

**Michigan Department of Community Health WIC Management Evaluation-
Administration**

Agency: _____ Clinic ID: _____

Reviewer: _____ Date: _____

MPR	Facility	Yes or N/A	If not, need Action Plan
2.1f	Is the clinic and waiting area clean? (e.g. restrooms supplied with soap, toilet paper, etc.)		
2.1f	Is the clinic and waiting area safe for children? (e.g. covers on electrical outlets, safe changing table, no sharp edges, no open stairways, toys are large enough to prevent choking accidents)		
2.1f	Are there safe places to change diapers, with covered disposal container and handwashing facilities?		
2.1f	Is the clinic and waiting area barrier-free? (Handicapped accessible)		
2.3b	Do facilities afford privacy for income intake, medical history and counseling? (No personal information can be overheard or seen by unauthorized person?) (MI-WIC Policy 1.03)		
2.3a	The local agency protects the names and addresses of clients' confidential information. (MI-WIC Policy 1.03)		
6.5b	Does the facility provide an area conducive to breastfeeding that includes comfortable chairs with arms, and a breastfeeding area away from the entrance? (MI-WIC Policy 4.03)		
Local Agency Required Procedures			
9.1a	Are local agency procedures developed for the following areas completed and reflect current MDCH/WIC policy?		
9.1 a	<u>Disaster Plan</u> (MI-WIC Policy 1.12) <i>a. The local agency shall develop a disaster plan that will include:</i> <i>i. A copy of the parent agency's disaster preparedness plan, if applicable.</i> <i>ii. Local governmental/community agency emergency contact information.</i> <i>iii. State and local WIC staff contact information.</i> <i>iv. A plan for notifying clients of service disruption, relocation and availability of WIC services.</i>		
7.4a	<u>Returned Formula</u> (MI-WIC Policy 8.05) Designate who is monitoring returned formula, and identify procedures for formula security, acceptance, inventory and issuance.		
4.3c	<u>Hematological</u> (MI-WIC Policy 2.16-A. 8)-Specify, "retest" criteria for agency.		

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MPR	Local Agency Required Procedures	Yes or N/A	If not, need Action Plan																
12.1d	<u>Immunization Policy (MI-WIC Policy 6.03)</u> Only required if within a local health department. Local agency policy related to WIC/Immunization program collaboration, update of immunization records, appropriate information on specific childhood preventable diseases, benefits of immunization and CDC recommended immunization schedule will be provided.																		
9.1a	<u>Nutrition Education Collaboration/WIC Agreement - Only</u> if Collaborative Program provides Nutrition Education. Does not include Project FRESH Education. (MI-WIC Policy 5.08 – specifying what activities will be performed, whom to contact...)																		
Certification Timeframes																			
5.2a	How does the agency assure that applicants are scheduled within 10 days for Pregnant or Breastfeeding women and infants, homeless or migrants? Within 20 days for Non-lactating or Child? (MI-WIC Policy 3.01)																		
5.2a	When is the first appointment available for: Instructions: Search for next available appt for new client of each status.																		
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="5" style="text-align: center; vertical-align: middle;">10 days</td> <td>• Pregnant Woman</td> <td></td> <td></td> </tr> <tr> <td>• Breastfeeding Woman</td> <td></td> <td></td> </tr> <tr> <td>• Infant</td> <td></td> <td></td> </tr> <tr> <td>• Homeless</td> <td></td> <td></td> </tr> <tr> <td>• Migrant</td> <td></td> <td></td> </tr> </table>	10 days	• Pregnant Woman			• Breastfeeding Woman			• Infant			• Homeless			• Migrant				
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5.2a	Is the agency using the 10/20 DAY REPORT (CLINIC-Reports-Schedules-10/20 Day Report) to monitor appointment scheduling? If not, suggest they do. <ul style="list-style-type: none"> • Ensure that scheduling staff are recording <u>client</u> choice or not client choice for more than 10/20 days. • Yes = client wanted appt scheduled at the date/time (agency had earlier available appointments). • No = agency had no earlier appointments available (this was next available appointment). 																		
3.1h	Does the agency have NCRD appointments available within 30 days at each site? (MI-WIC Policy 5.06)																		
5.2a	Is the agency in compliance with scheduling within the required timeframes?																		

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MPR	Certification Timeframes	Yes or N/A	If not, need Action Plan
	Are all enrollees and clients reminded of their certification appointments? (MI-WIC Policy 2.20) MI-WIC cards (automatic) Auto dialer/Text message Phone Other:		
5.2a	Are pregnant applicants or clients, who do not keep their appointments, contacted to reschedule? (MI-WIC Policy 3.01) LA contact is required if client selected "do not mail" How? MI-WIC postcard (automatic) Autodialer/Text Message Agency follow-up Other:		
	Does the agency serve all categories? If not, what categories are wait-listed? (MI-WIC Policy 3.02) NPP≥16 yo NPP<16 yo C4 C3 C2 C1		
5.2c	Does the agency with a waiting list provide MDCH/WIC with a monthly update on the number of applicants/clients on the waiting list and the agency activities to address the waiting list? (MI-WIC Policy 3.02)		
5.3d	Does the agency schedule and/or perform IEVAL and CEVAL for infants and children certified for more than 7 months? Are clients who miss IEVAL/CEVAL appointments offered another appointment? Are benefits denied if clients do not complete IEVAL/CEVALS? (MI-WIC Policy 2.17)		
	Are there any recommendations for improvement in scheduling?		
Policy Review			
9.1a	How does Local Agency make staff aware of policy and procedure changes? (circle all that apply) staff meetings training message board forward E-notice circulate copies		
9.1a	Ask staff where WIC Policy can be accessed. Ask staff where current Lab and Anthropometric Manuals can be accessed. If not known or hard copies are maintained, suggest they place shortcut on computers to access WIC Policy or Manual websites.		

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MPR	Returned Formula	Yes or N/A	If not, need Action Plan
7.4a	Does the local agency designate a person responsible for returned formula security, inventory maintenance and distribution? Name:		
7.4b	Does the agency issue returned formula to clients? Y N If so, when does the LA issue returned formula to clients? <ul style="list-style-type: none"> • Transitioning an infant from one formula to another formula? • Tide the family over until certification can be completed? • Other reasons deemed necessary by WIC Coordinator or specified in local agency policy? 		
7.4c	Is the Local Agency using log 8.05A dated 9/2013 to document returned and re-issued formula? Is the formula stored securely?		
7.4c	Does the agency issue returned formula according to the proration amount indicated for the current month's food package? Y N		
7.4c	Does the agency not replace returned formula after the benefit expiration date? (BVT Date)		
7.4c	Does the agency donate returned formula to non-profit programs in the community instead of reissuing formula to clients? Y N		
7.4c	Does the LA issue (some) EBT benefits instead of issuing returned formula to ensure participation is counted? Y N		
7.4c	Are the agency's returned formula logs (9/2013) completed accurately? Comments:		
7.4c	Does the agency require clients to return remaining formula before formula benefits are re-issued?		
Computer Security/Maintenance			
10.1b	Does the agency protect each computer with SSO access with antiviral software? (MI-WIC Policy 10.03)		
10.1b	How does LA ensure that staff doesn't share SSO access/accounts? (MI-WIC Policy 10.03)		
10.1b	Does the agency deactivate staff and remove staff roles for staff who no longer work for WIC? (MI-WIC Policy 10.03) How is this monitored?		

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MPR	Computer Security/Maintenance	Yes or N/A	If not, need Action Plan
2.3a	Does the agency protect client confidentiality through use of privacy screens or other means? (MI-WIC Policy 10.03)		
	Does the clinic perform regular cleaning/maintenance on the computers, scanners and printers (e.g., virus/malware protection, removing ink build-up, paper/dust and paper clips)? If not, suggest they do. Comments:		
Voter Registration MI-WIC Policy 1.10			
5.4d	Are clients who change their address offered to change their voter registration at that time?		
5.4 d	Are clients who change their address over the phone offered a mailed voter registration form or provided the website address? Michigan.gov/vote		
5.4d	Are all voter declination forms retained for 24 months after date on form? (Review file)		
5.4d	Are voter registration forms sent to county or township clerk at least on a weekly basis, or as stated in policy? (Ask/observe)		
Transfer (MI-WIC Policy 3.04)			
5.2b	All transfer applicants are scheduled as soon as possible, so as not to interrupt program benefits, or within 20 days. (MI-WIC Policy 3.04) Review TRANSFER REPORT		
5.3c	For transfer clients, is a current and valid WIC ID, VOC or proof of current enrollment in WIC/WIC Overseas the documentation needed to obtain WIC certification? (MI-WIC Policy 2.03, 2.19, 3.04)		
5.3c	Are eligible transfer clients given 1 year certification periods (from original cert date) and scheduled for infant/child evaluations (IEVAL/CEVAL)? (MI-WIC Policy 3.04)		
5.2b	For clients who transfer to another WIC Program or WIC Overseas and who request certification information, are certification records provided to the new WIC Program without a written release (if bona fide WIC site)? (MI-WIC Policy 3.04) If not, provide consultation.		

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MPR	Breastfeeding Education, Promotion and Support	Yes or N/A	If not, need Action Plan
6.5b	Does the agency evaluate educational materials to determine whether they present breastfeeding in a positive tone, are accurate, and are free of product names or images? (MI-WIC Policy 4.03)		
6.5b	Does the agency have a positive clinic environment – supporting breastfeeding as the preferred method of infant feeding? <ul style="list-style-type: none"> • Positive BF posters prominently displayed in each clinic room and area visible to clients • No formula/bottles displayed (MI-WIC Policy 4.03) 		
6.5c	Does the agency orient and train all staff to be supportive of breastfeeding? (MI-WIC Policy 4.02) <ul style="list-style-type: none"> • Clinic environment policies • Program goals and philosophy regarding BF • Task appropriate info about BF • Ways to promote, protect & support BF to WIC Clients 		
6.5d	Does the agency provide on-going breastfeeding training and staff activities at least quarterly? (MI-WIC Policy 4.02) How is this done? In-Service? Conferences? Including (but not limited to): <ul style="list-style-type: none"> • Initiation and maintenance of BF • Cultural diversity: sensitizing staff to their own attitudes and beliefs about BF, ways to promote, protect & support BF • Information on State and national activities that promote, protect & support BF • Is training documented on staff training log/screen or meeting minutes? 		
6.5e	What breastfeeding promotion and support activities are available to clients prenatally and during the post-partum period? BF classes MSUE Mother to Mother BF Group BF peer Other: (MI-WIC Policy 4.01, 4.03)		
9.1a	Does the agency maintain an up-to-date Breast Pump inventory? Physical inventory required. Who monitors? _____ How often? _____ (MI-WIC Policy 4.04)		

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MPR	Recordkeeping/Accountability Inventory and Log records	Yes or N/A	If not, need Action Plan
9.1a	<p>Does the agency maintain full and complete records concerning program operations, including equipment purchases/Computer Inventory Log/loaner breastpumps/warranty documentation? Review computer inventory (computers, printers, scanners, signature pads)-inventory signed annually by coordinator. Review inventory of WIC purchased item \$2500 or more. (MI-WIC Policy 10.01)</p>		
9.1b	<p>Does the agency retain all records required for audit or litigation until completion of the audit or litigation process, or for specified periods? (MI-WIC Policy 1.06)</p>		
Staff (MI-WIC Policy 1.07)			
2.3a	<p>Does the agency require staff and volunteers to sign the Michigan WIC Employee Confidentiality And Compliance Agreement Signature Form annually? Review file. (MI-WIC Policy 9.02)</p>		
3.1a	<p>Is staff training (i.e., Civil Rights, Breastfeeding, Policy, etc.) ongoing and documented in the MI-WIC User Staff Information Screen using the Staff training button or other record?</p>		
Dual Enrollment/Participation (MI-WIC Policy 3.03)			
5.5a	<p>Does the agency routinely search statewide for the Authorized Person AND the client record before "Precertifying" a new client/family to prevent dual enrollment?</p>		
5.5a	<p>Does the agency resolve the identified dual enrollments within 45 days? What happens if an enrollee appears to be dually enrolled?</p>		
5.5a	<p>Does the WIC/WIC or WIC/CSFP Dual Enrollment Report follow the Dual Enrollment resolution process document that dual enrollees are terminated, if enrolled on more than one program?</p>		
	<p>Does the agency review Dual Enrollment listings to determine if duplicate benefits were issued and mark <u>only</u> those clients for "investigate" (compliance)? If not, suggest they review Dual Enrollment and Compliance archived webcasts to prevent inaccurate Compliance Reporting.</p>		

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MPR	Dual Enrollment/Participation	Yes or N/A	If not, need Action Plan
10.1a	Does the agency follow-up and document any compliance investigation pertaining to possible WIC/WIC dual participation? (MI-WIC Policy 9.01)		
10.1a	Does the agency follow up and document any compliance investigation pertaining to possible WIC/CSFP dual participation? (MI-WIC Policy 9.01)		
	Caseload		
5.2	Utilize the Caseload Management Report/Migrant to monitor agency caseload and compliance with CPBC/contracted caseload. Is the agency averaging 97% of assigned caseload? (Commend if at or above 100%)		
	Compliance		
10.1a	Does the agency record all client compliance allegations on the Add Complaint Screen, or other log? (MI-WIC Policy 9.01, 9.02, 9.03)		
10.1a	Is the Compliance Investigations Screen utilized to document and monitor client compliance issues? Is the investigation of compliance complaints completed in a timely manner as documented on the Client Complaint and Investigation Summary? Are warnings, sanctions and restitution applied when appropriate? For completed investigations, is the resolution/action taken consistent with policy? (MI-WIC Policy 9.01)		
10.1a	Review the MI-WIC Report/Participation/Client Complaint and Investigation Summary(s) to identify any compliance documentation and follow-up concerns. (MI-WIC Policy 9.01)		
10.1b	Does agency prevent staff from certifying or providing benefits to self, relatives, or friends? (ask staff and Coordinator) (MI-WIC 9.03) How?		
10.1b	Does the agency maintain records (not in MI-WIC) of employee complaints on the Employee Compliance Log and employee investigations on the Employee Compliance Investigation Report? Review records to insure they are consistent with policy. (MI-WIC 9.02)		
10.1b	Does the agency enforce "separation of duties", whereby, more than one individual staff is responsible for determining eligibility for all certification criteria and issuing food benefits for the same client? (MI-WIC Policy 1.07, 9.03)		

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MPR	Compliance	Yes or N/A	If not, need Action Plan
10.1b	<p>Does the agency have clinics where one staff member performs the entire certification? Y N</p> <p>1) If yes, is an ongoing audit completed as required by policy (20% of single certifier records)?</p> <p>2) Does the agency retain validation of each client's identity and income documentation?</p> <p>If yes, review audits performed. (MI-WIC Policy 9.03)</p> <p>How does agency handle occasional/emergency single certifier situations, are these included in record reviews?</p>		
Lead Screening (MI-WIC Policy 6.04)			
4.3c	<p>Does the agency screen clients for lead testing and refer if they have not been tested or does the agency perform lead testing on all child clients?</p> <p>___ screen & refers ___ tests all ___ tests MA clients</p>		
9.1a	<p>Ensure that billed funds are attributed to the WIC Program if WIC funded staff performs lead testing.</p>		
12.1	<p>If a record is not found in MCIR, are efforts made to link WIC/MCIR record to client? If not, suggest they do.</p>		
MIHP Outreach			
5.1b	<p>Does the agency routinely provide referrals to MIHP/Healthy Start/NFP/Great Start providers where available? (MI-WIC Policy 6.02)</p> <p>What programs are available:</p>		
<p>Review MIHP Billing Report or ask to ensure that billed funds are attributed to WIC Program if WIC staff performs assessments.</p>			
Fair Hearing (MI-WIC Policy 1.04)			
1.1b	<p>Review fair hearing records, if any. Were policy and time-frames followed?</p>		
1.1 b	<p>Ask staff (if no Fair Hearings have been held) what are the actions to be taken if an applicant or client asks for a Fair Hearing? (c) (MI-WIC Policy 1.04)</p> <p>If not familiar, recommend staff training.</p>		
1.1b	<p>Ask Coordinator to state how they handle request for Fair Hearing from staff/client. If not familiar, recommend staff training.</p>		
1.1a	<p>Observe that Fair Hearing flyers are available (hard copy or MI-WIC) (MI-WIC Policy 1.04B)</p>		

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MPR	High Risk Monitoring (MI-WIC Policy 5.06)	Yes or N/A	If not, need Action Plan
6.6d	How often does the agency review high risk records to ensure that clients are referred for counseling as required? Review monitoring data		
6.6d	Does the monitoring process in place result in improvements in compliance with MI-WIC? Note: must review services at each clinic at least annually per MI-WIC Policy 1.11		
	Comments:		
Annual Review/ME Process			
9.1a	Has the agency completed annual reviews of each clinic and subcontractor using MDCH/WIC or agency developed monitoring tools? (MI-WIC Policy 1.11) Circle: MDCH/WIC ME tools Agency developed		
9.1a	Has the agency provided feedback, training and guidance to agency or sub-contractor staff regarding these annual reviews and findings? (MI-WIC Policy 1.11)		
11.1a	Has the agency completed the Comprehensive Plan of Action from their previous WIC Management Evaluation/Annual review? (MI-WIC Policy 1.05, 1.11)		
11.1b	Has the agency allowed and facilitated access to all requested records and clinics during the current review? (MI-WIC Policy 1.05)		
	Comments:		

Reviewed by: _____ Date: _____

Consultant: _____ Date: _____