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CONFIDENTIALITY AND RELEASE OF INFORMATION

MONITORING AND EVALUATION

CUSTOMER SERVICE

Revised 11/2015

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
WIC PROGRAM
POLICY AND PROCEDURE MANUAL

Policy and Procedure Number: 7.00
Effective Date: July 13, 1994
Revised: June 1, 2016

SECTION: LOCAL AGENCY OPERATIONS AND MANAGEMENT

SUBJECT: Civil Rights Responsibilities of Local Agencies

A. Policy

1. The local agency shall comply with Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, Department of Agriculture regulations on nondiscrimination (7 CFR Parts 15, 15a and 15b), and FNS Instruction 113-1, Civil Rights Compliance and Enforcement – Nutrition Programs and Activities, November 8, 2005 to ensure that no person shall, on the grounds of race, color, national origin, age, sex or handicap, be denied benefits of, or be otherwise subjected to discrimination under the Program. All of the above documents can be accessed on the internet.

2. The local agency shall comply with Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and subsequent regulations and instructions by:

   a. Notifying the public of the nondiscrimination policy and complaint rights of participants and potentially eligible persons.

   b. Reviewing and monitoring activity to ensure Program compliance with the nondiscrimination laws and regulations.

   c. Collecting and reporting racial and ethnic participation data as required by Title VI of the Civil Rights Act of 1964.

3. The local agency shall accept complaints of discrimination.

4. The local agency shall provide civil rights training to a new employee as part of the orientation to WIC and once every state fiscal year to all staff as part of a regularly scheduled staff meeting and documentation of provision of training shall be maintained and made available for review.

B. Procedure

1. The local agency will notify applicants/participants and the general public, particularly minorities, women, and grassroots organizations of the availability of Program benefits and services, location of local agencies, clinics, as well as hours of operation.

   a. Notification may consist of letters, leaflets, brochures, bulletins, media advertisements or announcements.

   b. Include the following statement on all recipient publications, notices to the public, posters, etc., that the Program is available to eligible persons without regard to race, color, national origin, age, sex or disability.

      In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

      Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

      To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

      (1) mail: U.S. Department of Agriculture
      Office of the Assistant Secretary for Civil Rights

1400 Independence Avenue, SW
Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

When space prohibits the use of the above lengthy statement, the following minimal statement may be used:

This institution is an equal opportunity provider.

c. Provide information and other materials in languages other than English, as needed.

d. Ensure that appropriate staff, volunteers or other translation resources are available to serve non-English speaking or limited English-speaking applicants/participants.

e. Display the nondiscrimination poster, "And Justice For All," or an FNS approved substitute in prominent places, such as clinic waiting rooms.

2. The local agency must periodically review Program policies and practices to evaluate the effect of those procedures on applicants and participants. In doing so, staff should be monitored to determine if services are being delivered in a manner consistent with civil rights policies.

3. Accommodations must be made for individuals with disabilities to ensure that the Program is accessible to them.

4. The local agency shall report participation by category of women, infants and children and by racial/ethnic categories as defined in FNS Instruction 113-1, Civil Rights Compliance and Enforcement – Nutrition Programs and Activities, November 8, 2005. Reporting shall be accomplished by entering the data in the management information system. More than one racial box can be checked.

Staff shall explain to the applicant or the parent or caregiver of an infant or child applicant that the collection of racial/ethnic categories is for statistical purposes only and has no effect on the determination of their eligibility to participate in the Program. Staff shall tell the person that self-identification is the preferred method of obtaining this information and then ask them their racial designation. Visual identification shall be used only if the applicant or the parent or caregiver of an infant or child applicant refuses to answer.

5. Complaints of discrimination shall be processed consistent with State Policy and Procedure 7.01.

6. The annual staff training on civil rights shall include, at a minimum, the following topics:

   a. Collection and use of data,
   b. Effective public notification systems,
   c. Complaint procedures,
   d. Compliance review techniques,
   e. Resolution of noncompliance
   f. Requirements for reasonable accommodation of persons with disabilities,
   g. Requirements for language assistance,
   h. Conflict resolution, and
   i. Customer service.

7. The local agency shall send documentation of the annual civil rights training by e-mail or fax to the State WIC Civil Rights Coordinator within 15 days of the training. Documentation shall consist of a copy of the meeting agenda, staff sign in sheet and the civil rights annual training agenda.

Attachments
7.00A Annual Civil Rights Lesson Plan

References
1. CFR 246.8
2. FNS Instruction 113-1, Civil Rights Compliance and Enforcement – Nutrition Programs and Activities, November 8, 2005.

Revised:

10/01/98	Reference General Administration Bulletin 98-01 (SFP 98-039)
02/15/06	Changed telephone numbers in the Discrimination Statement
04/03/07	Revised nondiscrimination statement
10/01/10	Deleted the requirement that all civil rights documents be kept on file; added that they are accessible by the internet; added in B. 6 topics to cover during training; and B.7. Documentation of training. Added Attachment 7.00A.
01/06/12	Added second paragraph in B.4. to state that self-identification is the preferred method to obtain racial designation. Updated revised nondiscrimination statement in B.1.b.
10/1/2015	Updated revised nondiscrimination statement in B.1.b, fixed typos in B.1.e and B.7, slight change in wording in B.4, corrected FNS Instruction to 113-1

2/25/2016 Updated nondiscrimination statement in B.1.b based on the non-discrimination statement from the USDA Office of Civil Rights, Compliance Branch October 14, 2015. In Section A.4 - redefined “annual” training as once per state fiscal year.

Annual Civil Rights Lesson Plan

OBJECTIVE: All Local Agency WIC staff who have contact with WIC applicants and/or participants shall understand civil rights related laws, regulations, procedures and directives.

WIC staff are required to abide by the provisions in five civil rights laws. The following Civil Rights Laws can be accessed on the internet:

Title VI of the Civil Rights Act of 1964, 42 U.S.C. § 2000d to 2000d-6

Americans with Disabilities Act of 1973 (28 CFR Part 35, Title II, Subtitle A)

Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681 et seq.)

Section 504 of the Rehabilitation Act of 1973

Age Discrimination Act of 1975 (45 CFR Part 91)

CONTENT:

Local agency staff should know the procedures for the following:

1. Racial Collection and Reporting

   a. Self- identification or visual identification; and

   b. Ethnicity - Definition

      Two question format

      i. Hispanic/Latino or Not Hispanic/Latino; and

      ii. Race - Can select more than one of the following:
      American Indian, Alaskan Native Asian, Pacific Islander,
      Black or African American, Native Hawaiian or Other Pacific Islander White.

2. Effective Public Notification Systems

   a. Program Availability;

   b. Complaint Information; and

c. Nondiscrimination Statement.

3. Complaint Handling and Processing Procedures (Policy and procedure 7.01)

a. The local agency staff is responsible for explaining the complaint system to each applicant/participant. The following information must be provided:

i. Anyone can file a complaint of discrimination within 180 days of the alleged act;

ii. A complaint can be filed with the Secretary of Agriculture, the Administrator of FNS or the State or local WIC agency; and

iii. Local agency staff must assist applicants/participants who wish to file complaints of discrimination;

b. All complaints of discrimination received by the local agency, written or verbal, must be accepted and forwarded to the State office immediately, but no later than 10 days after the acceptance of the complaint: and

c. Form DHMH 4435 must be used to document and forward complaints of discrimination to the State office.

4. Compliance Reviews (Management Evaluations)

State WIC Program is required to conduct monitoring reviews of local agencies at least once every two years.

5. Resolution of Noncompliance

If applicable, the State WIC Program shall provide written notice to the local agency indicating the areas of noncompliance and the action required to correct the situation.

6 Requirements for Reasonable Accommodation of Persons with Disabilities

a. Clinic must be accessible to the handicap;

b. Nutrition education and other program materials provided in the format referred by the person making request, i.e. large print, audio tapes, captioned videos, Braille text; and

c. Qualified interpreters must be provided for the hearing impaired.

7. Requirements for Language Assistance

    a. Availability of bilingual staff members or interpreters to serve non-English speaking and/or limited-English speaking person; and

    b. Availability of a commercially available telephonic interpretative service.

8. Conflict Resolution

    Ensure staff has the authority to resolve applicant and/or participant complaints or know the chain of command to refer the complaint or complainant (Policy and Procedure 7.91).

9. Customer Service (Policy and Procedure 7.90)

    a. Treat all customers with courtesy and respect;

    b. Promptly answer all customers’ questions with accurate, objective information;

    c. Resolve all customers' needs with the fewest number of calls possible;

    d. Use language that all customers can easily understand; and

    e. Promptly respond to all customers' concerns and complaints.

Policy and Procedure Number: 7.01
Effective Date: July 13, 1994
Revised: June 1, 2016

SECTION: LOCAL AGENCY OPERATIONS AND MANAGEMENT

SUBJECT: Civil Rights Complaints of Discrimination

A. Policy

1. The local agency staff is responsible for explaining the complaint system to each applicant/participant. The following information must be provided:

   a. Anyone can file a complaint of discrimination within 180 days of the alleged act.

   b. A complaint can be filed with the Secretary of Agriculture, the Administrator of FNS or the State or local WIC agency.

   c. Local agency staff must assist applicants/participants who wish to file complaints of discrimination.

   d. All WIC staff at the local and state level shall protect the confidentiality and Privacy Act rights of civil rights complainants at all points during the complaints process.

2. All complaints of discrimination received by the local agency, written or verbal, shall be accepted and forwarded to the State office immediately, but no later than 5 business days after the acceptance of the complaint.

3. Attachment 7.01A shall be used to document and forward complaints of discrimination to the State office.

4. All complaints of discrimination received by the State office shall be forwarded to the USDA Mid-Atlantic Regional Office Civil Rights Coordinator no later than 5 business days after receipt of the complaint.

B. Procedure

1. When a complaint is filed, a case file shall be created and maintained with all pertinent information. This case file shall be retained until all issues are resolved or until the end of the three-year retention period, whichever is later.

2. The local agency shall complete Attachment 7.01A which must be used for gathering and submitting information when a complaint of discrimination is made. The

following information is required:

a. Name of complainant.

b. Address and telephone number or other means of contacting person alleging discrimination.

c. Location and name of person, organization, or office that is accused of discriminatory practice.

d. Reason for the alleged discrimination.

e. Identity of others having knowledge of the discriminatory acts.

f. The name of the person who accepted the complaint and the date accepted.

g. The date the complaint was forwarded to the Civil Rights Coordinator at the State office.

3. All WIC staff shall protect the confidentiality and Privacy Act rights of civil rights complainants at all points during the complaints process.

Attachment:
7.01A Complaint of Discrimination Form

References
1. CFR 246.8
2. FNS Instruction 113-2

Revisions:
01/12 Added Section A. 1.d. and B.1.3. per STAR 2011 Civil Rights review.
10/15 Fixed typo in A.1.b
2/16 Replaced reference to DHMH Form 4435, which no longer exists, with Attachment 7.01A; Section A.2 amended time Local Agency must forward complaint to 5 business days; added paragraph A.4 to include state office deadline to forward complaint to USDA.

MARYLAND WIC PROGRAM
COMPLAINT OF DISCRIMINATION

1. Name of Complainant: ______

2. Address and telephone number or other means of contacting person alleging discrimination:

______

3. Location and name of person, organization or office that is accused of discriminatory practice:

______

Date of occurrence: ______

4. Nature of incident or aspect of the Program that led the person to allege discrimination:

______

5. Reason for the alleged discrimination:

☐ Race	☐ Color	☐ National Origin	☐ Sex
☐ Age	☐ Disability	☐ Retaliation	☐ Other (specify) ______

6. Identity of others having knowledge of the alleged discriminatory acts:

______

7. Complaint accepted by (Name/Local Agency): ______

Date complaint received by Local Agency: ______

Date forwarded to State Civil Rights Coordinator: ______

Date received by State Civil Rights Coordinator: ______

Date forwarded to FNS Civil Rights Division: ______

Clear Form

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
WIC PROGRAM
POLICY AND PROCEDURE MANUAL

Policy and Procedure Number: 7.10
Effective Date: November 23, 2015
Revised Date:

SECTION: Local Agency Operations and Management

SUBJECT: WIC Disaster Response and Continuation of Operations

A. Policy

The WIC Program is not designed to be a disaster assistance program and therefore, is not considered a first response option for disaster survivors. There is no legislative authority for using WIC food funds for purposes other than providing allowable food benefits to categorically eligible participants. The United States Department of Agriculture (USDA) Food and Nutrition Service (FNS) responds to disasters through various other means (see Attachments A-E)

Disaster situations include but are not limited to:

- Fire
- Weather-related: flood, tornado, hurricane, snow or other storm-related disruption
- Civil Disorder or other violent crime-related disruption
- Interruptions in governing agencies' functions or funding
- Power or water outage
- Earthquake
- Hazardous materials incidents
- Human Pandemic

Disasters can affect some or all of the State's operations; potential situations requiring action include:

- State Office involvement in a disaster affecting state office operations
- State Office response to a disaster affecting local agency operations
- Local agency involvement in a disaster affecting local operations
- State and Local Agency involvement or response to statewide disasters

The following procedure may be applicable in some but not every situation and is intended to provide guidance for a coordinated response during a disaster to ensure, to the extent possible, the continuation of WIC services to participants within its current program context and funding.[1]

[1] Emergency procedures for employees that affect the evacuation of an office or clinic site are covered in state and local office policies and are not included in this document.

B. Procedure

1. State Agency Responsibilities

a. Communication

Designated State WIC Office staff shall maintain communication with the following entities before (if possible), during and after a disaster:

i. Designated state staff to provide:
   - Current/updated contact information to supervisors.
   - Updated information about the closing and reopening of state office facilities and the need for employees to report for duty.
   - Guidance to designated staff about updates to the MD WIC Facebook and other social media sites used to provide notification in an emergency.

ii. Local agency staff to:
   - Maintain access to current contact information for designated local agency staff.
   - Assess need for and provide support and guidance.
   - Provide updates on vendor availability.

iii. WIC answering service and messaging service to:
   - Provide updated information about the closing and reopening of the state office or local agency sites.
   - Notify affected participants via “reminder” calls and text messages as needed.

iv. Vendors to:
   - Assess the availability of vendors where participants can redeem checks for food and/or special formula.
   - Communicate any changes in WIC foods to be stocked.
   - Communicate if and how out-of-state benefits will be accepted in Maryland according to B.4., WIC Authorized Vendor Practices During a Disaster.
   - Expedite pending vendor approvals, as needed.

v. Health Departments and Funding Agencies to:
   - Provide notification and updates about emergency situations to the designated staff of the Department of Health and Mental Hygiene in Baltimore as well as to local Health Departments and other WIC Grant Agencies, as needed.
   - Assess any damage, including damage to property, equipment or supplies and report such damage to the appropriate units.

vi. Other State Agencies/Programs to:

- Provide notification and updates about emergency situations to other agencies, including food banks, as needed.

vii. USDA Food and Nutrition Service (FNS), Mid-Atlantic Regional Office (MARO) to:
- Provide notification and updates about emergency situations, as needed.
- Request assistance from the USDA FNS MARO, as needed.

viii. Bank/Fiscal Units to:
- Provide notification and updates about emergency situations to banking and fiscal units responsible for ensuring WIC fiscal operations.

ix. Contractors to:
- Provide notification and updates about emergency situations, as needed, in order to reschedule meetings or other interactions with State WIC staff that may be affected by the emergency.

x. DHMH Office of Communications to:
- Provide pertinent information to the media.

b. Support of Local Agencies

Designated State Office staff shall provide support to local agencies and their staff by:

i. Assessing and maintaining, to the extent possible, the accessibility of the Management Information System, utilizing all backup and emergency procedures available as described in the *Maryland WIC System Security Plan*.

ii. Interpreting and assisting in the enforcement of policies that ensure, to the extent possible, continued operation of the Program.

iii. Ensuring, to the extent possible, that funding is in place for continued operations of the Program.

iv. Working with other state, national, or privately funded programs to help ensure that participants will have access to WIC or other resources for food during an emergency.

2. Local Agency Responsibilities

a. Emergency Procedures Plan

Local agencies shall develop a written emergency procedures plan that will be reviewed during the management evaluation process. The plan shall include, but is not limited to, the following:

i. Designated alternative certification and/or benefit distribution sites;

ii. Location of mobile equipment to be used at remote sites;

iii. Availability of manual certification materials, benefit issuance supplies, daily schedules and participant contact information;

iv. Plans for issuance of breast pumps;

v. Changes in routine practices, including those described in B.3., WIC Certification Procedures During a Disaster.
vi. Information for participants about alternate sources of food and other services in an emergency;
vii. Information for participants about food preparation and safety in an emergency;
viii. Plan for securing property and equipment during a disaster;
ix. Plans for communicating with local media; and
x. Local procedures for an emergency as outlined by the health department or funding agency to which they report.

b. Communication

Local agencies shall notify designated state office staff and the state WIC Director or Deputy Director immediately when there is a disruption in service of any type and immediately upon restoration of services. The following information, as applicable, should be included in their contact with the state WIC office during an emergency or disaster:

i. The type of emergency or disaster and the estimated length of the event;
ii. The number of staff affected;
iii. The status of clinic closures;
iv. Any clinic damage, including damage to property, equipment or supplies;
v. The number of WIC vendors in the area that are closed. Availability of infant formula at the clinic site(s); at vendor sites; at pharmacy sites;
vi. Contingency plans for providing services to participants, including plans to implement any adjustments to certification and participation procedures;
vii. Current/updated contact information for a spokesperson during any type of extended emergency;
viii. A plan to contact affected participants via phone or email to provide notification of changes or interruptions in service and to reschedule appointments, as needed; and
ix. A post-disaster assessment (Attachment 7.10 F), submitted within10 working days after the disaster has been resolved.

3. <u>WIC Certification and Participation Procedures During a Disaster</u>

Victims of a documented disaster shall be given first priority for appointments and benefit issuance and shall be given expedited certification processing. The following guidance applies in disaster situations:

a. Income, Residency and Identity:

i. Disaster-related evacuees who seek WIC benefits shall be considered as special nutritional risk applicants and receive expedited certification processing. As stated in Section 246.7(f)(2)(iii)(A) of WIC Program regulations, special nutritional risk applicants must be notified of their eligibility or ineligibility within 10 days of the date of the first request for Program benefits. With approval from the State Office, the notification period may be extended to a maximum of 15 days if a local agency can justify such a request; however, every effort must be made to certify these individuals immediately and at a maximum, within 10 days of their request (whether by phone or visit to the WIC agency) for WIC benefits. These individuals should be served ahead of others seeking benefits.
ii. In cases where disaster related evacuees move in with another household, the displaced individuals should be treated as a separate economic unit.
iii. The documentation requirements for income do not apply to disaster survivors whose documentation has been damaged, lost or destroyed or if the agency determines that the income documentation requirement would present an unreasonable barrier to participation. Adjunct eligibility provisions apply to disaster situations, even if the benefits are received based on special disaster provisions (e.g., emergency SNAP benefits). [SFP92-012]
iv. Temporary losses of income can be estimated on a current or annualized basis and eligibility should be determined on a case by case basis depending on the particular circumstances of the participant. [SFP92-012]
v. The documentation requirements for residency and identity do not apply to a disaster survivor whose documentation has been damaged, lost or destroyed.

b. Nutrition Risk Assessment

i. Disaster-related evacuees can be determined to be at nutritional risk if they are considered homeless.
ii. Hematological test results may be obtained within 90 days of certification for persons with a documented nutritional risk.
iii. Anthropometric measurements may be deferred for 90 days, if necessary, to expedite the certification process.
iv. Every effort should be made to provide a full health and nutritional assessment at the time the individual seeks services to ensure that s/he is linked into the health and social services network in the State.

c. Benefits

i. Benefits or foods that have been lost or damaged in a disaster may be replaced by a local agency as per MD Policy and Procedure 4.10.

ii. Replacement of unredeemed food benefits cannot result in the allocation of retroactive food benefits. The quantity of food benefits should be based on that portion of food benefits for which the participant would normally still be eligible (i.e., from the present to the remaining days in the month). [SFP 96-035]

iii. Benefits may be mailed to participants as per MD Policy and Procedure 4.04.

iv. Exempt infant formula and WIC-eligible medical foods benefits may be provided for participants with serious medical conditions as per MD Policy and Procedure 3.02.

v. Medical documentation can be provided as an original written document, electronically, or by facsimile. Medical documentation also may be provided by telephone to a competent professional authority who must promptly document the information which must be kept on file at the local clinic. However, this method may only be used until written confirmation is received and only when absolutely necessary on an individual participant basis to prevent undue hardship to a participant or to prevent a delay in the provision of infant formula that would place the participant at increased nutritional risk. The local clinic must obtain written documentation of the medical documentation within a reasonable amount of time after accepting the initial medical documentation by telephone. The written documentation must be kept on file with the initial telephone documentation.

vi. Participants presenting at WIC clinics in a new State with a food instrument that specifies an exempt infant formula or WIC-eligible medical food may be issued food instruments for the specified item up to the end of their certification period.

vii. Participants presenting at WIC clinics in a new State without a food instrument, but who can provide the name of the exempt infant formula or WIC-eligible medical food that the individual was receiving before relocating, may be issued a 1-month food instrument for that specific item.

viii. 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.

d. Transfers

i. Participants who are vacating the state due to a disaster should be issued a VOC.

ii. Participants with a VOC who have migrated to Maryland as a result of a disaster in another state may be transferred into the state without the need to show proof of identity, residency or income.

e. Certification Periods

i. A shorter certification period may be provided on a case-by-case basis.

ii. In cases where there is difficulty in scheduling appointments for breastfeeding women, infants and children who have not reached their fifth birthday, the certification period may be shortened or extended by a period not to exceed 30 days. In such cases, one month of food benefits can be issued to those participants until an appointment can be rescheduled

4. <u>WIC Authorized Vendor Practices During a Disaster</u>

a. Out-of-state food instruments

i. At the discretion of the State Agency, WIC vendors may be allowed to accept out-of-state food instruments during disaster situations. The State WIC office will advise vendors and local agencies if and when this is to be implemented.

ii. The originating WIC State Agency where the participant was initially certified is responsible for the cost of the food instrument. The out-of-State vendor should deposit each WIC check into the vendor's bank account for payment.

b. Authorized foods for out-of-state food instruments

i. If at all possible, the exact brand of infant formula specified on the out-of-state food instrument should be provided.

ii. If it is not possible to provide the exact brand items for foods listed on the out-of-State WIC food instrument, a similar item from the neighboring State's WIC approved food list may be substituted.

Attachment(s):

7.10 A	USDA Food and Nutrition Service: Office of Emergency Management, *WIC During Disaster*
7.10 B	USDA Food and Nutrition Service: *Office of Emergency Management, Disaster Supplemental Nutrition Assistance Program (D-SNAP)*
7.10 C	USDA: *The Food Bank Response to Disasters*
7.10 D	USDA Food and Nutrition Service: Office of Emergency Management, *USDA Foods During Disaster*
7.10 E	USDA Food and Nutrition Service: Office of Emergency Management, *Child Nutrition Programs During Disaster*
7.10 F	MD WIC Post Disaster Report

References:

(2) Detailed Policy Guidance for State Cooperators in Disaster Situations 2012 https://www.partnerweb.usda.gov/communities/WIC-FMNP-SFMNP/Disaster%20Assistance/Detailed%20Policy%20Guidance%20for%20State%20Cooperators%20in%20Disaster%20Situations%202012.pdf
(3) WIC On the WEB (WOW) Maryland WIC System Security Plan, Version 4.0 (4/25/2014)

Revisions:

United States Department of Agriculture

Food and Nutrition Service **Office of Emergency Management**

WIC During Disaster

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is not designed to be a disaster assistance program, and is, therefore, not considered a first response option for disaster survivors. WIC policies allow State agencies flexibility in program design and administration to support continuation of benefits to participants during times of natural or other disasters. WIC State agencies are encouraged to work with FEMA as well as their own State and local emergency services offices to assist participants during a disaster.

WIC State Agencies

- Disaster-related evacuees who seek WIC benefits should receive expedited certification processing.
- In cases where disaster-related evacuees move in with another household, the displaced individuals may be treated as a separate economic unit.
- Verification of certification (VOC) information should be provided by the local WIC office to WIC participants when a disaster-related evacuation is anticipated.
- The documentation requirements for income, residency and/or identity do not apply to a disaster survivors whose documentation has been damaged, lost or destroyed, or if the agency determines the income documentation requirement would present an unreasonable barrier to participation.
- State agencies may allow the participant's certification period to be shortened or extended by a period not to exceed 30 days.
- State agencies may establish their own policies and procedures with regard to replacement of unredeemed WIC checks or vouchers that are destroyed in disasters.
- State agencies may mail food instruments to persons who are not scheduled for nutrition education or a second or subsequent certification.

WIC Participants

- Participants/evacuees do not have to present proof of identity, residency or income that is normally required (that is, if one had to leave home in such a hurry that she was unable to bring the necessary documents, or if those documents were destroyed).

- Participants/evacuees may be able to use their original WIC checks or vouchers in the State to which they have been relocated. The WIC State agency will inform participants if this is the case, usually through a toll-free telephone number and/or other public announcement.

- Contact information for State WIC agencies can be found on the Food and Nutrition Service website: http://www.fns.usda.gov/wic/contacts/statealpha.htm.

WIC-Authorized Vendors

- WIC vendors may be allowed to accept out-of-State food instruments during disaster situations. The State WIC office will advise vendors if this is allowed.

- If at all possible, the participant should receive the exact brand of infant formula specified on the out-of-State food instrument.

- If it is not possible to provide the exact brand items for the other foods listed on the out-of-State WIC food instrument, a similar item from the neighboring State's WIC-approved food list may be substituted.
- The originating WIC State agency (i.e., the WIC State agency in which the participant was initially certified) is responsible for the cost of the food instrument. The out-of-State vendor should deposit each WIC check into his or her bank account for payment. If the originating WIC State agency issues vouchers instead of checks, the out-of-State vendor should submit the vouchers for payment to the originating WIC State agency.

These WIC vendor policies do not apply to Mississippi and Vermont because the WIC Programs in these States do not operate through grocery stores.

the following links: http://www.fns.usda.gov/wic/disasterresponse.htm and http:/ /www.fns.usda.gov/wic/disasterpolicyguidance.htm

USDA United States Department of Agriculture

Food and Nutrition Service **Office of Emergency Management**

Disaster Supplemental Nutrition Assistance Program (D-SNAP)

- Through the Disaster Supplemental Nutrition Assistance Program (D-SNAP), FNS is able to quickly offer short-term food assistance benefits to families suffering in the wake of a disaster.
- Eligible households receive one month of benefits, equivalent to the maximum amount of benefits normally issued to a SNAP household of their size. Benefits are issued via an electronic benefits transfer (EBT) card, which can be used to purchase food at most grocery stores.
- Through D-SNAP, affected households use a simplified application. D-SNAP benefits are issued to eligible applicants within 72 hours, speeding assistance to disaster victims and reducing the administrative burden on State agencies operating in post-disaster conditions.
- Households not normally eligible for SNAP may qualify for D-SNAP as a result of their disaster-related expenses, such as loss of income, damage to property, relocation expenses, and, in some cases, loss of food due to power outages.
- When States operate a D-SNAP, ongoing SNAP clients can also receive disaster food assistance. Households with disaster losses whose SNAP benefits are less than the monthly maximum can request a supplement. The supplement brings their benefits up to the maximum for the household size. This provides equity between D-SNAP households and SNAP households receiving disaster assistance.
- FNS approves D-SNAP operations in an affected area under the authority of the Robert T. Stafford Disaster Relief and Emergency Assistance Act when the area has received a Presidential disaster declaration of Individual Assistance (IA) from the Federal Emergency Management Agency (FEMA).
- State agencies request FNS approval to operate a D-SNAP within the disaster area. FNS approves program operations for a limited period of time (typically 7 days) during which the State agency may accept D-SNAP applications.

For more information and resources, please visit the FNS website at:
www.fns.usda.gov/disaster

The Food Bank Response to Disasters

Food banks are an important resource to help meet the food needs of those affected by emergencies and disasters. For food banks that participate in The Emergency Food Assistance Program (TEFAP), one effective way to address disaster food needs is to enroll affected individuals and families in TEFAP. Under certain conditions, food banks may also work through their State agency to request approval from USDA's Food and Nutrition Service (FNS) to operate a household disaster food distribution program using USDA Foods. TEFAP and household disaster feeding are two separate and distinct programs that can be used to respond to emergencies and disasters.

TEFAP Feeding During Disasters

TEFAP offers an immediate means of providing food to those in need during an emergency or disaster. TEFAP is an ongoing program with an already established distribution network. States determine the income eligibility guidelines, and disaster survivors often qualify. USDA Foods distributed through TEFAP during a disaster are part of the State's TEFAP allocation, and are not eligible for replacement.

Establishing a Household Disaster Feeding Program Using USDA Foods

Household disaster feeding using USDA Foods takes place only as needed, requires approval from FNS Headquarters, and comes with certain conditions that must be met. Only FNS has the authority to re-designate TEFAP food for use in disaster feeding. Food banks should **not** distribute TEFAP foods as part of a household disaster food distribution program without first working through their State Distributing Agency to obtain approval from FNS. The State Agency will work through their FNS Regional Office to obtain approval from FNS Headquarters. Approval from FNS Headquarters ensures that all conditions for replacement of the USDA Foods used have been met. Keep in mind that FNS has no authority to reimburse food banks for **administrative** expenses associated with any household disaster food distributions.

Before FNS will consider approval of a household disaster food distribution program, the following circumstances must exist in the disaster area:

- Commercial food distribution channels are disrupted making it difficult for food retailers to operate, and for Supplemental Nutrition Assistance Program (SNAP) benefits to be redeemed.
- Congregate feeding is not practical or expected to be inadequate to meet the needs of all affected households.
- Households are sheltering in place at home and are in need of food.
- The local disaster feeding organization can efficiently and effectively receive, store, and distribute USDA Foods.

Applications to use USDA Foods in a household disaster food distribution program must be submitted to FNS Headquarters through the State Distributing Agency. The application should, to the extent possible, include the following information:

- A description of the disaster, emergency, or situation of distress.
- Identification of the specific areas that would be served, and the number of households expected to participate in disaster feeding.
- An explanation as to why household distribution is warranted, and the anticipated distribution period.
- The quantity and types of food needed.
- Assurances that households will not receive both USDA Foods and Disaster SNAP benefits, and a description of the system used to prevent dual participation.
- The method(s) of distribution available.

Food banks approved to a household disaster food distribution program are required to collect minimal household information and, if Disaster SNAP is also operating, obtain a signed statement from each household that they are not also receiving Disaster SNAP benefits.

FNS regulations addressing USDA Foods for disasters can be found at 7 CFR 250.69 and 250.70. More information on this topic can also be found at http://www.fns.usda.gov/fdd/programs/fd-disasters/ or by contacting your FNS Regional Office.

June 2011

United States Department of Agriculture

Food and Nutrition Service **Office of Emergency Management**

USDA Foods During Disaster

Using USDA Foods during Disasters

- USDA's Food and Nutrition Service (FNS) supplies USDA Foods to disaster relief organizations such as the Red Cross and the Salvation Army for congregate feeding or household distribution.
- Disaster organizations request food through State agencies. States, in turn, notify USDA of the types and quantities of food that emergency feeding organizations need.
- States may use existing inventories of USDA Foods stored at State, local, and school warehouses intended for the National School Lunch Program (NSLP), The Emergency Food Assistance Program (TEFAP) and other USDA nutrition assistance programs.
- USDA Foods include a variety of non-perishable fruits, vegetables, meat, poultry and whole grain products.

Disaster USDA Foods for Mass Feeding Sites

- States have authority to release USDA Foods to disaster relief agencies for mass feeding when the President issues a disaster declaration, and in certain other types of emergencies.
- USDA Foods intended for the NSLP are most often used for mass feeding. School inventories are depleted as the end of the school year approaches which may affect what types of USDA Foods are available.

Disaster USDA Foods for Direct Distribution to Households

- Emergency feeding organizations sometimes request USDA Foods in smaller sizes to individual households for preparation and consumption at home.
- States must get approval from the USDA Food and Nutrition Service to distribute USDA Foods to disaster survivors.
- USDA Foods for household consumption are most often obtained from State and recipient agency inventory intended for The Emergency Food Assistance Program.
- Households cannot receive both disaster SNAP benefits and disaster USDA Food household food packages at the same time. States must take reasonable steps to prevent households from participating in both programs.

United States Department of Agriculture

Food and Nutrition Service **Office of Emergency Management**

Child Nutrition Programs During Disaster

Natural disasters, such as hurricanes, tornadoes, and floods, can be devastating to communities and require a quick response. Schools, child care centers, and summer sites that operate the National School Lunch (NSLP) and School Breakfast Programs (SBP), the Child and Adult Care Food Program (CACFP), or the Summer Food Service Program (SFSP) can help minimize disruptions to your family.

Here are some tips to help your children access healthy meals in the event of a disaster in your area:

Eligibility

- Children in households' receiving D-SNAP (Disaster-Supplemental Nutrition Assistance Program) benefits are eligible for free meals regardless of income.
- Children identified as homeless by a school or emergency shelter official are also eligible for free meals regardless of income.
- Eligibility for free meals will continue for the rest of the school year under NSLP and SBP or for a full year through CACFP or SFSP.
- Impacted families should contact their local school or child care center or summer site for more information on how to receive free meals through our programs.

Site Types

- Summer sites and child care centers may serve free meals to families in the event of a disaster. You should contact the local child care centers, schools and summer sites in your area to determine what sites are providing free meals.
- Emergency shelters in your area also may be able to provide your family with free meals. Contact your local shelter for this information.

Safety Tip

- Remember, the safety of you and your family is important. Some sites normally serving free meals to children may be relocated for safety reasons so check with your local providers before you travel to the site.

MD WIC Post Disaster Report

Local agency: ____

Location: ____

Complete one Post Disaster Report for each location affected

Date(s) of disaster (from) _______________ (to) _________________

Description of disaster:____

____

____

____

____

____

Description of procedures used to manage disaster: ______________________________

____

____

____

____

Description of current issues (include issues affecting staff, vendors, and participants):________________

____

____

____

Person Completing Form: ____ Date:________________
Print

Person Completing Form: ____
Signature

Local Agency Coordinator: ______________________________________
Signature

Policy and Procedure 7.20 has been deleted effective October 1, 2010

The information on administrative funds distribution is included in Policy and Procedure 6.00.

Policy and Procedure Number: 7.21
Effective Date: October 1, 1990
Revised Date: October 1, 2001

SECTION: **LOCAL AGENCY OPERATIONS AND MANAGEMENT**

SUBJECT: **Appointment No-Show Rates**

A. Policy

As a means of enhancing Program operations, the local agencies shall implement the following no show policies and procedures.

Each local agency must track no show rates for certification appointments.

No Show Tolerance Levels

1. Local agencies must attempt to maintain no-show rates within the following range:

   Certification: 30% maximum no show rate

2. Review of agency no show rates will be incorporated into the management evaluation of each local agency. Agencies whose no show rates exceed the maximum standard must document what steps they are taking to decrease the no show rate.

3. A local agency must contact all pregnant women who do not keep a certification appointment. Contact can be made in writing or by telephone.

B. Procedure

Local agencies shall abide by the above policy.

Policy and Procedure 7.22 has been removed.

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
WIC PROGRAM
POLICY AND PROCEDURE MANUAL

Policy and Procedure Number: 7.40
Effective Date: October 1, 1990
Revised Date: October 1, 2004

SECTION: **LOCAL AGENCY OPERATIONS AND MANAGEMENT**

SUBJECT: **WOW Information Systems Usage**

A. Policy

Local Agencies are to monitor the use of their computer resources to ensure that resources are being used solely in support of authorized WIC objectives, and that the computers, networks and peripherals are not being abused.

B. Procedure

1. Local Agencies shall ensure compliance with State and Federal copyright laws:
   a) Only State or approved Local Agency licensed software can be installed or used on WIC computers.
   b) Local Agencies must maintain a record of software licenses for any software installed on WIC computers. Unauthorized software may be removed at any time by the State.

2. Local Agencies shall monitor the use of their computer resources to protect against non-business use.
   a) WIC computers are not to be used for internet access to sites unrelated to WIC or WIC's business needs. Internet use consumes an enormous amount of bandwidth and will decrease the overall performance of the system significantly, as well as exposing the system to risk of a computer virus.
   b) WIC computers are not to be used for sending or receiving personal, inappropriate or non WIC communications.

Attachments:

References:

Revisions October 1, 2004

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
WIC PROGRAM
POLICY AND PROCEDURE MANUAL

Policy and Procedure Number: 7.41
Effective Date: October 1, 1990
Revised Date: April 1, 2013

SECTION: LOCAL AGENCY OPERATIONS AND MANAGEMENT

SUBJECT: WOW Information Systems Security

A. Policy

Local Agencies are to ensure confidentiality of WIC data and protect WIC information systems against unauthorized access.

B. Procedure

1. To safeguard WIC data and system access, all employees and contract personnel shall:

   a) Be aware of their responsibilities in protecting the confidential and sensitive information of their agency and the State of Maryland. Verification that all users are in compliance will be reviewed during the Local Agency Management Evaluation (ME).

   b) Use information resources only for their intended purposes as defined by State and agency policies and the laws and regulations of the State. Refer to DHMH policy 02.01.01 on the use of DHMH Electronic Information Systems (EIS); (http:/www.dhmh.state.md.us/policies/020101.pdf)

   c) Annually receive security awareness training regarding WIC and Internet Safety to protect program and participant data.

   d) Annually sign the Combined IRMA Policy Acknowledgement Form (http://www.dhmh.state.md.us/policies/cipaf-4518.pdf) for DHMH computer-related policies.

   e) Not allow the unauthorized sharing of protected and proprietary information.

   f) Protect their passwords to prevent unauthorized access to the system by maintaining the privacy of the password and ensuring that passwords are not posted, written down or shared with anyone.

   g) Change their passwords at least once every 90 days.

   h) Choose "strong" passwords that are at least 8 characters long containing a mix of letters, numbers, punctuation, symbols and underscore that comprise a password which should not be easily discovered (do not use names, birth dates, or similar common designations). A password cannot contain a blank space. Examples of strong passwords are “brea$tf@@ding” instead of “breastfeeding,” “W!C_W!NS” instead of “WICWINS,” and “pa$$w0rd” instead of “password.

i) Protect their system access by logging out of the system when leaving the computer for more than a brief period of time; and by using a screensaver password to protect against intrusion for brief periods of possible exposure.

j) Ensure that the use of their computer account is limited to their individual username. Staff must not allow anyone else to use their account, must not share their password, and must log off when another authorized user needs to use their system.

2. To safeguard WIC data and system access, Local Agencies shall:

   a) Notify the State office in writing to request authorization for system access.

   b) Notify the State office in writing within 1 day when an employee or contract personnel with system access is terminated or will no longer require access to the system.

   c) Maintain accurate and up-to-date roles assignments in the system for their staff so that the system access granted by user roles is appropriate for each user.

   d) Annually, have staff review and sign the combined IRMA Policy Acknowledgement Form (http://www.dhmh.state.md.us/policies/cipaf-4518.pdf) for DHMH computer-related policies and receive submit the Compliance with DHMH Security Policies (P&P 7.41A) affidavit. Copies of the forms signed by staff must be kept on file in accordance with Policy and Procedure 6.00 B.3 (record retention schedule) and be available for review during the Local Agency Management Evaluation (ME).

   e) Annually present security awareness training to all staff. Documentation of the training (i.e., staff meeting agenda and sign-in sheet) must be kept on file in accordance with Policy and Procedure 6.00 B.3 (record retention schedule) and be available for review during the Local Agency ME.

3. To safeguard WIC data and system access, The State shall:

   a) Ensure that WOW automatically requires the user to change their password at least once every 90 days and will require the password to be at least 8 characters long containing a mix of letters, numbers, punctuation, symbols and underscore that comprise a password which should not be easily discovered.

b) Respond to requests for system access within 3 working days of receiving the complete request documentation.

c) Remove account access from terminated employees on the day of termination or on the day of receiving notification of employee termination.

d) Prepare security awareness training materials on an annual basis for local agencies to present to staff.

4. Local agencies and their staff are responsible for securing computer equipment against theft, intrusion, and unauthorized access.

   a) All computer equipment must be protected against theft by being kept in a locked room when not in use or secured to non-movable objects.

   b) Computer equipment must be protected against intrusion and equipment which will be left unattended must be either locked down or put in a secure, locked location.

   c) Laptops are especially vulnerable to theft and extra diligence must be given to ensure their protection. Never leave laptop computers unattended, especially in open or plainly visible areas.

   d) All computer equipment must be protected against damage, including flooding. When conditions threaten to damage equipment, contact the Help Desk for guidance and take appropriate precautions such as removing the equipment from the threatened area and/or covering the equipment to protect against water, dust, or other intrusive materials.

5. All WIC computers must run antivirus software. If the antivirus software is not managed by local IT staff, the State shall install antivirus software and regularly update the signature files

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Attachments:
7.41A Compliance with DHMH Security Policies
7.41B Combined IRMA Policy Acknowledgement Form

References:
1. DHMH Policy 02.01.01DHMH Electronic Information Systems (EIS)

Revisions:
10/04 Modified to include the use of strong passwords and timeframe for termination notification and removal of system access.
7/10 Modified to include Compliance with DHMH Security Policies.
1/13 Modified to include annual security training and ME requirements.

MEMORANDUM

TO: Jacqueline Marlette-Boras
Director, Maryland WIC Program

FROM: ___________________________________

____

DATE: ___________________________________

RE: Compliance with DHMH Computer Related Policies

This memorandum is to advise that my local agency is in compliance with DHMH Policies:

02.01.01 Policy on the Use of DHMH Electronic Information Systems (EIS);
02.01.02 Software Copyright Policy and the State of Maryland Software Code of Ethics; and
02.01.06 Policy to Assure Confidentiality, Integrity and Availability of DHMH Information (IAP).

Compliance includes completion of the Software Code of Ethics Form for all known and potential computer users, distribution of the employee education package, and establishment of controls for all software and software licenses. Submission of this memorandum also confirms that all staff in my Local Agency have received annual security training.

cc: WIC Help Desk

Maryland Department of Health and Mental Hygiene
Information Technology Security Policy, Standards & Requirements

COMBINED OIT POLICY ACKNOWLEDGMENT FORM

<table>
<tr><td colspan="4">This document is a combined policy acknowledgment form for DHMH computer-related policies. Following consultation with your supervisor, please read and initial the appropriate acknowledgment sections, then sign the signature block below.</td></tr>
<tr><td colspan="2">Acknowledgement Section- Initials</td><td>Policy Number-Statement</td><td></td></tr>
<tr><td>Employee</td><td>Supervisor</td><td colspan="2">02.01.01 DHMH Information Technology Security Policy
Policy, Standards and Requirements for the protection of Information Technology. I hereby acknowledge awareness of DHMH Policy 02.01.01, and that my use of these systems constitutes my consent to comply with this directive.</td></tr>
<tr><td></td><td></td><td colspan="2">02.01.02-Software Copyright Policy & the State of Maryland Software Code Of Ethics-
Unauthorized duplication of copyrighted computer software violates the law and is contrary to the State's standards of conduct. The State disapproves of such copying and recognizes the following principles as a basis for preventing its occurrence.
1. The State will not permit the making or using of unauthorized software copies under any circumstances.
2. The State will provide legally acquired software to meet its legitimate software needs in a timely fashion and in sufficient quantities to satisfy those needs.
3. The State will enforce internal controls to prevent the making or using of unauthorized software copies, including measures to verify compliance with these standards and appropriate disciplinary actions for violations of these standards.
I understand that making or using unauthorized software will subject me to appropriate disciplinary action. I understand further that making copies of, or using unauthorized software may also subject me to civil and criminal penalties. My signature below indicates that I have read and understand Policy 02.01.02- Software Copyright Policy and the State of Maryland Software Code of Ethics.</td></tr>
<tr><td></td><td></td><td colspan="2">02.01.06-Policy to Assure Confidentiality, Integrity and Availability of DHMH Information (IAP)
I acknowledge that I am required to comply with the general applicable sections of this policy as it relates to my current job duties. I further acknowledge that should I breach this policy, I am subject to disciplinary, civil, and criminal consequences.

02.01.06-IAP–"Specific Personnel" Acknowledgement [ ] Check here if this applies.
If I am currently designated, or at any time my job duties require me to be designated as a Custodian, Data Steward, Designated Responsible Party, Database Administrator, and/or Network (System) Administrator, I acknowledge that I am required to comply with the corresponding responsibilities assigned to specific personnel. Likewise, if I am currently required, or if at any time my duties include the requirement for preparation or monitoring of contracts or memoranda of understanding, I acknowledge that I am required to comply with the specific personnel provisions of the Information Assurance Policy and guidance.</td></tr>
</table>

<table>
<tr><td colspan="3">Employee/User Signature Block- I hereby acknowledge that I have reviewed and understand the above-initialed policies.</td></tr>
<tr><td colspan="3">Employee/User Signature: ____________________________________ DATE: _______________</td></tr>
<tr><td>Employee/User Identification (Please Print)</td><td>NAME:____
PIN # or CONTRACT#:______________________</td><td>AGENCY/COUNTY:_________________
ADMINISTRATION/UNIT:______________
_ LOCATION:__________________</td></tr>
<tr><td>Supervisor's Verification</td><td>Supervisor Signature_________________________________
DATE:_____________</td><td>°Supervisor verifies that the employee/user has acknowledged and initialed the appropriate policies for his/her position.</td></tr>
<tr><td colspan="3">DHMH 4518 (REV Nov 2010) This form will be retained in the employee's DHMH personnel file.</td></tr>
</table>

All pertinent policies can be accessed and read at http://www.dhmh.maryland.gov/SitePages/op02.aspx
and State IT Security policy http://doit.maryland.gov/support/Documents/security_guidelines/DoITSecurityPolicyv3.pdf

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
WIC PROGRAM
POLICY AND PROCEDURE MANUAL

Policy and Procedure Number 7.42
Effective Date: October 1, 2003
Revised Date: April 1, 2012

SECTION:	**LOCAL AGENCY OPERATIONS AND MANAGEMENT**
SUBJECT:	**Adding, Removing and Modifying Staff Access to WOW**

A. Policy

Local agencies are required to submit a request to the State agency to add or remove staff from the WOW information system. State agency staff with the required role assignment will assign or change roles for local agency staff.

B. Procedure

Local agencies shall:

1. Submit a WOW Staff Data Sheet (Attachment 7.42A) to the WIC Help Desk to request that a new user be added, removed or changed in the WOW information system.

2. Determine the appropriate roles to assign to staff based on qualifications (i.e. CPA, CPPA), job function and need for separation of duties within the local agency. The list of WOW roles allowed for use by local agency staff are contained in Attachment 7.42B.

3. Determine the appropriate time study type to assign to staff based on the time study frequency requirements contained in Policy and Procedure 6.01.

4. Submit a request to remove a staff person from WOW within 1 day of the employee termination date of an employee.

5. When a staff person is suspected of abusing their roles within WOW, contact the State agency immediately to determine the appropriate course of action.

State agency shall:

1. Process requests for terminations on the day of termination or on the day of receiving notification of employee termination.

2. Process requests for adding and modifying staff within 3 working days of receipt of the WOW Staff Data Sheet and notify the local agency that the requested action has been taken.

3. Maintain a record of all requests for staff additions, deletions and modifications and monitor role assignments as part of the local agency management evaluation process (Policy & Procedure 7.81).

Attachment(s):
7.42A WOW Staff Data Sheet
7.42B WOW Security Roles and Internet Access

Revisions:

1.	7/2010	Added BF Aids Inventory Role
2.	10/2010	Added Time Study Role and Timeframes for Submission
3.	4/2011	7.42 Added reference to time study types. 7.42A Added additional time study type. 7.42B Updated role and access level definitions.
4.	4/2012	7.42A Added new change fields and comments section 7.42B Added new instructions for Employee Status, Employee Information, Job Classification, and Training

Local Agency Staff Data Request Form - Attachment 7.42A

Employee Status:

- ☐ New Date____/____/____
- ☐ Reinstate Date____/____/____
- ☐ Resign Date____/____/____ ☐ CORE User
- ☐ Change Date____/____/____
- ☐ Change Last Name (Old) ______________
- ☐ Change Local Agency (Old) ______________
- ☐ Change Other ______________

Last Name:	First Name:	MI:
Agency:	Time Study Type: ◯ Exempt (BFPC) ◯ Daily ◯ Quarterly	
Email:	SharePoint Access: ◯ Yes ◯ No	

WOW User Security Roles (Check the roles to be assigned to or removed from this staff member.)

Clinic		Admin
Add/Remove	Add/Remove	Add/Remove
☐ ☐ Appt Scheduler/Precert	☐ ☐ Demographics (R/O)	☐ ☐ BF Aids Inventory
☐ ☐ Appt Scheduler/Precert (R/O)	☐ ☐ Food Issuance	☐ ☐ Clinic Setup
☐ ☐ BF Peer Counselor Coord.	☐ ☐ Fraud and Abuse	☐ ☐ Schedule Set-up Tasks
☐ ☐ BF Support	☐ ☐ Fraud and Abuse (R/O)	☐ ☐ Time Study Approval
☐ ☐ CPA	☐ ☐ Monitoring	☐ ☐ User Setup (State Only)
☐ ☐ CPPA	☐ ☐ Reports	☐ ☐ Developer (State Only)
☐ ☐ Demographics		☐ ☐ Data Maintenance (State Only)

Internet Access	Job Classification		Training
Add/Remove	Add/Remove	Add/Remove	
☐ ☐ Full	☐ ☐ State	☐ ☐ CPA	☐ New Employee
☐ ☐ Limited	☐ ☐ LA Coordinator	☐ ☐ CPPA	Date: ______
☐ ☐ WOW Only	☐ ☐ LA Administrative	☐ ☐ BF Peer Counselor	

Comments: ____

Coordinator's Signature ______________________ Date ____________

Please returned signed form to WIC Help Desk via fax or email.
Fax: 410-333-5683 Email: wic.helpdesk@maryland.gov

For Office Use Only

NEW		REMOVE		SENT to	Train Ctr	Dist Ctr	Nutri Unit
User Name:	______	WOW:	______	Date:	______	______	______
ID #:	______	WIC DC:	______	Initials:	______	______	______
Password:	______	WOW DC1:	______				
Initials:	______	Date:	______				

Using the Staff Data Sheet

EMPLOYEE STATUS	
Status	
New	Add a new user to the system, provide their start date
Reinstate	Re-activate an existing user in the system, provide their new date
Resign	De-activate a current user, provide their last date as an employee
Change	Please indicate the date that the change will or has occurred
• Name	Marriage, etc. - give their previous last name in the space provided
• Local Agency	Use when switching to a new agency – provide the new agency name further down in the form
• Other	Write any other changes you are making to a staff's role, internet access, job classification, time study type, etc.

EMPLOYEE INFORMATION	
Field	
Time Study Type	Always mark whether an individual should be reporting Time Study quarterly or daily, *or* if they are paid entirely from the BFPC budget. See P&P 6.01 for more details.

SECURITY ROLES	
Role	**Permissions**
CLINIC MODULE	
Appt Sched/Precert	Has full access to all Appointment Scheduler functions, including: scheduling, moving, rescheduling and canceling appointments, scheduling classes, the appointment waiting list and time study entry. Has access to NoteMaster and Communications. Has access to the Precert screen and can perform functions of transferring participants and issuing VOCs.
Appt Sched/Precert (R/O)	Read only access to all screens accessible by Appt Sched/Precert role.
BF Peer Counselor Coordinator	Has access to the Counselor dropdown on the Breastfeeding Support tab.
BF Support	Has the ability to make participants active, schedule appointments and access all breastfeeding support screens, communications, referrals and print documents. In addition they have read-only access to the following screens: Women's Medical, Food Prescription, Nutrition History and Risk Factors.

CPA	Has rights to access special formulas, customize food packages and assign/remove high risk indicators.
CPPA	Has full access to all Appointment Scheduler functions to include accessing the daily schedule, scheduling, rescheduling, moving and canceling an appointment. Has full access to the following screens: Infant/Child/Woman Medical, Immunizations, Risk Factors, Nutrition Education, Referrals, Food Prescription, and Formula Calculator.
Demographics	Has full access to the following screens: Family Information, Participant Registration, Income Calculator, Cert Action.
Demographics (R/O)	Read only access to all screens accessible by the Demographics role.
Food Issuance	Has full access to functions involving check issuance including check printing, voiding, batch printing and manual check issuance.
Fraud & Abuse	Has full access to resolving dual participation, participant complaints, sanctions, warnings and disqualifications.
Fraud & Abuse (R/O)	Has read only access to screens accessible by the Fraud and Abuse role.
Monitoring	Has full access to all monitoring buttons.
Reports	Has full access to all reports.
ADMIN MODULE	
BF Aids Inventory	Has full access to the Breastfeeding Aids Inventory component of the Admin Module. Provides access to the Inventory Summary and Inventory Maintenance screens to maintain breastfeeding aids inventory.
Clinic Set-up	Has full access to all clinic demographic information. Includes maintaining local providers and referrals.
Schedule Set-up Tasks	Has full access to all functions related to creating schedules. Includes office closed days, schedule templates, generating schedules, mass rescheduling, autodialer set-up, etc.
Time Study Approval	Has full access to review and approve time study entries.
Fraud & Abuse (R/O)	Has read only access to screens accessible by the Fraud and Abuse role.
User Set-Up (State Only)	Available for STATE WIC staff only. Has full access to set-up new users, assign agencies and roles, and role permissions.
Developer (State Only)	Available for STATE WIC staff only. Has full access to all screens and functions.
Data Maintenance (State Only)	Available for STATE WIC staff only. Has full access to maintaining tables, referral categories, web-based training questions and state surveys. Also allows cert start date and birth date changes.

INTERNET ACCESS LEVELS	
Domain: Workstations and servers that share a security account manager.	
NOTE: Internet access can only be controlled for users accessing the internet through the WIC Domain (i.e., sites with a WIC installed T1 connection and some local health departments). Internet access cannot be controlled for users accessing the internet at sites using a Local Health Department Domain, DSL or cable connection.	
Level	**Permissions**
Full	Has full access to the internet.
Limited	Has restricted access to the internet to sites such as .gov, .edu, .org, .us, .net and other selected sites required for normal business operations.
WOW Only	Has access to WOW and selected internet sites required for normal business operations (i.e., Microsoft.com, windowsupdate.com, Baltimorecity.gov, etc).

JOB CLASSIFICATION	
Classification	
State	201 W. Preston and Training Center Staff
LA Coordinator	Person responsible for the administration of WIC Program at the Local Agency
LA Administrative	Anyone who provides administrative services to the clinics and does not perform certifications.
CPA	Physician, nutritionist, dietician, registered nurse, physician's assistant, State or locally medically trained health official, or individuals with a bachelor's, master's, or doctoral degree, who is required to complete WIC WISE 1 and 2 and CPA training. See P & P 7.63.
CPPA	Paraprofessional required to demonstrate proficiency through the completion of a series of competency checklists after completing WIC WISE 1 training. See P & P 7.60
BF Peer Counselor	Paraprofessional peers who help mothers with breastfeeding and are required to satisfactorily complete peer counselor training. See P & P 5.13.

TRAINING	
New Employee	Please indicate if this employee needs to begin new employee orientation training. This begins with WIC WISE I.

Policy and Procedure Number 7.43
Effective Date: October 1, 2003
Revised Date: January 2, 2013

SECTION:	**LOCAL AGENCY OPERATIONS AND MANAGEMENT**
SUBJECT:	**Computer Supplies**

A. Policy

Local agencies are required to purchase plain bond paper and toner cartridges for use with the management information system. The State Agency will supply blank check stock and MICR cartridges for use with the management information system.

B. Procedure

The local agency shall:

1. Order blank check stock and MICR cartridges for the check printer as follows:

   a. Requests for blank check stock are made through the MD WIC Distribution Center using the order form for WIC Certification Materials (Attachment 7.65B). Requests for MICR cartridges must be completed and sent or faxed to the State Agency using Attachment 7.43A of this policy. Local agencies must allow for a minimum of two weeks for an order to be received and shall monitor their current supply and order in a timely fashion to avoid running out of check stock or MICR cartridges.

   b. A request for emergency check stock or MICR cartridges must be phoned into the State Agency and explained to a supervisor.

2. Monitor their supply of MICR cartridges so that the “shelf life expectancy” of a cartridge does not pass prior to usage of the cartridge in the management information system. This may mean rotating cartridges among clinics and using older cartridges in clinics with a higher volume of check issuance.

3. Monitor check printing and respond to the “Low Toner” message on a MICR printer as soon as reasonably possible to prevent the issuance of food instruments that will be rejected by the bank due to a low supply of MICR ink.

4. Maintain MICR cartridges in a secure, cool location to prevent loss due to theft or improper storage conditions.

The State agency shall:

5. Monitor their supply of check stock and MICR cartridges to avoid the depletion of stock.

6. Fill all orders for check stock and MICR cartridges within one week of receipt of the order.

7, If an order is unable to be filled within one week of receipt, they shall contact the local agency to determine if there will be an emergency situation if the order(s) are not received within two weeks. If an emergency situation is determined, the State Agency will work with the local agency to determine a viable alternative solution.

Attachments: 7.43A MICR Toner Cartridge Order Form

References:

1. 7.65B Cert Materials Order Form

Revisions:

1. 1/2013 – Changed references from WOW to management information system and policy reference from 2.00A to 7.65B.

OFFICE OF THE MARYLAND WIC PROGRAM

201 W. Preston Street · Baltimore MD 21201 · 410-767-5242

MICR Toner Cartridge Order Form

Quantity _________	Cartridge Model #: STI-204511	Printer Model: ST9510
Quantity _________	Cartridge Model #: STI-204512	Printer Model: ST9512
Quantity _________	Cartridge Model #: STI-204063H	Printer Model: ST9530
Quantity _________	Cartridge Model #: STI-204513	Printer Model: ST9612
Quantity _________	Cartridge Model #: STI-204064H	Printer Model: ST9630
Quantity _________	Cartridge Model #: STI-204065H	Printer Model: ST9730
Quantity _________	Imaging Unit#: STI 24B6238	Printer Model: ST9730 MICR
Quantity _________	Imaging Unit#: Lexmark 520Z	Printer Model: ST9730 Report
Quantity _________	Cartridge Model #: STI-204514-24B6224	Printer Model: ST9712/ST9715

Please note: Cartridges have a MAXIMUM usable lifetime of 6 months. Checks printed on cartridges that are beyond their usable lifetime period may be rejected by the bank.

Ship Order to (Local Agency Address):

____

____

____

Note: Someone must be able to receive orders at the "Ship to" location Monday through Friday during normal work hours.

Order placed by: ____________________________________
PRINT NAME

Date: ______________________________

Send order form to:
Debbie Mulligan
Fax: 410-333-5683
Email:
Debbie.Mulligan@maryland.gov

Policy and Procedure Number: 7.60
Effective Date: January 2, 1990
Revised Date: October 1, 2015

SECTION:	**LOCAL AGENCY OPERATIONS AND MANAGEMENT**
SUBJECT:	**Competent Paraprofessional Authorities (CPPAs) and Competent Professional Authorities (CPA's)**

A. Policy

Federal regulations require that a qualified individual on the staff of the local agency, referred to as a WIC Competent Professional Authority (CPA), determine nutritional risk and prescribe supplemental foods. The CPA designation is limited to physicians, nutritionists[1], dietitians, registered nurses, physician's assistants[2], or State or local medically trained health officials.

A paraprofessional is an individual on the staff of the local WIC agency who does not meet the federal definition of a CPA, but who, following successful completion of a training program, will receive the designation as a WIC Competent Paraprofessional Authority (CPPA). The CPPA may perform certifications under the supervision of a CPA with the following limitations:

- Only a CPA shall prescribe a food package that provides a ready-to-use infant formula, special or non-contract standard infant formula, or special formula for women or children with special dietary needs.
- Only a CPA shall provide high risk (nutrition care) counseling.

WIC CPPA's and newly hired CPA's are called upon to demonstrate an array of competencies. These competencies include the ability to determine nutritional risk, prescribe supplemental foods, make referrals, and provide simple, practical, and accurate nutrition education and breastfeeding messages to WIC participants.

To gain these competencies, CPPAs and newly hired CPAs must complete a formal training program under the supervision of a CPA who has demonstrated

[1] A nutritionist is defined as having a bachelor's or master's degree in Nutritional Sciences, Community Nutrition, Clinical Nutrition, Dietetics, Public Health Nutrition, Home Economics (with an emphasis [9 or more college credit hours] in Nutrition), or Health Education (with an emphasis [9 or more college credit hours] in Nutrition).
[2] Certified by the National Committee on Certification of Physician's Assistants or certified by the State medical certifying authority.

competency through the completion of the competency checklists. Competency is evaluated by measuring the CPPA's and newly hired CPA's ability to meet performance objectives, including both knowledge and skills. Competency checklists completed by the supervising CPA are used (following WIC WISE training) to rate the CPPA's and newly hired CPA's ability to meet skill objectives.

The goals of CPPA and newly hired CPA training are to:

- Assure the consistency and accuracy of services provided to WIC participants;
- Increase nutrition knowledge and develop the counseling skills of staff;
- Increase staff confidence and job satisfaction;
- Organize and standardize paraprofessional staff training; and
- Acknowledge staff expertise.

B. Procedure

1. CPPA and new CPA Training

a. All WIC CPPA's and newly hired CPA's shall attend New Employee Training as described in Policy and Procedure 7.66.

   The WIC CPPA's and newly hired CPA's training shall be supervised by a CPA who has successfully completed competency checklists. The supervising CPA must have completed the WIC WISE part 1 and part 2 training in order to be familiar with WIC policies and procedures and new CPA training to be familiar with competency checklists.

   Newly hired CPAs must also be deemed competent in all areas of certification so that they may be qualified mentors for CPPAs and become supervising CPAs in the future.

b. During the training period, the newly hired CPA or CPPA may perform certifications, including assigning nutritional risk and prescribing food packages, if closely supervised by a CPA for a period not to exceed 9 months. A supervising CPA must review the applicant's record in the information system. A newly hired CPA or CPPA I who does not gain competency within 9 months of date of hire should not be permitted to perform certifications.

c. The newly hired CPA or paraprofessional must demonstrate proficiency through the completion of a series of competency checklists (Attachments 7.60 A-F). A CPA will observe the newly hired CPA and CPPA and sign the competency checklists. The competency checklists must be completed within 9 months of date of hire.

The CPA supervising the training shall submit the original completed competency checklists to the Training Center staff for review. Copies of these documents shall be kept in the newly hired CPA's or CPPA's employment file at the local agency.

d. The Local Agency Coordinator shall be notified in writing by the Training Center staff when the newly hired CPA or CPPA has successfully completed the competency checklists.

Attachments:

1. 7.60 A Certification Competency Checklist – Pregnant Women
2. 7.60 B Certification Competency Checklist – Postpartum Women
3. 7.60 C Certification Competency Checklist – Infant
4. 7.60 D Certification Competency Checklist – Toddler
5. 7.60 E Certification Competency Checklist – Preschooler
6. 7.60 F Certification Competency Checklist – General

References:

1. 7 CFR 246.2
2. WIC Nutrition Services Standards, Standard 1

Revisions:
Deleted sentence in Policy A that listed the four courses in the new employee training.

10/2008 – Section B.1.d. Clarified wording on completing competency checklists. New sentence that reads “For local agency staff that have been retrained the competency checklists must be completed within 6 months of the completion of WIC WISE part 1 training.

10/2010 – Section B.1.b. changed “WIC WISE web-based training modules” to “WIC WISE part 1 and part 2 training” Section A removed low iron formula from the first bullet of CPA duties since we no longer issue low iron formula.

10/2011 – Clarified wording in B.1.b and d. Added phone number line for the supervising CPA; Clarified language on proxy/designee, wiping the cuvette, weight in ounces for women and older children, disposal of soft hazardous waste, and goal setting on attachments A–G.

10/2013 – Changed deadline for completing competency checklists to 9 months from date of hire, deleted posttests from WIC WISE training and included new CPAs in the requirement to complete competency checklists. Supervising CPA has to have completed competency checklists. Revised column headings on Attachment 7.60 A-F and added a line for phone number of supervising CPA.

10/2015 – Clarified language and reformatted sections A and B and reformatted the Revisions section by removing excessive spaces. Reformatted Attachment 7.60 A–E by adding a “Not Observed But Competent” column and changed the title of the last column to “Additional Comments”.

Certification Competency Checklist – Pregnant Woman

WIC Staff ________________________ Date of Observation ________________ Participant ID #_____________

Local Agency ________________________ Supervising CPA ____________________________

Complete one observation each for: ☐ Pregnant woman ☐ Pregnant teen

Intake:	**Yes**	**No**	**N/A**	**Not Observed But Competent**	**Additional Comments**
1. Introduces self and puts applicant at ease.					
2. Explains the purpose of the WIC Program.					
3. Explains the certification process.					
4. Verifies and documents identity of applicant.					
5. Verifies and documents residence of applicant.					
6. Obtains or updates telephone number.					
7. Determines family size correctly.					
8. Verifies and documents family income.					
9. Verifies and documents adjunctive eligibility.					
10. Offers applicant the opportunity to register to vote.					
11. Explains the role of the proxy/designee.					
12. Provides information on the TCA, Food Stamp, Medical Assistance, MCHP, and Child Support Enforcement programs.					
Weight and Height Evaluation:					
13. Explains the procedure and its purpose.					
14. Uses a wall-hung or free-standing height board with attached headpiece to measure height.					
15. Asks applicant to remove shoes, excess clothing, and hair ornaments that could interfere with measurement.					
16. Asks applicant to stand with heels, buttocks and shoulder blades against wall, knees unbent, eyes straight ahead, feet slightly apart.					
17. Reads height measurement correctly to the nearest 1/8 inch.					
18. Uses an appropriate beam balance or digital scale to measure weight.					
19. Zero-balances the scale prior to measurement.					
20. Asks applicant to stand in the middle of the platform, arms at sides.					
21. Reads weight measurement correctly to the nearest 1 ounce. For digital scale, converts fractions of pounds as needed.					

Weight and Height Evaluation, continued:	Yes	No	N/A	Not Observed But Competent	Additional Comments
22. Length or height and weight data if provided by health care provider have been taken within 30 days of the certification and are appropriate for category.					
23. Records weight and height measurements accurately on the Medical Screen.					
24. Interprets collected measurements correctly.					
25. Can provide appropriate nutrition advice for a woman identified as overweight.					
26. Can provide appropriate nutrition advice for a woman identified as underweight.					
Blood Test Evaluation					
27. Explains the procedure.					
28. Participant is seated comfortably.					
29. Wears disposable, appropriate-sized gloves during the entire procedure.					
30. Takes blood sample from applicant's middle or ring finger, without ring; and is extended down.					
31. Cleans applicant's finger with alcohol; dries it with a dry absorbent pad. Avoids puncturing the middle of fingertip.					
32. Follows accepted procedure for use of lancet when puncturing finger.					
33. Wipes the first 3 drops of blood from finger with a clean absorbent pad. Waits for a bubble of blood to form before filling cuvette.					
34. Touches the blood with long, pointed edge of the cuvette and fills it completely with blood in one continuous step.					
35. Avoids squeezing the applicant's finger to obtain blood sample; applicant's hand remains extended down.					
36. Covers puncture site promptly with appropriate-sized bandage.					
37. Wipes both sides of cuvette; places it correctly into Hemocue and gently closes the drawer.					
38. Reads result correctly. Removes cuvette with gloved hand.					
39. Disposes of lancets and used cuvettes in puncture resistant container. Disposes of used gloves, pads, bandages and other soft waste in the appropriate waste container.					
40. Washes hands after gloves are removed.					

Blood Test Evaluation, continued.	Yes	No	N/A	Not Observed But Competent	Additional Comments
41. Uses bloodwork data from health care provider that are no older than 90 days.					
42. Records test result correctly on the Medical screen.					
43. Can provide appropriate nutrition advice when a low hemoglobin value is identified.					
Nutrition and Health Information					
44. Uses the Medical screen and Nutrition History to evaluate health conditions and eating practices.					
45. Involves the participant in the session by asking open-ended questions, responding to her questions, and encouraging her to share her thoughts and ideas.					
46. Probes and uses open-ended questions as needed to clarify responses before entering information in WOW.					
47. Correctly identifies and interprets risk factors using Medical screen and Nutrition History information.					
Nutrition Education/Referrals/Food Package					
48. Informs the participant of identified risk factor(s) and explains relationship to health.					
49. Tailors information to the applicant’s cultural, educational and economic needs.					
50. Assists participant in developing personal strategies for healthier eating.					
51. Helps participant understand appropriate weight gain.					
52. Assists participant in developing strategies to reduce pregnancy discomforts when identified.					
53. Provides information about the dangers of substance abuse during pregnancy.					
54. Provides a list of resources in the community for substance abuse counseling.					
55. Promotes breastfeeding and reviews benefits and contraindications.					
56. Assists participant (when appropriate) in setting a goal(s) to change an eating or lifestyle practice.					
57. Prescribes the most appropriate food package; explains contents; assists participant in understanding how WIC foods help meet nutrient needs of pregnancy.					

Nutrition Education/Referrals/Food Pkg, continued	**Yes**	**No**	**N/A**	**Not Observed But Competent**	**Additional Comments**
58. Provides educational materials relevant to the applicant's nutritional risk, category, and cultural, educational, and economic needs.					
59. If nutrition care counseling is needed, identifies and refers correctly, following LA guidelines.					
60. Records nutrition education content accurately in the Nutrition Education screen.					
61. Provides appropriate referrals and documents them in the Client Referrals screen.					
Program Information					
62. Explains the Rights and Responsibilities (R & R).					
63. Ensures that the R & R form is read and signed by the applicant.					
64. Issues and explains (or updates) the participant ID folder.					
65. Schedules a return appointment.					
66. Issues and explains how to use the WIC checks.					
67. Gives the participant the opportunity to ask questions.					

Name of CPA observing the trainee ______________________________
(Signature)

____
(Phone Number)

Certification Competency Checklist (B) – Postpartum Woman

WIC Staff ________________________ Date of Observation ________________ Participant ID# _______________

Local Agency _______________________________ Supervising CPA ___________________________________

Complete one observation each for: ☐ Breastfeeding mother ☐ Non-breastfeeding mother

Intake:	Yes	No	N/A	Not Observed But Competent	Additional Comments
1. Introduces self and puts applicant at ease.					
2. Explains the purpose of the WIC Program.					
3. Explains the certification process.					
4. Verifies and documents identity of applicant.					
5. Verifies and documents residence of applicant.					
6. Obtains or updates telephone number.					
7. Determines family size correctly.					
8. Verifies and documents family income.					
9. Verifies and documents adjunctive eligibility.					
10. Offers applicant the opportunity to register to vote.					
11. Explains the role of the proxy/designee.					
12. Provides information on the TCA, Food Stamp, Medical Assistance, MCHP, and Child Support Enforcement programs.					
Weight and Height Evaluation:					
13. Explains the procedure and its purpose.					
14. Uses a wall-hung or free-standing height board with attached headpiece to measure height.					
15. Asks applicant to remove shoes, excess clothing, and hair ornaments that could interfere with measurement.					
16. Asks applicant to stand with heels, buttocks and shoulder blades against wall, knees unbent, eyes straight ahead, feet slightly apart.					
17. Reads height measurement correctly to the nearest 1/8 inch.					
18. Uses an appropriate beam balance or digital scale to measure weight.					
19. Zero-balances the scale prior to measurement.					
20. Asks applicant to stand in the middle of the platform, arms at sides.					
21. Reads weight measurement correctly to the nearest 1 ounce.. For digital scale, converts					

fractions of pounds as needed.					

Weight and Height Evaluation, continued:	**Yes**	**No**	**N/A**	**Not Observed But Competent**	**Additional Comments**
22. Length or height and weight data if provided by health care provider have been taken within 30 days of the certification and are appropriate for category.					
23. Records weight and height measurements accurately on the Medical Screen.					
24. Interprets collected measurements correctly.					
25. Can provide appropriate nutrition advice for a woman identified as overweight.					
26. Can provide appropriate nutrition advice for a woman identified as underweight.					
Blood Test Evaluation:					
27. Explains the procedure.					
28. Participant is seated comfortably.					
29. Wears disposable, appropriate-sized gloves during the entire procedure.					
30. Takes blood sample from applicant’s middle or ring finger, without ring; hand is extended down.					
31. Cleans applicant’s finger with alcohol; dries it with a clean, dry absorbent pad. Avoids puncturing the middle of fingertip.					
32. Follows accepted procedure for use of lancet when puncturing finger.					
33. Wipes the first 3 drops of blood from finger with a clean absorbent pad. Waits for a bubble of blood to form before filling cuvette.					
34. Touches the blood with long, pointed edge of the cuvette and fills it completely with blood in one continuous step.					
35. Avoids squeezing the applicant’s finger to obtain blood sample; applicant’s hand remains extended down.					
36. Covers puncture site promptly with appropriate-sized bandage.					
37. Wipes both sides of cuvette; places it correctly into Hemocue and gently closes the drawer.					
38. Reads result correctly. Removes cuvette with gloved hand.					
39. Disposes of lancets and used cuvettes in puncture resistant container. Disposes of used gloves, pads, bandages and other soft waste in the appropriate waste container.					

40. Washes hands after gloves are removed.					

Blood Test Evaluation, continued:	Yes	No	N/A	Not Observed But Competent	Additional Comments
41. Uses bloodwork data from health care provider that are no older than 90 days.					
42. Records test result correctly on the Medical screen					
43. Can provide appropriate nutrition advice when a low hemoglobin value is identified.					
Nutrition and Health Information:					
44. Uses the Medical screen and Nutrition History to evaluate health conditions and eating practices.					
45. Involves the participant in the session by asking open-ended questions, responding to her questions, and encouraging her to share her thoughts and ideas.					
46. Probes and uses open-ended questions as needed to clarify responses before entering information in WOW.					
47. Correctly identifies and interprets risk factors using Medical screen and Nutrition History information.					
Nutrition Education/Referrals/Food Package:					
48. Informs the participant of identified risk factor(s) and explains relationship to health.					
49. Tailors information to the applicant's cultural, educational and economic needs.					
50. Assists participant in understanding how food and lifestyle choices affect her health over a lifetime.					
51. If breastfeeding, provides appropriate advice and support.					
52. Uses visual aids effectively.					
53. Provides exit counseling information.					
54. Provides a list of resources in the community for substance abuse counseling.					
55. Assists participant (when appropriate) in setting a goal(s)to change an eating or lifestyle practice.					
56. Prescribes the most appropriate food package;					

explains contents; assists participant in understanding how WIC foods help meet her nutrient needs.					
57. Provides educational materials relevant to the applicant's nutritional risk, category, and cultural, educational, and economic needs.					

Nutrition Education/Referrals/Food Pkg, continued:	**Yes**	**No**	**N/A**	**Not Observed But Competent**	**Additional Comments**
58. If nutrition care counseling is needed, identifies and refers correctly, following LA guidelines.					
59. Records nutrition education content accurately in the Nutrition Education screen.					
60. Provides appropriate referrals and documents them in the Client Referrals screen.					
Program Information:					
61. Explains the Rights and Responsibilities (R & R).					
62. Ensures that the R & R form is read and signed by the applicant.					
63. Issues and explains (or updates) the participant ID folder.					
64. Schedules a return appointment.					
65. Issues and explains how to use the WIC checks.					
66. Gives the participant the opportunity to ask questions.					

Name of CPA observing the trainee ______________________________
(Signature)

____
(Phone Number)

Certification Competency Checklist (C) – Infant

WIC Staff ________________________ Date of Observation ________________ Participant ID # ______________

Local Agency ______________________________ Supervising CPA _________________________________

Complete one observation each for: ☐ Breastfed Infant ☐ Formula Fed Infant ☐ Infant 6 months or older

Intake:	Yes	No	N/A	Not Observed But Competent	Additional Comments
1. Introduces self and puts caregiver at ease.					
2. Explains the purpose of the WIC Program.					
3. Explains the certification process.					
4. Verifies and documents identity of applicant.					
5. Verifies and documents residence of applicant.					
6. Asks for or updates telephone number.					
7. Determines family size.					
8. Verifies and documents family income.					
9. Verifies and documents adjunctive eligibility.					
10. Offers caregiver the opportunity to register to vote.					
11. Explains the role of the Proxy/designee.					
12. Provides information on the TCA, Food Stamp, Medical Assistance, MCHP, and Child Support Enforcement programs.					
13. Provides information about the dangers of substance abuse to caregiver if a new applicant.					
Weight and Height Evaluation:					
14. Explains the procedure and its purpose.					
15. Uses recumbent length board with a fixed headpiece and movable foot piece to measure length. Places a disposable paper drape on board before measurement.					
16. Asks caregiver to remove shoes, socks/ booties, clothing, and hair ornaments from applicant before taking length measurement.					
17. Lays infant on its back; head is straight. Instructs caregiver to hold head of infant firmly against the headpiece. Checks that head is held firmly against the headpiece and eyes point directly at the ceiling.					
18. Holds down both knees of infant, extends legs and moves footpiece firmly against both heels.					
19. Reads length measurement correctly to the nearest 1/8 inch.					

Weight and Height Evaluation, continued:	Yes	No	N/A	Not Observed But Competent	Additional Comments
20. Uses an appropriate beam balance or digital scale to measure weight.					
21. Zero-balances the scale prior to measurement. Infant scale is zero balanced with disposable sheet. Places infant in middle of scale tray.					
22. Infant is weighed in dry diaper only.					
23. Reads weight measurement correctly to the nearest 1 ounce. For digital scale, converts fractions of pounds as needed.					
24. Length or height and weight data if provided by health care provider have been taken within 30 days of the certification.					
25. Records weight and height measurements accurately on the Medical Screen.					
26. Explains the infant's growth pattern correctly using the growth chart.					
27. Can provide appropriate nutrition advice for an infant identified as underweight.					
Blood Test Evaluation:					
28. Explains the procedure.					
29. Participant is seated in lap of caregiver.					
30. Wears disposable, appropriate-sized gloves during the entire procedure.					
31. Takes blood sample from applicant's middle or ring finger, without ring, toe, or side of heel.					
32. Cleans the puncture site with alcohol; dries finger with a dry absorbent pad.					
33. Follows accepted procedure for use of lancet when puncturing finger, toe, or side of heel.					
34. Wipes the first 3 drops of blood from finger, toe or side of heel with a clean, dry absorbent pad. Waits for a bubble of blood to form before filling cuvette.					
35. Touches the blood with long, pointed edge of the cuvette and fills it completely with blood in one continuous step.					
36. Avoids squeezing the applicant's finger, toe or side of heel to obtain blood sample; applicant's hand remains extended down.					
37. Covers puncture site promptly with appropriate-sized bandage.					
38. Wipes both sides of cuvette; places it correctly into Hemocue and gently closes the drawer.					
39. Reads result correctly. Removes cuvette with gloved hand.					

Blood Test Evaluation, continued:	Yes	No	N/A	Not Observed But Competent	Additional Comments
40. Disposes of lancets and used cuvettes in puncture resistant container. Disposes of used gloves, pads, bandages and other soft waste in the appropriate waste container.					
41. Washes hands after gloves are removed.					
42. Records test result correctly on the Medical screen.					
43. Uses bloodwork data from health care provider that are no older than 90 days.					
44. Can provide appropriate nutrition advice when a low hemoglobin value is identified.					
Nutrition and Health Information:					
45. Uses the Medical screen and Nutrition History to evaluate health conditions and feeding practices.					
46. Assesses both infant and mother for breastfeeding questions and/or problems.					
47. Involves the caregiver in the session by asking open-ended questions, responding to her questions, and encouraging her to share her thoughts and ideas.					
48. Probes and uses open-ended questions as needed to clarify responses before entering information in WOW.					
49. Correctly identifies and interprets risk factors using Medical screen and Nutrition History information.					
Nutrition Education/Referrals/Food Package:					
50. Informs the caregiver of identified risk factor(s) and explains relationship to health.					
51. Tailors information to the applicant/caregiver's cultural, educational and economic needs.					
52. Assists caregiver in understanding her infant's hunger and fullness cues and developmental stage in relation to feeding.					
53. Offers encouragement and support to mothers to continue to breastfeed.					
54. Selects appropriate sections of the *Help me be healthy* pamphlet to discuss with the caregiver. Records information about the infant on the pamphlet before providing it to the caregiver.					
55. Provides appropriate anticipatory guidance.					
56. Uses visual aids effectively.					

Nutrition Education/Referrals/Food Pkg, continued:	Yes	No	N/A	Not Observed But Competent	Additional Comments
57. Assists caregiver (when appropriate) in setting a goal(s) to change a feeding or lifestyle practice.					
58. Prescribes the most appropriate food package; explains contents.					
59. Provides educational materials relevant to the applicant's nutritional risk, category, and cultural, educational, and economic needs.					
60. If nutrition care counseling is needed, identifies and refers correctly, following LA guidelines.					
61. Records nutrition education content accurately in the Nutrition Education screen.					
62. Provides appropriate referrals and documents them in the Client Referrals screen.					
Program Information:					
63. Explains the Rights and Responsibilities (R & R).					
64. Ensures that the R & R form is read and signed by the caregiver.					
65. Issues and explains (or updates) the participant ID folder.					
66. Schedules a return appointment.					
67. Issues and explains how to use the WIC checks.					
68. Gives the caregiver the opportunity to ask questions.					

Name of CPA observing the trainee ______________________________
(Signature)

____
Phone Number

Certification Competency Checklist (D) – Toddler (Ages 1 to less than 2 years)

WIC Staff ______________________ Date of Observation _______________ Participant ID # ____________

Local Agency ______________________________ Supervising CPA ________________________________

Complete 2 observations.

Intake:	**Yes**	**No**	**N/A**	**Not Observed But Competent**	**Additional Comments**
1. Introduces self and puts caregiver & child at ease.					
2. Explains the purpose of the WIC Program.					
3. Explains the certification process.					
4. Verifies and documents identity of applicant.					
5. Verifies and documents residence of applicant.					
6. Asks for or updates telephone number.					
7. Determines family size.					
8. Verifies and documents family income.					
9. Verifies and documents adjunctive eligibility.					
10. Offers caregiver the opportunity to register to vote.					
11. Explains the role of the proxy/designee.					
12. Provides information on the TCA, Food Stamp, Medical Assistance, MCHP, and Child Support Enforcement programs.					
13. Provides information about the dangers of substance abuse to caregiver if a new applicant.					
Weight and Height Evaluation:					
14. Explains the procedure and its purpose.					
15. Uses recumbent length board with a fixed headpiece and movable foot piece to measure length. Places a disposable paper drape on board before measurement.					
16. Asks caregiver to remove shoes, socks, excess clothing, and hair ornaments from child before taking length measurement.					
17. Lays child on its back; head is straight. Instructs caregiver to hold head of child firmly against the headpiece. Checks that head is held firmly against the headpiece and eyes point directly at the ceiling.					
18. Holds down both knees of child, extends legs and moves footpiece firmly against both heels.					
19. Reads length measurement correctly to the nearest 1/8 inch.					

Weight and Height Evaluation: continued	Yes	No	N/A	Not Observed But Competent	Additional Comments
20. Uses an appropriate beam balance or digital scale to measure weight.					
21. Zero-balances the scale prior to measurement. Infant scale is zero balanced with disposable sheet. Places child in middle of scale tray.					
22. Child is weighed in light indoor clothing without shoes and with a dry diaper.					
23. Reads weight measurement correctly to the nearest 1 ounce. For digital scale, converts fractions of pounds as needed.					
24. Length or height and weight data if provided by health care provider have been taken within 30 days of the certification.					
25. Records weight and height measurements accurately on the Medical Screen.					
26. Explains the child's growth pattern correctly using the growth chart.					
27. Can provide appropriate nutrition advice for a child identified as underweight.					
Blood Test Evaluation:					
28. Explains the procedure.					
29. Child is seated in lap of caregiver.					
30. Wears disposable, appropriate-sized gloves during the entire procedure.					
31. Takes blood sample from child's middle or ring finger, without ring, toe, or side of heel.					
32. Cleans the puncture site with alcohol; dries finger with a dry absorbent pad.					
33. Follows accepted procedure for use of lancet when puncturing finger, toe, or side of heel.					
34. Wipes the first 3 drops of blood from finger, toe or side of heel with a clean, dry absorbent pad. Waits for a bubble of blood to form before filling cuvette.					
35. Touches the blood with long, pointed edge of the cuvette and fills it completely with blood in one continuous step.					
36. Avoids squeezing the child's finger, toe or side of heel to obtain blood sample; hand remains extended down.					
37. Covers puncture site promptly with appropriate-sized bandage.					
38. Wipes both sides of cuvette; places it correctly into Hemocue and gently closes the drawer.					
39. Reads result correctly. Removes cuvette with					

gloved hand.					

Blood Test Evaluation, continued:	Yes	No	N/A	Not Observed But Competent	Additional Comments
40. Disposes of lancets and used cuvettes in puncture resistant container. Disposes of used gloves, pads, bandages and other soft waste in the appropriate waste container.					
41. Washes hands after gloves are removed.					
42. Uses bloodwork data from health care provider that are no older than 90 days.					
43. Records test result correctly on the Medical screen.					
44. Can provide appropriate nutrition advice when a low hemoglobin value is identified.					
Nutrition and Health Information:					
45. Uses the Medical screen and Nutrition History to evaluate health conditions and eating practices.					
46. Involves the caregiver in the session by asking open-ended questions, responding to her questions, and encouraging her to share her thoughts and ideas.					
47. Probes and uses open-ended questions as needed to clarify responses before entering information in WOW.					
48. Correctly identifies and interprets risk factors using Medical screen and Nutrition History information.					
Nutrition Education/Referrals/Food Package:					
49. Informs the caregiver of identified risk factor(s) and explains relationship to health.					
50. Tailors information to the applicant/caregiver's cultural, educational and economic needs.					
51. Assists caregiver in understanding her/his role as teacher and role model for the child.					
52. Selects appropriate sections of the *Help me be healthy* pamphlet to discuss with the caregiver. Records information about the child on the pamphlet before providing it to the caregiver.					
53. Provides appropriate anticipatory guidance.					
54. Uses visual aids as appropriate.					

55. Assists caregiver (when appropriate) in setting a goal(s) to change a feeding or lifestyle practice.					
56. Prescribes the most appropriate food package; explains contents; assists caregiver in understanding how WIC foods help meet nutrient needs of the child.					
Nutrition Education/Referrals/Food Pkg, continued:	**Yes**	**No**	**N/A**	**Not Observed But Competent**	**Additional Comments**
57. Provides educational materials relevant to the child's nutritional risk, category, and cultural, educational, and economic needs.					
58. If nutrition care counseling is needed, identifies and refers correctly, following LA guidelines.					
59. Records nutrition education content accurately in the Nutrition Education screen.					
60. Provides appropriate referrals and documents them in the Client Referrals screen.					
Program Information:					
61. Explains the Rights and Responsibilities (R & R).					
62. Ensures that the R & R form is read and signed by the caregiver.					
63. Issues and explains (or updates) the participant ID folder.					
64. Schedules a return appointment.					
65. Issues and explains how to use the WIC checks.					
66. Gives the caregiver the opportunity to ask questions.					

Name of CPA observing the trainee ______________________________
(Signature)

____
(Phone Number)

Certification Competency Checklist (E) – Preschooler (Ages 3 +)

WIC Staff ________________________ Date of Observation ________________ Participant ID # ______________

Local Agency __________________________________ Supervising CPA _________________________________

Complete 2 observations.

Intake:	**Yes**	**No**	**N/A**	**Not Observed But Competent**	**Additional Comments**
1. Introduces self and puts caregiver & child at ease.					
2. Explains the purpose of the WIC Program.					
3. Explains the certification process.					
4. Verifies and documents identity of applicant.					
5. Verifies and documents residence of applicant.					
6. Asks for or updates telephone number.					
7. Determines family size.					
8. Verifies and documents family income.					
9. Verifies and documents adjunctive eligibility.					
10. Offers caregiver opportunity to register to vote.					
11. Explains the role of the proxy/designee.					
12. Provides information on the TCA, Food Stamp, Medical Assistance, MCHP, and Child Support Enforcement programs.					
13. Provides information about the dangers of substance abuse to caregiver if a new applicant.					
Weight and Height Evaluation:					
14. Explains the procedure and its purpose.					
15. Uses a wall-hung or free-standing height board with attached headpiece to measure height.					
16. Asks caregiver to remove child's shoes, excess clothing, and hair ornaments before taking height measurement.					
17. Asks applicant to stand with heels, buttocks and shoulder blades against wall, knees unbent, eyes straight ahead, feet slightly apart.					
18. Reads height measurement correctly to the nearest 1/8 inch.					
19. Uses an appropriate beam balance or digital scale to measure weight.					
20. Zero-balances the scale prior to measurement.					
21. Asks applicant to stand in the middle of the platform, arms at sides.					

Weight and Height Evaluation, continued:	Yes	No	N/A	Not Observed But Competent	Additional Comments
22. Reads weight measurement correctly to the nearest ounce. For digital scale, converts fractions of pounds as needed.					
23. Height and weight data if provided by health care provider have been taken within 30 days of the certification.					
24. Records weight and height measurements accurately on the Medical Screen.					
25. Explains the child's growth pattern correctly using the growth chart.					
26. Can provide appropriate nutrition advice for a child identified as underweight.					
27. Can provide appropriate nutrition advice for a child identified as overweight.					
Blood Test Evaluation:					
28. Explains the procedure.					
29. Participant is seated comfortably.					
30. Wears disposable, appropriate-sized gloves during the entire procedure.					
31. Takes blood sample from applicant's middle or ring finger; hand is extended down.					
32. Cleans the finger with alcohol; dries it with a dry absorbent pad. Avoids puncturing the middle of fingertip.					
33. Follows accepted procedure for use of lancet when puncturing finger.					
34. Wipes the first 3 drops of blood from finger with a clean absorbent pad. Waits for a bubble of blood to form before filling cuvette.					
35. Touches the blood with long, pointed edge of the cuvette and fills it completely with blood in one continuous step.					
36. Avoids squeezing the child's finger to obtain blood sample; hand remains extended down.					
37. Covers puncture site promptly with appropriate-sized bandage.					
38. Wipes both sides of cuvette; places it correctly into Hemocue and gently closes the drawer.					
39. Reads result correctly. Removes cuvette with gloved hand.					

Blood Test Evaluation, continued:	Yes	No	N/A	Not Observed But Competent	Additional Comments
40. Disposes of lancets and used cuvettes in puncture resistant container. Disposes of used gloves, pads, bandages and other soft waste in the appropriate waste container					
41. Washes hands after gloves are removed.					
42. Uses bloodwork data from health care provider that are no older than 90 days.					
43. Records test result correctly on the Medical screen.					
44. Can provide appropriate nutrition advice when a low hemoglobin value is identified.					
Nutrition and Health Information:					
45. Uses the Medical screen and Nutrition History to evaluate health conditions and eating practices.					
46. Involves the caregiver (and child where appropriate) in the session by asking open-ended questions, responding to her/his questions, and encouraging her/him to share thoughts and ideas.					
47. Probes and uses open-ended questions as needed to clarify responses before entering information in WOW.					
48. Correctly identifies and interprets risk factors using Medical screen and Nutrition History information.					
Nutrition Education/Referrals/Food Package:					
49. Informs the caregiver of child's identified risk factor(s) and explains relationship to health.					
50. Tailors information to the applicant/caregiver's cultural, educational and economic needs.					
51. Assists caregiver in understanding her/his role as teacher and role model for the child.					
52. Selects appropriate sections of the *Help me be healthy* pamphlet to discuss with the caregiver (and child where appropriate). Records information about the child on the pamphlet before providing it to the caregiver.					
53. Provides appropriate anticipatory guidance.					
54. Uses visual aids as appropriate.					
55. Assists caregiver (when appropriate) in setting a goal(s) to change a feeding or lifestyle practice.					

56. Prescribes the most appropriate food package; explains contents; assists caregiver in understanding how WIC foods help meet nutrient needs of the child.					
Nutrition Education/Referrals/Food Pkg , continued:	**Yes**	**No**	**N/A**	**Not Observed But Competent**	**Additional Comments**
57. Provides educational materials relevant to the child's nutritional risk, category, and cultural, educational, and economic needs.					
58. If nutrition care counseling is needed, identifies and refers correctly, following LA guidelines.					
59. Records nutrition education content accurately in the Nutrition Education screen.					
60. Provides appropriate referrals and documents them in the Client Referrals screen.					
Program Information:					
61. Explains the Rights and Responsibilities (R & R).					
62. Ensures that the R & R form is read and signed by the caregiver.					
63. Issues and explains (or updates) the participant ID folder.					
64. Schedules a return appointment.					
65. Issues and explains how to use the WIC checks.					
66. Gives the caregiver the opportunity to ask questions.					

Name of CPA observing the trainee ______________________________
(Signature)

____
(Phone Number)

Certification Competency Checklist (F) – General

WIC Staff ________________________ Date of Observation ______________________________

Local Agency ____________________ Supervising CPA ________________________________

Weight and Height Evaluation:	Yes	No	Comments/Notes:
Can manually calculate the exact age of infants and children and plot weight and height (or length as appropriate) on the appropriate CDC growth chart.			
Can manually assess growth and assign Underweight, Short Stature, At Risk for Overweight, and Overweight in infants and children following State guidelines.			
Can manually evaluate weight status of women following State guidelines.			
Can manually evaluate Underweight, Overweight, and Low and High Maternal Weight Gain in Women following State guidelines.			
Blood Test Evaluation:			
Can perform daily quality assurance procedures for performing the hemoglobin assessment.			
Can explain how to clean a blood spill and procedure if accidentally exposed to blood.			
Manual Certification Form:			
Can correctly complete a manual certification form, including documentation of identified risk factors.			

Name of CPA observing the trainee __________________________________

(Signature)

____

(Phone Number)

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
WIC PROGRAM
POLICY AND PROCEDURE MANUAL

Policy and Procedure Number: 7.61
Effective Date: October 1, 2003
Revised Date: October 1, 2012

SECTION:	**LOCAL AGENCY OPERATIONS AND MANAGEMENT**
SUBJECT:	**Ongoing Staff Training**

A. Policy

Regulatory requirements, technology, and nutrition science continue to change. WIC is committed to ongoing training of its staff to ensure that the Program remains in compliance, is technologically up-to-date, and that nutrition and breastfeeding information provided to participants and to non-WIC colleagues is accurate.

The State Agency shall be available to assist the local agency in providing training to its staff.

B. Procedure

1. All newly hired WIC staff shall attend the new employee training as detailed in Policy and Procedure 7.66.

2. Ongoing staff training will be developed to meet needs as they arise. Designated staff are required to attend State sponsored trainings as scheduled.

3. All WIC staff shall attend the State WIC Conference as scheduled.

4. The Local Agency Coordinator or a designated representative shall attend the monthly Local Agency Coordinators' meetings.

5. Local agencies shall send designated staff to the statewide WIC Nutrition Services Updates and Breastfeeding Coordinators' meetings as scheduled. Meetings are used to review changes to WIC policies and procedures, to update knowledge and skills, and to share ideas and educational materials from other local agencies.

   If a local agency is unable to send a representative, the State WIC Nutrition Services or Breastfeeding Services Unit, as appropriate, should be informed in advance of the meeting.

Reference:
WIC Nutrition Services Standards, Section 3

Revisions:

10/10	Added All Local Agency WIC staff, except peer counselors, shall Attend Grow and Glow Breastfeeding Training. Removed references to the number of times specific meetings will be held each year. Changed Nutritionists meetings to Nutrition Services Updates. Changed notification requirement for local agencies regarding whom to contact if unable to send a representative to a meeting.
10/12	Moved B.2 to Policy and Procedure 7.66.

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
WIC PROGRAM
POLICY AND PROCEDURE MANUAL

Policy and Procedure Number: 7.62
Effective Date: October 1, 2003
Revised Date: October 1, 2014

SECTION:	**LOCAL AGENCY OPERATIONS AND MANAGEMENT**
SUBJECT:	**Equipment for Performing Weight and Height Measurements**

A. Policy

Local agencies shall purchase and maintain equipment to perform weight and height measurements accurately, uniformly and safely.

B. Procedure

1. Length and Height Measurement Equipment

a. **For infants and children under 2 years of age**, an infant length board suitable for table-top measurements shall be used. The board shall be sturdy, made of wood or plastic with an unpadded surface, contain a fixed (unmovable) headboard and a freely-sliding foot piece, and have an attached ruler that measures in 1/8 inch (recommended) or 1/16 inch increments to at least 39 inches. The length board shall allow unobstructed reading of the length measurement.

b. **For women and children 2 years of age and older**, a stadiometer (height board) shall be used. The stadiometer may be wall-hung or free-standing and shall consist of a flat measuring ruler (against which the applicant's back is placed) with 1/8 inch (recommended) or 1/16 inch increments and a freely-sliding head piece (set perpendicular to the ruler). It shall measure to at least 76 inches and allow unobstructed reading of the height measurement.

c. When using rulers that measure to 1/16 inch, 16ths shall be converted to 8ths inch as shown in Attachment 2.32A.

2. Weight Measurement Equipment

a. **For infants and children under 2 years of age**, either a beam balance or electronic (digital) table-top infant scale or an electronic floor scale with a tare function shall be used. The scale shall measure to the nearest one ounce and allow unobstructed reading of the weight measurement.

The infant scale shall be sturdy, contain a tray or seat upon which the infant can be safely placed and measure up to at least 44 pounds.

b. **For women and children 2 years of age and older**, a beam balance or electronic (digital) floor scale shall be used. The scale shall measure to the nearest 4 ounces, up to at least 440 pounds and shall allow unobstructed reading of the weight measurement.

c. When using digital scales that display ounces in decimals, decimals shall be converted to the nearest full ounce as shown in Attachment 2.32A

3. Equipment Installation, Maintenance, and Training of Staff

Equipment shall be installed, maintained, and checked for accuracy according to the manufacturer's specifications. Local agency staff designated to perform nutritional risk screening shall be trained on the use and maintenance of the equipment.

4. Resources

The following companies are examples of distributors of equipment and can provide technical assistance regarding the products they offer.

Med-Electronics, Inc.
6608 Virginia Manor Road
Beltsville, MD 20705
Phone: 888-321-1300
www.med-electronics.com

Perspective Enterprises
7829 S. Sprinkle Road.
Portage, MI 49002
Phone: 800-323-7452
www.perspectiveent.com

QuickMedical
Phone: 888-345-4858
30200 S.E. 79th St., Suite 120
Issaquah, WA 98027-8792
Phone: 888-345-4858
www.quickmedical.com

References:

1. 29 CFR 1910.1030
2. 42 CFR 493

Revisions:

10/2011	Updated company contact information.
10/2013	Removed B.1.c. disallowing length/height board attached to scale. Updated technology makes such equipment acceptable. Updated company contact information.
10/2014	Changed B.1.a. and B.1.b. to read "1/8 inch (recommended) or 1/16 inch."
	Inserted B.1.c "When using rulers that measure to 1/16 inch, 16ths shall be converted to 8ths inch as shown in Attachment 2.32A."
	Inserted B.2.c. "When using digital scales that display ounces in decimals, decimals shall be converted to the nearest full ounce as shown in Attachment 2.32A."

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
WIC PROGRAM
POLICY AND PROCEDURE MANUAL

Policy and Procedure Number: 7.63
Effective Date: October 1, 2005
Revised Date: October 1, 2015

SECTION:	**LOCAL AGENCY OPERATIONS AND MANAGEMENT**
SUBJECT:	**Competent Professional Authority Application and Training**

A. Policy

Federal regulations require that a qualified individual on the staff of the local agency, referred to as a WIC Competent Professional Authority (CPA), determine nutritional risk and prescribe supplemental foods. The CPA designation is limited to physicians, nutritionists[1], dietitians, registered nurses, physician's assistants[2], or State or local medically trained health officials. Individuals with a bachelor's, master's or doctoral degree from an accredited college or university, who do not meet one of these categories for CPA designation, may apply to become a CPA.

B. Procedure

1. An applicant for the WIC CPA position shall meet the following requirements in order to be considered for the CPA designation:
    a. A bachelor's, master's or doctorate degree from an accredited college or university.
    b. One year of experience in health or human service delivery providing client education or counseling services or performing nutrition or health assessment.
    c. Completion of the Maryland WIC new employee training program, including WIC WISE part 1, WIC WISE part 2, and CPA Training, according to Policy and Procedure 7.66.
    d. Demonstrated competency in CPA level duties, including but not limited to:

        i. The prescription of food packages that provide a non-contract formula, including a non-contract standard or exempt (special) infant formula or exempt formula for women or children with special dietary needs.

[1] A nutritionist is defined as having a bachelor's or master's degree in Nutritional Sciences, Community Nutrition, Clinical Nutrition, Dietetics, Public Health Nutrition, Home Economics (with an emphasis [9 or more college credit hours] in Nutrition), or Health Education (with an emphasis [9 or more college credit hours] in Nutrition).
[2] Certified by the National Committee on Certification of Physician's Assistants or certified by the State medical certifying authority.

ii. The provision of nutrition counseling and follow up to WIC participants with certain high-risk conditions.
iii. The provision of counseling and follow up to WIC participants with certain breastfeeding problems.
iv. Planning and provision of group nutrition education classes.

e. Successful completion of at least nine credits of approved coursework to include at least:

i. 3 credits in Basic Nutrition
ii. 3 credits in Maternal or Pediatric or Life Cycle Nutrition
iii. 3 credits in Medical Nutrition Therapy, Community Nutrition, or Advanced Nutrition

2. Applicants shall provide documentation of:
   a. A degree received from an accredited college or university.
   b. Previous work experience that meets the requirements of the policy.

3. Applicants shall complete WIC Wise part 1, WIC Wise part 2, and CPA training programs as outlined in Policy and Procedure 7.66.

4. In addition to the requirements of the Paraprofessional Training Program, applicants shall complete, under the supervision of a CPA, the following CPA Applicant Observation Checklists, available from the WIC Training and Temporary Services Unit:
   a. Provision of Formula Food Packages (Attachment 7.63A)
   b. Nutrition Education Counseling for High Risk Participants (Attachment 7.63B)
   c. Group Nutrition Education (Attachment 7.63C)

   The CPA supervising the training shall submit the CPA Applicant Observation Checklists to the Training and Temporary Services Unit. Copies of these documents shall be kept in the CPA applicant's employment file at the local agency.

6. Applicants shall use Attachment 7.63 D, *Prior-Approval Request for CPA Courses, to* obtain approval from the State Agency, Nutrition Services Unit prior to registering for any course(s) to be used to meet the requirements of the Policy. A copy of the course description from the college or university must be submitted with the Prior-Approval form. The form and course description should be submitted to the State Nutrition Services Unit at least 30 business days prior to the course start date. Applicants will be notified within 15 business days of receipt of the request as to the approval or denial of the course(s).

7. Documentation of coursework completed to fulfill the requirements of this policy shall be submitted to State Agency, Nutrition Services Unit. Documentation shall consist of a transcript with the final grade of B (80

percent) or above. Coursework must have been completed within five years prior to application.

8. Upon successful completion of the requirements for CPA designation, the Local Agency Coordinator shall be notified in writing by the State Agency that the applicant has been designated as a Competent Professional Authority.

Attachments:

7.63A	CPA Applicant Competency Observation Checklist Provision of Non-contract Formula Food Packages for Infants
7.63B	CPA Applicant Competency Observation Checklist Nutrition Education Counseling for High Risk Participants
7.63C	CPA Applicant Competency Observation Checklist Group Nutrition Education
7.63D	Prior Approval Request for CPA Courses

References: CFR 246.2

Revisions:

10/10	Updated training requirement to include WIC WISE and CPA training. B.4: Changed Nutrition Services Unit to Training and Temporary Services Unit. Changed Paraprofessional Training Program to WW1, WW2, and CPA training. Changed submission from State Agency QA Nutritionist to State Nutrition Services Unit.
10/11	Formatted the header and footer to proper font, added reference, minor wording changes. 7.63A: Changed language from “Certifier” to “CPA Applicant.” Deleted #6 which was a duplicate of #4. Deleted “low iron formula.” 7.63B: Changed language from “Certifier” to “CPA Applicant.” Clarified #14. 7.63C: Changed language from “nutrition educator” to “CPA Applicant.”
10/14	In Successful completion of at least 9 credits, 3 credits in Life Cycle Nutrition was added as an option to Maternal or Pediatric Nutrition; 2 credits in Nutrition or Health Counseling Skills was changed to 3 credits in Medical Nutrition Therapy. 7.63D: added Life Cycle Nutrition option to Maternal or Pediatric Nutrition (at least 3 credits required); changed Nutrition or Health Counseling Skills (At least 2 credits required) to Medical Nutrition Therapy (At least 3 credits required).
10/15	Added Community Nutrition and Advanced Nutrition to list of approved coursework. Updated format.

CPA Applicant
Competency Checklist
Provision of Formula Food Packages

WIC Staff ______________________________ Date of Observation ______________

Local Agency ____

Participant Category/ ID number____

Type and name of formula ____

Complete 1 checklist for at least 3 of the following formula types. Discuss requirements for the other types, if no observation is possible:

- Special Issue Contract Infant Formula
- Exempt (Special) Infant Formula
- Toddler Formula (Medical Food)

Procedure:	**Yes**	**No**	**NA**	**Comments:**
1. CPA Applicant follows guidelines for issuing formula as outlined in Policy and Procedure 3.02.				
2. CPA Applicant issues the appropriate form and quantity of formula as outlined in Policy and Procedure 3.02.				
3. CPA Applicant obtains the required documentation as outlined in Policy and Procedure 3.02 and files the documentation according to local agency guidelines.				
4. CPA Applicant explains to the participant any special requirements for use of formula use (such as mixing instructions).				
5. If necessary, certifier clarifies formula prescription with health care provider.				

State CPA observing the trainee ____
(Signature)

CPA Applicant
Competency Observation Checklist
Nutrition Education Counseling for High Risk Participants

WIC Staff ______________________________ Date of Observation ______________

Local Agency ____

Participant Category/ ID number____

Nutrition Risk ____

Complete 1 checklist each of the following participant categories:

- Formula fed Infant
- Breastfeeding Infant
- Pregnant Woman
- Breastfeeding Woman
- Postpartum Woman
- Child

Procedure:	**Yes**	**No**	**NA**	**Comments:**
1. CPA Applicant introduces self to participant.				
2. CPA Applicant explains to participant reason for visit.				
3. CPA Applicant builds rapport with participant/puts participant at ease.				
4. CPA Applicant explores participant knowledge about high risk condition.				
5. CPA Applicant uses open ended questions .				
6. CPA Applicant listens to and, when necessary, clarifies participant responses.				
7. CPA Applicant accurately addresses participant concerns about high risk nutrition condition.				
8. CPA Applicant provides appropriate, accurate and individualized nutrition information and advice in relation to nutrition risk.				
9. CPA Applicant helps participant set realistic, action-oriented, measurable goal(s) related to nutrition risk condition.				
10. CPA Applicant uses tools such as food models.				

CPA Applicant
Competency Observation Checklist
Nutrition Education Counseling for High Risk Participants

Procedure:	**Yes**	**No**	**NA**	**Comments:**
11. CPA Applicant provides and reviews appropriate written materials.				
12. CPA Applicant discusses need for and offers follow-up appointment with participant.				
13. CPA Applicant certifier allows participant to ask questions.				
14. CPA Applicant accurately documents content of high risk visit in the Care Plan section of NoteMaster in WOW.				
15. CPA Applicant documents High Risk Counseling as topic in Nutrition Education Screen of WOW.				
16. CPA Applicant makes follow up appointment in WOW.				

CPA observing the trainee ______________________________
(Signature)

CPA Applicant
Competency Observation Checklist
Group Nutrition Education

WIC Staff ______________________________ Date of Observation ______________

Local Agency ____

Title of Nutrition Education Class ____

Procedure:	**Yes**	**No**	**NA**	**Comments:**
1. The CPA Applicant introduces self to group.				
2. The CPA Applicant introduces topic to group.				
3. The CPA Applicant involves the group in the session.				
4. Activities used help reinforce key concepts of the session.				
5. Visual aids are used to enhance learning.				
6. Written materials given to participants are accurate and support the information presented in the session.				
7. The CPA Applicant uses open-ended questions.				
8. Information is presented clearly and in a logical and organized flow.				
9. The presentation can be heard by all participants.				
10. The CPA Applicant uses active listening and responds to questions appropriately.				
11. The CPA Applicant conducts an evaluation of the session.				

CPA observing the trainee ____
(Signature)

CPA Applicant
Prior-Approval Request for CPA Courses

Employee Name____

Local Agency____

Date of Request ____

Applicants to the position of WIC Competent Professional Authority I & II must document successful completion of required coursework, as specified below, if their bachelor's degree is in an area other than Nutrition or Dietetics. **Approval to take each course should be obtained from the State Agency prior to registering for the course.** The State Agency will not provide reimbursement of expenses for taking these courses. A total of at least 9 credits is required in the following subject areas. Please provide the following information and a copy of the course description from the college/university for each course you plan to take.

Basic Nutrition (At least 3 credits are required)
Name of Course____
Number of Credits_______________________________________
Semester/Year____
College/University_______________________________________

Maternal or Pediatric or Life Cycle Nutrition (At least 3 credits are required)
Name of Course____
Number of Credits_______________________________________
Semester/Year____
College/University_______________________________________

Medical Nutrition Therapy (At least 3 credits are required)
Name of Course____
Number of Credits_______________________________________
Semester/Year____
College/University_______________________________________

State Agency Approval:

9 **Approved**

9 **Denied**

Reason for denial____

CPA Applicant
Prior-Approval Request for CPA Courses

Nutrition Unit

Signature	Title	Date

WIC Director

Signature	Date

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
WIC PROGRAM
POLICY AND PROCEDURE MANUAL

Policy and Procedure Number: 7.64
Effective Date: October 1, 2007
Revised Date: October 1, 2015

SECTION:	**LOCAL AGENCY OPERATIONS AND MANAGEMENT**
SUBJECT:	**Laboratory Requirements for Performing Blood Tests**

A. Policy

Local agencies shall abide by federal and state regulations regarding blood tests performed in WIC clinics.

B. Procedure

1. Standing Order, Letter of Permit Exception, and CLIA Waiver

a. In order to perform hemoglobin tests on WIC participants, each local agency shall have:

- A **Standing Order to Perform the Blood Test** from the local agency's Health Officer or Medical Director to perform the test;
- A **Letter of Permit Exception** obtained from the DHMH Office of Health Care Quality; and
- A federal **CLIA[1] Certificate of Waiver** from the US Department of Health and Human Services, Centers for Medicare and Medicaid Services.

b. Follow the procedures described in Attachment 7.64A.

2. Blood Testing Equipment

The local agency shall:

a. Perform a hemoglobin or hematocrit test, following a written, standardized procedure that is CLIA waived. The HemoCue Hemoglobin Analyzing System and STAT Site methods are acceptable for the hemoglobin test. The Hematastat method is acceptable for the hematocrit test.

b. Ensure that blood-testing equipment is installed and maintained according

[1] CLIA refers to the Clinical Laboratory Improvement Amendment of 1988. Certain laboratory tests may receive a waiver that exempts them from the requirements of the regulation.

to the manufacturer's specifications. Local agency staff designated to perform blood tests shall be trained on the use and maintenance of the equipment.

The following companies are examples of distributors of equipment and can provide technical assistance regarding the products they offer.

HemoCue

HemoCue America
A Division of Radiometer America Inc.
32669 Collection Center DriveChicago, IL 60693-0326
Phone 800.881.1611
Fax 800.333.7043
Info@hemocue.com

Stanbio Laboratory (STAT Site Distributor)
1261 North Main Street
Boerne, TX 78006
Phone: 800-531-5535
www.stanbio.com

Separation Technology, Inc.
(Hematastat Distributor)
582 Monroe Road
Suite 1424
Sanford, Florida 32771 USA
Phone: 800-777-6668
www.separationtechnology.com

c. Use lancets that comply with the Needlestick Safety and Prevention Act regulation. Refer to Attachment 7.64B for more information.

3. **Blood-borne Pathogens Exposure Plan**

The local agency shall follow a written blood borne pathogens procedure that complies with Occupational Safety and Health Administration (OSHA) requirements. Refer to Attachment 7.64C for more information.

Attachments:

7.64A	Standing Order, Letter of Permit Exception, and CLIA Waiver Instructions
7.64B	Safety Lancets
7.64C	Bloodborne Pathogens Requirements

References:

1. 29CFR 1910.1030
2. 42 CFR 493
3. COMAR 10.10.01-08, Medical Laboratories in Maryland

Revisions:
10/11 Updated company contact information.
10/14 Updated HemoCue contact information.
10/15 Updated HemoCue contact information.

Procedures to Obtain a Standing Order, Letter of Permit Exception, and CLIA Waiver to perform blood tests in WIC Clinics.

1. To obtain a Standing Order to perform the blood test:

Each local health department or non-profit health agency has a medical director who is responsible for developing standing orders. A request should be made for this individual to write the standing order for your WIC agency.

2. To obtain the Letter of Permit Exception and federal CLIA Waiver:

Each local health department or non-profit health agency that operates a laboratory must have both the Permit and Waiver, so will likely have already applied. Determine if your WIC agency has been included in the application process. **Note that each WIC clinic must have its own Letter of Permit Exception. A copy of the Letter of Permit Exception and the CLIA Waiver must be posted in each WIC clinic laboratory. Both the Permit and Waiver cover a 2 year period.**

If you must complete the application for your WIC agency, contact the DHMH Office of Health Care Quality to obtain an application packet and instructions.

Laboratory Licensing Programs
Spring Grove Center – Bland Bryant Building
55 Wade Avenue
Catonsville, Maryland 21228
410-402-8025.

1. Complete the State Compliance Application **for each WIC clinic** your local agency operates.
   a. Complete Section I. Select "Point of Care" as the laboratory. Leave the *State Permit Number, CLIA Number,* and *CLIA Certificate Type* fields blank.
   b. Complete Section II. The laboratory director must be a medical officer such as a Physician, Physician's Assistant, or Nurse Practitioner.
   c. Leave Section III blank.
   d. Complete Section IV. The Owner is the name of the county health department or the State of Maryland. The federal tax ID number must be entered.
   e. Complete Section V.
   f. Complete Section VI.
   g. Complete Section VII. Under *Hematology*, check "Hemoglobin."
   h. Sections XI and XII can be left blank.
   i. Complete XIV. The Attestation **must be signed and dated by the laboratory director** as specified in Section II.
   j. There is a $100.00 processing fee for each application. The processing fee is waived for WIC Programs operated through local health departments. Non-profit WIC agencies must pay the fee.

2. Complete the Clinical Laboratory Improvements Amendments of 1988 (CLIA) Application for Certification form. (Refer also to application instructions that are attached)
    a. Complete Section I. Leave the *CLIA Identification Number* blank. The Federal Tax Identification Number must be entered.
    b. Complete Section II. Select "Certificate of Waiver."
    c. Complete Section III. Select 26, "Public Health Laboratories."
    d. Complete Section IV.
    e. Complete Section V. Enter the total number of clinics for your agency and addresses for each. For tests performed, enter: **Hematology: HemoCue Hemoglobin System.**
    f. Complete Section VI.
    g. Complete Sections VIII, IX, and X.
    h. The application must be signed and dated by the laboratory director.
    i. There is a $150.00 fee to obtain the certificate which covers ALL of the clinics. An invoice will be sent by the federal government to the applicant's address.
3. Send all completed state (and payment for the processing fee if applicable) and federal applications to:

    Laboratory Licensing Programs
    Spring Grove Center – Bland Bryant Building
    55 Wade Avenue
    Catonsville, Maryland 21228

Retractable Lancets - Examples

Lancet	Manufacturer	Ordering Information	Features
Genie Lancet	Becton-Dickinson 201-847-6800 www.bd.com	Cardinal Health Care 1-800-964-5227 www.cardinal.com Hopkins Medical Supply 1-800-835-1995 www.hmponline.com	Contains a retractable stainless steel blade. Sizes: 1.0 mm deep puncture 1.5 mm deep puncture 2.0 mm deep puncture
Unistick 2	Owen Mumford 1-800-421-6936 www.owenmumford.com	Cardinal Health Care 1-800-964-5227 www.cardinal.com Hopkins Medical Supply 1-800-835-1995 www.hmponline.com	Contains a retractable needle. Sizes: Comfort 1.8 mm deep puncture (Gauge 28G) (children) Normal 1.8 mm deep puncture (Gauge 23G) (adults)
Unistick 3			Comfort 1.8 mm deep puncture (Gauge 28G) Normal 1.8 mm deep puncture (Gauge 23G)
Haemolance Plus Safety Lancets	Arkray USA 800.818.8877 www.arkrayusa.com	Cardinal Health Care 1-800-964-5227 www.cardinal.com	Contains a retractable needle. Sizes: Normal flow Adult, 1.8 mm deep puncture (green) Low flow Child, 1.4 mm deep puncture (blue)

SurgiLance	Medipurpose 770-448-9493 www.medipurpose.com	Cardinal Health Care 1-800-964-5227 www.cardinal.com Hopkins Medical Supply 1-800-835-1995 www.hmponline.com	Contains a retractable needle. Sizes: SLN 200 1.8 mm deep puncture (grey) SLN 240 2.2 mm deep puncture (orange)

Blood Borne Pathogens Requirements

The State of Maryland Department of Health and Mental Hygiene requires that all health department employees who handle blood follow the U.S. Occupational Safety and Health Administration (OSHA) regulations (29 CFR Part 1910.1030). Each local health department must have a written "Blood Borne Pathogens Plan" on file. WIC employees who handle blood are covered by these regulations. These regulations require, at a minimum:

- The provision of blood-borne pathogens training for new employees who handle blood and an annual refresher training to previously trained employees;
- Availability of the Hepatitis B vaccine;
- Required personal protective equipment for employees, such as disposable gloves (varied sizes and latex-free);
- Restrictions for the area where the blood work is to be performed;
- Daily "housekeeping" of the area where blood work is performed;
- Location of and removal of infectious waste;
- Procedures to safely remove blood that contaminates surfaces such as countertops and floors; and
- A written Exposure Control Plan.

All employees who handle blood shall be familiar with the details of the Blood Borne Pathogens Plan. Local agencies that are not health departments or medical facilities shall consult with the State WIC Agency Nutrition Services Unit regarding the OSHA requirements. Forms for developing an Exposure Control Plan are available from the State Nutrition Services Unit.

Compliance with the Needlestick Safety and Prevention Act, an Amendment to the OSHA Bloodborne Pathogens regulations (29 CFR 1910)

- Adds the term "safer medical devices" to the list of engineering controls designed to reduce the risk of accidental needlesticks and includes in the definition, retractable needles.

- Requires employers to establish an ongoing process to identify, evaluate, and select effective safer medical devices (lancets) and to include staff who perform bloodwork in this process. Refer to Attachment 7.64B for examples of retractable lancets that can be considered for use.

  For the purpose of the BBP standard, an "effective" safer medical device is a device that, based on "reasonable judgment," will make an exposure incident involving a contaminated sharp less likely to occur in the application in which it is used.

  - Records of the process and staff involved must be maintained by the employer.

  - Changes in technique may be required in the use of newer devices, so staff training and support are necessary.

- Requires employers to amend their Exposure Control Plans on an annual basis or more frequently to reflect new technologies in safer medical devices.

- Requires employers to maintain a "sharps injury log" of percutaneous (under the skin) needlestick injuries to use as a tool to identify high risk areas and evaluate devices. The log must ensure the confidentiality of those employees with such injuries. The log must include the department or work area where the exposure incident occurred, the type and brand of device used, and an explanation of how the incident occurred.

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
WIC PROGRAM
POLICY AND PROCEDURE MANUAL

Policy and Procedure Number: 7.65
Effective Date: October 1, 2007
Revised Date: October 1, 2014

SECTION:	**LOCAL AGENCY OPERATIONS AND MANAGEMENT**
SUBJECT:	**Ordering Outreach, Certification, Nutrition Education, and Breastfeeding Support Materials**

A. Policy

Local agencies shall order certification, nutrition education, and breastfeeding support materials through the Maryland WIC Distribution Center.

B. Procedure

1. Online Procedure:

a. Each Local Agency Coordinator and those designated by the coordinator will have access to order materials.. Only these individuals shall have online access to the MD WIC Distribution Center.

b. The MD WIC Distribution Center is accessible from the Internet via the CORE IMS Enterprise Edition software.

   i. To log onto the system, the user must enter *User Name* and *Password*. User name is the user's last name and first initial. First-time users must enter the default password "wic" to access the system, although not prompted, it is best to change the password.
      1. Once inside the system, click on *Profile* to change the default password.

   ii. Click on the *Ordering tab*. Click on *New Order*. Click on the *Ship To* dropdown list to select the local agency's shipping address.
      1. If more than one shipping address, click on the *Location* box to select the correct address.

   iii. Click on *Add Line* to order materials.
      1. Click on the dropdown listing to the right of the field labeled *Item#* to view the entire inventory of materials. To filter the listing, click on the dropdown listing for *Class* or *Category*. Click on *Apply Filter* to bring up only what is selected.
      2. Click on the arrow to the right of the item to be ordered.

Enter quantity desired. Click *Add*. The item will appear in the screen as "ordered."

(Note that for items with a specified local agency allotment, if the number requested exceeds the allotment, an error message will appear. In such a case, the user must reduce the quantity requested.)

3. Continue to click on *Add Line*to order additional items.
4. Click *Edit* to make changes to a line.
5. Click *Save* to save the order. Note: the order cannot be altered once it is saved.
6. Click *Print* to print a copy of the order or save it as a portable document file (pdf) for future reference.
7. Click *Logout* to leave the system.

iv. To locate and check on a previous order, click on *Find Order*.

1. Enter search criteria, such as order number, order date, or an item.
2. Click on the *Ship To* dropdown to find the local agency's shipping address information.
3. Apply filter to complete the search.
4. Click on *Edit* to view the order. Once the items have been shipped, the user will see an expected delivery date. If an item will not ship right away, the user will see a note in the *Comment* field.
5. Click *Logout* to leave the system.

2. Manual Procedure

Users are expected to use the online procedure to order materials. Should the online system not be accessible, permission must be obtained to fax a paper request for materials.

a. Contact the Washington County WIC Program Coordinator at 240-313-3336 to request permission to fax a paper request.
b. Use Attachment 7.65A **WIC Manual Order Form** and fax to the MD WIC Distribution Center at 240-420-5262.

Attachments:
7.65A WIC Manual Order Form

Revisions:
10/10 Changed instruction to change password. Updated all attachments.
10/11 Updated Attachment 7.65D Breastfeeding Support Materials.
10/12 Updated Attachment 7.65D Breastfeeding Support Materials.

10/13 Consolidated Attachments 7.65A, B, C, and D into 7.65A
10/14 Changed access to CORE to those designated by LA Coordinator, instead of 2 per local agency

WIC MANUAL ORDER FORM

1. User MUST order materials online, EXCEPT when the online system is not accessible.
2. Contact the Washington County WIC Program Coordinator at 240-313-3336 to obtain permission PRIOR to sending in manual order.
3. FAX this form to the MD WIC Distribution Center at 240-420-5262.

Local Agency Name: ________________________ Date of Request: ________________________

Mailing Address: ____

Contact Person: ___________________________ Phone Number: _________________________

BREASTFEEDING		QUANTITY
Breastfeeding Aids: Nurture III Medium (23-29mm) Flange 05/09 (1 package = 2 flange)	B-18	
Breastfeeding Aids: Nurture III Large (29-35mm) Flange 05/09 (1 package = 2 flange)	B-19	
Breastfeeding Aids: Nurture III Extra-Large (35+ mm) Flange 05/09 (1 package = 2 flange)	B-20	
Breastfeeding Aids: TheraShells Breast Shell 05/07 (1 box = 2 shells)	B-30	
Lactina Double Pump Kit 05/07 (each)	B-31	
Breastfeeding Aids: Lactina 27mm Flange 05/07 (1 box = 2 flange)	B-32	
Breastfeeding Aids: Lactina 27mm Flange / Connector Kit 05/07 (1 kit = 2 of each)	B-32A	
Breastfeeding Aids: Lactina Flange Connector 05/07 (1 box = 2 connectors)	B-33	
Breastfeeding Aids: Lactina 30mm (XLarge) Flange 05/07 (1 box = 2 flange)	B-34	
Breastfeeding Aids: Lactina 30mm Flange / Connector Kit 05/07 (1 kit = 2 of each)	B-34A	
Breastfeeding Aids: Manual Harmony Breast Pump 05/07 (each)	B-35*	
Breastfeeding Aids: Supplemental Nursing System (SNS) 05/07 (each)	B-36	
Breastfeeding Aids: STARTER Supplemental Nursing System (SNS) 05/07 (each)	B-37	
Breastfeeding Aids: Lactina 36mm (XXLarge) flange 10/07 (1 Box=2 flange)	B-39	
Breastfeeding Aids: Lactina Hospital Grade Breast Pump 10/09 (each)	B-40*	
Harmony Manual Breast Pump w/ 2 Breastshields	B-49	
Nurture III Pump Filters (1 Bag = 50 pieces)	B-50	
Nurture III Double Collection Hook-up Kit with DVD 02/10 (each)	B-52	
Nurture III Breast Pump	B-53*	
Pump in Style Breast Pump 09/10 (each)	B-55	
CERTIFICATION		**QUANTITY**
WIC Check Stock 04/09 (Case= 2000)	C-00	
Participant ID Folder 10/12 (25 per pack)	C-01	
Participant ID Folder Span 10/12 (25 per pack)	C-01A	
Authorized Food List 10/12 (100 per pack)	C-02	
Authorized Food List Span 10/12 (100 per pack)	C-03	
Rights & Responsibilities form 02/12 (100 per pack)	C-08	
Rights & Responsibilities form Span 02/12 (100 per pack)	C-09	
Health History Infant 0-5 months E/S 05/12 (500 per pack)	C-14	
Plastic Bags for ID Folders 05/07 (100 per pack)	C-16	
Health History Women E/S 05/12 (500 per pack)	C-52	
Health History Child E/S 05/12 (500 per pack)	C-57	
Health History Infant 6-12 months E/S 03/06 (500 per pack)	C-77	

CLINIC SUPPLIES		QUANTITY
Nitrile SMALL Disposbale Gloves, Silver 10/12 (Box=200)	CS-01	
Nitrile MEDIUM Disposbale Gloves, Silver 10/12 (Box=200)	CS-02	
Nitrile LARGE Disposable Gloves, Silver 10/12 (Box=200)	CS-03	
Nitrile X-LARGE Disposable Gloves, Silver 10/12 (Box=200)	CS-04	
PVC SMALL Disposable Gloves, Clear 10/12 (Box=100)	CS-05	
PVC MEDIUM Disposable gloves, Clear 10/12 (Box=100)	CS-06	
PVC LARGE Disposable Gloves, Clear 10/12 (Box=100)	CS-07	
Gauze Sponge, 2x2 in, 10/12 (Pack=200)	CS-08	
Alcohol Towelettes 10/12 (Pack=200)	CS-09	
HB 201+ Cuvettes, 4X50 7/13 (4 vials per case)	CS-10	
Hemocue Cleaner 07/13 (5 swabs per pack)	CS-11	
NUTRITION		**QUANTITY**
Help Me Be Healthy 1 to 1 1/2 yrs 06/10 (50 per pack)	N-36	
Help Me Be Healthy 1 to 1 1/2 yrs Span 06/10 (50 per pack)	N-37	
Help Me Be Healthy 1 1/2 to 2 yrs 06/10 (50 per pack)	N-38	
Help Me Be Healthy 1 1/2 to 2 yrs Span 06/10 (50 per pack)	N-39	
Help Me Be Healthy 2 to 2 1/2 yrs 06/10 (50 per pack)	N-40	
Help Me Be Healthy 2 to 2 1/2 yrs Span 06/10 (50 per pack)	N-41	
Help Me Be Healthy 2 1/2 to 3 yrs 06/10 (50 per pack)	N-42	
Help Me Be Healthy 2 1/2 to 3 yrs Span 06/10 (50 per pack)	N-43	
Help Me Be Healthy 3 to 3 1/2 yrs 06/10 (50 per pack)	N-44	
Help Me Be Healthy 3 to 3 1/2 yrs Span 06/10 (50 per pack)	N-45	
Help Me Be Healthy 3 1/2 to 4 yrs 06/10 (50 per pack)	N-46	
Help Me Be Healthy 3 1/2 to 4 yrs Span 06/10 (50 per pack)	N-47	
Help Me Be Healthy 4 to 4 1/2 yrs 06/10 (50 per pack)	N-48	
Help Me Be Healthy 4 to 4 1/2 yrs Span 06/10 (50 per pack)	N-49	
Help Me Be Healthy 4 1/2 to 5 yrs 06/10 (50 per pack)	N-50	
Help Me Be Healthy 4 1/2 to 5 yrs Span 06/10 (50 per pack)	N-51	
Help Me Be Healthy 0-6 months 06/10 (50 per pack)	N-54	
Help Me Be Healthy 0-6 months Span 06/10 (50 per pack)	N-55	
Help Me Be Healthy 6-12 months 06/10 (50 per pack)	N-56	
Help Me Be Healthy 6-12 months Span 06/10 (50 per pack)	N-57	
Tips for a Healthy Pregnancy 09/12 (50 per pack)	N-60	
Tips for a Healthy Pregnancy Span 05/07 (50 per pack)	N-61	
Health Tips for New Moms 08/12 (50 per pack)	N-62	
Health Tips for New Moms Span 05/07 (50 per pack)	N-63	

FOR MD WIC DISTRIBUTION CENTER ONLY

Request received: ______________________

Request filled: ________________________

Data entered in system: __________________

Staff filling request: ____________________

Policy and Procedure Number: 7.66
Effective Date: October 1, 2007
Revised Date: October 1, 2014

SECTION:	**LOCAL AGENCY OPERATIONS AND MANAGEMENT**
SUBJECT:	**New Employee Training**

A. Policy

New employees of the WIC Program shall complete new employee training (WIC WISE part 1, part 2, Grow and Glow and CPA training) within nine months from date of hire.

The goals of new employee training are to:

- Standardize services provided to WIC participants;
- Increase nutrition and breastfeeding knowledge and develop counseling skills;
- Increase staff confidence and job satisfaction;
- Organize and standardize new employee training

Employees who return to the WIC Program after a separation from the Program may attend new employee training.

B. Procedure

All new employee training (WIC WISE part 1 and WIC WISE part 2, new CPA training and Grow and Glow part 1 and part 2) will be held at the Maryland WIC Training Center. See Attachment 7.66A for directions.

1. WIC WISE TRAINING

   a. Submission of the Data Request Form (Attachment 7.42A) by the published deadline will register new employees to attend WIC WISE training.

   b. Local agencies will begin the process of new employee training using the procedures, guidelines and materials found in the "Become WIC WISE Local Agency Manual". Local agencies will send the completed and signed trainer's checklists from the "Become WIC

WISE “ manual with the new employee on the first day of WIC WISE part 1 training.

c. WIC WISE part 1 will be completed in 7 days over a 2 week period. WIC WISE part 2 will be completed in a consecutive 1 week period.

d. New employees must attend WIC WISE part 1 before attending WIC WISE part 2. New staff must be available to attend the entire 12 days of training. Local agency staff in need of refresher training may also attend as space permits.

e. WIC WISE part 1 will be offered no less than 4 times per year and is required for all local agency, state and temporary staff hired since the previous training. WIC WISE part 2 will be offered no less than 3 times per year and is required for all local agency, state and temporary staff who perform, supervise or evaluate certifications.

f. WIC WISE training includes certification, nutrition, and food package policies and procedures, information system training, breastfeeding basics, basic nutrition principles for pregnant and postpartum women, infants and children, counseling skills based on VENA principles, risk code and food package training.

g. Breastfeeding peer counselors who perform peer counseling duties only are not bound by this policy. They will complete breastfeeding peer counselor training. Refer to Policy and Procedure 5.13

h. Clerical staff who perform clerical duties only are not bound by this policy. They will complete the appropriate sections of the “Become WIC WISE” training manual with a local agency mentor.

i. State office staff from the nutrition, breastfeeding, IT and communications units are required to attend WIC WISE part 1. State office staff from the nutrition, breastfeeding and communications units are required to attend WIC WISE part 2. All state office staff are required to complete the “Become WIC WISE “ training manual. Only the nutrition, breastfeeding and IT staff must turn in the trainer’s checklists.

j. Paraprofessional and professional staff have additional training requirements. The local agency shall abide by Policy and Procedure 7.60 B.1.d which requires that a CPA review the records for all certifications completed by a staff member who has not completed the paraprofessional/ professional training.

k On the rare occasion that a new employee is unable to attend the complete WIC WISE training, he/she may be trained at the local agency. These employees must complete the equivalent of WIC WISE training. The Local Agency Coordinator shall contact the Training Center Coordinator for more information. State staff will evaluate these employees for competency levels. If competency levels are not demonstrated, the employee will be required to attend WIC WISE Training part 1 and part 2.

l. Employees that do not achieve basic competencies during WIC WISE part 1 and part 2 will need to be evaluated by state staff after 1 month of mentoring in their local agency.

m. Any WIC WISE part 1 class that is over capacity by the deadline to register will have applicants admitted in the following order of priority: new local agency employees, new temporary employees, employees returning to WIC after more than a six month absence, employees who require retraining, new state staff, new 3 Sigma staff, employees from MARO/USDA, other visitors.

2. NEW CPA TRAINING

a. Will be completed in a 2 day training that will be offered no less than 3 times per year and is required for all local agency, state and temporary staff CPA's hired since the previous training. New CPA's must attend WIC WISE part 1 before attending New CPA training.

b. CPA training includes policies and procedures on special formula approval, completing competency checklists on CPPA's, planning secondary nutrition education high risk counseling, care plans and the customization of food packages.

3. GROW AND GLOW TRAINING

a. Will be completed in a 2 day nonconsecutive training that will be offered no less than 3 times per year and is required for all new employees except breastfeeding peer counselors. It is recommended that staff complete WIC WISE part 1 and WIC WISE part 2 before attending Grow and Glow training.

b. Grow and Glow training includes prenatal breastfeeding assessment and education, counseling strategies, how to recognize appropriate position and latch, potential difficulties breastfeeding women encounter, and equipment/breastfeeding aids. The trainings are designed to encourage positive attitudes toward breastfeeding, motivate staff to create "breastfeeding friendly" clinic environments, provide staff with ways to recognize when breastfeeding may or may not be done correctly and an understanding of what staff can do to assist breastfeeding dyads, including making appropriate referrals when needed.

c. State office staff from the nutrition, breastfeeding and communications units are required to attend Grow and Glow parts 1 and 2.

4. RECORDS OF COMPLETION OF NEW EMPLOYEE TRAINING

a. The local agency trainer's checklists and the completed competency checklists will be maintained at the Training Center by the Training Center staff.
b. Attendance records and evaluations will be maintained by the Training Center staff for the amount of years in accordance with State record keeping guidelines.

Attachment: 7.66 A Directions to the Training Center

Revisions: Inserted information about the Annex training site including Attachment 7.66B

10/09 B.1. C: changed "basic counseling skills" to "counseling skills based on VENA principles.

11/09 Updated 7.66A to include directions from Southern Maryland to the Brooklyn Training Center

10/10 In B. 1. B. changed wording from "will be offered" to "is required", clarified who attends WIC WISE part 2 and the sequencing of the training.
Added nutrition and food package policies to B. 1. c.
Added B. 1. e, i, and j. Reordered B. 1. e-j

10/2011 Changes in the frequency of training; changed requirement to complete new employee training to six months from date of hire.

10/2012 Deleted 7.66B. Revised 7.66A for the new location. Corrected attachment reference in B.1.b. Added Grow and Glow in A and B.3. Reordered B.1 a-i. Added B.1.j, other minor language changes/clarifications

10/2013 Updated frequency and length of training for WIC WISE part 1, New CPA training and Grow and Glow training. Deleted references to the WBT modules. Clarified prerequisites to Grow and Glow and New CPA training. Changed length of time to complete new employee training from 6 to 9 months. Added section on local agency role in new employee training. Moved language from policy 2.02 regarding having a CPA review records of a new CPPA or CPA until competency checklists have been completed.

10/2014 – added language to clarify who is required to come to the various new employee trainings.

Maryland WIC Training & Temporary Services Center

5503 A Ritchie Highway, Brooklyn Park, MD 21225
Phone 410-222-6131 • Fax 410-222-0965

DIRECTIONS TO THE TRAINING CENTER

****It is suggested to use the directions below, as GPS has been known to misguide individuals to our location.****

FROM ANNAPOLIS

Take 97 North to 695 East …… Use Exit 17 B (Key Bridge, Dundalk)

Merge onto the beltway

Take Exit 3A (Route 2 North, Brooklyn)

Turn or bear RIGHT at the STOP sign and then turn RIGHT onto Route 2

Turn RIGHT at the 3^{rd} LIGHT (16^{th} Avenue)

The Training Center is in the strip of store fronts directly behind Taco Bell and Long John Silvers.

There is parking in the front and on the side of the Training Center.

FROM BALTIMORE CITY

Take Martin Luther King Blvd to 395 South

Merge onto 95 North toward New York

Take Exit 54 (Hanover Street, Route 2)

Stay on Hanover Street which becomes Route 2

Turn LEFT at 16^{th} Avenue

The Training Center is in the strip of store fronts directly behind Taco Bell and Long John Silvers.

There is parking in the front and on the side of the Training Center.

FROM NORTH EAST MARYLAND

Take 95 South toward Baltimore

Keep Right to take I-895 South / Harbor Tunnel (toward Annapolis)

Merge onto MD route 2 South via Exit 7 toward Brooklyn.

Turn Left onto 16th Avenue

The Training Center is in the strip of store fronts directly behind Taco Bell and Long John Silvers.

There is parking in the front and on the side of the Training Center.

FROM WESTERN MARYLAND

Take 695 (Baltimore Beltway) East toward Glen Burnie

Take Exit 3A (Route 2 North, Brooklyn)

Turn or bear RIGHT at the STOP sign and then turn RIGHT onto Route 2

Turn RIGHT at the 3rd LIGHT (16th Avenue)

The Training Center is in the strip of store fronts directly behind Taco Bell and Long John Silvers.

There is parking in the front and on the side of the Training Center.

FROM 495 (Capital Beltway)

From 495 take 95 North to 695

Take 695 East towards Glen Burnie

Take Exit 3A (Route 2 North, Brooklyn)

Turn or bear RIGHT at the STOP sign and then turn RIGHT onto Route 2*

Turn RIGHT at the 3rd LIGHT (16th Avenue)

The Training Center is in the strip of store fronts directly behind Taco Bell and Long John Silvers.

There is parking in the front and on the side of the Training Center.

FROM 301 (Southern Maryland)

Take 301 North to 97 North

Take 695 East towards Glen Burnie

Take Exit 3A (Route 2 North, Brooklyn)

Turn or bear RIGHT at the STOP sign and then turn RIGHT onto Route 2*

Turn RIGHT at the 3rd LIGHT (16th Avenue)

The Training Center is in the strip of store fronts directly behind Taco Bell and Long John Silvers.

There is parking in the front and on the side of the Training Center.

If you see McDonald's you've gone too far, turn around and turn LEFT at 16th Avenue

* Route 2 is Ritchie Highway

EXTENDED STAY AMERICA TO THE TRAINING CENTER:

Turn RIGHT onto Chesapeake Center Dr.

Turn LEFT onto E. Ordnance Rd.

Turn RIGHT onto Ritchie Hwy.

Turn RIGHT at the 5th LIGHT (16th Avenue)

The building is behind the Valvoline service station.

The Training Center is in the strip of store fronts directly behind Taco Bell and Long John Silvers.

There is parking in the front and on the side of the Training Center.

HAMPTON INN TO THE TRAINING CENTER:

Turn RIGHT out of the hotel parking lot onto Ritchie Hwy.

Turn RIGHT at the 5th LIGHT (16th Avenue)

The Training Center is in the strip of store fronts directly behind Taco Bell and Long John Silvers.

There is parking in the front and on the side of the Training Center.

DAYS INN TO THE TRAINING CENTER:

Turn RIGHT out of the hotel parking lot onto Ritchie Hwy.

Make an immediate U Turn to go NORTH on Ritchie Highway towards Baltimore.

Turn RIGHT at the 4th LIGHT (16th Avenue)

The Training Center is in the strip of store fronts directly behind Taco Bell and Long John Silvers.

There is parking in the front and on the side of the Training Center.

PUBLIC TRANSPORTATION:

Always check the MTA website for recent changes http://www.mtamaryland.com/

The Light Rail ends in Glen Burnie at the Cromwell Station stop.

The # 14 bus runs from Cromwell Station north on Ritchie Highway. Get off the bus at Ritchie Highway and 16th Avenue.

The #14 bus runs from the Patapsco light rail stop south on Ritchie Highway. Get off the bus at Ritchie Highway and 16th Avenue.

The Training Center is in the strip of store fronts directly behind Taco Bell and Long John Silvers at 16th Avenue and Ritchie Highway.

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
WIC PROGRAM
POLICY AND PROCEDURE MANUAL

Policy and Procedure Number: 7.67
Effective Date: October 1, 2007
Revised Date: October 1, 2014

SECTION: **LOCAL AGENCY OPERATIONS AND MANAGEMENT**

SUBJECT: **WIC Temporary Staffing**

A. Policy

Local agencies may request temporary staff (temps) to cover long or short term staff shortages.

B. Procedure

1. Local agencies will contact the Training Center to request a temp. Every attempt will be made to provide qualified temporary staff to meet the staffing needs and requirements of local agencies.

2. All temporary staff are required to attend the next scheduled round of new employee trainings (WIC WISE parts 1 and 2, Grow and Glow parts 1 and 2 and new CPA training if applicable) after their date of hire. Local agencies are responsible for completing the trainer's checklists for temporary staff before they attend WIC WISE part 1.

3. The Training Center will cover the cost of the first 2 weeks of salary for temporary workers. Local agency budgets will be charged for the temp services after the first 2 weeks via a journal adjustment or invoice through the State WIC Office. See Policy and Procedure 6.04, Reimbursement for Costs of Temporary Staffing.

4. The Local Agency Coordinator or the Coordinator's designee will be responsible for signing the temp's timesheet and faxing it to the Training Center by the published deadline.

5. The original timesheet will remain on file at the local agency for audit purposes.

6. Any concerns regarding performance or attendance should be forwarded to the staff at the Training Center.

7. Local agencies may contact the Training Center at any time to discuss requests for temporary staff.

Revisions:

10/10 Added B. 1. Reordered B. 2-8
10/12 Deleted B.7 and B.8 Deleted Attachment 7.67A. Added new B.7
10/14 Due to changes in the training schedule, B.1-3 have been reworded

Policy and Procedure Number: 7.70
Effective Date: October 1, 2007
Revised Date: October 1, 2015

SECTION: **LOCAL AGENCY OPERATIONS AND MANAGEMENT**

SUBJECT: **Confidentiality and Release of Applicant and Participant Information**

A. Policy

Confidential applicant and participant information is any information about an applicant or participant, whether it is obtained from the applicant or participant, another source, or generated as a result of a WIC application, certification, or participation, that individually identifies an applicant and/or family member(s). Applicant or participant information is confidential, regardless of the original source and exclusive of previously applicable confidentiality provided in accordance with other Federal, State, or local law.

1. The local agency shall restrict the use and disclosure of confidential applicant and participant information to persons directly connected with the administration or enforcement of the WIC Program whom the State Agency determine have a need to know the information for WIC Program purposes. These persons may include, but are not limited to:

   a. Personnel from its local agencies and other WIC State or local agencies;

   b. Persons under contract with the State Agency to perform research regarding the WIC Program;

   c. Persons investigating or prosecuting WIC Program violations under Federal, State or local law; and

   4. Representatives of the United State Department of Agriculture and the Comptroller General of the United States to inspect, audit, and copy. Any reports or other documents resulting from the examination of such records that are publicly released may not include confidential applicant or participant information.

2. Non-WIC Purposes

   The local agency may disclose confidential applicant and participant information when approved by the State Agency to public organizations to use in the administration of other programs that serve persons eligible for the WIC Program provided that:

   a. The DHMH Secretary, or his designee, designates in writing the permitted non-WIC uses of the information and the names of the organizations to which such information may be disclosed;

b. The applicant or participant is notified at the time of application or through subsequent notice that the DHMH Secretary, or his designee, has authorized the use and disclosure of information about their participation in the WIC Program for non-WIC purposes. The statement must also indicate that such information will be used only by State and local WIC agencies and public organizations only in the administration of their programs that serve persons eligible for the WIC Program; and

c. The State or local agency disclosing the information must enter into a written agreement with the other public organization, or in the case of a non-WIC use by a State or local WIC agency, the unit of the State or local WIC agency that will be using the information. The written agreement shall:

i. Specify that the receiving organization may use the confidential applicant and participant information only for:

- Establishing the eligibility of WIC applicants or participants for the programs that the organization administers;
- Conducting outreach to WIC applicants and participants for such programs;
- Enhancing the health, education, or well-being of WIC applicants or participants who are currently enrolled in such programs, including the reporting of known or suspected child abuse or neglect that is not otherwise required by State law;
- Streamlining administrative procedures in order to minimize burdens on staff, applicants, or participants in either the receiving program or the WIC Program; and/or
- Assessing and evaluating the responsiveness of a State's health system to participants' health care needs and health care outcomes.

ii. Contain the receiving organization's assurance that it will not use the information for any other purpose or disclose the information to a third party.

3. Child Abuse and Neglect

Local agencies who are required by State law to report known or suspected child abuse or neglect shall disclose confidential applicant and participant information without the consent of the applicant or participant to the extent necessary to comply with such law.

4. Release Forms

Except in the cases of subpoenas or search warrants, (as described in #6.

below) the local agency shall disclose confidential applicant and participant information to individuals or entities not listed in this section only if the affected applicant or participant signs a release form authorizing the disclosure and specifying the parties to which the information may be disclosed. The local agency must permit applicants and participants to refuse to sign the release form and must notify the applicants and participants that signing the form is not a condition of eligibility and refusing to sign the form will not affect the applicant's or participant's application or participation in the WIC Program. Release forms authorizing disclosure to private physicians or other health care providers may be included as part of the WIC application or certification process. All other requests for applications or participants to sign voluntary release forms must occur after the application and certification process is completed.

5. Access to Information by Applicants and Participants

The local agency shall provide applicants and participants access to all information they have provided to the WIC Program. In the case of an applicant or participant who is an infant or child, the access may be provided to the parent or guardian of the infant or child, assuming that any issues regarding custody or guardianship have been settled. However, the local agency need not provide the applicant or participant (or the parent or guardian of an infant or child) access to any other information in the file or record such as documentation of income provided by third parties and staff assessments of the participant's condition or behavior, unless required by Federal, State, or local law or policy or unless the information supports a State or local agency decision being appealed.

6. Subpoenas and Search Warrants.

The local agency shall disclose confidential applicant or participant information pursuant to a valid subpoena or search warrant. Upon receiving the subpoena or search warrant, the local agency shall immediately notify the State Agency by telephone and fax the subpoena or other documentation to the State agency. The State agency shall consult with legal counsel who will determine whether the information can be disclosed.

7. USDA and Comptroller General

The local agency shall provide the United States Department of Agriculture and the Comptroller General of the United States access to all WIC Program records, including confidential applicant and participant information.

8. WIC Applicant/Participant Request for Release of Information to Another State WIC Agency or a Third Party

An applicant/participant or the parent or guardian of an infant or child participant must submit a signed request to the local agency for the release of information to be sent to a specific third party or organization, i.e. doctor. Each local agency shall use the consent for release of information approved by their local health department or use the sample Consent for Release of Participant Information (Attachment 7.70A).

9. Release of Information to Other State WIC Agencies

The local agency shall release information to WIC agencies in other states for certification verification for the transfer of participants and/or to prevent and detect dual participation.

Local agency staff shall:

a. Provide information via telephone, fax, or mail as requested by the other State without a release signed by the WIC participant or the parent or guardian of an infant or child participant. Information provided will be limited to the information contained on a VOC card.

b. Document the name and telephone/fax number of the person requesting the information. Local agency staff may return a call to the requesting agency prior to releasing the information if there is any doubt that it is not a WIC agency.

c. Request that any unused Maryland food instruments be destroyed or returned to the WIC agency.

d. Terminate the WIC participant when such information is requested from another State agency.

e. Upon detection of dual participation, terminate the participant from one of the WIC Programs.

10. Consent to Use Applicant/Participant Photograph in WIC Program Materials

The local agency staff shall have the applicant/participant or the parent or guardian of an infant or child participant sign the consent form (Attachment 7.70B) that will allow the WIC Program to produce, reproduce, display, advertise, loan, or otherwise distribute, any and all photographs, films, television productions or other media made by or for the WIC Program, in the public interest, without limitation or reservation.

B. Procedure

The local agency shall abide by the Policy listed above.

Reference:
- 7 CFR 246.25(a)(4)
- 7 CFR 246.26(d)

Attachments:

7.70A Consent for Release of Participant Information
7.70B Consent to Use Photographs, Films, Television Productions or Other Media

Revisions:

Revisions:	12/1/12	Added B8 – B10 and 7.70A & 7.70B.
	10/1/15	Modified B10 and 7.70B from “any or all” to “any and all.”

Maryland WIC Program
Request for Release of Information

I hereby agree that the __________________ WIC Program may release information concerning:

Name: ______________________________ WIC ID Number: ________________

Name: ______________________________ WIC ID Number: ________________

Name: ______________________________ WIC ID Number: ________________

and send this information to:

Name: ______________________________ Organization: ___________________

Telephone: _________________________ Fax: ___________________________

E-mail: ____________________________

Signed: ____ Date: _____________
(Participant/Authorized Representative)

Print Name: __________________________________

Current Telephone Number:____

Local Agency Use:

Information sent by: _____________________________ Date: _____________

Recorded in WOW on: __________________________

Consent to Use Photographs, Films, Television Productions or Other Media

Sample Form

Maryland Department of Health and Mental Hygiene

I/we hereby give to the Maryland Department of Health and Mental Hygiene or its authorized representatives permission to produce, reproduce, display, advertise, loan, or otherwise distribute, any and all photographs, films, television productions, or other media, made by or for them, in the public interest, without limitation or reservation.

____
Signature

____
Name

____
Address

____
Witness Date

If under 21 years of age, signature of parent or guardian is required.

Policy and Procedure Number: 7.80
Effective Date: March 3, 1992
Revised: January 1, 2011

SECTION: **LOCAL AGENCY OPERATIONS AND MANAGEMENT**

SUBJECT: **Local Agency Self Monitoring and Review**

A. Policy

The local agency shall establish a self evaluation system to review and monitor their operations and those of associated clinics or contractors.

B. Procedure

1. The local agency shall review its operations periodically, and at least annually, to determine if local policies and procedures correspond to the Maryland State WIC Program Local Agency Policy and Procedure manual. At a minimum, this evaluation shall include:

    a. Certification procedures will be reviewed periodically, at least annually, to assist CPA and CPPA's to maintain Program standards.

    b. A sample record audit of at least one percent of participant records will be done annually.

    c. An annual audit of signatures on randomly selected check receipts to verify certifications.

2. A local agency may develop self-evaluation tools or use the tools developed by the State Agency (Attachments 7.80A , 7.80B). If a local agency develops self-evaluation tools, they must include the minimum standards contained in the State developed tools

3. Records of self-evaluation shall be maintained by the local agency until the State Agency's Management Evaluation of the local agency is completed.

Attachment(s):
7.80A Local Agency Certification Self Review Tool
7.80B Program Operation Self Review Tool

Reference:
Federal Regulations 7 CFR 246.19 (b) (6)

Revisions:
1/11 Updated Attachment 7.80A

Local Agency Certification Self-Review Tool

Staff Person/Title:________________________________ Date:_________________________

Participant ID Number:____________________________ Category / Age: _________________

Start Time:_________ End Time:__________ Reviewer: ______________________________

Required certification information: Rate Counselor on whether task is completed appropriately

	Y	N	N/A	Comments
Continuity of Care				
Reviewed notes / alerts / goals from previous visit				
Establishing Rapport				
Staff Introduced self / clinic procedures explained				
Displayed understanding for other culture				
Focused on client when translator used				
Ensured Privacy (low voice – close door at client request)				
Offered help when needed (books, toys for child, room to BF etc)				
Used appropriate non-verbal communication				
Used respectful language				
Pre-Cert / Family / Participant Information (spelling, information verified and documented)				
Name, Phone number, Street/Mailing address, Birth date, Family size				
Income verified – Foster Care status documented if applicable				
Voter registration status, internet access status				
Proxy options explained / “Right to sign R&R” box “checked” if needed				
Proof of Identity				
Adjunct Eligibility				
Race / Ethnic Background / Asked about participation in other assistance programs (was purpose of these questions explained)				
Proof of Pregnancy if applicable				
Mother’s ID documented on infant screen if BF / completed BF intake				
Cert Action / Rights and Responsibilities				
Correct Category / Cert Reason / Cert Period assigned and explained				
Information on WIC Folder reviewed (initial visit and as needed)				
Immunization Screen updated – R&R signed at appropriate location				
R&R explained / Client given an opportunity to read – ask questions				
R&R signed correctly by certifier and participant				
Complaint and Fair Hearing Processes reviewed				
Food Prescription / Follow up Appointment / Check issuance				
Appropriate schedule day / clinic confirmed				
Authorized Food List explained / clarified				
Food package assigned appropriate for category / preference – foods explained				
Issue month correct – clients checks eligible to spend on date of appt.				
Appropriate next appointment scheduled				
For new applicants – rules for check use explained – video shown				
Assessment / Nutrition Education				
Height, weight, hemoglobin performed according to P&P				
Infection control procedures followed				
Lead Screening question asked – clarified response if needed				
Appropriate risk factors assigned				

High Risk Form / completed / procedure followed				

kills checklist – Rate Counselor on a scale of 1-3 on how well each skill is performed
Note: Staff is not expected to use every skill with every client – check only those that apply

1 = Needs practice 2 = Meets Objective 3 = Excellent Job	1	2	3	Comments
Assessment / Nutrition Education (continued)				
Reviewed client's medical screen and health history information – asked probing questions to clarify responses				
Avoided spending extensive time on irrelevant information				
Shared findings (Ht/Wt/Iron) in a non-judgmental manner				
Asked open-ended questions to explore client's concerns				
Listened actively and allowed for silence				
Asked about / validated clients concerns / met need				
Maintained focus on desired health (ie healthy pregnancy, active family)				
Used Nutrition Basics info / visual aides to start and guide conversation				
Identified and acknowledged clients strengths (positive behaviors)				
Attempted to foster discussion based on risk factors if nothing offered by client - Provided simple, accurate nutrition message if client receptive				
Limited number of nutrition messages given to client per session				
Tailored message based on client's age, gender, culture and feedback				
Provided handouts to reinforce nutrition message – topics of interest pointed out (don't forget - iron, lead, breastfeeding, formula prep, tooth decay)				
Completed comprehensive assessment prior to providing nutrition education				
Referrals / Setting Goals / Closure				
Referred clients to outside sources when needed (DSS, food banks, BF)				
Worked with client to identify problem behaviors and ideas for change				
Summarized conversation				
Helped client set goal(s) that is specific & realistic for the family's lifestyle				
Documented goals / nutrition topics on the Nutrition Ed screen of WoW				
Restated goal and checked for understanding				
Expressed appreciation for clients time				
Was enthusiastic about following up at next visit				
Documented notes / alerts appropriately				

Follow up with staff member

Parent's / Caregiver's Primary Concern:	Assigned Risk Factors:
Nutrition Topics discussed:	
Suggestions / Feedback / Discussion Sample questions…"Tell me about your rational for the Nutrition Education topics you discussed" "Tell me how you assessed the clients readiness for change"	

Developed by Washington County WIC Program

Program Evaluation
Sample Self-Review Tool

I. General Administration

Communication

_____ Staff meetings held monthly
Last staff meeting held _______.
Minutes kept _____. Attendance recorded _____.

_____ Opportunity is provided at the staff meeting to learn new skills, as well as discuss and/or resolving current issues.

_____ Follow up contacts are made with staff after new material is presented to ensure implementation.

_____ Local agency policies/procedures are consistent with the State Plan and Federal Regulations.

_____ There is a written plan for training staff that includes local and state policies and procedures.

_____ Staff telephone responses to callers are positive and complete.

Staff Satisfaction

_____ Staff given opportunity to express work related needs in staff meeting or private conference.

Client Satisfaction

_____ Routine survey of participant to identify WIC related problems.

_____ Participant problems are quickly resolved.
Current unresolved issues are __________.

Outreach

_____ Continuing process throughout the year.

_____ Log of outreach contacts maintained.
The most recent outreach effort was ______.

Caseload

_____ Caseload maintained within 5% of allotment.

Civil Rights

_____ Yearly civil rights training documented.
Last civil rights training held ________.

II. Financial

Accountability

_____ Receipt of checks verified by someone other than person issuing.

_____ All checks accounted for and monthly inventory completed by someone other than person issuing.

_____ All checks are stored in secure manner at all times.
_____ A random sample of checks are found to be supported by valid certifications.
_____ Data processing equipment kept free of dust, food and drink.

Recordkeeping
_____ Participant and financial records kept according to State policy.
_____ Fair hearing requests/actions filed and logged by year.
_____ Inventory of WIC owned property current.

Reports
_____ Manual/voided checks returned to Data Processing on time.

Budget
_____ Monitored monthly to track expenditures.
_____ Time studies to support Nutrition education expenditures completed quarterly. Last time study completed ______.

III. Nutrition Education
_____ All WIC participants have opportunity for required contact 1 and contact 2.
_____ Education related to participant’s risk.
_____ Professional and paraprofessionals given frequent opportunities to update their skills.
_____ The parent/caregiver of infants certified for one year receive four nutrition education contacts.
_____ High risk referral plan utilized.
_____ Participants or caregivers are provided education materials and/or referrals related to their needs.
_____ Risk code and food package assignment consistently meet standards.
_____ Nutrition Education plan is followed as designed.

Certification
_____ Certification staff observed at least annually to verify that certification standards are met. (See Attachment 7.80A Local Agency Certification Self-Review Tool)
_____ Standards defined by Maryland paraprofessional training program are consistently met.
_____ Certification time frames meet State and federal standards.

IV. Program Operation and Compliance

Vendor Relations
_____ Informal vendor visits occur to foster communication sand problem resolution.
_____ Vendors monitored regularly.

_____ Results of monitor visit maintained in log.
_____ Vendor problems resolved quickly. Current vendor problems that are not resolved are ____.
_____ Ongoing random reviews of vendor files are conducted and documented.

Check Utilization

_____ Checks redeemed appropriately on monitor visit.
_____ Participant reported redemption problems resolved quickly.

Security

_____ Data Processing equipment is secured against theft and unauthorized use.
_____ Computer access is restricted to authorized personnel by appropriate use of passwords.
_____ Telephone numbers (for modems), passwords, security keys and related items are restricted to authorized personnel.
_____ Backups of WIC data are performed on a regular basis and stored in a safe, secure location.
_____ Logs are maintained to track the location and movement of Data Processing equipment.

Comments:

Coordinator: ___________________________ Date completed:__________.

Policy and Procedure Number: 7.81
Effective Date: October 1, 2002
Revised Date: October 1, 2014

SECTION:	**LOCAL AGENCY OPERATIONS AND MANAGEMENT**
SUBJECT:	**State Monitoring and Review of Local Agency**

A. Policy

The State Agency shall conduct an evaluation of each local agency at least once every two years to determine compliance with the Local Agency Policies and Procedures. The evaluation shall include reviews of management, certification, nutrition education, participant services, civil rights compliance, accountability, financial management systems, food and delivery systems, Farmers' Market Nutrition Program (FMNP) and participant files.

B. Procedure

1. The State Office shall:

   a. Notify the local agency coordinator electronically of the management evaluation 60 calendar days prior to their scheduled management evaluation month. The notification shall include a questionnaire (Attachment 7.81A) that the local agency shall complete and return to the State Agency 30 calendar days prior to the scheduled management evaluation month.

      The notification may include instructions for the local agency to send copies of reports and/or materials with the completed questionnaire.

   b. Contact the local agency coordinator and schedule dates and locations for on-site visits to the local agency WIC clinics and the administrative office.

   c. Utilize Management Evaluation Review Form Cycle 1 (Attachment 7.81B) or Management Evaluation Review Form Cycle 2 (Attachment 7.81C). Both forms evaluate each functional area of local agency operations but each form focuses on different aspects of local agency operations. The forms will be used in alternate local agency evaluations.

d. Conduct an exit interview with the local coordinator to review any findings and observations made during the evaluation.

e. Provide a written report to the administrative head of the local agency within 60 calendar days after the completion of the evaluation.

f. Respond to the corrective action plan submitted by the Local Agency within 30 calendar days after receipt.

g. Conduct, if necessary, a follow up review within 6 months after approval of the corrective action plan to ensure that corrective action measures are implemented.

h. Provide written notification of closure of the review.

2. The Local Agency shall:

   a. Submit the completed questionnaire and any requested materials to the State Agency 30 calendar days prior to the scheduled management evaluation month.

   b. Permit State Agency evaluators to conduct on-site reviews of a minimum of 20 percent of the clinics in each local agency.

   c. Permit State Agency evaluators to observe local agency staff determining an applicant's eligibility and providing Program benefits including secondary nutrition education.

   d. Locate any documents that the State Agency evaluators need to review.

   e. Submit a corrective action plan, including implementation timeframes, within 60 days of receipt of the State Agency report, when such report contains a finding of noncompliance.

Attachments:
7.81 A Pre Management Evaluation Questionnaire
7.81 B Management Evaluation Review Form Cycle 1
7.81 C Management Evaluation Review Form Cycle 2

Reference:

246.19(b)(1) – (4)

Revisions:

10/06 - Attachment 7.81B- Revised Management Evaluation Forms
10/07 - Attachments 7.81 A, B, C, and E
10/10 – Attachment 7.81 A-number 5 removed reference to 'module' and changed to Competency Checklists.
Attachment 7.81B-number 38 added "reference materials available."
Attachment 7.81C-Changed to records value correctly removed reference to length/height/weight, number 38 added 'completed, ' incorporated area to list primary concern of participant, assigned risk factors, nutrition topics discussed and feedback section.
7.81E Removed references to Building on Basics, Nutrition Basics, Breastfeeding Basics and replaced with WIC WISE II, Competency Checklist completed, Grow & Glow, Nutritionists Meeting & Breastfeeding Meeting Attendance.
Revised Attachment 7.81G.
Added Attachments 7.81H trough N.
Added "including the Farmers' Market Nutrition Program (FMNP) policy and procedures." In section B.1.f.
Changed attachments in Section B.2.b to read "Attachments 7.81B-N."
Added Reference 246.19(b)(1) – (4)
10/11 – Revised Attachment C to delete digital scale, converts fractions of pounds correctly as needed, changed edges to both flat sides, reworded cleans work area and if blood spills occur following OSHA/MOSH guidelines, deleted uses WFP brochure and replaced with Uses Authorized Foods List at initial certification or as needed, added Peer Counselor Referral form completed by participant (if applicable), added provides breastfeeding support (if applicable), added using participant focused counseling, added initially certified and or as need, added nutrition and breastfeeding.
Attachment D - Added to title Breastfeeding, added in WOW to last statement on page 2.
Added Attachments P & Q
10/12 Revised Attachment 7.81G Financial Management
10/14 Revised policy to reflect new review process; deleted all attachments, added new 7.81A, 7.81B and 7.81C

Unit	Pre-ME Questionnaire	P&P #	Management Evaluation Question	Audit Cycle	Policy Met	Comments
Analytics & Communications	Pre-ME Questionnaire	1.00	Provides documentation showing the State Analytics & Communications Coordinator materials developed by Local Agency staff.	Mandatory		
Analytics & Communications	Pre-ME Questionnaire	1.10	Provides documentation showing consultation with local Health Department or parent agency for guidance prior to creating social media account(s).	Mandatory		
Analytics & Communications	Pre-ME Questionnaire	1.10	Contacts the Communications Team prior to the establishment of account(s).	Mandatory		
Analytics & Communications	Pre-ME Questionnaire	1.10	Establishes both an Account Administrator and Content Moderator for social media account(s).	Mandatory		
Analytics & Communications	Pre-ME Questionnaire	1.10A	Does not use private messaging between the local agency account holder and the public.	Mandatory		
Nutrition	Pre-ME Questionnaire	2.03	Maintains a list of the names, addresses, and telephone numbers by date and by priority of all applicants who are wait listed after they are certified.	Mandatory		

Unit	Pre-ME Questionnaire	P&P #	Management Evaluation Question	Audit Cycle	Policy Met	Comments
Nutrition	Pre-ME Questionnaire	2.03	Contacts the individuals on the waiting list by priority and date order, schedules appointments for those applicants who telephoned and mail food instruments to those who were certified and placed on the waiting list.	Mandatory		
Nutrition	Pre-ME Questionnaire	2.09	Maintains processing standards when an applicant requests an appointment.	Mandatory		
Nutrition	Pre-ME Questionnaire	2.11	Documents participants who appealed the termination of benefits before the date entered on Ineligibility Notice and continues to receive WIC benefits until the Hearing officer reaches a decision or the certfication period expires, whichever occurs first.	Mandatory		
Nutrition	Pre-ME Questionnaire	2.18	Maintains files of the required documents from WIC Oversees Programs for a period of 3 1/2 years.	Mandatory		
Nutrition	Pre-ME Questionnaire	2.19	Mails food instrument to the participant, if needed, but under no circumstances shall the ID Folder be mailed with the food instruments. The ID Folder must be mailed separately (certified, return receipt requested) to ensure protection from theft.	Mandatory		

Unit	Pre-ME Questionnaire	P&P #	Management Evaluation Question	Audit Cycle	Policy Met	Comments
Nutrition	Pre-ME Questionnaire	2.21	Determines and documents that the homeless facility meets WIC requirements.	Mandatory		
Nutrition	Pre-ME Questionnaire	2.21	Documents that homeless facilities are contacted at least every six months to ensure continued compliance and requests homeless facility notify the local agency if it ceases to meet any of these conditions.	Mandatory		
Nutrition	Pre-ME Questionnaire	2.21	Determines if homeless facility, which was not previously determined, meets WIC requirements.	Mandatory		
Nutrition	Pre-ME Questionnaire	2.25	Mails the completed voter registration application, if applicant agrees, with date stamp on each completed card in the two sections the applicant filled in and forwards the card within 5 days to the appropriate registration official.	Mandatory		
Nutrition	Pre-ME Questionnaire	2.25	Provides regular, visible means for collecting voter registration applications.	Mandatory		
Nutrition	Pre-ME Questionnaire	3.05	Inventories and tracks returned and re-issued formula properly.	Mandatory		
Nutrition	Pre-ME Questionnaire	3.05	Documents donated formula one-month prior to expiration to designated organizations.	Mandatory		

Unit	Pre-ME Questionnaire	P&P #	Management Evaluation Question	Audit Cycle	Policy Met	Comments
Vendor	Pre-ME Questionnaire	4.04	Follows guidelines for mailing food instruments: All food instruments: must be mailed via First Class mail, must be mailed in a standard business size "check security" type envelope which contains the return address of the local WIC agency and the statement "Address Correction Requested", may not be automatically forwarded by the Post Office to participants who have had a recent change of address; instead, the envelope must be returned to the local agency for the appropriate follow-up.	Mandatory		
Nutrition	Pre-ME Questionnaire	5.02	Documents refusals of a participant or a participant’s caregiver, to attend or participate in nutrition education in the participant's WOW record.	Mandatory		
Nutrition	Pre-ME Questionnaire	5.02	Conducts and provides an annual assessment of participant views concerning the effectiveness of secondary nutrition education.	Mandatory		
Nutrition	Pre-ME Questionnaire	5.03	Develops process for staff to routinely monitor the status of high risk participants.	Mandatory		
Nutrition	Pre-ME Questionnaire	5.03	Uses an approved referral form for performing high risk services and manual certifications.	Mandatory		
Nutrition	Pre-ME Questionnaire	5.03	Utilizes WOW Help for special procedures for the Care Plan.	Mandatory		

Unit	Pre-ME Questionnaire	P&P #	Management Evaluation Question	Audit Cycle	Policy Met	Comments
Nutrition	Pre-ME Questionnaire	5.05	Provides an updated list of community agencies that provide substance abuse counseling and treatment. Provides this information to women participants at certification/mid-certification, or recertification.	Mandatory		
Breastfeeding	Pre-ME Questionnaire	5.09	Designates Local Agency Breastfeeding Coordinator who is a CPA with breastfeeding expertise.	Mandatory		
Breastfeeding	Pre-ME Questionnaire	5.09	Disseminates breastfeeding promotion information to and from the State Agency.	Mandatory		
Breastfeeding	Pre-ME Questionnaire	5.09	Assists with training in breastfeeding promotion and support for local agency and local health department staff.	Mandatory		
Breastfeeding	Pre-ME Questionnaire	5.09	Establishes and utilizes a referral system with other health professionals within the health department and community to provide support to breastfeeding women.	Mandatory		
Breastfeeding	Pre-ME Questionnaire	5.11	Calls participant if Hospital-Grade Electric Pump is not returned in 1 month. If an extension is requested, documents on paper log or in participant's WOW record. Follows procedure if unable to reach participant by phone.	Mandatory		

Unit	Pre-ME Questionnaire	P&P #	Management Evaluation Question	Audit Cycle	Policy Met	Comments
Breastfeeding	Pre-ME Questionnaire	5.11	Cleans returned breast pump motors and outer casing each time the motor is returned.	Mandatory		
Breastfeeding	Pre-ME Questionnaire	5.11	Checks to assure each hospital-grade electric pump is functioning properly.	Mandatory		
Breastfeeding	Pre-ME Questionnaire	5.12	Insures that staff members who give out breastfeeding aids are trained in their appropriate use and are able to effectively educate participants on the proper use of the breastfeeding aids.	Mandatory		
Breastfeeding	Pre-ME Questionnaire	5.13	Designates peer counselor coordinator, if local agency has peer counselor program.	Mandatory		
Breastfeeding	Pre-ME Questionnaire	5.13	Recruits and hires peer counselors based on job descriptions developed by the State Agency.	Mandatory		
Breastfeeding	Pre-ME Questionnaire	5.13	Trains peer counselors using the Maryland WIC Peer Counselor Training Program prior to independent contact with WIC participants.	Mandatory		
Breastfeeding	Pre-ME Questionnaire	5.13	Works outside of the local agency WIC clinic or business hours as requested by local agency for peer counselor programs.	Mandatory		

Unit	Pre-ME Questionnaire	P&P #	Management Evaluation Question	Audit Cycle	Policy Met	Comments
Breastfeeding	Pre-ME Questionnaire	5.13	Partners with community resources to extend breastfeeding support beyond the WIC clinic. Peer counselor programs should also network with community lactation consultants.	Mandatory		
Breastfeeding	Pre-ME Questionnaire	5.15	Meets with each employee within *two months after each employee completes Grow and Glow, Part 2, to discuss what breastfeeding support roles each sees the employee taking on. (Local Agency Breastfeeding Coordinator or her designee, the Breastfeeding Peer Counselor Coordinator or other staff IBCLC)	Mandatory		
Breastfeeding	Pre-ME Questionnaire	5.15	Meets with the Local Agency Coordinator to communicate the outcome of the discussion.	Mandatory		
Analytics & Communications	Pre-ME Questionnaire	7.00	Prints the nondiscrimination statement (including the discrimination complaint procedure) on all WIC-related materials that are disseminated to applicants, participants, outreach/referral contacts, and the general public (leaflets, brochures, bulletins, news media PSAs, application forms, nutrition education materials).	Mandatory		
IT	Pre-ME Questionnaire	7.40	Maintains a record of all software licenses for software installed on WIC Computers.	Mandatory		

Unit	Pre-ME Questionnaire	P&P #	Management Evaluation Question	Audit Cycle	Policy Met	Comments
IT	Pre-ME Questionnaire	7.41	Maintains a file of IRMA Policy Acknowledgement forms for all staff. Presents security awareness training and maintain appropriate documentation.	Mandatory		
Nutrition	Pre-ME Questionnaire	7.62	Installs, maintains, and checks for accuracy according to the manufacturer's specifications. Trains staff on the use and maintenance of the equipment (scales and stadiometer).	Mandatory		
Nutrition	Pre-ME Questionnaire	7.64	Makes available protective gear such as aprons, lab coats and protective eyewear for staff that request it.	Mandatory		
Nutrition	Pre-ME Questionnaire	7.64	Keeps a written copy of the LA infection control procedures in the clinic.	Mandatory		
Nutrition	Pre-ME Questionnaire	7.64	Has procedure in place to document blood work data within 90 days of certification.	Mandatory		
Analytics & Communications	Pre-ME Questionnaire	7.65	Has at least one, but no more than two, staff person(s) with access to online ordering.	Mandatory		
Training Center	Pre-ME Questionnaire	7.66	Requires that a CPA review the records for all certifications completed by a staff member who has not completed the paraprofessional/ professional training.	Mandatory		

Unit	Pre-ME Questionnaire	P&P #	Management Evaluation Question	Audit Cycle	Policy Met	Comments
Analytics & Communications	Pre-ME Questionnaire	7.70	Receives signed consent to use applicant/participant photos for WIC materials and Analytics & Communications.	Mandatory		
Analytics & Communications	Pre-ME Questionnaire	7.70	Receives signed consent to use applicant/participant letter, electronic mail, voice mail or other social media for WIC materials and Analytics & Communications.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Analytics & Communications	Off Site	1.00	Targets the highest priority target groups with outreach plan.	Mandatory		
Analytics & Communications	Off Site	1.00	Identifies and contacts organizations that have a significant WIC eligible population to facilitate referrals.	Mandatory		
Analytics & Communications	Off Site	1.00	Provides evidence of outreach activities.	Mandatory		
Analytics & Communications	Off Site	1.00	Announces the availability of Program benefits annually.	Mandatory		
Analytics & Communications	Off Site	1.00	Submits the Local Agency Outreach Log to the State Outreach Coordinator each month by the required deadline.	Mandatory		
Analytics & Communications	Off Site	1.00	Submits the annual Outreach Plan covering the upcoming SFY by the required deadline.	Mandatory		
Analytics & Communications	Off Site	1.10	Aligns Social Media account(s) content with the vision and mission of the WIC Program.	Mandatory		Monitored continuously
Analytics & Communications	Off Site	1.10	Assures posts focus on WIC related topics.	Mandatory		
Analytics & Communications	Off Site	1.10	Provides proper credit to the source of information.	Mandatory		Monitored continuously
Analytics & Communications	Off Site	1.10	Structures the social media account optimally. (see https://www.facebook.com/help/387958507939236/)	Cycle 1		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Analytics & Communications	Off Site	1.10	Uses strong passwords on Social Media accounts.	Cycle 1		
Analytics & Communications	Off Site	1.10A	Uses only one Facebook page.	Mandatory		
Analytics & Communications	Off Site	1.10A	Sets up account as a page.	Mandatory		
Analytics & Communications	Off Site	1.10A	Assures that the Twitter avatar is consistent with the local agency Facebook page image.	Mandatory		Monitored continuously
Analytics & Communications	Off Site	1.10A	Takes all precautionary measures to ensure Twitter privacy.	Mandatory		
Analytics & Communications	Off Site	1.10A	Does not have a YouTube channel.	Mandatory		Monitored continuously
Analytics & Communications	Off Site	1.10A	Does not have a blog.	Mandatory		Monitored continuously
Analytics & Communications	Off Site	1.10A	Leaves privacy and account settings as formatted by the state.	Cycle 1		
Analytics & Communications	Off Site	1.10A	Uses standardized responses between participants and the local agency page administrator.	Cycle 1		
Analytics & Communications	Off Site	1.10A	Monitors page routinely.	Cycle 1		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Analytics & Communications	Off Site	1.10A	Leaves content added by the State.	Cycle 1		
Nutrition	Off Site	3.02	Issues Premature formulas according to procedures required.	Mandatory		
Nutrition	Off Site	3.02	Issues Transitional formulas according to procedures.	Mandatory		
Nutrition	Off Site	3.02	Documents evaluation of need for the formula and authorizes its issuance.	Mandatory		
Nutrition	Off Site	3.02	Ensures procedures are followed when issuing formula.	Mandatory		
Nutrition	Off Site	3.03	Issues formula according to policy for children and women with special dietary needs.	Mandatory		
Nutrition	Off Site	3.03	Documents all required information correctly in WOW on the participant's notes screen.	Mandatory		
Nutrition	Off Site	3.06	Refers to Medical Assistance or REM for tube fed or REM eligible.	Mandatory		
Nutrition	Off Site	3.06	Reviews exempt (special) formula requests for participants who receive Medical Assistance and processes according to policy.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.01	Ensures that local agency employees are aware of the requirement to report possible conflicts of interest to include participation in the WIC Program, serving as a proxy of a WIC participant; employment at a WIC authorized vendor, and ownership of, or relationship to an owner of a WIC authorized store.	Cycle 1		
Vendor	Off Site	4.01	Ensures that local agency employees who are WIC participants or proxies of WIC participants or who have family members or relatives who are WIC participants do not certify themselves, or those for whom they serve as proxies.	Cycle 1		
Vendor	Off Site	4.01	Ensures that local agency employees who are WIC participants or proxies of WIC participants do not issue food instruments or identification folders to themselves, or to the participants for whom they serve as proxies.	Cycle 1		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.01	Ensures that a local agency employee who is employed by, has ownership of, or is a family member or relative of an owner of a WIC authorized vendor is not responsible for routine monitoring of that vendor.	Cycle 1		
Vendor	Off Site	4.01	Obtains a signed WIC Employee Conflict of Interest Statement (Attachment 4.01A) annually and when an employee's status changes to warrant documentation of participation in the WIC Program, serving as a proxy of a WIC participant, employment at a WIC authorized vendor, and ownership of, or relationship to an owner of a WIC authorized store.	Cycle 1		
Vendor	Off Site	4.01	Ensures that the signed forms are available for review during the local agency management evaluation or upon request by the State Agency.	Cycle 1		
Vendor	Off Site	4.01	Requests guidance from the State Agency should it not be immediately clear if an employee's status represents a conflict of interest.	Cycle 1		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.04	Ensures that its control and accountability over all aspects of its handling of food instruments is in accordance with the Food Instrument Accountability section of policy 4.07.	Mandatory		
Vendor	Off Site	4.04	Mails checks with adequate leeway so that they are received by the participants prior to the "First Date To Spend".	Mandatory		
Vendor	Off Site	4.04	Includes a notice in the food instrument mailing reminding the participant not to sign the food instruments until they are redeemed at the authorized stores.	Mandatory		
Vendor	Off Site	4.04	Records the following information in the participant's WIC information system notes for all food instruments that are mailed. a. The fact that the food instrument was mailed. b. The actual date the food instrument was mailed. c. The reason the food instrument was mailed (e.g. endorser was ill or lacked transportation).	Mandatory		
Vendor	Off Site	4.04	Follows the policy and procedure as indicated for lost food instruments for all mailed food instruments reported to the local agency as "not received."	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.04	Mails food instruments to participants in accordance with Section 246.12 (r) (4) of the U.S.D.A. Federal Regulations and COMAR 10.54.01.18 C (5).	Cycle 1		
Vendor	Off Site	4.04	Ensures that the distribution of food instruments by mail is compatible with other WIC benefits.	Cycle 1		
Vendor	Off Site	4.05	Voids food instruments in the WIC information system using one of the pre-established void reasons.	Cycle 1		
Vendor	Off Site	4.07	Assigns the check to the participant using the Manual Check Entry screen in the WIC information system upon receipt of the Missing Issuance Report.	Cycle 1		
Vendor	Off Site	4.07	Researches checks appearing on the Missing Issuance Report and assigns to the participant receiving the checks within 5 business days of receipt of the Missing Issuance Report.	Cycle 1		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.09	Documents the disposition of each check generated (system and manual) on the appropriate check receipt or register. Documentation shall include authorized participant signature and issue and/or void dates. Initiation of the check generation process and custody of the checks should be given to two separate staff members.	Mandatory		
Vendor	Off Site	4.09	Stores all types of printed food instruments (manual checks and system generated checks that haven't been issued to the participant) in a secure place under lock and key.	Cycle 1		
Vendor	Off Site	4.09	Remains physically at all times with food instruments out of secure storage.	Cycle 1		
Vendor	Off Site	4.09	Maintains a Manual Check Log to document the generation of manual checks at the central office and the distribution of checks to clinic sites.	Cycle 1		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.09	Documents on the check receipt and in the participant's WIC information system notes that the checks (list numbers, date of issue, etc.) were issued to the participant or designee, that the required signatures were not obtained in the check register and/or receipt at the time of issuance.	Cycle 1		
Vendor	Off Site	4.09	Follows procedures for issuance of checks to any WIC employee, who is a WIC participant or who is a designee for any WIC participant, in accordance with Policy & Procedure Number 2.20.	Cycle 1		
Vendor	Off Site	4.09	Documents all activities which deviate from the check issuance process in participant’s WIC information system notes as well as in the check receipt and/or register.	Cycle 1		
Vendor	Off Site	4.16	Conducts on-site monitoring visits to at least 10 percent of its authorized food vendors annually on a representative basis according to instructions in attachment 4.13B.	Cycle 1		
Vendor	Off Site	4.16	Monitors potential high-risk and high-risk vendors in accordance with Policy 4.17.	Cycle 1		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.21	Conducts, documents and maintains documentation of vendor monitoring and training in accordance with Policies 4.15, 4.16 and 4.17.	Cycle 1		
Vendor	Off Site	4.21	Forwards copies of documentation of all vendor related contacts and activities to the State Agency in a timely manner.	Cycle 1		
Vendor	Off Site	4.21	Maintains confidentiality related to all vendor files.	Cycle 1		
Vendor	Off Site	4.21	Presents vendor related files when asked to review by State or Federal staff.	Cycle 1		
Vendor	Off Site	4.23	Removes a designee at any time for violation of any of the participant abuses.	Cycle 1		
Vendor	Off Site	4.23	Sanctions shall be based on the more serious infraction if more than one kind of infraction, actual or attempted.	Cycle 1		
Vendor	Off Site	4.23	Keeps all offenses under this policy active in the participant's WIC information system record for two years from the date of sanction. No sanction issued over two years prior to the current violation shall be considered in issuing a subsequent sanction.	Cycle 1		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.23	Encourages vendors to lodge complaints against participants, parents, caretakers, or designees who violate or attempt to violate Program Procedures and Regulations.	Cycle 1		
Vendor	Off Site	4.23	Notifies the participant, parent, caretaker, or designee in writing of any alleged abuse.	Cycle 1		
Vendor	Off Site	4.23	Investigates and documents each alleged situation within 30 days of its occurrence.	Cycle 1		
Vendor	Off Site	4.23	Investigates within 30 days of receipt of anonymous tips of alleged participant, caretaker, or designee abuse. If the alleged abuse cannot be verified, a sanction cannot be imposed. In such cases, counseling may be the only appropriate option.	Cycle 1		
Vendor	Off Site	4.23	Exhausts all avenues for remedying the offense if the participant is an infant or a child. He/she should not be disqualified for the abuses of his/her parent, caretaker or designee.	Cycle 1		
Vendor	Off Site	4.23	Uses of the WIC information system generated Education and Warning letters to notify a participant, caretaker, or designee or applicant who is to receive a warning.	Cycle 1		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.23	Sends a written advance notice of disqualification at any time during certification not less than 15 days before the disqualification, stating the reasons for this action and the participant's right to a fair hearing.	Cycle 1		
Vendor	Off Site	4.23	Sends all warning or sanction letters via both Certified Mail-Return Receipt Requested and regular mail.	Cycle 1		
Vendor	Off Site	4.23	Continues to provide benefits to participants who appeal the disqualification within the 15-day advance adverse action notification period until the hearing official reaches a decision adverse to the participant, or the certification period expires, whichever occurs first.	Cycle 1		
Vendor	Off Site	4.23	Advises participants who have requested a fair hearing of the time and place of the hearing at least 10 days prior to the hearing date.	Cycle 1		
Vendor	Off Site	4.23	Sends a warning or denial of application, which includes the necessary appeal notification (while applicants cannot be disqualified).	Cycle 1		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.23	Imposes sanctions on applicants that are comparable to and do not exceed sanctions applied to participants for similar abuses.	Cycle 1		
Vendor	Off Site	4.23	Does not deny the right to reapply for abusive applicants who are denied participation for a period longer than three months.	Cycle 1		
Vendor	Off Site	4.23	Reports physical abuse incidents towards the vendor, clinic or agency staff, and/or property to the police.	Cycle 1		
Vendor	Off Site	4.23	Disqualifies the designee and issues a warning letter to the particpant or the caretaker in cases of program abuse by a designee.	Cycle 1		
Vendor	Off Site	4.23	Ensures that the participant's Notices of Eligibility/Ineligibility bear the signature of the adult participant, caretaker, or designee and submits a list of food instrument numbers and issue dates to the State Office. Sends disqualification notice and forwards all documentation to the State Agency.	Cycle 1		
Vendor	Off Site	4.23	Allows a disqualified participant to reapply for Program benefits at the end of the disqualification period or when full restitution of any remittance due is made or a repayment schedule is agreed upon according to policy.	Cycle 1		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.27	Performs an investigation of all food instruments listed on the report to determine if checks were improperly voided, or if there are any indications of fraud or abuse. Takes corrective action if checks were improperly voided, immediately contacts the State Agency if there appears to be intentional fraud and or abuse committed by a participant or local agency staff person and reports all findings to the State Agency by the requested due date.	Cycle 1		
Vendor	Off Site	4.27	Ensures that staff are appropriately trained and monitored to prevent over-issuance of benefits and that participants are counseled in the event that an over-issuance occurs.	Cycle 1		
Vendor	Off Site	4.27	Submits corrective action plan to the State Agency if voided checks are redeemed in 2 consecutive months. The corrective action plan must include, at a minimum, a summary of the actions taken by the local agency to reduce or prevent the recurrence of the redemption of voided checks.	Cycle 1		
Nutrition	Off Site	5.02	Provides according to policy acceptable formats for delivering the secondary contact.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Nutrition	Off Site	5.03	Develops a written procedure to ensure that participants identified as at high nutritional risk receive a care plan.	Mandatory		
Nutrition	Off Site	5.03	Documents counseling by the CPA according to policy.	Mandatory		
Nutrition	Off Site	5.03	Documents refusal of high risk services by the participant, caregiver or designee.	Mandatory		
Nutrition	Off Site	5.03	Documents in the Care Plan all appropriate and timely information provided to the participant regarding their high risk status according to policy.	Mandatory		
Nutrition	Off Site	5.06	Develops and submits Nutrition/Breastfeeding Services Plan to the State Nutrition Services Unit according to guidelines in policy.	Mandatory		
Nutrition	Off Site	5.06	Submits changes to Nutrition/Breastfeeding Services Plan according to recommendations provided from the state office. Hard copy is kept at the State Office.	Mandatory		
Nutrition	Off Site	5.08	Ensures contact is made with nutrition education specialist and/or breastfeeding coordinator to discuss development or procurement of items used with WIC participants.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Nutrition	Off Site	5.08	Follows policy in selecting appropriate materials are developed or purchased for WIC participants.	Mandatory		
Nutrition	Off Site	5.08	Uses current USDA nondiscrimination statement on all developed publications as indicated.	Mandatory		
Nutrition	Off Site	5.08	Makes copies of approved nutrition education or breastfeeding promotion materials available to the State WIC Office for LA sharing.	Mandatory		
Nutrition	Off Site	5.08	Follows guidelines with regards to considering specific equipment prior to purchase.	Mandatory		
Breastfeeding	Off Site	5.09	Attends quarterly Breastfeeding Coordinator Meetings.	Mandatory		
Breastfeeding	Off Site	5.09	Develops and implements the breastfeeding component of the local agency annual nutrition services plan.	Mandatory		
Breastfeeding	Off Site	5.09	Sends all staff (except peer counselors) to WIC WISE 1, WIC WISE 2, and Grow and Glow (parts 1 and 2) as a part of their new employee breastfeeding training.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Breastfeeding	Off Site	5.09	Issues one can of formula powder per month from WIC for an infant less than 1 month old with appropriate documentation for a specific breastfeeding complication. All infants provided one can of infant formula powder during the first month of life must have a recommendation from either an IBCLC or physician and those with latch-on difficulty, poor suck, or feeding difficulty must be receiving follow-up with a lactation consultant.	Mandatory		
Breastfeeding	Off Site	5.11	Considers factors in determining whether to provide a manual breast pump or an a/c adapter/electric pump to a participant.	Mandatory		
Breastfeeding	Off Site	5.11	Maintains log (on paper or in participant's WOW record) to document when a breast pump is returned.	Mandatory		
Nutrition	Off Site	5.11	Maintains logs (on paper or in participant's WOW record) to document who received and reason for receipt Hospital-Grade and Electric Breast Pumps.	Mandatory		
Breastfeeding	Off Site	5.12	Documents each issuance under BF Aids on the BF Support breastfeeding screen.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Breastfeeding	Off Site	5.12	Follows-up with participant to determine progress within two working days.	Mandatory		
Breastfeeding	Off Site	5.13	Counsel WIC participants about normal breastfeeding issues. Peer counselors will follow the contact guidelines and protocols provided to them during the Maryland WIC Peer Counselor Training Program to determine frequency of contact with participants and issues to be discussed for specific concerns.	Mandatory		
Breastfeeding	Off Site	5.13	Documents contacts per contact guidelines in Att. 5.13A by peer counselors and amount of breastfeeding using the Maryland WIC Program WOW system or, when not available, using a paper documentation form.	Mandatory		
Breastfeeding	Off Site	5.13	Attends Breastfeeding Peer Counselors & Peer Counselor Coordinators Meetings four times a year.	Mandatory		
Breastfeeding	Off Site	5.15	Updates Breastfeeding Support Roles Table throughout the year and submits with Nutrition/Breastfeeding Services Plan.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	6.01	Enters time studies in WOW. The reports are checked quarterly by Financial Unit. Any omissions or deficiencies are immediately addressed.	Mandatory		
Financial	Off Site	6.01	Enters data on the appropriate time study screens in WOW.	Mandatory		
Financial	Off Site	6.01	Enters all types of leave on the time study screens in WOW.	Mandatory		
Financial	Off Site	6.01	Follows the definition of Standard and Non-Standard work schedules in completing the time studies.	Mandatory		
Financial	Off Site	6.01	Abides by the frequency of time studies for their different categories of staff.	Mandatory		
Financial	Off Site	6.01	Certifies that all data is complete and correct (staff person).	Mandatory		
Financial	Off Site	6.01	Reviews and approves all data that was entered (supervisor).	Mandatory		
Financial	Off Site	6.01	Completes the Salary Calculations Worksheet correctly.	Mandatory		
Financial	Off Site	6.01	Uses the percentages calculated at the bottom of the Quarterly Time Study Percentages Report to allocate salary and fringe expenditures as well as expenditures in other appropriate line items.	Mandatory		
Financial	Off Site	6.02	Obtains approval for all equipment purchases.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	6.02	Offers equipment purchased with WIC funds that is no longer needed to other programs according to the established priority.	Mandatory		
Financial	Off Site	6.02	Reports broken equipment to the Financial Unit, updates attachment 6.02A and disposes of it according to the policies.	Mandatory		
Financial	Off Site	6.02	Reports stolen equipment to the Financial Unit and updates attachment 6.02A according to the policies including a comment about theft.	Mandatory		
Financial	Off Site	6.03	Complies with allowable cost as covered in the questions for the procedures listed in P&P 6.05 Analytics & Communications, NE, and Breastfeeding Promotion Items.	Mandatory		
Financial	Off Site	6.03	Describes how incentive items listed in the Annual Nutrition Services Plan will be used and what participant category will receive them.	Mandatory		
Financial	Off Site	6.04	Reviews compliance to this policy when receiving reports for temporary staff assigned to the local agency (Financial Unit).	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	6.05	Ensures purchased items have value as breastfeeding promotion and support that equal or outweigh other uses.	Mandatory		
Financial	Off Site	6.05	Ensures items purchased for staff present a WIC Analytics & Communications, nutrition education or breastfeeding message and contain the local WIC agency name and contact information (telephone number or web site).	Mandatory		
Analytics & Communications	Off Site	6.05	Ensures purchased items have a WIC specific message that targets the potentially eligible population.	Mandatory		
Analytics & Communications	Off Site	6.05	Ensures purchased items are normally seen in public.	Mandatory		
Analytics & Communications	Off Site	6.05	Ensures that purchased items contain the USDA nondiscrimination statement on publications or other printed materials.	Mandatory		
Analytics & Communications	Off Site	6.05	Ensures purchased items have value as Outreach devices that equal or outweigh other uses.	Mandatory		
Analytics & Communications	Off Site	6.05	Ensures purchased item include WIC contact information such as the state or local agency name, address, and/or telephone number.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Analytics & Communications	Off Site	6.05	Ensures purchased items constitute or show promise of an innovative or proven way of encouraging WIC participation.	Mandatory		
Financial	Off Site	6.05	Ensures purchased items were at a reasonable and necessary cost with a total cost per item of less than $4.00.	Mandatory		
Analytics & Communications	Off Site	6.05	Ensures purchased items contain a WIC specific message that targets participants.	Mandatory		
Nutrition	Off Site	6.05	Ensures purchased items have a clear and useful connection to particular WIC nutrition education messages.	Mandatory		
Nutrition	Off Site	6.05	Ensures purchased items either convey information to be considered educational or are utilized by participants to reinforce nutrition education contacts.	Mandatory		
Breastfeeding	Off Site	6.05	Ensures purchased items have a clear and useful connection to promoting and supporting breastfeeding among current WIC participants.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Breastfeeding	Off Site	6.05	Ensures purchased items either convey information that encourages and supports breastfeeding in general, informs participants about the benefits of breastfeeding, or offers support and encouragement to women to initiate and continue breastfeeding.	Mandatory		
Financial	Off Site	6.05	Ensures items purchased for staff used when staff travel throughout the community and participate in various cooperative functions that target WIC population and not used primarily in the clinic.	Mandatory		
Financial	Off Site	6.06	Ensures all WIC personnel listed in the approved budget file appear on the payroll.	Mandatory		
Financial	Off Site	6.06	Ensures all personnel charged to WIC on the agency payrolls completed a time study.	Mandatory		
Financial	Off Site	6.06	Ensures that daily backup documentation agree with the Summary of Time Study Hours in the budget file.	Mandatory		
Financial	Off Site	6.06	Documents the salary costs available for employees who split their time between WIC and another program on a regular schedule (only required to do time studies one month per quarter).	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	6.06	Ensures the WIC Program is charged only for the hours worked for WIC and provides back-up documentation.	Mandatory		
Financial	Off Site	6.06	Documents the salary costs available for employees who split their time between WIC and another program NOT on a regular schedule (daily time studies required all year).	Mandatory		
Financial	Off Site	6.06	Ensures the WIC Program was charged only for the costs for hours worked in WIC and provides back-up documentation.	Mandatory		
Financial	Off Site	6.06	Ensures the backup documentation agree with the expenditures reported on quarterly report.	Mandatory		
Financial	Off Site	6.08	Ensures a MBE or SBR was used whenever possible.	Mandatory		
Financial	Off Site	6.08	Ensures all new equipment purchased and assigned an inventory number are listed on the Schedule of Equipment Costs (4542G) in the WIC Program Budget Package.	Mandatory		
Financial	Off Site	6.08	Ensures a minimum of three bids were received when purcahasing an item or service.	Mandatory		
Financial	Off Site	6.09	Ensures Vehicle Mileage Log (6.09A) is maintained.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	6.09	Documents all travel to conduct WIC Program business including site visited and miles traveled.	Mandatory		
Financial	Off Site	6.09	Ensures vehicles are used only to conduct WIC Program business.	Mandatory		
Financial	Off Site	6.09	Ensure employees show commute miles if they took the car home.	Mandatory		
Financial	Off Site	6.09	Ensures that drivers who used privately owned vehicles for official WIC Program business are reimbursed in accordance with the DBM approved rate.	Mandatory		
Financial	Off Site	6.09	Ensures one half the ordinary standard rate was used when approriate.	Mandatory		
Financial	Off Site	6.09	Ensures drivers are not reimbursed for communting miles as well as commute miles while conducting WIC business leaving from and returning to their home.	Mandatory		
Financial	Off Site	6.09	Ensures all drivers complete and submit a Vehicle Mileage Log with their request for reimbursement.	Mandatory		
Financial	Off Site	6.10	Ensures official travel expenditures (trasportation, lodging, and phone) are reimbursed in accordance with the regulations set forth by the Department of Budget and Management.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	6.10	Ensures meal allowances for employees while on travel are properly reimbursed at the rates established by DBM.	Mandatory		
Financial	Off Site	6.10	Ensures registration receipts are submitted with reimbursement request.	Mandatory		
Analytics & Communications	Off Site	7.00	Notifies program availability to minority and grassroots organizations.	Mandatory		
Financial	Off Site	7.00	Reviews Civil Rights Responsibilities policy at staff meetings periodically. Monitors staff to ensure adherence to policy.	Mandatory		
Financial	Off Site	7.00	Ensures access to clinic for disabled individuals.	Mandatory		
Financial	Off Site	7.00	Provides civil rights training.	Mandatory		
Financial	Off Site	7.00	Provides a copy of the sign in sheet, agenda, and outline of the civil rights presentation given.	Mandatory		
Financial	Off Site	7.01	Reports any complaints of discrimination in the past two years.	Mandatory		
Financial	Off Site	7.01	Submits the correct complaint form within established time frames.	Mandatory		
Financial	Off Site	7.21	Review caseload reports to determine if caseload is achieved.	Mandatory		
Financial	Off Site	7.21	Describes procedure to contact pregnant women who do not keep their appointment.	Mandatory		

Management Evaluation Review Form
Cycle 1

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
IT	Off Site	7.40	Uses WIC computers for WIC/work related purposes only.	Mandatory		
IT	Off Site	7.41	Installs up-to-date State anti-virus software on computers.	Mandatory		
IT	Off-Site	7.41	Submits Staff Data Sheets in a timely manner.	Mandatory		
IT	Off-Site	7.41	Assigns system access appropriately for users.	Mandatory		
IT	Off Site	7.43	Monitors and orders the check stock and MICR toner so an emergency request is not made.	Cycle 1		
Training Center	Off Site	7.60	Insures all WIC CPPA's and new CPA's to attend New Employee Training.	Mandatory		
Training Center	Off Site	7.60	Provides the WIC CPPA's and new CPA's training that is supervised by a CPA who has successfully completed competency checklists.	Mandatory		
Training Center	Off Site	7.60	Provides closely supervised supervision during training to the new CPA and CPPA during certifications.	Mandatory		
Training Center	Off Site	7.60	Observes new CPA and CPPA and completes and signs competency checklists.	Mandatory		
Training Center	Off Site	7.60	Provides the Training Center Coordinator with original competency checklists for review.	Mandatory		
Training Center	Off Site	7.61	Attends the State WIC Conference as scheduled.	Mandatory		Mandatory when conference is held.

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
WIC Director	Off Site	7.61	Attends the monthly local agency coordinators' meeting (local agency coordinator or a designated reprentative).	Mandatory		
Nutrition	Off Site	7.61	Attends State sponsored trainings as scheduled.	Mandatory		
Analytics & Communications	Off Site	7.65	Requests permission prior to placing manual orders.	Cycle 1		Would address immediately if notified by distribution center
Analytics & Communications	Off Site	7.65	Submits the proper order form for all manual orders.	Cycle 1		
Training Center	Off Site	7.66	Submits Data Request forms by the deadline to register.	Mandatory		
Training Center	Off Site	7.66	Uses the procedures, guidelines and materials found in the “Become WIC WISE Local Agency Manual”. Local agencies will send the completed and signed trainer’s checklists from the “Become WIC WISE “ manual with the new employee on the first day of WIC WISE part 1 training.	Mandatory		
Training Center	Off Site	7.66	Instructs new employees to attend WIC WISE part 1 before attending WIC WISE part 2.	Mandatory		
Training Center	Off Site	7.66	Instructs employees hired since the previous training to attend WIC WISE Training part 1. Instructs staff who perform, supervise or evaluate certifications to attend WIC WISE Training part 2.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Training Center	Off Site	7.66	Contacts the Training Center Coordinator for more information when a new employee is unable to attend the complete WIC WISE training.	Mandatory		
Training Center	Off Site	7.66	Instructs CPAs hired since the previous training to attend New CPA training.	Mandatory		
Training Center	Off Site	7.66	Instructs all new employees hired since the previous training to attend Grow and Glow training (except beastfeeding peer counselors).	Mandatory		
Training Center	Off Site	7.67	Signs the temp's timesheet and faxes to the Training Center by the published deadline included with the confirmation.	Mandatory		
Training Center	Off Site	7.67	Concerns regarding performance or attendance of temporary staff are forwarded to the staff at the Training Center.	Mandatory		
Training Center	Off Site	7.67	Contacts the Training Center at any time to discuss requests for temporary staff.	Mandatory		
Financial	Off Site	7.70	Reports suspected cases of child abuse.	Mandatory		
Financial	Off Site	7.70	Receives signed request before releasing participant information.	Mandatory		
Financial	Off Site	7.70	Releases participant information to participants or the parents or guardian when requested.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	7.70	Submits subpoenas to State WIC Office for approval.	Mandatory		
Financial	Off Site	7.70	Requires participant to submit a signed request to release information.	Mandatory		
Financial	Off Site	7.70	Provides participant information to other State WIC agencies when requested.	Mandatory		
Financial	Off Site	7.80	Conducts annual reviews of its clinic operations. Obtain copy of a completed form.	Mandatory		
Financial	Off Site	7.80	Conducts annual reviews of its staff. Obtain a copy of completed form with staff name blocked out.	Mandatory		
Financial	Off Site	7.80	Conducts an annual sample record audit of at least one percent of participant records. Ask for documentation and record date of last audit.	Mandatory		
Financial	Off Site	7.80	Uses the State supplied tool to monitor clinics and staff or uses a form including the minimum standards contained in the State developed tools.	Mandatory		
Financial	Off Site	7.90	Describes how the local agency instructs staff on the three key components of providing quality customer service.	Mandatory		
Financial	Off Site	7.90	Describes how the local agency ensures staff meet the following objectives of high quality customer service.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	7.90	Describes how the local agency is committed to providing good customer service.	Mandatory		
Financial	Off Site	7.90	Resolves all customers' needs with the fewest number of calls possible.			
Financial	Off Site	7.91	Documents that the local agency resolves customer complaints within two days of receipt of the complaint.	Mandatory		
Financial	Off Site	7.91	Knows the chain of command in resolving customer complaints.	Mandatory		
Financial	Off Site	7.91	Conducts surveys in the clinics or offices (health department or non-profit health services) that allows a participant to provide anonymous comments.	Mandatory		
Financial	Off Site	8.00	Submits receipt form to the State Department of Agriculture for the last calendar year.	Mandatory		
Financial	Off Site	8.00	Trains staff annually on the distribution of FMNP checks to the participants.	Mandatory		
Financial	Off Site	8.00	Provides instructions on how to use the FMNP checks to staff.	Mandatory		
Financial	Off Site	8.00	Distributes the FMNP checks within the authorized time frame.	Mandatory		
Financial	Off Site	8.00	Reports lost or stolen checks following instructions on notifying the State Office on the required form.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Analytics & Communications	Off Site	1.00	Targets the highest priority target groups with outreach plan.	Mandatory		
Analytics & Communications	Off Site	1.00	Identifies and contacts organizations that have a significant WIC eligible population to facilitate referrals.	Mandatory		
Analytics & Communications	Off Site	1.00	Provides evidence of outreach activities.	Mandatory		
Analytics & Communications	Off Site	1.00	Announces the availability of Program benefits annually.	Mandatory		
Analytics & Communications	Off Site	1.00	Submits the Local Agency Outreach Log to the State Outreach Coordinator each month by the required deadline.	Mandatory		
Analytics & Communications	Off Site	1.00	Submits the annual Outreach Plan covering the upcoming SFY by the required deadline.	Mandatory		
Analytics & Communications	Off Site	1.10	Aligns Social Media account(s) content with the vision and mission of the WIC Program.	Mandatory		Monitored continuously
Nutrition	Off Site	1.00	Has a cooperative agreement with any local hospital, and if so, conducts outreach and certification at the hospital. P&P 2.36	Cycle 2		
Analytics & Communications	Off Site	1.10	Assures posts focus on WIC related topics.	Mandatory		
Analytics & Communications	Off Site	1.10	Provides proper credit to the source of information.	Mandatory		Monitored continuously

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Analytics & Communications	Off Site	1.10	Reviews the social media applications' management and security help files. (See https://www.facebook.com/help/325807937506242/)	Cycle 2		
Analytics & Communications	Off Site	1.10	Keeps social media accounts separate from any other application(s).	Cycle 2		
Analytics & Communications	Off Site	1.10A	Uses only one Facebook page.	Mandatory		
Analytics & Communications	Off Site	1.10A	Sets up account as a page.	Mandatory		
Analytics & Communications	Off Site	1.10A	Assures that the Twitter avatar is consistent with the local agency Facebook page image.	Mandatory		Monitored continuously
Analytics & Communications	Off Site	1.10A	Takes all precautionary measures to ensure Twitter privacy.	Mandatory		
Analytics & Communications	Off Site	1.10A	Does not have a YouTube channel.	Mandatory		Monitored continuously
Analytics & Communications	Off Site	1.10A	Does not have a blog.	Mandatory		Monitored continuously
Analytics & Communications	Off Site	1.10A	Works with the State to co-administrate the Facebook account.	Cycle 2		
Analytics & Communications	Off Site	1.10A	Takes all precautionary measures to ensure Facebook privacy.	Cycle 2		
Nutrition	Off Site	2.37	Provides orientation to volunteers regarding the importance of maintaining the confidential nature of participant information and assures that they sign a confidentiality statement.	Cycle 2		
Nutrition	Off Site	2.37	Volunteers are not permitted to drive local agency vehicles.	Cycle 2		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Nutrition	Off Site	2.37	Adheres to any additional policies/procedures pertaining to the use of volunteers required by the health department/agency.	Cycle 2		
Nutrition	Off Site	2.37	Provides orientation to dietetic interns regarding the importance of maintaining the confidential nature of participant information and assures that they sign a confidentiality statement. Does not permit dietetic interns to drive local agency vehicles. Assigns appropriate learning activities to dietetic interns. Assures that actual provision/performance of services by dietetic interns is supervised by a CPA who is present at the time the service is provided or performed.	Cycle 2		
Nutrition	Off Site	3.02	Issues Premature formulas according to procedures required.	Mandatory		
Nutrition	Off Site	3.02	Issues Transitional formulas according to procedures.	Mandatory		
Nutrition	Off Site	3.02	Documents evaluation of need for the formula and authorizes its issuance.	Mandatory		
Nutrition	Off Site	3.02	Ensures procedures are followed when issuing formula.	Mandatory		
Nutrition	Off Site	3.03	Issues formula according to policy for children and women with special dietary needs.	Mandatory		
Nutrition	Off Site	3.03	Documents all required information correctly in WOW on the participant's notes screen.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Nutrition	Off Site	3.06	Refers to Medical Assistance or REM for tube fed or REM eligible.	Mandatory		
Nutrition	Off Site	3.06	Reviews exempt (special) formula requests for participants who receive Medical Assistance and processes according to policy.	Mandatory		
Vendor	Off Site	4.04	Ensures that its control and accountability over all aspects of its handling of food instruments is in accordance with the Food Instrument Accountability section of policy 4.07.	Mandatory		
Vendor	Off Site	4.04	Mails checks with adequate leeway so that they are received by the participants prior to the "First Date To Spend".	Mandatory		
Vendor	Off Site	4.04	Includes a notice in the food instrument mailing reminding the participant not to sign the food instruments until they are redeemed at the authorized stores.	Mandatory		
Vendor	Off Site	4.04	Records the following information in the participant's WIC information system notes for all food instruments that are mailed. a. The fact that the food instrument was mailed. b. The actual date the food instrument was mailed. c. The reason the food instrument was mailed (e.g. endorser was ill or lacked transportation).	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.04	Follows the policy and procedure as indicated for lost food instruments for all mailed food instruments reported to the local agency as "not received."	Mandatory		
Vendor	Off Site	4.05	Counsels staff who have voided food instruments in the WIC information system that have also been redeemed (Policy and Procedure 4.23) and provides appropriate follow-up to the State Agency.	Cycle 2		
Vendor	Off Site	4.05	Verifies periodically that checks that are identified as voided on a check receipt are likewise voided in the WIC information system.	Cycle 2		
Vendor	Off Site	4.08	Reviews the Food Checks Rejected Report monthly for checks rejected due to improper use by participants.	Cycle 2		
Vendor	Off Site	4.08	Issues WIC information system generated Education, Warning, and or Disqualification Notices to participants in accordance with sanction procedures specified in Policy and Procedure 4.23 no later than 30 days after the month in which the violation is reflected.	Cycle 2		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.09	Documents the disposition of each check generated (system and manual) on the appropriate check receipt or register. Documentation shall include authorized participant signature and issue and/or void dates. Initiation of the check generation process and custody of the checks should be given to two separate staff members.	Mandatory		
Vendor	Off Site	4.10	Abides by procedures when replacing or over-issuing food instruments.	Cycle 2		
Vendor	Off Site	4.10	Reports to State Agency food instruments that are lost, stolen, missing, destroyed or damaged prior to issuance to the participant.	Cycle 2		
Vendor	Off Site	4.10	Follows procedures to replace checks when checks or previously purchased food items are reported destroyed in a disaster only if written documentation is provided in the form of a report from a fire department, police department or some other governmental agency.	Cycle 2		
Vendor	Off Site	4.10	Follows procedures to document the over-issuance of food instruments in the WIC information system by selecting appropriate over-issuance reason when initiating the request to print an additional set of benefits for the issue month.	Cycle 2		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.13	Designates a Local Agency Liaison Staff Person who will be the Local Agency contact person during and after the vendor authorization process.	Cycle 2		
Vendor	Off Site	4.13	Provides an appropriate number of staff to assist the State Agency in the vendor authorization process.	Cycle 2		
Vendor	Off Site	4.13	Ensures that appropriate staff attends required training(s) on the vendor authorization process.	Cycle 2		
Vendor	Off Site	4.13	Conducts on-site reviews of applicant vendors, as required by the State Agency using the Retail Vendor On-Site Review Form as found in Attachment 4.13A. The completed on-site review forms shall be submitted to the State Agency.	Cycle 2		
Vendor	Off Site	4.13	Assists the State Agency in the vendor training process, as required.	Cycle 2		
Vendor	Off Site	4.13	Distributes lists of authorized vendors to participants.	Cycle 2		
Vendor	Off Site	4.22	Reviews the list of potential matches identified and, to the best of their ability, determine if the enrollee they are adding exists in the WIC information system, prior to saving the new record.	Cycle 2		
Vendor	Off Site	4.22	Reviews the dual participation section of the WIC information system not less than monthly for each clinic to detect and resolve possible dual participants.	Cycle 2		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.22	Contacts the other agency to verify the enrollment and, if indicated, decides the course of action to be taken.	Cycle 2		
Vendor	Off Site	4.22	Initiates the appropriate action as indicated in the participant sanction policy.	Cycle 2		
Vendor	Off Site	4.24	Maintains Vendor resource library.	Cycle 2		
Vendor	Off Site	4.28	Monitors local newspapers or marketplaces to identify advertisements offering infant formula for sale.	Cycle 2		
Vendor	Off Site	4.28	Uses the management information system (MIS) to match the seller's name, phone number, email address, or any other identifying fields to determine if the seller is a WIC participant.	Cycle 2		
Vendor	Off Site	4.28	Confirms that the seller is a WIC participant to the State Agency.	Cycle 2		
Vendor	Off Site	4.28	Contacts the participant to provide notification that he or she: may not sell or give away formula purchased with WIC benefits, must return to the WIC local agency any infant formula provided by WIC that they do not need or are not able to use and must immediately remove the advertisement from the application site(s). If applicable, will be sanctioned in accordance with Policy and Procedure 4.23.	Cycle 2		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Vendor	Off Site	4.28	Documents the contact with the participant in the participant's WIC information system notes.	Cycle 2		
Vendor	Off Site	4.28	Reminds participants when food package changes are made that involve infant formula, that any unused formula should be returned and that it may not be sold or given away.	Cycle 2		
Nutrition	Off Site	5.02	Provides according to policy acceptable formats for delivering the secondary contact.	Mandatory		
Nutrition	Off Site	5.03	Develops a written procedure to ensure that participants identified as at high nutritional risk receive a care plan.	Mandatory		
Nutrition	Off Site	5.03	Documents counseling by the CPA according to policy.	Mandatory		
Nutrition	Off Site	5.03	Documents refusal of high risk services by the participant, caregiver or designee.	Mandatory		
Nutrition	Off Site	5.03	Documents in the Care Plan all appropriate and timely information provided to the participant regarding their high risk status according to policy.	Mandatory		
Nutrition	Off Site	5.06	Develops and submits Nutrition/Breastfeeding Services Plan to the State Nutrition Services Unit according to guidelines in policy.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Nutrition	Off Site	5.06	Submits changes to Nutrition/Breastfeeding Services Plan according to recommendations provided from the state office. Hard copy is kept at the State Office.	Mandatory		
Nutrition	Off Site	5.08	Ensures contact is made with nutrition education specialist and/or breastfeeding coordinator to discuss development or procurement of items used with WIC participants.	Mandatory		
Nutrition	Off Site	5.08	Follows policy in selecting appropriate materials are developed or purchased for WIC participants.	Mandatory		
Nutrition	Off Site	5.08	Uses current USDA nondiscrimination statement on all developed publications as indicated.	Mandatory		
Nutrition	Off Site	5.08	Makes copies of approved nutrition education or breastfeeding promotion materials available to the State WIC Office for LA sharing.	Mandatory		
Nutrition	Off Site	5.08	Follows guidelines with regards to considering specific equipment prior to purchase.	Mandatory		
Breastfeeding	Off Site	5.09	Attends quarterly Breastfeeding Coordinator Meetings.	Mandatory		
Breastfeeding	Off Site	5.09	Develops and implements the breastfeeding component of the local agency annual nutrition services plan.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Breastfeeding	Off Site	5.09	Sends all staff (except peer counselors) to WIC WISE 1, WIC WISE 2, and Grow and Glow (parts 1 and 2) as a part of their new employee breastfeeding training.	Mandatory		
Breastfeeding	Off Site	5.09	Issues one can of formula powder per month from WIC for an infant less than 1 month old with appropriate documentation for a specific breastfeeding complication. All infants provided one can of infant formula powder during the first month of life must have a recommendation from either an IBCLC or physician and those with latch-on difficulty, poor suck, or feeding difficulty must be receiving follow-up with a lactation consultant.	Mandatory		
Breastfeeding	Off Site	5.11	Considers factors in determining whether to provide a manual breast pump or an a/c adapter/electric pump to a participant.	Mandatory		
Breastfeeding	Off Site	5.11	Maintains log (on paper or in participant's WOW record) to document when a breast pump is returned.	Mandatory		
Nutrition	Off Site	5.11	Maintains logs (on paper or in participant's WOW record) to document who received and reason for receipt Hospital-Grade and Electric Breast Pumps.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Breastfeeding	Off Site	5.12	Documents each issuance under BF Aids on the BF Support breastfeeding screen.	Mandatory		
Breastfeeding	Off Site	5.12	Follows-up with participant to determine progress within two working days.	Mandatory		
Breastfeeding	Off Site	5.13	Counsel WIC participants about normal breastfeeding issues. Peer counselors will follow the contact guidelines and protocols provided to them during the Maryland WIC Peer Counselor Training Program to determine frequency of contact with participants and issues to be discussed for specific concerns.	Mandatory		
Breastfeeding	Off Site	5.13	Documents contacts per contact guidelines in Att. 5.13A by peer counselors and amount of breastfeeding using the Maryland WIC Program WOW system or, when not available, using a paper documentation form.	Mandatory		
Breastfeeding	Off Site	5.13	Attends Breastfeeding Peer Counselors & Peer Counselor Coordinators Meetings four times a year.	Mandatory		
Breastfeeding	Off Site	5.15	Updates Breastfeeding Support Roles Table throughout the year and submits with Nutrition/Breastfeeding Services Plan.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	6.01	Enters time studies in WOW. The reports are checked quarterly by Financial Unit. Any omissions or deficiencies are immediately addressed.	Mandatory		
Financial	Off Site	6.01	Enters data on the appropriate time study screens in WOW.	Mandatory		
Financial	Off Site	6.01	Enters all types of leave on the time study screens in WOW.	Mandatory		
Financial	Off Site	6.01	Follows the definition of Standard and Non-Standard work schedules in completing the time studies.	Mandatory		
Financial	Off Site	6.01	Abides by the frequency of time studies for their different categories of staff.	Mandatory		
Financial	Off Site	6.01	Certifies that all data is complete and correct (staff person).	Mandatory		
Financial	Off Site	6.01	Reviews and approves all data that was entered (supervisor).	Mandatory		
Financial	Off Site	6.01	Completes the Salary Calculations Worksheet correctly.	Mandatory		
Financial	Off Site	6.01	Uses the percentages calculated at the bottom of the Quarterly Time Study Percentages Report to allocate salary and fringe expenditures as well as expenditures in other appropriate line items.	Mandatory		
Financial	Off Site	6.02	Obtains approval for all equipment purchases.	Mandatory		
Financial	Off Site	6.02	Offers equipment purchased with WIC funds that is no longer needed to other programs according to the established priority.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	6.02	Reports broken equipment to the Financial Unit, updates attachment 6.02A and disposes of it according to the policies.	Mandatory		
Financial	Off Site	6.02	Reports stolen equipment to the Financial Unit and updates attachment 6.02A according to the policies including a comment about theft.	Mandatory		
Financial	Off Site	6.03	Complies with allowable cost as covered in the questions for the procedures listed in P&P 6.05 Outreach, NE, and Breastfeeding Promotion Items.	Mandatory		
Financial	Off Site	6.03	Describes how incentive items listed in the Annual Nutrition Services Plan will be used and what participant category will receive them.	Mandatory		
Financial	Off Site	6.04	Reviews compliance to this policy when receiving reports for temporary staff assigned to the local agency (Financial Unit).	Mandatory		
Financial	Off Site	6.05	Ensures purchased items have value as breastfeeding promotion and support that equal or outweigh other uses.	Mandatory		
Financial	Off Site	6.05	Ensures items purchased for staff present a WIC outreach, nutrition education or breastfeeding message and contain the local WIC agency name and contact information (telephone number or web site).	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Analytics & Communications	Off Site	6.05	Ensures purchased items have a WIC specific message that targets the potentially eligible population.	Mandatory		
Analytics & Communications	Off Site	6.05	Ensures purchased items are normally seen in public.	Mandatory		
Analytics & Communications	Off Site	6.05	Ensures that purchased items contain the USDA nondiscrimination statement on publications or other printed materials.	Mandatory		
Analytics & Communications	Off Site	6.05	Ensures purchased items have value as outreach devices that equal or outweigh other uses.	Mandatory		
Analytics & Communications	Off Site	6.05	Ensures purchased item include WIC contact information such as the state or local agency name, address, and/or telephone number.	Mandatory		
Analytics & Communications	Off Site	6.05	Ensures purchased items constitute or show promise of an innovative or proven way of encouraging WIC participation.	Mandatory		
Financial	Off Site	6.05	Ensures purchased items were at a reasonable and necessary cost with a total cost per item of less than $4.00.	Mandatory		
Analytics & Communications	Off Site	6.05	Ensures purchased items contain a WIC specific message that targets participants.	Mandatory		
Nutrition	Off Site	6.05	Ensures purchased items have a clear and useful connection to particular WIC nutrition education messages.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Nutrition	Off Site	6.05	Ensures purchased items either convey information to be considered educational or are utilized by participants to reinforce nutrition education contacts.	Mandatory		
Breastfeeding	Off Site	6.05	Ensures purchased items have a clear and useful connection to promoting and supporting breastfeeding among current WIC participants.	Mandatory		
Breastfeeding	Off Site	6.05	Ensures purchased items either convey information that encourages and supports breastfeeding in general, informs participants about the benefits of breastfeeding, or offers support and encouragement to women to initiate and continue breastfeeding.	Mandatory		
Financial	Off Site	6.05	Ensures items purchased for staff used when staff travel throughout the community and participate in various cooperative functions that target WIC population and not used primarily in the clinic.	Mandatory		
Financial	Off Site	6.06	Ensures all WIC personnel listed in the approved budget file appear on the payroll.	Mandatory		
Financial	Off Site	6.06	Ensures all personnel charged to WIC on the agency payrolls completed a time study.	Mandatory		
Financial	Off Site	6.06	Ensures that daily backup documentation agree with the Summary of Time Study Hours in the budget file.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	6.06	Documents the salary costs available for employees who split their time between WIC and another program on a regular schedule (only required to do time studies one month per quarter).	Mandatory		
Financial	Off Site	6.06	Ensures the WIC Program was charged only for the costs for hours worked in WIC and provides back-up documentation.	Mandatory		
Financial	Off Site	6.06	Documents the salary costs available for employees who split their time between WIC and another program NOT on a regular schedule (daily time studies required all year).	Mandatory		
Financial	Off Site	6.06	Ensures the WIC Program was charged only for the costs for hours worked in WIC and provides back-up documentation.	Mandatory		
Financial	Off Site	6.06	Ensures the backup documentation agree with the expenditures reported on quarterly report.	Mandatory		
Financial	Off Site	6.08	Ensures a MBE or SBR was used whenever possible.	Mandatory		
Financial	Off Site	6.08	Ensures all new equipment purchased and assigned an inventory number are listed on the Schedule of Equipment Costs (4542G) in the WIC Program Budget Package.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	6.08	Ensures a minimum of three bids were received when purcahasing an item or service.	Mandatory		
Financial	Off Site	6.09	Ensures Vehicle Mileage Log (6.09A) is maintained.	Mandatory		
Financial	Off Site	6.09	Documents all travel to conduct WIC Program business including site visited and miles traveled.	Mandatory		
Financial	Off Site	6.09	Ensures vehicles are used only to conduct WIC Program business.	Mandatory		
Financial	Off Site	6.09	Ensure employees show commute miles if they took the car home.	Mandatory		
Financial	Off Site	6.09	Ensures that drivers who used privately owned vehicles for official WIC Program business are reimbursed in accordance with the DBM approved rate.	Mandatory		
Financial	Off Site	6.09	Ensures one half the ordinary standard rate was used when approriate.	Mandatory		
Financial	Off Site	6.09	Ensures drivers are not reimbursed for communting miles as well as commute miles while conducting WIC business leaving from and returning to their home.	Mandatory		
Financial	Off Site	6.09	Ensures all drivers complete and submit a Vehicle Mileage Log with their request for reimbursement.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	6.10	Ensures official travel expenditures (trasportation, lodging, and phone) are reimbursed in accordance with the regulations set forth by the Department of Budget and Management.	Mandatory		
Financial	Off Site	6.10	Ensures meal allowances for employees while on travel are properly reimbursed at the rates established by DBM.	Mandatory		
Financial	Off Site	6.10	Ensures registration receipts are submitted with reimbursement request.	Mandatory		
Analytics & Communications	Off Site	7.00	Notifies program availability to minority and grassroots organizations.	Mandatory		
Financial	Off Site	7.00	Reviews Civil Rights Responsibilities policy at staff meetings periodically. Monitors staff to ensure adherence to policy.	Mandatory		
Financial	Off Site	7.00	Ensures access to clinic for disabled individuals.	Mandatory		
Financial	Off Site	7.00	Provides civil rights training.	Mandatory		
Financial	Off Site	7.00	Provides a copy of the sign in sheet, agenda, and outline of the civil rights presentation given.	Mandatory		
Financial	Off Site	7.01	Reports any complaints of discrimination in the past two years.	Mandatory		
Financial	Off Site	7.01	Submits the correct complaint form within established time frames.	Mandatory		
Financial	Off Site	7.21	Review caseload reports to determine if caseload is achieved.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	7.21	Describes procedure to contact pregnant women who do not keep their appointment.	Mandatory		
IT	Off Site	7.40	Uses WIC computers for WIC/work related purposes only.	Mandatory		
IT	Off Site	7.41	Installs up-to-date State anti-virus software on computers.	Mandatory		
IT	Off-Site	7.41	Submits Staff Data Sheets in a timely manner.	Mandatory		
IT	Off-Site	7.41	Assigns system access appropriately for users.	Mandatory		
Training Center	Off Site	7.60	Insures all WIC CPPA's and new CPA's to attend New Employee Training.	Mandatory		
Training Center	Off Site	7.60	Provides the WIC CPPA's and new CPA's training that is supervised by a CPA who has successfully completed competency checklists.	Mandatory		
Training Center	Off Site	7.60	Provides closely supervised supervision during training to the new CPA and CPPA during certifications.	Mandatory		
Training Center	Off Site	7.60	Observes new CPA and CPPA and completes and signs competency checklists.	Mandatory		
Training Center	Off Site	7.60	Provides the Training Center Coordinator with original competency checklists for review.	Mandatory		
Training Center	Off Site	7.61	Attends the State WIC Conference as scheduled.	Mandatory		Mandatory when conference is held.

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
WIC Director	Off Site	7.61	Attends the monthly local agency coordinators' meeting (local agency coordinator or a designated reprentative).	Mandatory		
Nutrition	Off Site	7.61	Attends State sponsored trainings as scheduled.	Mandatory		
Training Center	Off Site	7.66	Submits Data Request forms by the deadline to register.	Mandatory		
Training Center	Off Site	7.66	Uses the procedures, guidelines and materials found in the "Become WIC WISE Local Agency Manual". Local agencies will send the completed and signed trainer's checklists from the "Become WIC WISE " manual with the new employee on the first day of WIC WISE part 1 training.	Mandatory		
Training Center	Off Site	7.66	Instructs new employees to attend WIC WISE part 1 before attending WIC WISE part 2.	Mandatory		
Training Center	Off Site	7.66	Instructs employees hired since the previous training to attend WIC WISE Training part 1. Instructs staff who perform, supervise or evaluate certifications to attend WIC WISE Training part 2.	Mandatory		
Training Center	Off Site	7.66	Contacts the Training Center Coordinator for more information when a new employee is unable to attend the complete WIC WISE training.	Mandatory		
Training Center	Off Site	7.66	Instructs CPAs hired since the previous training to attend New CPA training.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Training Center	Off Site	7.66	Instructs all new employees hired since the previous training to attend Grow and Glow training (except beastfeeding peer counselors).	Mandatory		
Training Center	Off Site	7.67	Signs the temp's timesheet and faxes to the Training Center by the published deadline included with the confirmation.	Mandatory		
Training Center	Off Site	7.67	Concerns regarding performance or attendance of temporary staff are forwarded to the staff at the Training Center.	Mandatory		
Training Center	Off Site	7.67	Contacts the Training Center at any time to discuss requests for temporary staff.	Mandatory		
Financial	Off Site	7.70	Reports suspected cases of child abuse.	Mandatory		
Financial	Off Site	7.70	Receives signed request before releasing participant information.	Mandatory		
Financial	Off Site	7.70	Releases participant information to participants or the parents or guardian when requested.	Mandatory		
Financial	Off Site	7.70	Submits subpoenas to State WIC Office for approval.	Mandatory		
Financial	Off Site	7.70	Requires participant to submit a signed request to release information.	Mandatory		
Financial	Off Site	7.70	Provides participant information to other State WIC agencies when requested.	Mandatory		
Financial	Off Site	7.80	Conducts annual reviews of its clinic operations. Obtain copy of a completed form.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	7.80	Conducts annual reviews of its staff. Obtain a copy of completed form with staff name blocked out.	Mandatory		
Financial	Off Site	7.80	Conducts an annual sample record audit of at least one percent of participant records. Ask for documentation and record date of last audit.	Mandatory		
Financial	Off Site	7.80	Uses the State supplied tool to monitor clinics and staff or uses a form including the minimum standards contained in the State developed tools.	Mandatory		
Financial	Off Site	7.90	Describes how the local agency instructs staff on the three key components of providing quality customer service.	Mandatory		
Financial	Off Site	7.90	Describes how the local agency ensures staff meet the following objectives of high quality customer service.	Mandatory		
Financial	Off Site	7.90	Describes how the local agency is committed to providing good customer service.	Mandatory		
Financial	Off Site	7.90	Resolves all customers' needs with the fewest number of calls possible.	Mandatory		
Financial	Off Site	7.91	Documents that the local agency resolves customer complaints within two days of receipt of the complaint.	Mandatory		
Financial	Off Site	7.91	Knows the chain of command in resolving customer complaints.	Mandatory		

Unit	Off Site	P&P #	ME Question	Audit Cycle	Policy Met	Comments
Financial	Off Site	7.91	Conducts surveys in the clinics or offices (health department or non-profit health services) that allows a participant to provide anonymous comments.	Mandatory		
Financial	Off Site	8.00	Submits receipt form to the State Department of Agriculture for the last calendar year.	Mandatory		
Financial	Off Site	8.00	Trains staff annually on the distribution of FMNP checks to the participants.	Mandatory		
Financial	Off Site	8.00	Provides instructions on how to use the FMNP checks to staff.	Mandatory		
Financial	Off Site	8.00	Distributes the FMNP checks within the authorized time frame.	Mandatory		
Financial	Off Site	8.00	Reports lost or stolen checks following instructions on notifying the State Office on the required form.	Mandatory		

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
WIC PROGRAM
POLICY AND PROCEDURE MANUAL

Policy and Procedure Number: 7.90
Effective Date: October 1, 2006

SECTION:	**CUSTOMER SERVICE**
SUBJECT:	**Customer Service Guidelines**

A. Policy

1. Each local agency shall implement a high quality standard of customer service delivery, exemplified by the following three key components:

   a. Reliable points of entry;

   b. Prompt response to customer calls, written correspondence, and requests for services; and

   c. Front-line customer contacts handled with the highest level of professionalism and customer service.

2. Each local agency shall ensure that staff meets the following objectives of high quality customer service:

   a. Treat all customers with courtesy and respect;

   b. Promptly answer all customers' questions with accurate, objective information;

   c. Resolve all customers' needs with the fewest number of calls possible;

   d. Use language that all customers can easily understand; and

   e. Promptly respond to all customers' concerns and complaints.

3. Each local agency is directly responsible for delivery of all customer service commitments. To better support the WIC staff, local agency management shall:

a. Involve staff in customer service improvement initiatives; and

b. Establish a customer-focused culture and infrastructure at all levels of management and internal support.

B. Procedure

Local agencies shall abide by the above policy.

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
WIC PROGRAM
POLICY AND PROCEDURE MANUAL

Policy and Procedure Number: 7.91
Effective Date: October 1, 2006

SECTION:	**CUSTOMER SERVICE**
SUBJECT:	**Customer Service Complaints**

A. Policy

The local agency is responsible for receiving and responding to all customer comments complaints within two business days of receipt. The WIC Coordinator shall determine whether an oral or written response is necessary based on the situation.

B. Procedure

The local agency shall:

1. Resolve customer complaints, except those relating to civil rights discrimination (Refer to Policy and procedure 7.01) at the initial point of contact or within two days of receipt of the complaint. The State Agency will become involved only after the chain of command has been followed at the local agency and there is no mutual resolution, or as referred by the WIC Coordinator.

2. Ensure that all clinic staff:

   a. Has the authority to resolve customer complaints at the initial point of contact or within two business days of the receipt of the complaint; or

   b. Know the chain of command to refer the complaint or complainant.

3. Have customer feedback forms/surveys readily available in the WIC clinic, health department or health services building and in a conspicuous place for customers to provide anonymous comments.