Agency:

_Clinic ID: _____

Reviewer: _____ Date: _____

				If no, need
MPR	Facility	Yes	N/A	Action Plan
6.2f	Is the clinic and waiting area clean?			
	(e.g., restrooms supplied with soap, toilet paper, etc.)			
6.2f	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			
0.05	accidents)			
6.2f	Are there safe places to change diapers, with covered disposal			
2.1f	container and handwashing facilities?			
Z. 11	Is the clinic, waiting area and restroom barrier-free?			
2.3b	(Handicapped accessible)			
2.30	Do facilities afford privacy for income intake, anthro and lab procedures, 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'			
2.04	confidential information. (MI-WIC Policy 1.03)			
6.5a	Does the facility provide a private space for breastfeeding			
	and/or expressing milk that includes comfortable seating,			
	electrical outlet, flat surface (table or counter) and cleaning			
	supplies? (MI-WIC Policy 4.01)			
	Local Agency Required Procedures			
9.1a	Are local agency procedures developed for the following areas			
0.1-	completed and reflect current MDHHS/WIC policy?			
9.1a	Disaster Plan (MI-WIC Policy 1.12)			
	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>ii. Local governmental/community agency emergency contact</i>			
	information.			
	iii. State and local WIC staff contact information.			
	iv. A plan for notifying clients of service disruption, relocation,			
	and availability of WIC services.			
7.4c	Returned Formula (MI-WIC Policy 8.05) If LA chooses to			
	donate unused/returned formula to a non-profit agency, the LA			
	must have a State approved policy (using the template),			
	including signature from LA Admin and/or legal counsel.			
4.3c	<u>Hematological</u> (MI-WIC Policy 2.16-A. 8)-Specify, "retest"			
	criteria for agency.			
9.1a	Homeless Facility Agreement- Are there Homeless			
	Shelters/Facilities in the LA service area(s)? Y N			
	Has the agency contacted local facilities and signed the			
	Agreement (Exhibit 2.22A)? (MI-WIC Policy 2.22)			

	Administration	Yes	N/A	If no, need Action
MPR	Local Agency Required Procedures			Plan
12.1d	Immunization Policy (MI-WIC Policy 6.03) Only required if			
	within a local health department.			
	1. Local agency immunization collaboration policies may			
	include the following:			
	a. Immunization promotion methods			
	b. Coordination of services that addresses:			
	i. Assessment of children who are not UTD			
	ii. Provision of information to Pregnant			
	women regarding needed vaccines			
	iii. Provision of information on recommended			
	vaccination schedules			
	iv. Referral for services			
	v. Administration of vaccines			
	c. Provision of immunization training for WIC staff			
	2. Non-health department WIC agencies are encouraged to			
	collaborate with local HD within their jurisdiction to increase			
	immunization rates.			
9.1a	Nutrition Education Collaboration/WIC Agreement – Required			
	if Collaborative Program, i.e. MSUE, provides Nutrition			
	Education, including Project FRESH education. (MI-WIC Policy			
	5.08A – specifies activities performed, whom to contact, etc)			
	Cost to Client (MI-WIC Policy 2.01)			
4.1a	The certification is performed at no cost to the applicant.			
	- No medical referral <i>required</i> for enrollment—infers cost			
	Certification Timeframes			If no, Action Plan needed
5.2a	How does the agency assure that applicants are scheduled			
	within 10 days for PG or Breastfeeding women and infants,			
	homeless or migrant families? Or within 20 days for Non-			
	lactating woman or Child?			
	(MI-WIC Policy 3.01)			
	□Use 10/20 Day report (Clinic/Reports/Schedules/10/20			
	Day)			
	□Scheduler contacts Coordinator for adjustments			
	□ Monitor ISD Referrals for contact within timeframes			
	□Other:			
5.2	Are all authorized persons asked to verify notification			
	preferences?			
5.2c	Does the agency serve all categories? Y N			
	If not, has the agency notified MDHHS/WIC of a Waiting List? (MI-WIC Policy 3.02)			

Michigan Dept. of Health and Human Services WIC Management Evaluation
Administration

	Administration	1		
5.3d	Does the agency schedule and/or perform IEVAL and CEVAL for infants and children certified for 8 months or more?			
5.3d	Are benefits NOT denied if clients do not complete IEVAL/CEVALs? (MI-WIC Policy 2.17)			
MPR	Policy Review	Yes	N/A	If No, need Action Plan
9.1a	How does Local Agency make staff aware of policy and procedure changes? (Check all that apply) staff meetings forward E-notice			
	circulate copies training Ask staff where MI-WIC and LA Policies can be accessed.			
	Returned Formula (MI-WIC Policy 8.05 & 8.05A)			
	<i>Reviewer</i> : Identify local agency (LA) staff responsible for receiving and handling of formula:			
7.4c I, O	Ask or observe and verify the process of formula return:			
7.4c	Verify returned formula matches the type issued in Food Packageobtain printed copy using Food Package Display screen in MI-WIC.			
7.4a	Is the formula stored securely in a locked area, with limited WIC staff access, out of view of clients and in appropriate conditions?			
7.4b	Does the WIC Local Agency (LA) provide replacement EBT formula benefits in accordance with MI-WIC Policy 8.05 (for example, proper amount, via EBT only, etc.)?			
7.4b	Does the agency require clients to return remaining formula before formula benefits are re-issued?			
7.4c	Is all returned formula examined to determine whether eligible for disposal or donation? Including client interview, inspected for dents/damage/tampering, checked for expiration date?			
7.4c	Is all returned formula that is not donated, properly disposed of on the day of receipt?			
7.4c	Does the agency donate returned formula only to non-profit (501(c)(3)) programs in the community?			
7.4c	 Does the LA maintain a paper file with all required documents? IRS Verification of 501(c) (3) Where & how often donating Class II & III proof of training/knowledge, if dispensing Donation receipt with required info Any other communications 			

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Administration

	Administration			
7.4d	Is the MI-WIC Formula Acceptance and Action Log (8.05A) appropriately completed and reviewed monthly?			
	Reviewer: If <i>Action Taken</i> on log is not recorded, does quantity listed match stored formula?			
7.4c	Is MI-WIC Policy 8.05 & LA policy reviewed and training provided annually to all staff?			
MPR	Formula Distribution (MI-WIC Policy 8.10)	Yes	N/A	If no, Action Plan needed
	Has the LA received formula samples? Yes No			
7.5a	If yes, is courtesy/sample formula stored separate from returned formula according to MI-WIC Policy 8.10?			
7.5b	If yes, is distribution of courtesy/sample formula documented according to MIWIC Policy 8.10 using LA Formula Receipt and Distribution Log, Exhibit 8.10A?			
MPR	Computer Security/Maintenance (MI-WIC Policy 10.03)			
10.1b	Does the agency protect each computer with MILogin access with antiviral software?			
10.1b	How does LA ensure that staff doesn't share MILogin access/accounts?			
10.1b	Does the agency remove staff roles for staff who no longer work for WIC? How is this monitored?			
2.3a	Does the agency protect client confidentiality through use of privacy screens or other means?			
	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			
0, I	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 and current proof of residency 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)			

	Administration			
5.2b	For clients who transfer to another WIC Program or WIC Overseas and who request certification information, are certification records or VOC provided to the new WIC Program without a written release (if bona fide WIC site)? (MI-WIC Policy 3.04) If not, provide consultation.			
				If no, need
MPR	Breastfeeding Education, Promotion and Support	Yes	NA	Action Plan
6.5a	Does the agency have a clinic environment that promotes and	105		i iun
0.54	 supports exclusive breastfeeding by displaying breastfeeding educational and promotional materials? Do materials reflect diversity of clients served? Are materials free of formula names, images and/or bottles? Are the materials prominently displayed in areas visible 			
	to clients?			
6.5b	 (MI-WIC Policy 4.01) Does the agency orient and train all staff on their roles and responsibilities in the promotion and support of exclusive breastfeeding? (MI-WIC Policy 1.07, 4.01, 12.01) Breastfeeding policies and agency goals? Training and documentation requirements? Breast pump issuance? 			
6.5d	What breastfeeding promotion and support activities are available to clients prenatally and during the postpartum period? How often? Location BF classes Support Groups Peer Counselors Other: (MI-WIC Policy 4.01, 4.02)			
6.5d	What are the after-hours availability of the Peer Counselor? (e.g. cell phone use, extended clinic hrs-evening, weekends, etc.) (MI-WIC Policy 12.02)			
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)			

r	Administration			
6.5d	Is there a process in place to address the client's			
	breastfeeding concerns prior to a food package or			
	breastfeeding status change?			
	c c			
	Recordkeeping/Accountability			If no, need
	Inventory and Log records			Action
MPR	Inventory and Eog records	Yes	NA	Plan
9.1a	Dese the even of maintain full and complete records	162	NA	Γιατί
9.1a	Does the agency maintain full and complete records			
	concerning program operations, including equipment			
	purchases/Computer Inventory Log/loaner breast pumps			
	/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)			
9.1b	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)			
	Staff (MI-WIC Policy 1.07)			
2.3a	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 9.02A)			
3.1i	Is required staff training ongoing and documented according to			
0.11	MI-WIC Policy 1.07?			
3.1i	Are staff providing nutrition services observed for competency-			
0.11	based nutrition services skills annually?			
	based nutrition services skins annually :			
	Dual Enrollment/Participation (MI-WIC Policy 3.03)			
5.5a	Does the agency routinely search statewide for the Authorized			
0.04	Person AND the client record before "Pre-certifying" a new			
	client/family to <i>prevent</i> dual enrollment?			
5.5a	Does the agency follow the WIC Dual Enrollment resolution			
0.00	process in MI-WIC Policy 3.03?			
10.1a	Does the agency review Dual Enrollment listings to determine			
	if duplicate benefits were issued and mark <u>only</u> those clients			
	for "investigate" (compliance)? (MI-WIC Policy 9.01)			
10.1a	Does the agency follow-up and document any compliance			
10.14	investigation pertaining to possible WIC/WIC dual			
	participation? (MI-WIC Policy 9.01)			
MPR	Caseload			
5.2	Utilize the Caseload Management Report/Migrant to monitor			
0.4	agency caseload and compliance with CPBC/contracted			
	caseload. Is the agency averaging 97% of assigned			
	caseload? (Commend if at or above 100%)%			
L				

	Administration			lf no, need
	Compliance	Yes	N/A	Action Plan
10.1a	Does the agency record all client fraud/compliance allegations on the <i>Add Complaint</i> Screen? (MI-WIC Policy 9.01, 9.02, 9.03)	103		1 1011
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 have clinics where one staff member performs the entire certification? Y N If yes, What clinics:			
	 Is an ongoing audit completed as required by policy? MI-WIC Policy 9.03A (100% IFF/IBP and 20% all others within 14 days) Does the agency scan copies of all documents supporting eligibility into the client's MI-WIC record? Review audits performed. (MI-WIC Policy 9.03) 			
	 3) How are clients identified? Single Cert Report Schedules 			
	 Does the agency do WIC Enrollment in the hospital? Y N How is information obtained? 			
	RequestMedWICWoman'sFormRecordStaffVerbal- Height Weight Hgb			
	Infant's - Lngth, wght & hd circumference			

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Administration			If no Action
Lead Screening (MI-WIC Policy 6.04)	Yes	N/A	If no, Action Plan needed
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? screen & referstests alltests MA clients			
Ensure that billed funds are attributed to the WIC Program if WIC funded staff performs lead testing.			
If a record is not found in MCIR, are efforts made to link WIC/MCIR record to client? If not, suggest they do.			
MIHP Outreach			
Does the agency routinely provide referrals to MIHP/Healthy Start/Nurse Family Partnership/Great Start providers where available? (MI-WIC Policy 6.02) What programs are available:			
Review MIHP Billing Report or ask to ensure that billed funds			
assessments.			
Fair Hearing (MI-WIC Policy 1.04)			
Have you had any fair hearings in the past 2 years? Y N Were policy and timeframes followed?			
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? (MI-WIC Policy 1.04) If not familiar, recommend staff training.			
Are Fair Hearing requests from staff/clients handled according to MI-WIC Policy 1.04?			
Observe that Fair Hearing flyers are available. (hard copy or MI-WIC) (MI-WIC Policy 1.04B)			
Annual Review/ME Process			
Has the agency completed annual reviews of each clinic and subcontractor using MDHHS/WIC or agency developed monitoring tools? (MI-WIC Policy 1.11) Check what is used: MDHHS Annual Review Tools MDHHS/WIC ME tools Agency developed			
	they have not been tested or does the agency perform lead testing on all child clients? screen & referstests alltests MA clients tests MA clients Ensure that billed funds are attributed to the WIC Program if WIC funded staff performs lead testing. If a record is not found in MCIR, are efforts made to link WIC/MCIR record to client? If not, suggest they do. MIHP Outreach Does the agency routinely provide referrals to MIHP/Healthy Start/Nurse Family Partnership/Great Start providers where available? (MI-WIC Policy 6.02) What programs are available: What is Referral process? Review MIHP Billing Report or ask to ensure that billed funds are attributed to WIC Program if WIC staff performs assessments. Fair Hearing (MI-WIC Policy 1.04) Have you had any fair hearings in the past 2 years? Y N Were policy and timeframes followed? Ask staff (if no Fair Hearing have been held) what are the actions to be taken if an applicant or client asks for a Fair Hearing? (MI-WIC Policy 1.04) If not familiar, recommend staff training. Are Fair Hearing requests from staff/clients handled according to MI-WIC Policy 1.04B) Annual Review/ME Process Has the agency completed annual reviews of each clinic and subcontractor using MDHHS/WIC or agency developed monitoring tools? (MI-WIC Policy 1.11) Check what is used: MDHHS Annual Review Tools MDHHS/WIC ME tools	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? screen & referstests alltests MA clients Ensure that billed funds are attributed to the WIC Program if WIC funded staff performs lead testing. If a record is not found in MCIR, are efforts made to link WIC/MCIR record to client? If not, suggest they do. Does the agency routinely provide referrals to MIHP/Healthy Start/Nurse Family Partnership/Great Start providers where available? (MI-WIC Policy 6.02) What is Referral process? What is Referral process? Fair Hearing (MI-WIC Policy 1.04) Have you had any fair hearings in the past 2 years? Y N Were policy and timeframes followed? Ask staff (if no Fair Hearing flyers are available. (hard copy or MI-WIC Policy 1.04) If no familiar, recommend staff training. Are Fair Hearing requests from staff/clients handled according to MI-WIC Policy 1.04? Observe that Fair Hearing flyers are available. (hard copy or MI-WIC) (MI-WIC Policy 1.04? Observe that Fair Hearing flyers are available. (hard copy or MI-WIC) (MI-WIC Policy 1.04? Max the agency completed annual reviews of each clinic and subcontractor using MDHHS/WIC or agency developed monitoring tools? (MI-WIC Policy 1.11) Check what is used: MDHHS/WIC Policy 1.01	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? screen & referstests alltests MA clients Ensure that billed funds are attributed to the WIC Program if WIC funded staff performs lead testing. If a record is not found in MCIR, are efforts made to link WIC/MCIR record to client? If not, suggest they do. MIHP Outreach Does the agency routinely provide referrals to MIHP/Healthy Start/Nurse Family Partnership/Great Start providers where available? (MI-WIC Policy 6.02) What programs are available: What is Referral process? What is Referral process? Have you had any fair hearings in the past 2 years? Y N Were policy and timeframes followed? 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? (MI-WIC Policy 1.04) If not familiar, recommend staff training. Are Fair Hearing requests from staff/clients handled according to MI-WIC Policy 1.048 Annual Review/ME Process Has the agency completed annual reviews of each clinic and subcontractor using MDHHS/WIC or agency developed

MPR				If no, Action
	Annual Review/ME Process cont'd	Yes	N/A	Plan needed
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 Corrective Action Plan (CAP)			
	from their previous WIC Management Evaluation/ Annual			
4 4 4 1	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)			
	High Risk Monitoring (MI-WIC 5.06)			
6.6d	Does the agency review high risk records to ensure that clients			
	are referred for counseling as required?			
	How? Check all that apply:			
	High Risk Record review (at least annually)			
	High Risk Report			
	 Observations/client interviews (at least annually) 			
	□ Other:			
	How often? (at least annually)			
	Review monitoring data			
01.4	Quality Improvement Activities			
QI 1	What Quality Improvement (QI) activities are WIC staff			
	involved?			
	 Nutrition Services Plan 			
	□ Breastfeeding Plan			
	□ Outreach Plan			
	Other data driven QI Project			
	(Nutrition Service Standards, MLPH Accreditation Indicator)			

MDD	Administration	Vaa	If No. nood
MPR	Quality Assurance Laboratory Procedures (interview lab staff and review logs) (MI-WIC Policy 2.16)	Yes	If No, need Action Plan
4.3c	Copy of the MDHHS/WIC Laboratory Manual (dated 8-15-19) in the WIC Clinic or do staff know how to access from the MDHHS/WIC website?		
	HemoCue machine Self-test results (P/F) recorded each day that the machine is used?		
	HemoCue machine cleaned each day it is used (outside & microcuvette holder)?		
	Are high and low control solutions run each week that the machine is utilized and when a new lot number of Microcuvettes is opened?		
	Control solutions stored in the refrigerator (containing no food) until opened and then used and stored properly, according to manufacturer's directions?		
	Does the quality control log contain a record of the lot number, expiration date and acceptable ranges of the controls used?		
	Microcuvettes dated when opened and recorded on QC and Daily log?		
	Microcuvettes or control solutions used before their expiration date?		
	Are testing work surfaces decontaminated with germicide (or freshly prepared 10% bleach solution) at the close of each day and anytime there is evidence of contamination?		
	Are QC logs retained for 3 years and 150 days past the end of the fiscal period?		
4.3c	Is there a CLIA Certificate of Waiver for the WIC lab? (Lab Manual pg. 5)		
	Anthropometric Equipment (MI-WIC Policy 2.15)		
4.3b Infant Scale/	Is a copy of the Anthropometric Measurement Procedures in the WIC Clinic or do staff know how to access from the MDHHS/WIC website? (<i>If not, suggest they do.</i>) DCH - 0730, revised 2/18		
board	Does a recumbent length board have a stable headboard and moveable foot piece?		
	Check the recumbent board for accuracy with the standardized rod. Is the board accurate?		
	Is an approved scale with at least 1 oz. sensitivity used? Is the balance beam scale zero-balanced at least once daily? Is the digital scale zero balanced between each weighing (unless has reweigh feature)? (If digital scale used, is it a "clinic quality" scale?)		
	Has the Infant scale been calibrated within the past 12 months? Date		
<u>e</u>	Is an approved scale with at least 1/4 pound increments used?		
sca	Is the scale on a firm surface?		
Adult+ child scale	Is the balance beam scale zero-balanced at least once daily? Is the digital scale zero balanced between each weighing? (Unless scale has reweigh feature for confirmation).		
	Scales and measurement equipment cleaned on a regular basis?		
	Height board accurate using the standardized rod?		
	Does the measurement board go down far enough so that the small child is measured standing straight and the footboard is aligned with the upper board?		
	Right-angle headboard used? (Either separate or part of a fixed board)		
	Firm surface used for standing?		
	Has the scale been calibrated within the past 12 months? Date		

Reviewed by:

Date: _____

Consultant: _____Date: _____

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