

MI-WIC POLICY

Administration

1.0 Administration

1.05 Management Evaluation

Effective Date 08/10/12

PURPOSE: The purpose of this policy is to outline the steps necessary to perform the biennial WIC Management Evaluation (ME) as required by USDA (Federal Regulations 246.19) and the WIC component of the Michigan Local Public Health Accreditation.

A. POLICY

1. WIC Management Evaluation/Accreditation (ACME) and quality assurance activities are designed to maintain compliance with Federal Regulations and Michigan Department of Community Health/WIC Division Policies (MDCH/WIC) as well as improve client services, clinic flow and program efficiency.
2. MDCH WIC Division shall conduct Management Evaluation reviews of each local agency at least every two years.
 - a. The structure of the WIC Management Evaluation consists of:
 - i. Minimum Program Requirements (MPR's)-reflecting main program areas as stated in Federal Regulations and MDCH/WIC contracts and agreements
 - ii. Indicators-reflecting specific program requirements by federal regulation or MDCH/WIC policy
 - iii. Criteria-reflecting components of indicators that are MDCH/WIC policy requirements to fulfill indicators
 - b. If a criterion or indicator under a Minimum Program Requirement is not met, the MPR is "not met" and must be addressed with a Corrective Plan of Action (CPA). The CPA must address the steps to be taken to meet the indicator, including the monitoring process and timeframe for implementation.
3. This WIC Management Evaluation also serves as part of the agency-wide Accreditation review (Accreditation/Management Evaluation referred to as ACME) for agencies that are part of the **Michigan Local Public Health Accreditation Program**. Please see Policy 1.05, Exhibit A.
4. The Management Evaluation shall encompass but not be limited to:
 - a. Program administration
 - b. Certification, including observation of clients
 - c. Nutrition education
 - d. Civil rights, referrals and outreach
 - e. Food benefit and WIC Bridge Card accountability, and food benefit delivery systems
 - f. Record review

- g. Project Fresh, if applicable
 - h. Minimum Program Requirements (MPR) as stated in local agency agreements and determined by MDCH/WIC.
5. Financial and Budget Program Evaluation will be performed by Michigan Department of Community Health Auditors.
6. One clinic at each local agency or 20% of primary clinics and subcontracted clinics shall be reviewed, whichever is greater. Additional on-site reviews may be conducted, as necessary. Primary clinics are clinic sites that provide comprehensive WIC services on a regular basis (i.e. several days a week). Secondary clinics provide services periodically (i.e., weekly, monthly or bi-monthly) and are staffed from the primary clinic. Subcontracted clinics are sites staffed by agencies with whom the Local Agency contracts to provide WIC services within their jurisdiction.
7. The review will be scheduled by the reviewer with the local agency. The reviewer will perform the Management Evaluation by observing client certification and services, reviewing agency records, reports and policies, interviewing staff and clients and documenting their observations and findings on approved tools.
8. Upon completion of the review, the reviewer and local agency staff will discuss a preliminary summary report at the Exit Conference. This report will include special recognition of exceptional program areas, as well as indicators labeled “not met”. The reviewer will explain the reason for the indicator being “not met” and will provide recommendations for a corrective plan of action. The reviewer may also make further suggestions for program improvement not addressed in the ME report during this meeting.
9. The agency will receive a final Management Evaluation report shortly after the completion of the Management Evaluation detailing the findings of the ME. This will report all findings for each MPR including indicators and criteria as “met” or “not met”, the “reason not met” and recommendations for Program improvement for each indicator “not met”.
10. Local agencies with indicators that were “not met” shall submit a Corrective Plan of Action/ME follow-up (CPA) within 30 days of the date of the Management Evaluation Report for each item to MDCH/WIC Division for approval.
 - a. The WIC Division will email a CPA/Management Evaluation Follow up document that lists each item requiring a CPA to the WIC Coordinator. Please see Sample, Policy 1.05 Exhibit B for completion instructions.
 - b. The local agency will develop a CPA for each indicator “not met” including steps to be taken to correct the “reason not met” (i.e., training, observation, record review), how progress will be monitored (record review, observation)

which staff will be responsible for implementation of these steps, and the estimated time frame for completion of each Plan.

- c. The CPA/ME follow up document will be returned to MDCH/WIC for review prior to implementation of the plan. The document shall be returned to the WIC Division Secretary with a cover letter signed by the Health Officer or Agency Director, as well as a copy of the electronic document in Microsoft Word.

11. MDCH/WIC will review the submitted CPA/ME follow up and accept or discuss corrections or modifications to the plan with the local agency. MDCH/WIC will provide an acceptance letter to the agency detailing any agreed upon changes to the plan. Upon acceptance of the CPA, the agency is now able to implement the steps detailed in the CPA(s).
12. After the accepted Corrective Plan of Action(s) (CPA) has been completed and fully implemented for at least 90 days, the Local Agency shall notify the MDCH/WIC Local Agency Consultant. Documentation of each step detailed in the CPA should be retained by the local agency for review (i.e., training dates, meeting agendas and rosters, staff observations/record reviews and feedback provided). Demonstration of the effective resolution of each CPA is required for final approval.
13. The MDCH WIC Division will monitor the CPA's progress and follow up with the local agency. The WIC Local Agency Consultant will give final approval of the Corrective Plan of Action.
14. This CPA implementation and approval process must be completed within 365 days of the ME Exit Conference for final approval. This allows the Local Agency to be in good standing with the WIC Division and be eligible for Accreditation.
15. For agencies that are part of the **Michigan Local Public Health Accreditation Program**, successful completion of the CPA/ME follow up for the most recently completed ME will result in the MPR/Indicator for WIC marked as "Met" for the WIC Section of Accreditation. Please see Policy 1.05 Exhibit A.
16. Agencies that do not complete the Corrective Plan of Action within the stated timeframes shall be subject to the following actions:
 - a. Intensive MDCH/WIC monitoring and consultation of program activities (including annual Management Evaluations) until compliance is met.
 - b. Withdrawal of agreements to provide WIC services in cases where all efforts to meet requirements fail.
 - c. "Not accredited" status, if the Local Agency is within the Accreditation program.

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B. Guidance

1. The following table reflects the planned schedule for each step of the Management Evaluation process. Required timeframes are stated in policy and noted with an * in the table.

Step	Description	Due Date	Staff Assigned
1	Schedule ME (ME week, entrance and exit conference)	By April 1	MDCH/WIC ME reviewer
2	ME scheduled letter and ME checklists sent to LA	30 days prior to ME	MDCH ME secretary
3	ME (observation, checklists, report) Entrance conference Exit conference	Week of ME	MDCH ME reviewer and LA WIC staff
4	ME letter/report to LA	45 days after exit	MDCH/WIC Consultant
5*	Corrective Plan of Action (CPA) addressing “not met”	30 days after date of ME letter/report*	LA Coordinator
6	CPA Acceptance letter	15 days after CPA submitted	MDCH/WIC Consultant
7	LA implements plan		LA Coordinator and Staff
8*	LA Notifies MDCH/WIC Consultant that plan has been fully implemented for at least 90 days*; ready to schedule follow up.	By 300 days past exit conference date	LA Coordinator
9	LA schedules and ME reviewer performs follow up of CPA. All CPA(s) must demonstrate effective resolution.	By 300 days past exit conference date - after LA notification	MDCH ME reviewer and LA WIC staff
10	ME reviewer submits report of the status of each CPA.	10 days after follow up	ME reviewer to MDCH/WIC Consultant
11*	CPA approval or follow up until all citations are approved	BEFORE 365 days* past exit conference date	MDCH/WIC Consultant
12	IF CPA approved on all items, LA eligible for “met” on Accreditation for WIC Section and in good standing with WIC Division.	CPA Completed/Approved before 365 days from ME Exit conference	MDCH/WIC Consultant

References:

Federal Regulations 246.19

Management Evaluation Tools (MPR document and ME chapters)

Michigan Local Public Health Accreditation Program Guidance