

**Monitoring Plan for the
Special Supplemental Nutrition Program for
Women, Infants, and Children (WIC)**

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Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

PROGRAM OVERVIEW

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is funded by the United States Department of Agriculture/Food and Nutrition Services (USDA/FNS) and is administered in North Carolina by the Nutrition Services Branch, Division of Public Health, DHHS. The program is designed to provide food, nutrition education, breastfeeding support, and referrals to health and social services to low-income pregnant, postpartum, and breastfeeding women; infants; and children until age five. Additional information on WIC can be found at <http://www.fns.usda.gov/wic/> and at www.nutritionnc.com. The program operates in all 100 counties within NC with direct program services provided through local public health departments/districts and/or community and rural health agencies. The community and rural health agencies for SFY 08-09 are:

Rural Health Group, Inc.
Lincoln Community Health Center, Inc.
Tri County Community Health Council, Inc.
Eastern Carolina Human Services Agency, Inc.
Piedmont Health Services, Inc.

MONITORING ACTIVITIES

On Site-Reviews of Local WIC Programs

Federal requirement: It is a federal requirement that each local WIC Program be monitored on-site at least once every two federal fiscal years and that during these visits, at least 20% of sites in a local agency be monitored. [7 CFR Ch.II 246.19 (b)(3)]. At a minimum, monitoring of local agencies must include a review of management practices, the certification process, nutrition education, civil rights compliance, procedures to ensure accountability, financial management systems, and food delivery systems. The monitoring process includes a review of administrative and clinical records and documents, an observation of activities, and interviews with staff.

Process used: Refer to Attachment I (which is a chapter in the WIC Program Manual) for information on this process including the report of findings, local agency response, and follow-up to monitoring by the regional nutrition consultant. Attachment I also includes a copy of the WIC monitoring tool. The monitoring tool is reviewed annually and updated as needed.

Documentation: A monitoring packet is prepared for each event when it is closed out. This packet includes the letter of introduction with dates of the review; the report of findings; the local agency corrective action plan; the close-out letter; and the working papers of the reviewers (i.e., completed tools). Each monitoring packet is scanned into docushare. A hard copy is frequently maintained as well by the local agency and by the regional nutrition consultant.

Follow-up to findings: The regional nutrition consultant follows-up on the implementation of the corrective action plan by the local WIC Program within 12 months of the close-out of the

ATTACHMENT I

Chapter 15 Monitoring /Auditing

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There are federal requirements for WIC Program monitoring activities and program audits. The purpose of this Chapter is to provide information about these required activities.

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monitoring event. Significant findings from a monitoring event are discussed with the Nutrition Services Branch Head and Operations Manager.

Monitoring schedule: Refer to Attachment II for the schedule of WIC Program monitoring events for FY'07-'08 and for FY '08-'09.

Technical Assistance Provided to Local WIC Programs

Regional nutrition consultants provide on-going technical assistance to local WIC Programs through on-site visits, telephone calls, and email.

Training of Local Agency Staff

Statewide training is provided on a periodic basis to WIC local agency staff on program policies and procedures. These trainings are done through face-to-face statewide and/or regional trainings, statewide webinars, and self-paced training modules.

Review of Financial Reports

There are a variety of procedures in place to monitor the financial and contractual activities of local WIC programs including:

- a.) an annual budget which is based on a per participant funding formula and which includes four budgets with each one having a defined minimum and maximum threshold for spending
- b.) the annual consolidated agreement (or contract for local programs that are not public health departments) which each local agency signs
- c.) an agency specific agreement addenda which is an addendum to the consolidated agreement and is a set of performance objectives specific to a program's services. The WIC agreement addendum also provides the mechanism for developing the Local Agency Nutrition Education Plan which is a federal requirement.
- d.) monitoring of local agency requested budget revisions to assure that the requests are compliant with the required minimum and maximum budget thresholds for spending
- e.) monitoring of local agency expenditure reports required of programs not housed within a public health department
- f.) monitoring of lapsed funds
- g.) monitoring of monthly participation by local WIC program
- h.) an annual review and update of the fixed assets report by each local agency

Audits

All local agencies are required to have an annual audit performed in accordance with the Single Audit Act of 1984 as implemented by OMB Circular A-133. The audit report is submitted to the Local Government Commission (LGC) by the County Administration (if single county health department) or the District Health Department or Public Health Authority (if so organized) within (six) 6 months following the close of the contract. If the Contract entity is a non-governmental entity, such entity is subject to the provisions of G.S. 143C-6-23. Additionally, any non-governmental entity except a for-profit corporation is subject to the provisions of OMB Circular A-133. Audit findings referred to the DHHS Controller's Office by LGC are investigated and findings verified by the DHHS Controller's Office staff with assistance of the Division of Public Health Program staff.

Monitoring

It is a federal requirement that each local WIC program be monitored at least once every two federal fiscal years.

■ Components of Local Agency Monitoring

At a minimum, monitoring of local agencies must include a review of management practices, the certification process, nutrition education, civil rights compliance, procedures to ensure accountability, financial management systems, and food delivery systems. The monitoring process includes a review of administrative and clinical records and documents, an observation of activities, and interviews with staff.

■ Monitoring Visit

- **Monitoring Team.** A monitoring team is usually comprised of two people; a Regional Nutrition Consultant and a central office Nutrition Services Branch staff person. Sometimes there may be an additional team member(s).
- **Monitoring Tool.** A standard tool is used to complete a Local Agency WIC Program monitoring. Attachment 1 is the current WIC Program Monitoring Tool. This tool may be used also by Local Agency staff to conduct ongoing quality assurance efforts.
- **Site Selection.** For agencies with more than one site, the Nutrition Services Branch makes every effort to vary the site monitored from one monitoring cycle to another. Agencies with more than 5 fully operational sites will have at least two sites monitored during a visit. These sites will vary from one monitoring cycle to another.
- **Dates of the Monitoring.** The dates of a monitoring visit are established by the Regional Nutrition Consultant in conjunction with the Local Agency staff. The dates are usually established three to four months before the monitoring visit is to occur and are confirmed in writing by the Regional Nutrition Consultant. The monitoring process usually occurs over 3-4 days, but may be shorter or longer depending on the situation.

■ Report Of Findings From Monitoring Visit

- **Exit Conference.** The report of findings is presented orally during an exit conference with Local Agency staff.
- **Written Report.** Within approximately 30 days of the completion of the monitoring visit, the Local Agency will receive a written report. These reports are addressed to the Director of the agency with a copy sent to the Local Agency WIC Director.

- **Types of Findings.** There are two types of findings that may result from a WIC Program monitoring.
 - **Recommendations** are suggestions that the review team believe will further enhance WIC Program services. They do not require a written response.
 - **Deficiencies** reflect non-compliance with program rules and policies and require a written response.

■ **Local Agency Response to Report of Findings**

Local Agencies with cited deficiencies are given approximately 60 days from the date of the monitoring report to submit a detailed corrective action plan (CAP) to the monitoring team. The CAP must include specific actions for assuring complete and permanent correction of each deficiency, a timetable for implementation of the actions, and any other information requested in the report of findings. The CAP must be sent in hard copy with a cover memo on agency letterhead. The cover memo must be signed by the Director of the Agency or by his/her designee. The State Agency may require written clarification of a CAP.

■ **Monitoring Close-Out**

Once the monitoring team determines that the Corrective Action Plan (CAP) adequately addresses all the deficiencies noted in the monitoring report, the team will send correspondence to the Local Agency indicating the WIC Program monitoring process is closed.

■ **Follow-Up To Monitoring**

The expectation of the State Agency is that the Local Agency fully implements all corrective actions and permanently corrects cited deficiencies to the satisfaction of the State Agency. Within 12 months of the close-out of the monitoring visit, the Regional Nutrition Consultant will visit the local agency to assess the status of the Local Agency CAP implementation. This visit will be documented in a written consultation report and sent to the Local Agency. Additional follow-up visits may be scheduled depending on the situation.

■ **Confidentiality of Applicant/Participant Information**

During the monitoring visit, all applicant and participant information is maintained in a confidential manner by the monitoring team. Following the monitoring, the working documents and report of findings from a Local Agency WIC Program Monitoring are public information. For this reason, applicant and participant identifying information must not be documented in the working papers nor cited in verbal or written reports of findings.

Audits

An audit of a local agency is an independent investigation into the agency's financial operations, including its compliance with federal laws and regulations. WIC Programs can be audited in two ways:

■ **Mandated Audits**

All local agencies are required to have an annual audit performed in accordance with the Single Audit Act of 1984 as implemented by OMB Circular A-133. The audit report shall be submitted to the Local Government Commission (LGC) by the County Administration (if single county health department) or the District Health Department or Public Health Authority (if so organized) within (six) 6 months following the close of the contract. If the Contract entity is a non-governmental entity, such entity is subject to the provisions of G.S. 143C-6-23. Additionally, any non-governmental entity except a for-profit corporation is subject to the provisions of OMB Circular A-133.

Audit findings referred to the DHHS Controller's Office by LGC will be investigated and findings verified by the DHHS Controller's Office staff with assistance of the Division of Public Health Program staff.

■ **Periodic Federal Audits**

These may occur at the request of USDA.

WIC Program Monitoring Tool

The WIC Program Monitoring Tool is comprised of five components:

Part I: Administrative Services Review

Part II: Nutrition Services Review

Table 1: Client Observation

Table 2: WIC Record Review (Pregnant and Postpartum Women)

Table 3: WIC Record Review (Infants and Children)

Local Agency: _____
 Date of Visit: _____
 Monitoring Team: _____
 Site(s) Monitored: _____

WIC Program Monitoring Tool
Part I: Administrative Services Review
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1. Application Process & Transfer of Certification

Review Area	Reviewers Notes	Status**
<p>1.1. Does the local agency follow required procedures for processing applications for the WIC Program?</p> <p><u>Minimum Standard:</u> An application must be initiated at the time an individual inquires in-person about participation in the WIC Program. For applications that cannot be processed on the day of application, a pending record must be established in the WIC Data system for the applicant and an appointment for eligibility determination scheduled within processing standards. When an agency does not use a standard appointment system, there must be a written policy for how eligibility determination of pending applications will be handled. Pregnant women who miss their certification appointment, must receive notification of the missed appointment within 10 days. (WPM, Chapter 6).</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review the records of five individuals from the pending list included in the monitoring packet. Use the table below to document findings. ▪ Include at least 3 women in the sample if possible. ▪ Interview staff ▪ Ask staff for next available appointment for a pregnant woman, infant, child, and postpartum women. 		

Table for Review Areas 1.1: Pending Applications

Use the report included in the monitoring packet and/or print a list of pending individuals from screen 19. Select 5 records (include 3 pregnant women if possible). Review appropriate HSIS screens (i.e., master file, certification, appointments, notices) to assure correct procedures are being followed.

	1	2	3	4	5
1. Client Identifier Number					
2. WIC status (1 = Woman; 2 = Infant; 3 = Child)					
3. Required components of application are complete					
▪ Name					
▪ County of residence					
▪ Date of birth					
▪ Migrant status					
▪ WIC status					
▪ Address					
▪ Sex					
▪ Telephone number (if available)					
▪ Race					
▪ Date of initial application					
4. Scheduled appointment date / or walk-in policy					
5. Appointment within processing standards					
6. Documentation of F/U for missed appointments					
▪ Required for pregnant women					

Code For Table: ✓=Present M=Missing NA=Not Applicable I=Incomplete

1. Application Process & Transfer of Certification

Review Area	Reviewers Notes	Status**
<p>1.2. Is physical presence of applicants/participants noted and documented at each certification/recertification?</p> <p><u>Minimum Standard:</u> At the initial certification and at each recertification, all applicants/participants must be physically present. Physical presence or the legitimate absence of physical presence (i.e., there are limited exceptions to the physical presence requirement) must be documented in the client's health record. (WPM, Chapter 6)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe physical presence for 3-5 clients using Table 1, item 6 to document findings ▪ Link with findings from the clinical record review. 		
<p>1.3. Is proof of identification and proof of residence reviewed and documented according to guidelines?</p> <p><u>Minimum Standard:</u> Proof of identification and proof of residence must be reviewed and documented at every certification and for participants transferring to the program. (WPM, Chapter 6)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe screening of proof of identification and proof of residence for 3-5 applicants using Table 1, items 7-8 to document findings. 		

1. Application Process & Transfer of Certification

Review Area	Reviewers Notes	Status**
<p>1.4. Is income eligibility screened and documented according to guidelines?</p> <p><u>Minimum Standard:</u> Income must be screened and documented at every certification. Transfers to the program who are not due for recertification would not need income screening. (WPM, Chapter 6)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe income screening and review documentation for 3-5 applicants using Table 1, item 9 to document findings. If possible include at least one full income screening. • Review documentation of income eligibility for 5 individuals on the LA generated ineligible list using the table below to document findings. 		

Table for Review Area 1.4: Income Eligibility

Review documentation of income eligibility for 5 individuals on the LA generated ineligible list.

	1	2	3	4	5
1. Client Identifier Number					
2. Proof of income or adjunct income eligibility documented					
3. Economic unit determined and documented					
4. Income eligibility determined correctly					
5. Signed/dated by applicant					
6. Signed/dated by staff					
7. Ineligibility notice documented					

Code For Table: ✓=Present M=Missing NA=Not Applicable I=Incomplete

Review Area	Reviewers Notes	Status**
<p>1.5. Does staff offer the participant/parent/caretaker the opportunity to designate a proxy at each certification?</p> <p><u>Minimum Standard:</u> Applicant must be offered the opportunity to designate a proxy for food instrument pick-up. (WPM, Chapter 8)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe 3-5 certifications using Table 1, item 10 to document findings. 		

1. Application Process & Transfer of Certification

Review Area	Reviewers Notes	Status**
<p>1.6. Are applicants/participants made aware of their rights and responsibilities for program participation?</p> <p><u>Minimum Standard:</u> At each certification, staff must make the applicant/participant aware of the rights and responsibilities of program participation and in such a way that accommodates the language and literacy needs of the client. The applicant/participant must sign and date that they understand the rights and responsibilities. (WPM, Chapter 6) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe 3-5 certifications using Table 1, item 11 to document findings. 		
<p>1.7. Does the local agency have a procedure for transferring participants and accepting transfers?</p> <p><u>Minimum Standard:</u> Local agencies must ask clients at certification about plans to move during the certification period and issue VOC cards to participants/caretakers who plan to move out-of-state. Summary sheets may be used instead of VOC cards only for in-state transfers. VOC cards, WIC summary sheets, and telephone verification may be used when accepting transfers. If transfers are not enrolled on a walk-in basis, they should be enrolled within a reasonable time period. (WPM Chapter 6) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Interview staff ▪ Observe 3-5 certifications using Table 1, item 12 to document findings. ▪ Observe a client requesting transfer into the program if possible. 		
<p>1.8. Does the local agency make program services more accessible for individuals who are employed, attend school, live in a rural area, and/or have transportation problems?</p> <p><u>Minimum Standard:</u> The WIC Program is required to make program services more accessible for applicants/participants who are employed, attend school, live in a rural area, and/or have transportation problems. There are a variety of approaches to increase accessibility including scheduling appointments at individual's convenience and extending clinic hours. (WPM, Chapter 6) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Interview staff ▪ Review clinic schedules (on profile sheet) ▪ Review appointment schedules 		

** ✓=Meets Minimum Standard D=Deficiency R=Recommendation NA=Not Applicable

2. Food Instrument Issuance

Review Area	Reviewers Notes	Status**
<p>2.1. Do participants sign food instruments and sign and date food instrument receipts?</p> <p><u>Minimum standard:</u> Food instruments must be signed by the person receiving the food instruments at pickup, except in the case of proxies who do not intend to transact the food instrument. A signature and date of the person receiving food instruments is required on all receipts. (WPM Chapter 8)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe issuance to 3-5 participants using Table 1, item 14 to document findings. ▪ Review a sample of printed food instrument receipts 		
<p>2.2. Are the Preprinted Food Instrument (PPFI) issuance logs complete for each issuance?</p> <p><u>Minimum Standard:</u> PPFI issuance logs must reflect the disposition of each PPFI. All information requested on the log must be completed for each issuance. Documentation of voided and mailed FI should be noted also. (WIC ADP Manual Chapter 3)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review PPFI issuance logs ▪ Observe issuance of PPFI when possible 		
<p>2.3. Is Preprinted Food Instrument (PPFI) issuance entered into the WIC ADPS no later than close of business of the next working day?</p> <p><u>Minimum Standard:</u> Issuance of PPFI's must be entered into the WIC ADPS as quickly as possible but no later than close of business of the next working day. (WIC ADP Manual Chapter 2)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review the unmatched redemption report to see unmatched redemption rate of PPFI's ▪ Interview staff 		

2. Food Instrument Issuance

Review Area	Reviewers Notes	Status**
<p>2.4. Does the local agency document proof of identity at food instrument issuance?</p> <p><u>Minimum Standard:</u> Staff must document proof of identity of the participant/ parent/caretaker/proxy at each food instrument issuance. Documentation must be consistent across staff and in accordance with the local agency written policy. (WPM, Chapter 8)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe issuance to 3-5 participants using Table 1, item 14 to document findings. ▪ Review the agency's written policy 		
<p>2.5. Are food benefits issued in accordance with policy?</p> <p><u>Minimum Standard:</u> Issuance of food benefits should occur in accordance with policy at the initial issuance, subsequent issuance, and in "special situations" such as required monthly issuance and issuing early/late, at the end of categorical eligibility, near the end of certification, or when a formula prescription changes. (WPM Chapter 8)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe issuance to 3-5 participants using Table 1, item 14 to document findings. ▪ Review over-issuance report in the monitoring packet using the table below to document findings. ▪ Interview staff 		

Table for Review Area 2.5: Food Benefits Issuance
Document over-issuance status for 5 individuals on the over-issuance report.

	1	2	3	4	5
8. Client Identifier Number					
9. Action Due Date					
10. Highest Issuance					
11. Valid Issuance					

2. Food Instrument Issuance

Review Area	Reviewers Notes	Status**
<p>2.6. Are clients educated on how to use food instruments at the initial certification?</p> <p><u>Minimum Standard:</u> At the initial certification, staff must educate clients on how to use food instruments including food selection, approved vendors, replacement of food instruments, and use of coupons. (WPM, Chapter 8)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe issuance to 3-5 participants using Table 1, item 15 to document findings if initial issuance. ▪ Interview staff 		
<p>2.7. Are food instruments voided, unclaimed or replaced according to program requirements?</p> <p><u>Minimum Standard:</u> Food instruments that are voided, unclaimed, or replaced must be invalidated per policy including writing "VOID", "UNCLAIMED", or "REPLACED" in the "pay exactly" box on the invalidated food instrument. (WPM Chapter 8)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review voided, unclaimed, and replaced food instruments and PPFI ▪ Interview staff 		

3. Security And Accountability

Review Area	Reviewers Notes	Status**
<p>3.1. Do staff document issuance of Verification of Certification (VOC) cards and Summary Sheets on the VOC Card/Summary Sheet Issuance log?</p> <p><u>Minimum Standard:</u> A log of all VOC cards and Summary sheets that have been issued must be kept. If the numbers of VOC cards are not in consecutive order, the local agency should be able to account for those missing from the consecutive order. (WPM Chapter 6) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review VOC Card/Summary Sheet issuance logs 		
<p>3.2. Do staff inventory Verification of Certification (VOC) cards on a quarterly basis?</p> <p><u>Minimum Standard:</u> An up-to-date log of all VOC cards received from the State Office must be maintained. Local agency must do a quarterly review (February, May, August, November) of the inventory log and the physical inventory of VOC cards on hand. The VOC Inventory Log should be in agreement with the physical inventory of VOC cards and the VOC/Summary Sheet Issuance Log. (WPM Chapter 6) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review inventory log and documentation of quarterly inventory using report of VOC cards included in the monitoring packet. 		
<p>3.3. Does the local agency secure check stock when not in use?</p> <p><u>Minimum Standard:</u> The local agency is responsible for keeping check stock in a locked storage area when not in use. (WIC ADP Manual Chapter 3) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ View storage areas ▪ Interview staff 		
<p>3.4. Does the local agency secure pre-printed food instruments after hours and whenever staff is not in the issuance area?</p> <p><u>Minimum Standard:</u> The local agency is responsible for keeping pre-printed food instruments in a locked storage area when not in use. (WIC ADP Manual Chapter 3) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe storage areas ▪ Interview staff 		

3. Security And Accountability

Review Area	Reviewers Notes	Status**
<p>3.5. Does the agency staff protect access to the WIC ADP system and to MICR printers?</p> <p><u>Minimum Standard:</u> Local agency staff should log out of the WIC ADP system when away from their work station, never share WIC user ID and/or passwords, and limit physical access to MICR printers. (WIC ADP Manual Chapters 1 and 3) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe staff practices ▪ Interview staff 		
<p>3.6. Are inventory records for Preprinted Food Instruments (PPFI's) completed quarterly and all PPFI's accounted for?</p> <p><u>Minimum standard:</u> Inventory must be done quarterly by printing inventory sheet from the HSIS system and checked against PPFI's on hand. (WPM Chapter 8) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review inventory logs 		
<p>3.7. Is there a system in place to retrieve printed food instrument receipts and invalidated food instruments?</p> <p><u>Minimum standard:</u> Printed food instrument receipts must be stored in a method easily retrievable. Food instruments that are voided, unclaimed, or replaced must also be stored and retained according to the DHHS retention schedule. (WPM Chapter 8 and WIC ADP Manual Chapter 3) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review the storage & retrievability of food instrument receipts ▪ Review the storage of voided, unclaimed, & replaced food instruments 		
<p>3.8. Is the individual who completes the unmatched redemption report someone who does not routinely issue food instruments?</p> <p><u>Minimum Standard:</u> The unmatched redemption report should be researched and completed by an individual other than one who routinely issues food instruments by reviewing HSIS records, preprinted logs, receipts and/or voided FI. (Unmatched Redemption Report NA475-1) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Interview individual who completes the report ▪ Review Unmatched Redemption Report NA475-1 		

** √=Meets Minimum Standard D=Deficiency R=Recommendation NA=Not Applicable

3. Security And Accountability

Review Area	Reviewers Notes	Status**
<p>3.9. Are formulas/nutritional products received from the state and/or returned from participants kept in a secure place?</p> <p><u>Minimum Standard:</u> All formulas/ nutritional products received from the state and/or returned from participants should be kept in a secured storage area until issued. Out-of-date and damaged products should be disposed of in a timely manner. (WPM Chapter 7)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe storage of nutritional products ▪ Interview staff 		
<p>3.10. Are formulas/nutritional products received from the Nutrition Services Branch (NSB) and/or returned from participants issued and inventoried according to program requirements?</p> <p><u>Minimum Standard:</u> Staff must maintain an ongoing inventory log of all formulas/nutritional products received from the NSB and/or returned from participants and document issuance/disposition of all inventoried products. (WPM Chapter 7) <i>Note: These products must be maintained separate from Free Trade Samples.</i></p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review issuance and inventory log ▪ Compare the inventory log to the formula report(s) included in the monitoring packet. 		

4. Vendor Management

Review Area	Reviewers Notes	Status**
<p>4.1. Is documentation of the last annual vendor training on file?</p> <p>Minimum Standard: Documentation of the last annual vendor training should be kept including: correspondence announcing the training with two dates offered; agenda and a copy of the module used. (WPM Chapter 11) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review vendor training file 		
<p>4.2. Is the appropriate documentation of vendor management activities on file?</p> <p>Minimum standard: The WIC Vendor Agreement is a three way contract between a Vendor, the State WIC agency and the Local WIC agency. Copies of the vendor agreement & price lists (non-corporate stores), Information update, monitoring reports, verification of attendance forms and food instrument replacement forms should be present in each vendors file and retained in accordance with the DHHS records retention schedule. (WPM Chapter 11) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review a sample of 5 vendor files using the table below to document findings. Include both corporate and non-corporate vendors in sample. 		

Table for Review Area 4.2: Vendor Files

Review 5 vendor files (include both corporate and non-corporate vendors) to ensure appropriate documentation of vendor management activities.

Vendor Name/Number	Vendor Agreement* <i>(non-corporate vendors only)</i>	Price List*	Update / Application* <i>(all vendors)</i>	Verification of Attendance <i>(all vendors)</i>	FI Replacement Documentation <i>(all vendors)</i>	Monitoring Reports <i>(all vendors)</i>

* Local Agency must maintain a copy of original Vendor Update sent to the State Office. If vendor is new for current FFY, an application will be on file instead of an update.

Code For Table: ✓=Present M=Missing NA=Not Applicable I=Incomplete

** ✓=Meets Minimum Standard D=Deficiency R=Recommendation NA=Not Applicable

5. Civil Rights

Review Area	Reviewers Notes	Status**
<p>5.1. Is the current nondiscrimination policy statement on all locally developed print materials, internet sites, and electronic media announcements that describe the WIC Program?</p> <p><u>Minimum Standard:</u> The current nondiscrimination statement must appear on locally printed publications and television and radio announcements about the WIC Program that are produced for public information, public education, or public distribution as well as local websites that describe the WIC Program. (WPM Chapter 4) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Review locally printed WIC publications, locally produced radio and television spots (or their scripts), and the local agency web site. 		
<p>5.2. Is the current "Justice for All" poster and the current "Fair Hearing" poster prominently displayed in each clinic and issuance site?</p> <p><u>Minimum Standard:</u> The "Justice for All" poster and the "Fair Hearing" posters (English & Spanish versions) must be prominently displayed wherever WIC applications are accepted, certifications are performed, or food instruments are issued. (WPM Chapter 14) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Observe posters ■ Interview staff regarding use of posters in satellite sites. 		
<p>5.3. Is the local agency making a reasonable effort to serve non-English speaking or limited English proficiency (LEP) participants.</p> <p><u>Minimum Standard:</u> Programs and services supported in whole or part with federal funds must provide interpreter services at no charge to non-English speaking clients and those with LEP. (Consolidated Agreement at http://www.ncpublichealth.com/contracts/contracts_forms.htm#agreementAd) Bi-lingual staff and written materials in primary languages of client base are other indicators of reasonable effort to serve clients with limited English proficiency. (WPM Chapter 4) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Interview staff ■ Observe non-English speaking clients if possible 		

5. Civil Rights

Review Area	Reviewers Notes	Status**
<p>5.4. Is a fair hearing notice on all locally developed letters related to program eligibility?</p> <p><u>Minimum Standard:</u> If any locally developed notices are used to inform the applicant/participant of his/her eligibility, the notices must include the fair hearing statement. (WPM, Chapter 6) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review locally developed notices used to inform applicants/participants of eligibility status 		
<p>5.5. Do applicants/participants receive required notifications according to program policy?</p> <p><u>Minimum Standard:</u> Clients must receive required notifications and there must be documentation in the WIC ADPS record of the client receiving the notification. Required notifications include: ineligibility at certification, no longer eligible, recertification due, missed appointment, waiting list. (WPM, Chapter 6) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Link with findings from the clinical record review and from item 1.6. and from the client observations (item #13) 		
<p>5.6. Is staff collecting racial/ethnic information from clients in a manner that complies with Federal guidelines?</p> <p><u>Minimum Standard:</u> Participants must be given the opportunity to self-identify their ethnic (only one ethnicity choice) and racial (may claim multi-race categories) categories. (WPM Chapter 4) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Interview staff ▪ Observe 3-5 participants using Table 1, item 5 to document findings. 		
<p>5.7. Do staff receive annual civil rights training?</p> <p><u>Minimum Standard:</u> Staff who interact with program applicants/participants and their supervisors must participate in annual civil rights training which addresses the USDA required content areas. (WPM Chapter 4) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Interview staff ▪ Review documentation of training 		

6. Program Outreach

Review Area	Reviewers Notes	Status**
<p>6.1. Has the agency publicized the availability of program benefits through the media within the past year?</p> <p>Minimum Standard: At least annually, the local agency shall publicly announce the availability of Program benefits through the media. The announcement should include an emphasis on reaching and enrolling eligible women in the early months of pregnancy and migrants. The announcement must include the eligibility criteria for participation (residential, categorical, income, nutrition/medical risk) and contact information for the agency or the North Carolina Family Health Resource Line (1-800-FOR-BABY). (WPM Chapter 10) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review documentation of the media release. 		
<p>6.2. Does the agency maintain a file of outreach and referral activities?</p> <p>Minimum Standard: Local agencies are required to maintain a file of outreach and referral activities, including documentation of the annual media release. (WPM Chapter 10) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review file of outreach and referral activities. 		

7. Fiscal Management

Review Area	Reviewers Notes	Status**
<p>7.1. Have all subcontracted services received prior approval from the Regional Nutrition Consultant?</p> <p><u>Minimum Standard:</u> Subcontracted services (such as but not limited to temporary personnel, interpreters service, space rental, and breast pump rental programs) require prior approval by the State WIC office. (WPM Chapter 3)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Compare the date each agreement was initiated or renewed, with the date it was approved by the Regional Nutrition Consultant. ▪ Interview staff 		
<p>7.2. Does the local agency account for WIC Program expenditures according to program requirements?</p> <p><u>Minimum Standard:</u> The local agency must maintain documentation that supports all expenditures, expenditures must be billed to the appropriate activity budget, and all expenditures must be allowable under program policy. Unless jointly purchased, all items purchased by the WIC Program must be used solely by WIC. (WPM, Chapter 12)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review one month of expenditure records and supporting documentation including time sheets. (use the month indicated in the initial correspondence for the program review) ▪ Interview staff. 		
<p>7.3. Does the local agency's cost allocation plan to determine WIC expenditures comply with WIC Program policy?</p> <p><u>Minimum Standard:</u> The local agency must use an acceptable method to determine cost sharing between programs. Common sources of shared expenses include but are not limited to:</p> <ul style="list-style-type: none"> ▪ duplicating, internet services, utilities, ▪ printing, office supplies, equipment, ▪ telephone janitorial & maintenance and clinic costs. <p>Source documentation must be available and be retained for a minimum of three years. (WPM, Chapter 12)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Compare cost allocation plan & supporting documentation for each expense that is cost shared between programs. ▪ Interview staff 		

7. Fiscal Management

Review Area	Reviewers Notes	Status**
<p>7.4. Was prior approval obtained for any purchase within the past 2 years of equipment greater than \$500 and of any medical equipment, computers, and computer accessories (including software)?</p> <p><u>Minimum Standard:</u> All purchases of equipment costing greater than \$500, medical equipment, and computers/computer accessories (including software) must have prior approval. (WPM Chapter 12) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Interview staff ▪ Review approval requests 		
<p>7.5. Does the most recent "Fixed Asset Inventory Listing" reflect the status of equipment purchased by the WIC Program?</p> <p><u>Minimum Standard:</u> Within 60 days of the date of approval to purchase equipment, the local agency must submit to the Nutrition Services Branch (NSB) a written report of the purchase of equipment with an acquisition cost of \$500 or more. Once the NSB receives notification of an equipment purchase, it will issue a DHHS inventory tag to the Local Agency for the equipment and staff must place each tag on the appropriate item. Annually, the Nutrition Services Branch sends to each local agency, a detailed fixed assets report for their agency. Local agency staff must confirm the accuracy of the information on the report by actually viewing the equipment listed, verifying serial numbers and locations, noting any problems/discrepancies, noting items that have been surplus or lost/stolen, signing the report, and returning the report to the NSB. (WPM Chapter 12) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review equipment purchases (with WIC funds) within the past two years and the location of inventory tags on purchased equipment. ▪ Review the Fixed Asset Inventory Listing included in the monitoring packet to see if it was completed by the local agency within the past year. (<i>Note: The report is not included in the packet for reviews occurring May through August</i>) ▪ Interview staff 		

Local Agency: _____
Date of Visit: _____
Monitoring Team: _____
Site(s) Monitored: _____

WIC Program Monitoring Tool
Part II: Nutrition Services Review
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8. Nutrition Assessment

Review Area	Reviewers Notes	Status**
<p>8.1. Is a nutrition assessment being completed for each certification?</p> <p><u>Minimum Standard:</u></p> <ul style="list-style-type: none"> ■ Anthropometric data is collected and assessed per program guidelines. (WPM Chapter 6) ■ Biochemical data is collected and assessed per program guidelines. (WPM Chapter 6) ■ Clinical data is collected and assessed per program guidelines. (WPM Chapter 6) ■ Dietary data is collected and assessed per program guidelines. (WPM Chapter 6) ■ Eco-social data is collected and assessed per program guidelines. (WPM Chapter 6) <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Observe 3-5 individuals using Table 1, item 17 to document findings. ■ Review at least 15 client health records using Table 2 & Table 3 to document findings. Health record selection should include 5 each of women, infants & children. Five records should be of participants using a special formula/nutritional product and/or food package III. 		
<p>8.2. Do staff use correct procedures for weighing and measuring infants, children, and women?</p> <p><u>Minimum Standard:</u> Standard techniques for weighing and measuring individuals are being used. All staff who weigh and measure should have received training for how to collect accurate measurements. (WPM Chapter 6)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Observe at least 1 infant, 1 child, & 1 woman being weighed and measured using Table 1, item 16 to document findings. When applicable, observe more than 1 person doing the weighing and measuring. 		

8. Nutrition Assessment

Review Area	Reviewers Notes	Status**
<p>8.3. Does maintenance of equipment used to weigh and measure participants meet NC Program requirements?</p> <p><u>Minimum Standard:</u> Weighing and measuring equipment must meet specifications outlined by the state. Scales must be tested by the NC Department of Agriculture annually, and inaccurate scales removed from service until they can be calibrated, repaired, or replaced. (WPM Chapter 6) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ View all scales in agency ▪ Check stadiometers for accuracy of height (i.e. placement on the wall) ▪ Review receipt for annual test of scales 		
<p>8.4. Is there a prescription for use of special formulas/nutritional products?</p> <p><u>Minimum Standard:</u> Use of special nutritional products requires a prescription which meets policy requirements and which must be maintained in the participant's health record. (WPM Chapter 7) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review at least 5 records of clients using a special formula using Table 2 and Table 3 to document findings. 		
<p>8.5. Are all eligible nutrition risk criteria for each participant identified and are criteria being used correctly?</p> <p><u>Minimum Standard:</u> All eligible risk criteria are identified and documented in clients' health record. (Policy clarification pending). Nutrition risk criteria must be used in accordance with how each criterion is defined. (WPM Chapter 6) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe 3-5 individuals using Table 1, item 17 to document findings. ▪ Review at least 15 client health records using Part II Table 2 & Table 3 to document findings. Health record selection should include 5 each of women, infants & children. Five records should be of participants using a special formula/nutritional product and/or food package III. 		

9. Plan of Nutrition Care

Review Area	Reviewers Notes	Findings**
<p>9.1. Is an individualized plan of nutrition care documented for each client?</p> <p><u>Minimum Standard:</u> An individualized plan of nutrition care is required and should be based on the findings of the nutrition assessment. (WPM Chapter 5, Section 4) Individuals not currently participating in Medicaid but who appear to be income eligible shall be referred to Medicaid. (WPM Chapter 10, Section 5) Individuals will be provided with information on other public assistance and health-related programs as needed based on the nutrition assessment. Local agencies should maintain a list of local resources for substance use counseling and treatment. (WPM Chapter 5). <u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Observe 3-5 individuals using Table 1, item 18 to document findings. ■ Review at least 15 client health records using Table 2 & Table 3 to document findings. Health record selection should include 5 each of women, infants & children. Five records should be of participants using a special formula/nutritional product and/or food package III. 		
<p>9.2. Are State funds being used appropriately for eligible clients who are in need of this benefit?</p> <p><u>Minimum Standard:</u> State funds are used only for certain participants in need of nutritional products in excess of that available through WIC and who are not eligible to receive the additional amounts through Medicaid or CSHS. The need for products from State funds is documented in clients' health records. (WPM Chapter 7) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Review at least 5 health records of clients who were issued nutritional products from State funds using the table below to document findings. 		

Table for Review Area 9.2 - Use Of State Funds

Use the State Funds Issuance report printed from the WIC ADPS screen 19 to identify up to five (5) individuals who received issuance through State Funds. Review the health records and issuance records of each client to determine if state funds were used in accordance with WIC Program formula policy.

Participant ID Number / Date of Birth	1	2	3	4	5
Appropriate Use Of State Funds *					

* Appropriateness is based on client's category, nutritional need, which WIC food package was issued, and eligibility for Medicaid/CSHS.

10. Nutrition Education & Counseling

Review Area	Reviewers Notes	Status**
<p>10.1. Do participants receive the required number of nutrition education contacts per certification?</p> <p><u>Minimum Standard:</u> During each certification period, at least two nutrition education contacts must be made available to all adult participants, the parents or caretakers of children, and whenever possible, to the children themselves. Contacts will be made available at a quarterly rate to parents or caretakers of infant participants certified for a period in excess of six months. If participant refuses to participate in nutrition education, the refusal must be documented. (WPM Chapter 5)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review at least 15 client health records using Table 2 & Table 3 to document findings. Health record selection should include 5 each of women, infants & children. Five records should be of participants using a special formula/nutritional product and/or food package III 		
<p>10.2. Is nutrition education appropriate for the needs of the participants?</p> <p><u>Minimum Standard:</u> Nutrition education offered to clients must be accurate, relevant to the client's medical/nutrition risk, and appropriate to the client's needs. (WPM Chapter 5)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Observe 5 educational sessions with participants using Table 1, item 19 to document findings.. ▪ Review at least 15 client health records using Table 2 & Table 3 to document findings. Health record selection should include 5 each of women, infants & children. Five records should be of participants using a special formula/nutritional product ▪ Observe a nutrition education class/group activity if available. 		
<p>10.3. Do women receive information on the 5 required topics during their WIC participation (prenatal & postpartum)?</p> <p><u>Minimum Standard:</u> By the time women are finishing their WIC Program benefits, local agencies must ensure that counseling on five specific topics has been provided. (WPM Chapter 5)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ▪ Review at least 5 records of women using Table 2 to document findings. 		

10. Nutrition Education & Counseling

Review Area	Reviewers Notes	Status**
<p>10.4. Are lesson plans and training documentation on file when administrative support staff teach "mini-lessons"?</p> <p><u>Minimum Standard:</u> Agencies with administrative support staff who teach mini-lessons must keep on file the lesson plans for the mini-lessons that were developed by the nutritionist. Documentation that staff were trained to teach the mini-lesson(s) also must be maintained by the agency. (WPM Chapter 5) <u>Method of Review</u></p> <ul style="list-style-type: none"> ■ Review lesson plans for mini-lessons. ■ Review documentation that support staff were trained to provide mini-lessons. 		
<p>10.5. Are class outlines on file when group education is provided by a nutritionist or other health professional?</p> <p><u>Minimum Standard:</u> Agencies that conduct group education must have class outlines with required components: target audience, objectives, outline of presentation, and materials/activities used. (WPM Chapter 5) <u>Method of Review</u></p> <ul style="list-style-type: none"> ■ Review outlines for required components. 		

11. Breastfeeding Promotion & Support

Review Area	Reviewers Notes	Status**
<p>11.1. Is there a designated Breastfeeding Coordinator who is a health professional who meets the training and credential requirements?</p> <p><u>Minimum Standard:</u> There must be a designated individual serving as the Breastfeeding Coordinator. This designated person must have a degree and/or health profession certification that is recognized for working with the maternal and child population, and can be an international board certified lactation consultant (IBCLC), nutritionist (LDN & RD preferred), registered nurse (RN), certified nurse mid-wife, health educator or social worker. When the health professional is not an IBCLC, then the designated person must successfully complete the 7-day North Carolina Lactation Educator Training Program or other State-approved breastfeeding training. (WPM Chapter 9)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Interview staff ■ Review credentials and/or training experience of designated coordinator 		
<p>11.2. Does the clinic environment promote & support breastfeeding? (Is it “breastfeeding friendly”)?</p> <p><u>Minimum Standard:</u> There should be clear and visible efforts by staff to promote & support breastfeeding. There should be minimal visibility of formula including having cans of formula, infant feeding bottles, and artificial nipples stored out of view of clients. Educational materials, office supplies, and promotional items must be free of infant formula product names and information. (WPM Chapter 9)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Observe clinic environment 		
<p>11.3. Do all new staff involved in providing direct services to WIC clients receive task-appropriate breastfeeding promotion and support training as part of their orientation?</p> <p><u>Minimum Standard:</u> All new staff who provide direct services to WIC clients will receive task-appropriate breastfeeding information as part of their orientation and as defined by state policy. (WPM Chapter 9)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Interview staff ■ Review local agency orientation guidelines 		

11. Breastfeeding Promotion & Support

Review Area	Reviewers Notes	Status**
<p>11.4. Is there a plan to assure that women have access to breastfeeding promotion and support during the prenatal and postpartum period?</p> <p>Minimum Standard: The agency has a plan to assure women receive the breastfeeding information and support they need during the prenatal and postpartum period. (WPM Chapter 9) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Interview staff ■ Review plans, protocols, and breastfeeding education resources 		
<p>11.5. Does the local agency maintain an inventory and tracking system for breastpumps (manual & electric), breastfeeding supplies, and Tri-Vi-Sol vitamin D drops?</p> <p>Minimum Standard: There must be an inventory and tracking system maintained for breastfeeding supplies, including pumps and kits, that is current and accurate. (WPM Chapter 9 with policy clarification pending re breastfeeding supplies and Tri-Vi-Sol drops) <u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Review the inventory & tracking logs for supplies. ■ Determine the location/retrievability of five electric breastpumps. ■ Review issuance protocols and participant breastpump loan agreements 		

12. Policies and Procedures Management

Review Area	Reviewers Notes	Status**
<p>12.1. Is the North Carolina WIC Program Manual current and readily available to local agency staff?</p> <p><u>Minimum Standard:</u> The WIC Director is responsible for assuring that all copies of the WIC Program Manual are maintained with the most current information and are readily accessible to staff. The WIC Director is also responsible for assuring that staff is aware of changes in WIC Program policy and procedures. (WPM, Chapter 1)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Review copy(ies) of WIC Program Manual ■ Review location and accessibility to WIC Program Manual ■ Interview staff 		
<p>12.2. Is there an annual quality assurance assessment of the WIC Program?</p> <p><u>Minimum Standard:</u> There must be a quality assurance assessment of each program conducted annually. (NCGS 130A-9 Standards. Mandated PH Services, 10 NCAC12. 0229. Quality Assurance applies to all Programs). It is encouraged that at least one WIC staff member be involved in the local agency quality assurance efforts, especially when reviewing nutrition, maternal health, child health, and family planning services.</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Interview staff ■ Review report(s) of most recent agency QA assessment involving WIC Program services 		
<p>12.3. Does the agency follow standard documentation practices?</p> <p><u>Minimum Standard:</u> There must be a written list of standard abbreviations used by staff when documenting (NCGS 90-18 [30]). Local agencies must use standard procedures for correcting documentation errors and for using initials and signatures. All documentation must be in ink. (Standard accounting procedures.)</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Review standard list of abbreviations ■ Review documentation policy ■ Interview staff 		

12. Policies and Procedures Management

Review Area	Reviewers Notes	Status**
<p>12.4. Does the local agency have required written policies on file and readily available to staff?</p> <p><u>Minimum Standard:</u> At a minimum, there must be a local agency written policy for:</p> <ol style="list-style-type: none"> 1. Local Agencies that use non-health professional staff to provide "low risk" nutrition education must have a written policy. (WPM Chapter 5) 2. Local agencies that provide group education must have written class outlines on file. (WPM Chapter 5) 3. Local agencies must have a written protocol for how "low risk" nutrition education is documented. (WPM Chapter 5) 4. Handling pending applications when specific appointments are not given (WPM Chapter 6) 5. Immunization screening (WPM Chapter 6) 6. How staff will document proof of identity reviewed at food instrument issuance (WPM Chapter 8) 7. Issuance of Vitamin D Supplements for exclusively Breastfed Infants/Children (November 19, 1999 Memo) (Policy clarification pending) 8. Targeting Priorities I and II (WPM Chapter 10) <p>Local agency staff are encouraged to have policies signed by the WIC Director (and any other staff per agency protocol) and dated. Staff are also encouraged to review policies at least every two years and update as needed.</p> <p><u>Method of Review:</u></p> <ul style="list-style-type: none"> ■ Review written policies ■ Interview staff 		

WIC PROGRAM MONITORING TOOL

Table 1: Client Observation

Client Observation: Observe 3 – 5 applicants/participants as they move through the process of applying for WIC and receiving Program benefits to assure that correct procedures are being followed. Observe at least one woman, one infant, and one child if possible. If different clients are observed for different activities, then note new client identifier number.

Agency / Site: _____

	1	2	3	4	5
1. Client Identifier Number					
2. Date of birth					
3. Date of certification being reviewed					
4. # Days from application to certification					
5. Racial/Ethnic status					
6. Client is physically present					
7. Proof of ID viewed & documented					
8. Proof of residence viewed & documented					
9. Income eligibility <ul style="list-style-type: none"> • Proof of income /adjunct income eligibility viewed and documented ▪ Economic unit determined ▪ Income eligibility determined correctly ▪ Signed/Dated by staff 					
10. Proxy offered					
11. Rights and responsibilities <ul style="list-style-type: none"> ▪ Reviewed by/read to applicant/ participant ▪ Signed/Dated by applicant / participant 					
12. Asks about plans to move & issues VOC card if out-of-state move					
13. Notifications given & documented (as applicable)					
14. Food instruments <ul style="list-style-type: none"> ▪ issued correct food benefit ▪ proof of identity documented ▪ client/proxy signs FI ▪ client/proxy signs receipts 					
15. Client told how to use FI (if initial certification)					
16. Anthropometric measurements done according to recommended technique <ul style="list-style-type: none"> ▪ Scales zeroed prior to obtaining weight ▪ Infants weighed in dry diapers ▪ Children and women weighed in light clothing & w/out shoes ▪ Heights measured w/out shoes 					
17. Nutrition assessment completed <ul style="list-style-type: none"> ▪ Anthropometric / Biochemical / Clinical / Dietary / Eco-social ▪ All eligible nutrition risk codes identified and used correctly 					
18. Plan of care developed <ul style="list-style-type: none"> ▪ Based on findings of assessment ▪ Reflects client input ▪ Appropriate client referrals ▪ Plans for follow-up noted 					
19. Nutrition education/counseling provided <ul style="list-style-type: none"> ▪ Relevant to medical/nutrition risk ▪ Appropriate to client' needs ▪ Accurate educational content 					

WIC PROGRAM MONITORING TOOL Table 2. WIC Record Review (Pregnant & Postpartum Women)

Health Department/Agency: _____

Site: _____

Date: _____ Reviewers: _____

Client Identifier Number	1	2	3	4	5
1. Identifying information					
Date of birth					
EDC					
Date of delivery					
Date of certification being reviewed					

2. Nutrition Assessment Data Collection, Documentation, & Medical /Nutritional Eligibility	1	2	3	4	5
Physically present					
Anthropometric <ul style="list-style-type: none"> ▪ Prenatal : weight gain chart ▪ Prenatal/Postpartum: prepregnancy BMI ▪ Prenatal/Postpartum: weight & height ▪ Postpartum: total wt gain in pregnancy 					
Biochemical (hgb/hct)					
Clinical					
Dietary					
Formula/nutritional product Rx					
Eco-social					
Medical /nutritional eligibility					

3. Plan of Nutrition Care	1	2	3	4	5
Plan of care developed <ul style="list-style-type: none"> ▪ Based on findings of assessment ▪ Reflects client input ▪ Appropriate client referrals ▪ Plans for follow-up noted 					
Certification dated w/signature & title					

4. Nutrition Education / Counseling	1	2	3	4	5
Required # of contacts <ul style="list-style-type: none"> ▪ Client refusal of nut ed is documented 					
Required Nutrition Education <ul style="list-style-type: none"> ▪ importance of nutrition ▪ breastfeeding ▪ substance use ▪ folic acid ▪ immunizations for children 					
Nutrition education appropriate to need					

5. Notifications <i>(Link findings with Part I., 5.6)</i>	1	2	3	4	5
Required Notifications Given <ul style="list-style-type: none"> ▪ Recertification Due ▪ Termination Due ▪ Missed Appointment 					

Health Department/Agency: _____

Site: _____

Date: _____ Reviewers: _____

Client Identifier Number	1	2	3	4	5
1. Identifying Information					
Date of birth					
Date of certification being reviewed					

2. Nutrition Assessment Data Collection, Documentation, & Medical /Nutritional Eligibility	1	2	3	4	5
Physically present					
Anthropometric <ul style="list-style-type: none"> ▪ Growth charts ▪ Birth weight/length (to 24 mos of age) ▪ Parental BMI 					
Biochemical (hgb/hct)					
Clinical					
Dietary					
Formula/nutritional product Rx					
Eco-social					
Medical/nutritional eligibility					

3. Plan of Nutrition Care	1	2	3	4	5
Plan of care developed <ul style="list-style-type: none"> ▪ Based on findings of assessment ▪ Reflects client input ▪ Appropriate client referrals ▪ Plans for follow-up noted 					
Certification dated w/signature & title					

4. Nutrition Education / Counseling	1	2	3	4	5
Required # of contacts <ul style="list-style-type: none"> ▪ Client refusal of nut ed is documented 					
Nutrition education appropriate to need					

5. Notifications <i>(Link findings with Part I., 5.6)</i>	1	2	3	4	5
Required Notifications Given <ul style="list-style-type: none"> ▪ Recertification Due ▪ Termination Due ▪ Missed Appointment 					

ATTACHMENT II

October 2007 - September 2008 WIC Program Monitoring Schedule

Occurred / Scheduled Dates

	Oct'07	Nov'07	Dec'07	Jan'08	Feb'08	Mar'08	Apr'08	May'08	Jun'08	July'08	Aug'08	Sept'08
Clay 10/2-10/4				Haywood 1/29-1/31	Transylvania 2/26-2/28	Caldwell 3/11-3/13	Jackson 4/8-4/10	Surry 5/5-5/7	Macon 6/24-6/26		Toe River 8/5-8/7	
Rowan 10/16-10/17												
Montgomery 12/4-12/6		Cabarrus 11/6-11/8		Forsyth 1/29-1/31	Union 2/25-2/27		Lincoln 4/22-4/24	Cleveland 5/6-5/8		Davie 7/22-7/24		
		Onslow 11/6-11/8	Columbus 12/18-12/20			Cumberland 3/17-3/19			Scotland 6/11-6/13	Robeson 7/21-7/23		Bladen (not yet scheduled)
Hoke 10/2-10/4				Person 1/8-1/10	Anson 2/5-2/7		Moore 4/28-4/30	Randolph 5/20-5/21	Rockingham 6/10-6/12	Piedmont Health 7/21-7/24	Caswell 8/12-8/13	Stanly 9/4-9/5
Tri-County 10/16-10/18					Pender 2/19-2/21	Jones 3/4-3/6		Eastern Carolina 5/5-5/7	Carteret 6/16-6/18		Brunswick 8/26-8/28	
		Pitt 10/30-11/1		Albemarle 1/15-1/18	MTW 2/27-2/29		Dare 4/22-4/24	Rural Health Group 5/5-5/7	Granville- Vance) 6/23-6/25		Beaufort 8/27-8/28	Hertford 9/3-9/4

ATTACHMENT II

October 2008 - September 2009 WIC Program Monitoring Schedule

Planned Month (dates will be set closer to the time of the review)

Oct'08	Nov'08	Dec'08	Jan'09	Feb'09	Mar'09	Apr'09	May'09	Jun'09	July'09	Aug'09	Sept'09
Madison	Yadkin		Stokes	Buncombe		Swain	Graham		ADHD	Cherokee	
		RPM	Henderson	Gaston	Davidson	Burke	Iredell	Catawba	Mecklenburg	Alexander	
		Lee				Richmond		Harnett	LCHC	Alamance	Guilford
Wayne	Johnston		Wilson	Lenoir	Craven	Onslow	Green	Sampson	New Hanover		Pamlico
Edgecombe	Hyde		Albemarle	Warren		Wake	Nash			Franklin	Northampton