WIC Program is supplemental; it is not intended to provide all of the participant's daily food requirements.
- F. Instruct participants on the identification requirements for WIC and who may be issued food benefits, attend nutrition education, and bring a child to certification appointments.
- G. Explain that giving away, selling or attempting to sell WIC foods, WIC-issued breast pump, formula, or vouchers online or by any other means will be considered a participant violation.
- VI. Ensure that Limited English Proficiency (LEP) or visually and/or hearing-impaired applicants or participant understand their rights and responsibilities.

### **Authority**

7 CFR § 246.7(j) 7 CFR § 246.8(c)

### **Definitions/Supporting Information**

**Applicant-** An individual who comes to the WIC clinic requesting WIC services.

**Participant -** An individual who receives WIC benefits or services (i.e. supplemental foods, breastfeeding services, nutrition education, referrals).

Revised June 2018 Page 3 of 3