

Utah WIC Policy and Procedures Manual

Section L: Program Operations

L. PROGRAM OPERATIONS

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Section L: Program Operations

L.1. Policy and Procedure Manual

Policy

The following year's Policy and Procedure Manual will be posted for a 30 day public comment period on the Utah WIC website before submission to the USDA. The manual becomes effective upon USDA approval on or after October 1st.

Procedure

- I. The State agency will post the following year's Policy and Procedure Manual (P&P) including proposed changes on the Utah WIC website for a public comment period of 30 days. **The proposed P&P will also be posted on the Utah WIC SharePoint site for staff access.**
 - a. The date that the 30 day comment period will begin will be based upon USDA timelines and may be modified (extended or reduced in length) to meet USDA/FNS deadlines.
 - b. Interested persons may contact the State WIC Agency to determine the date the public comment period will begin; which is typically during mid to late spring. Local agency WIC Directors and Nursing Directors will be notified via e-mail.
 - c. All comments will be forwarded to the State Agency.
- II. Upon completion of the public comment period,
 - a. The State agency will review and respond to comments received and make any revisions deemed necessary by the State agency before the USDA submission deadline.
 - b. Upon submission to the USDA, the State agency will post the revised proposed Policy and Procedure Manual along with responses to the comments received on the Utah WIC website.
- III. The Policy & Procedure Manual will take effect on or after October 1st upon final USDA approval.
 - a. The USDA approved Policy and Procedure Manual will be posted to the Utah WIC website when it becomes effective and will be **posted on the Utah WIC SharePoint site for local WIC clinics to implement.**

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- b. Upon receipt of the approved Policy and Procedure Manual, all WIC staff should review the Summary of Changes document. This may be done individually or as a group.
- c. ~~A hard or electronic copy of the Policy and Procedure Manual must be retained on file in each clinic.~~

L.2. Policy Memorandums and Information Sharing with Local Agencies

Policy: Policy Memorandums

Policy Memorandums will be the standard for how local WIC Directors will be informed of new policy or changes in policy within a fiscal year from the State agency.

Procedure

- I. All Policy Memorandums and Information Memorandums will be sent electronically via e-mail to Local WIC Directors and will be posted on the Utah WIC SharePoint site.
- II. The only exception to this is when the State WIC Program Manager is notified in writing or e-mail that a local WIC Director will be away from their office for an extended period of time. If requested, the Policy Memorandum communications will be sent to a designee on behalf of the local WIC Director.
- III. Draft policy memorandums will be sent to local WIC Directors and will be posted to the Utah WIC website and SharePoint for a 15 day public comment period when there is a significant policy change necessary mid- fiscal year.
 - a. In some instances public comment periods may not be possible due to potential health risks or critical time sensitivity.
- IV. Final Policy Memorandums will be expected to be followed upon receipt, unless otherwise noted at the top of the page with an effective date.
- V. ~~A hard or electronic copy of all Policy and Information Memorandums should be kept on file in each clinic and dated as to when they were shared with staff. Memos from the current and prior fiscal year should be retained at a minimum.~~ Local Agencies must have a process in place to document that applicable staff has reviewed each memo. Compliance with this requirement will be reviewed during routine monitoring visits from the State agency.

Policy: Information Sharing with Local Agencies

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The Utah WIC SharePoint site will be utilized as the primary location for all sharing of information from the State WIC Office to local agencies.

Procedure

I. The Utah WIC SharePoint site can be accessed at: <http://wicshare.health.utah.gov> using VISION system credentials. The WIC SharePoint site is a secure site for Utah WIC employee access only. SharePoint will be updated and maintained by State WIC staff and will contain the following types of information:

a. Announcements from the State Office

b. Calendar

- i. Events
- ii. Meetings
- iii. Conference calls
- iv. Training Seminars
- v. Conferences
- vi. Management Evaluations

c. The WIC Wire newsletter

d. WIC Directories

- i. Local agencies must maintain their own WIC directories current on SharePoint.

e. Issues and discussions

f. Documents for review

g. Special formula ordering

h. Ad hoc reports from VISION

- i. Reports
- ii. Report requests

i. Policy and Procedures (P&P)

- i. Current P&P
- ii. Proposed P&P
- iii. Memos
- iv. Policy Discussion

j. Nutrition Information

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- i. Announcements
- ii. Food and formula recalls
- iii. Formula updates
- iv. Nutrition brochures
- v. Food package information
- vi. Nutrition education materials
- vii. Product Guide
- viii. Nutrition and breastfeeding topic discussions

- k. Staff training modules
 - i. Training modules
 - ii. Training videos
 - iii. Web links to training online
 - iv. VISION system training webinars

- l. Clinic forms

- m. Clinic Forms and Supplies Order Form (UCI Order form)

Policy: Meetings

Local Agencies must have representation at State-Local meetings and conference calls.

Procedure

- I. Local agencies must have representation at the following Utah WIC meetings:
 - a. WIC Director Conference Calls
 - b. Nutrition and Breastfeeding Conference Calls
 - c. Required training (as determined by the State Agency)
 - d. Required conferences (as determined by the State Agency)

L.3. Confidentiality

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 WIC application, certification, or participation, that individually identifies an applicant or participant 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.

WIC information, whether provided by the participant or observed by WIC staff, is protected under the confidentiality provisions of Section 246.26(d) of the WIC Regulations. Examples of observed information include the time and date a participant or applicant was at the WIC clinic, and any aspect of the appearance or apparent condition of persons attending the WIC clinic.

Procedure

- I. Disclosure of Confidential WIC information is limited to:
 - a. Persons directly connected with the administration or enforcement of the program, including persons investigating or prosecuting violations in the WIC program under Federal, State or local authority.
 - i. This includes WIC staff and administrators who are responsible for the ongoing conduct of the program operations.
 - ii. It does not include personnel in the State or Local Health Department who do not have ongoing involvement in the operation or management of the program. Thus, this provision excludes operational personnel not certifying and serving WIC applicants/participants and administrators who do not directly supervise WIC staff.
 - b. The Comptroller General of the United States for audit and examination authorized by law.
 - c. The Executive Director of the Utah Department of Health, who is the chief State health officer, has authorized the sharing of confidential WIC information with representatives of the following programs:
 - i. Medicaid,
 - ii. Head Start/Early Head Start,

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- iii. Data Resources Program,
 - iv. Maternal and Infant Health Program/Utah Pregnancy Risk Assessment Monitoring System (PRAMS),
 - v. Supplemental Nutrition Assistance Program (SNAP) formerly known as the Food Stamp Program,
 - vi. Food \$ense (SNAP-Ed) formerly known as the Food Stamp Nutrition Education Program,
 - vii. Commodity Supplemental Food Program,
 - viii. Tobacco Prevention and Control Program,
 - ix. Baby Your Baby,
 - x. Home Visiting Program (nursing),
 - xi. Immunizations Program,
 - xii. Utah Statewide Immunization Information System (USIIS) (requires signing the USIIS Release Form)
- d. **For foster children only**, representatives of the following programs:
- i. Division of Child and Family Services (DCFS) (requires the foster parent signing the DCFS Foster Child Release Form)
 - ii. Fostering Healthy Children Program (requires the foster parent signing the DCFS Foster Child Release Form)
- II. WIC participants are notified that confidential information may be shared with the above programs by signing the Rights and Responsibilities form unless an additional release form is indicated. The State agency has signed agreements with these programs allowing sharing of information only for the purposes of:
- a. Establishing the eligibility of WIC applicants or participants for the programs that the organization administers;
 - b. Conducting outreach to WIC applicants and participants for such programs;
 - c. 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;
 - d. Streamlining administrative procedures in order to minimize burdens on staff, applicants, or participants in either the receiving program or the WIC Program; and
 - e. Assessing and evaluating the responsiveness of a State's health system to participants' health care needs and health care outcomes.

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- III. If the local agency wishes to share confidential WIC information on a general basis with another program or organization not listed on the Rights and Responsibilities Form, the following is required:
 - a. The local agency must have a signed agreement with the program or organization with which the information is to be shared. This agreement must include assurances that the information will be used only for the purposes listed above and that the information will not be released to a third party. The local agency must have the approval of the State WIC Program Manager to enter into such an agreement. The State WIC Program Manager will seek approval from the Executive Director of the Utah Department of Health before information may be shared.
 - b. Participant's whose information may be released must sign a release form authorizing the release of information. The local agency may not require participants to sign the release form in order to receive WIC benefits.
- IV. If a signed agreement with the program is not in place, and the local agency wishes to share confidential information per participant request, on a case by case basis, the participant must sign a release form authorizing disclosure. A signed release form provides the local agency with the documentation necessary to show that particular information was released per the participant's request with his/her approval.
- V. Participants must be informed at each certification visit or when placed on a wait list that the WIC clinic may contact them via the telephone or mail. If the participant does not wish to be called, document this appropriately in the computer system.
 - a. When leaving a message for a participant, DO NOT make reference to WIC. Teletask may mention WIC as long as it does not specify the participant's name.
 - b. Participants should also be notified that they may receive a postcard or letter in the mail.
- VI. If the clinic receives a telephone call asking to speak to a participant, the staff member should take a name and telephone number and let the caller know that if the person is in the clinic, the message will be delivered. Information acknowledging the person is in the WIC clinic **should not** be given.

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- VII. Participant information may not be released to WIC vendors.
- VIII. Vendor information (whether it is obtained from the vendor or another source) that identifies the vendor, other than the vendor's name, address and authorization status, is also confidential.
 - a. Restricted information on a vendor may only be released to:
 - i. Persons directly connected with the administration of enforcement of the WIC Program or the Food Stamps Program.
 - ii. Persons directly connected with the administration or enforcement of any Federal or State law.
 - iii. A vendor that is subject to an adverse action.
- IX. Participant records are confidential and **must be kept in a locked filing cabinet or in a secure environment within the clinic clinic staff must protect them from unauthorized access within the VISION system.**
- X. Volunteers are considered part of the WIC Program. They may have access to participant information if required by their job assignment.
 - a. Exercise discretion in screening and selecting capable volunteers who would have access to confidential information.
 - b. If a potential volunteer does not appear to be a good candidate for keeping information confidential, there may be other activities that the person can perform that would not include access to participant information.
 - c. All volunteers must sign an agreement to protect the confidentiality of information.
 - i. By signing an agreement, the volunteer would agree to keep information confidential or forfeit the volunteer assignment.
- XI. WIC participants or applicants have the right to access all information provided by the participant or applicant, assuming that any issues regarding custody or guardianship have been settled. This includes WIC participants or applicants who request to see **or copy** his or her own record, or a parent or guardian requesting access to, **or a copy of** a child' record.
 - a. The local agency need not grant the participant or guardian access to any other information in the file or record, such as documentation of income provided by the third parties or any information which

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serves as a staff assessment of the participant's condition or behavior, unless required by State or local law or policy.

- XII. When WIC records are requested in cases of custody from an individual other than the applicant/participant, or from an organization not covered by an information sharing agreement, it is recommended that local WIC agencies consult with their legal counsel. The attorney can then decide who the appropriate individual to sign a release is, and what procedures to follow with respect to the request.
- XIII. State and local agencies are required by law to cooperate with FNS in completing authorized studies.
- XIV. **Subpoenas and Search Warrants.** A subpoena should never be ignored. Failure to respond to a subpoena could result in the State or local agency being found in contempt of court. This could result in the incarceration of or fines against WIC employees. The State or local agency may disclose confidential applicant, participant, or vendor information pursuant to a valid subpoena or search warrant in accordance with the following procedures:
- a. In determining how to respond to a subpoena duces tecum (i.e., a subpoena for documents) or other subpoena for confidential information, the State or local agency must use the following procedures:
 - i. Upon receiving the subpoena, immediately notify the State agency;
 - ii. Consult with legal counsel for the State or local agency and determine whether the information requested is in fact confidential and prohibited by this section from being used or disclosed as stated in the subpoena;
 - iii. If the State or local agency determines that the information is confidential and prohibited from being used or disclosed as stated in the subpoena, attempt to quash the subpoena unless the State or local agency determines that disclosing the confidential information is in the best interest of the Program. The determination to disclose confidential information without attempting to quash the subpoena should be made only infrequently; and, if the State or local agency seeks to quash the subpoena or decides that disclosing the confidential information is in the best interest of the Program, inform the court or the receiving party that this information is confidential and seek to limit the disclosure by:

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1. Providing only the specific information requested in the subpoena and no other information; and,
 2. Limiting to the greatest extent possible the public access to the confidential information disclosed.
- b. In responding to a search warrant for confidential information, the State or local agency must use the following procedures:
- i. Upon receiving the search warrant, immediately notify the State agency;
 - ii. Immediately notify legal counsel for the State or local agency;
 - iii. Comply with the search warrant; and,
 - iv. Inform the individual(s) serving the search warrant that the information being sought is confidential and seek to limit the disclosure by:
 1. Providing only the specific information requested in the search warrant and no other information; and
 2. Limiting to the greatest extent possible the public access to the confidential information disclosed.
- XV. State law requires the reporting of known or suspected child abuse or neglect. WIC staff must release this information to the Department of Human Services, Child and Family Services (DCFS). The DCFS Child Abuse Intake Hotline can be reached at 1-800-678-9399. In addition, it is recommended that WIC clinics follow local agency policy for reporting suspected child abuse.
- XVI. The confidentiality provision does not prohibit the release of information if the information is released in a way that protects the identity of the individuals. Requests for data in aggregate or summary form may be granted, as long as the released information excludes any items which would identify program participants or applicants.

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L.4. Outreach

Policy

Each local agency is responsible for identifying a referral network that includes all organizations and programs that serve low income pregnant, breastfeeding and postpartum women, infants and children. Outreach is conducted in accordance with public notification requirements (see section L.11).

Procedure

- I. Grassroots organizations identified in the referral network must be contacted yearly and educated about WIC.
 - a. At least one or more of the organizations contacted must serve homeless populations.
 - b. All information given to these grassroots organizations must contain the clinic address and telephone number, clinic hours, and the non-discrimination clause.
 - c. It is also recommended that the clinic advertise the availability of evening and/or Saturday appointments.
 - d. Dated copies of letters must be kept on file along with a list of all organizations which were contacted.
 - e. Tracking of outreach activities can be done in the VISION system within the Operations menu, Outreach Log.
- II. All local agencies should place special emphasis on notifying agencies that work with pregnant women, migrant farm workers, homeless individuals, foster parents, protective services, and underserved racial and ethnic groups about the availability of the WIC program.
- III. In addition to basic outreach activities, the clinic may choose to promote the WIC Program in the following ways:
 - a. Health Care
 - i. Hospitals and doctors' offices
 - ii. In-service hospital staff on WIC
 - iii. Labor and delivery discharge packs
 - iv. Childbirth classes

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- b. Internal Outreach
 - i. Bring a friend to WIC
 - ii. Other health department clinic staff (i.e. Immunizations, CSHCN, CHEC, etc.)

- c. Social Service Agencies and other Grassroots Organizations
 - i. Human Services Department
 - ii. SNAP (Food Stamps)
 - iii. Medicaid
 - iv. Daycare Licensing
 - v. Child and Family Services
 - vi. Family Employment Program
 - vii. Department of Workforce Services
 - viii. EFNEP
 - ix. CAP, food banks, homeless shelters
 - x. Gatherings of homeless people
 - xi. Counseling services
 - xii. Family planning
 - xiii. Substance abuse counseling
 - xiv. Child abuse counseling
 - xv. Mental health
 - xvi. La Leche League, local lactation consultants, local pump stations
 - xvii. Lions Club, Junior League, Rotary Club
 - xviii. Refugee Services
 - xix. Community organizations representing racial or ethnic groups

- d. Schools
 - i. PTA/PTSA/PTO
 - ii. School Lunch
 - iii. Head Start
 - iv. Health fairs

- e. Religious organizations
 - i. Any

- f. Businesses
 - i. Any

- g. Meetings
 - i. Health fairs
 - ii. Conferences
 - iii. County fairs

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- IV. Each local agency must maintain a current WIC web site or web page. Other media should be used to the extent possible such as newspapers, radio, television, social networking, pamphlets and fliers.
- V. Web sites and public service announcements should include a description of the services and benefits provided, location of clinics including address, telephone number, hours of operation and the WIC non-discrimination statement.
- VI. State and local agencies will share the responsibility for writing and disseminating press releases. Press releases and/or presentations where the media may be in attendance must be reviewed by the State Agency prior to the sharing of information.
 - a. A copy of the press release must be kept on file. Include the date the article was printed and/or the date(s) the PSA was aired on radio/television.
- VII. Outreach materials are available from the State agency. ~~These materials should be used by all clinics statewide to ensure the public sees WIC as one uniform program.~~
 - a. Local agencies are encouraged to develop additional outreach materials. All publications must be approved by the State agency prior to distribution. Local outreach materials must contain clinic addresses and telephone numbers, clinic hours, and must contain the non-discrimination clause.

L.5. Caseload Management

Policy

Caseload reductions must be made as equitable as possible on a statewide basis to ensure participants have equal access to the program throughout the state. When reductions are necessary, all clinics must follow the same procedure for removing participants. Applicants with the lowest priority will be the first to be placed on a waiting list.

Procedure

- I. The State agency will determine who will be denied WIC benefits during caseload management. The decision will be based on the following criteria: priority, nutrition risk factors, category, age and/or income.
- II. Local agencies will be notified, in writing, of the need for wait lists, the type of list, which priorities are to be placed on the wait list, and the date to implement the list. A local agency may not implement caseload management without written approval.
- III. If participants are to be removed midcert due to caseload management, the state WIC office must contact Food and Nutrition Services for prior approval. Local agencies must notify all participants 15 days in advance that they may be removed from the program due to caseload management.

Policy: Waitlists

During caseload management, each local agency must keep a wait list of all individuals who express interest in receiving WIC benefits, either in person or by telephone.

Procedure

- I. Applicants who are placed on a wait list must be notified of their placement on the list within 20 days of their request.
 - a. A **Notice of Waiting List must be printed from the VISION system** and given or mailed to the applicant at this time. Documentation that the letter was given or sent must be made.

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- II. All wait lists must include the person's name, address, phone number, status, age and date placed on the wait list.
- III. Clinic staff must explain to applicants why placement on a waiting list is necessary, and what it means in terms of the realistic possibilities of receiving benefits, so that it does not create false expectations on the part of the applicant.
- IV. There are two types of wait lists - certified and uncertified. During caseload management, one or both types may be implemented as determined by the State Agency.
 - a. **Uncertified wait lists** include applicants who are interested in applying for the WIC program but have not been screened. These applicants must be placed on the list based on their highest potential priority (Priority 1 for pregnant and breastfeeding women and infants, Priority 3 for children and Priority 4 for postpartum women.) Uncertified wait lists are manually recorded on a log.
 - b. **Certified wait lists** include applicants who have been certified eligible through screening, but whose priority is not currently being served. Certified wait lists will be created by the computer system after the certification information has been entered into the computer. The lists will be grouped by priority.
- V. Participants with a valid VOC who are transferring into the local agency must be placed at the top of the list regardless of priority.
- VI. When funds become available, applicants will be served in order of application, based on risk.
- VII. During caseload management, all applicants must be **referred to other health and social service agencies** such as food banks, SNAP (Food Stamps), soup kitchens, etc.
- VIII. Discontinuation of wait lists will be the decision of the State WIC office. The decision will be based on the availability of funds. Written notification will be provided to the local agencies with instructions as to the date to discontinue wait lists.
 - a. When discontinuing wait lists, applicants on the list are to be contacted in the following manner:
 - i. Locate the list with the highest priority.
 - ii. Contact the first person on the list, either by letter or telephone, scheduling them for an appointment to determine eligibility. It

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- should be made clear to the applicant that this is only the completion of screening and does not mean that they will automatically be put on the program.
- iii. Document that notice was given. This information can be placed directly on the wait list.
 - iv. If an attempt is made to contact an applicant by phone and the individual cannot be reached, a follow up letter must be sent to notify the applicant to complete the screening process. Document that the letter was sent.
 - v. Continue though all lists, contacting each person on the list.
 - vi. Applicants who do not respond to notification after 15 days from the date of the letter or phone notice may be crossed off the list. Applicants who miss their appointment may also be crossed off the list.
 - vii. If the applicant is no longer categorically eligible when being removed from the wait list (i.e. child is 5), they should be sent a **Notice of Ineligibility**. Document that the letter was given or sent.
- IX. Applicants removed from the wait list and responding to the notification of their removal from the list shall complete screening necessary to determine eligibility.
- a. Check income if data is older than 30 days.
 - b. Collect anthropometric and biochemical data if not taken at time of application, is > 60 days old, or does not reflect current category.
 - ~~c. Complete all required forms.~~
- X. Once an applicant has completed the screening visit and has been determined eligible or ineligible, his/her name may be removed from the wait list.

L.6. Equipment

Policy

The purchase of all medical equipment with an individual purchase price over \$5,000 or a grouping of purchases totaling over \$5,000 must be approved by the state WIC office.

Procedure: Purchase Approval

- I. Collect at least 2 price quotes from different companies.
- II. Write a letter to the State WIC Office. Include the following in the letter:
 - a. brand name of equipment
 - b. model number
 - c. quantity needed
 - d. estimated cost (lower bid price or justification for higher price)
supplier
 - e. justification for purchase
 - f. where new equipment will be located
- III. An approval letter will be sent from the State WIC Office. Keep this letter on file.
- IV. Order equipment. Add equipment information to inventory file.

Procedure: Equipment Criteria

The following criteria should be considered in evaluating the safety, practicality, and accuracy of equipment.

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Equipment	Criteria
Infant scale - mechanical	<ul style="list-style-type: none">• balance beam scale with tray• non-detachable, free-sliding weights• zeroing mechanism (screw type)• can be read easily• records to 1/2 oz or 10 gm• can be cleaned easily• no sharp edges on tray
Infant scale - digital	<ul style="list-style-type: none">• durable, sensitive, accurate and reliable• automatically zero in between weights• can be read easily• records to 1/2 oz or 10 gm• can be cleaned easily• no sharp edges on tray
Adult scales - mechanical	<ul style="list-style-type: none">• upright platform beam balance• non-detachable, free-sliding weights• zeroing mechanism (screw type)• records to 1/4 lb. or 0.1 kg• can be easily read• sturdy and functional
Adult scales - digital	<ul style="list-style-type: none">• durable, sensitive, accurate and reliable• automatically zeroes in between weights• records to 1/4 lb. or 0.1 kg• can be easily read• sturdy and functional
Infant length measuring board	<ul style="list-style-type: none">• rigid headboard• movable foot board• measuring device marked to 1/8 inch• no sharp edges or unfinished parts• no loose joints• sturdy and functional• easily cleaned• measurements can easily be read• device can be calibrated
Adult height measuring board	<ul style="list-style-type: none">• measuring device readable to 1/8 inch• measuring device perpendicular to floor• measuring device securely attached to wall• durable and easy to clean• no sharp edges or unfinished parts• measurements can be easily read• movable headboard at least 6 inches wide• measuring device cannot be stretched• device can be calibrated

L.7. Inventory

Policy

All equipment and office furniture purchased by the WIC program must be tagged with a permanent ID number, and listed on the clinic's inventory log. This should include but is not limited to desks, chairs, filing cabinets, computers and printers, scales, measuring boards, centrifuges and HemoCues.

Procedure

- I. The inventory log or list must contain the following information for each purchase:
 - a. Description
 - b. Serial number or ID number
 - c. Location and use
 - d. Condition
 - e. Where the equipment was purchased
 - f. Date of purchase
 - g. Cost
 - h. Percentage of federal participation in the cost
 - i. Who holds the title
 - j. Date of disposal, and
 - k. Sale price (if applicable)
- II. Equipment with serial numbers, such as electric breast pumps that are assigned to the clinic by the State Office will be documented using the Serialized Inventory function of the VISION system's Operations Menu. (See also Section K).
- III. All office furniture and equipment purchased with WIC funds remains the property of the Federal government. Call the State WIC office prior

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to disposing of any equipment or furniture. Management and disposition of equipment and furniture must be done according to State laws and procedures.

- IV. A physical inventory of the property must be taken and the results reconciled with the property records at least once every two years.
- V. Records for nonexpendable property acquired in whole or in part by program funds must be retained for 4 years following its final disposition.

L.8. Retention of Files

Policy

WIC files must be kept for Federal or State auditors' review for the length of time specified below.

Procedure

- I. Participant files for women, infants and children may be destroyed after 4 years following the end of the fiscal year when the files were closed.
- II. All other files and reports including, but not limited to, information pertaining to financial operations, food delivery systems, food instrument and cash value voucher issuance and redemption, equipment purchases and inventory, certification, nutrition education, civil rights and fair hearing procedures may be destroyed after 4 years.
- III. If any litigation, claim, negotiation, audit or other action involving the records has been started before the end of the 4 year period, the records should be kept until all issues are resolved.
- IV. If electronic images of historical documents are maintained, then hard copies do not need to be retained. Any hard copy documents that were scanned into the VISION system do not need to have the hard copies retained on file. These may be shredded after they are scanned.
- V. Specific procedures must be followed prior to destroying any WIC files.
 - a. Describe all files to be destroyed on a log. This log should be kept in the clinic for review. The log must contain:
 - i. Record types to be destroyed
 - ii. Record dates or fiscal year closed
 - iii. Date destroyed
 - iv. Method of destruction
 - v. Signatures of two persons witnessing destruction.
 - b. Destruction should be completed according to local health department policy. Shredding or burning are acceptable methods of destruction. Disposal of records at a dumpsite is not an acceptable method of destruction.

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- c. Destruction may be completed by a third party contractor if approved by local health department policy. Two witnesses must sign the log that the documents to be destroyed were deposited to the contractor.
- d. When it is the county/agency policy to send records to archives that will later be destroyed by the archiving agency, maintaining documentation on file of records that were sent to archives is sufficient to meet the document destruction log requirement.
- e. It is acceptable but not required to request permission of the State office to destroy documents as long as the destruction is completed according to policy.

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L.9. Financial Management

In this subsection

The following topics are included in this subsection.

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L.9.1. Program Costs – Food and NSA Expenses

Policy: Food Costs

Food costs are the cost of food purchased with checks issued to certified WIC participants from local WIC clinics.

Procedure

- I. Food costs shall not exceed the food vendor's customary sale price of the supplemental food commodities.
- II. Food fund expenditure amounts will be provided to local health departments upon request. Calendar year food fund expenditures will be made available in full by April of the following calendar year.

Policy: Nutrition Services and Administration (NSA) Reimbursements

The state will reimburse local agencies for allowable operational and administrative costs up to but not exceeding the grant for NSA funds.

Procedure

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- I. This grant amount is determined by the Local Agency Funding Formula (see policy in this section).
- II. Reimbursement will be processed upon receipt of the local agency's Monthly Expenditure Report (MER).
 - a. Of these NSA allowable expenses at least 1/6 must be spent on Nutrition Education activities.
- III. The following are examples of allowable NSA costs:
 - a. Administering the food delivery system
 - b. Certification procedures
 1. Laboratory fees incurred for tests conducted to determine nutritional risk
 2. Expendable medical supplies used to determine nutrition risk
 3. Medical equipment used, such as scales, measuring boards, centrifuges
 - c. Salary and Fringe Benefits
 - d. Overhead expenses associated with operating the program
 - e. Outreach services
 - f. Translators for materials and interpreters
 - g. Fair Hearings
 - h. Independent medical assessment of the appellant, if necessary
 - i. Monitoring and reviewing program operations
 - j. Nutrition Education (must spend at least 1/6 of all NSA funds in this area)
 - i. Salary and other costs for time spent on nutrition education consultations
 - ii. Buying and producing nutrition education materials. These include:
 1. handouts
 2. flip charts
 3. food models
 4. audiovisuals
 5. other teaching helps
 6. nutrition education mailings
 - iii. Training nutrition educators, including:
 1. Costs related to conducting training sessions
 2. Purchasing and producing training materials
 - iv. Conducting evaluations of nutrition education
 - v. Salary and other costs incurred in developing the nutrition education plans
 - vi. Monitoring nutrition education

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- IV. The following are also allowable NSA costs with prior approval from the state WIC office:

Activity	Special notes . . .
Transportation of rural participants	<ul style="list-style-type: none">• Must be considered essential to assure program access.• Direct reimbursement to participants for transportation is not allowed.
Computer equipment and software* including acquisition of automatic data processing hardware or software.	<ul style="list-style-type: none">• Must be required by state or local agency.• Approval shall be granted by USDA or State Agency as applicable. <p>*Permission not required to purchase software for general management and payroll purposes.</p>
Capital expenditures over \$5,000.00 (purchases over \$5,000.00 must be approved by State agency/USDA)	This includes: <ul style="list-style-type: none">• cost of facilities• equipment (including medical)• other capital assets• any repairs that materially increase the value of useful life of capital assets.
Management studies	<ul style="list-style-type: none">• Performed by agencies or departments other than WIC, or• Outside consultants under contract with WIC.

L.9.2. Infant Formula Rebates

Policy

The method for determining the number of units of contract brand infant formula that qualify for a rebate is outlined below.

Procedure

- I. Read the obligation records for those checks paid during the month by the bank.
- II. If the check was paid for infant or child, find the food package information for that check.

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- III. If the check food package has any authorized (count>0) rebatable items on it, then get the peer group average price for those rebatable items.
- IV. Divide the actual check paid amount by the peer group average item price and round it either up or down; in order to get the number of rebatable items on the check.
- V. The quantity of rebatable items billed will always be less than or equal to the maximum quantity of rebatable items allowed on the check to be purchased.

L.9.3. Local Agency Operational Reimbursement

Policy

All operational costs are subject to the terms of the WIC grant and Federal Management Circulars A-87, 7CRF Part 3016 and other guidelines followed by the Utah Department of Health and local agencies.

Procedure

- I. All expenditures claimed on the reimbursement form should have appropriate time and attendance documentation for the claims.
- II. The local agencies must have a system for documenting the time spent on the program and this system will be monitored every year as part of the monitoring visit from the State agency. Regular audits will be performed to assure proper classification, documentation and reimbursement.
- III. Each local WIC agency has a maximum administrative budget, which is specified in the WIC grant.

Procedure: Budget Summary

- I. Local agencies will be required to send to the state WIC Office a "Budget Summary" no later than January 1st for the current federal fiscal year. Any questions or problems regarding the budget should be addressed to the State Agency (SA).
 - a. The summary includes details of personnel services, consultant/contractual services, department operations & program supplies, and indirect costs. At least one-sixth of the allocation must be spent on nutrition education and breastfeeding promotion.

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Any projected local health department (LHD) contributions to fund WIC Program operations should also be noted in the budget summary.

- b. The LHD Budget Summary must be signed and dated by an Authorized Representative and the WIC Director before it will be accepted by the SA.

Procedure: Local Agency Monthly Expenditure Report (MER)

- I. The approved invoice to be used for the reimbursement is the State Health Department Monthly Expenditure Report (MER). The claim for reimbursement contained on this report should cover a specific calendar month.
- II. There must be four columns filled in for the WIC Program for NSA expenditures on the monthly expenditure report, and one column for Peer Counseling grant expenditures:
 - a. WIC Administration Expenditures, which includes:
 - i. General Management and Supervision
 - ii. Administrative reports
 - iii. Personnel Management
 - iv. Filing and Paperwork
 - v. Other Statistical & Tracking reports
 - vi. Travel Time to meetings
 - vii. System or Payroll Maintenance
 - viii. Vendor Activities
 - ix. General Outreach
 - b. WIC Client Services Expenditures, which includes:
 - i. Dietary and Risk Assessment
 - ii. Income Assessment
 - iii. Referrals
 - iv. Processing & explaining food instruments and cash value vouchers
 - v. General Client Charting
 - vi. Scheduling/Phone time with Clients
 - vii. Travel to outreach Client Services
 - viii. Coordinating WIC with other Services
 - ix. Data entry of Client Data (intake and Immunization)
 - c. WIC Nutrition Education
 - i. Nutrition Counseling

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- ii. Developing/Printing client Newsletters
- iii. Dietary Assessment Counseling
- iv. Lessons for Clients (includes planning)
- v. Continuing Ed. (Nutrition Related)
- vi. Community Classes/Education
- vii. Travel for Nutrition Related Reasons
- viii. Formula Counseling
- ix. Phone Calls for Nutrition Reasons
- x. Nutrition Plan (yearly)
- xi. Documenting Nutrition Education Nutrition Care Plan (low or High Risk)
- xii. Procuring/Developing/Nutrition Ed. Materials
- xiii. Evaluating Nutrition Ed. (WIC Survey)

d. WIC Breastfeeding Expenditures

- i. Breastfeeding Counseling
- ii. Regular Staff doing Lactation Management
- iii. Breastfeeding Promotion
- iv. Procuring/Printing/Developing Resources
- v. Breastfeeding Coordination and Community Activities
- vi. Travel to Breastfeeding functions
- vii. Continuing Ed. For Breastfeeding
- viii. Breastfeeding Supervision

Policy: Peer Counseling funds

Peer Counseling funds are to be used only to develop or expand activities necessary to sustain a successful Peer Counseling Program.

Procedure

- I. Allowable costs include:
 - a. Compensation for Peer Counselors and designated Peer Counselor managers/coordinators,
 - b. Related costs such as
 - i. Training,
 - ii. Telephones and associated cost solely used by Peer Counselors,
 - iii. Travel for home and hospital visits, and training,
 - iv. Recruitment of peer counseling staff,

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- v. The purchase of demonstration materials (e.g. breast pumps for demonstration purposes, videos).
 - vi. Computers and associated cost solely used by Peer Counselors
 - vii. Overhead cost related solely to the Peer Counselor program
- II. Items and materials to be used or distributed to WIC participants (e.g., breast pumps, breastfeeding aids, and written materials) are not allowable costs under this funding, and should instead be purchased using regular NSA funds under the breastfeeding promotion and support category.

L.9.4. Local Agency Claims

Policy

Funds collected through the recovery of local agency claims will only be spent to cover allowable expenditures.

L.9.5. Local Agency Funding Formula

Policy

- I. Funding for activities beyond required WIC services may or may not be allowed, depending on necessity, feasibility, and availability of funding. The SA will determine what funding is needed for providing required WIC services using a Nutrition and Service Administrative (NSA) Funding Formula. Expenditures falling over the funding amount in the current contract year must be provided at the LHD expense without future SA reimbursement.
- II. The amount to be spread to the LHD is determined by subtracting any Operational Adjustment (OA) monies and an estimated spend-forward amount from the total awarded funds. The NSA Funding Formula for the Utah WIC Program allocates a percentage of the remaining NSA monies between the SA and the LHD: 85% of the total funding goes to the LHDs, while 15% remains at the state level.
- III. The initial funding for LHDs will be based on the policy listed above. LHD allocations may be adjusted one or more times during the FFY due to funding and/or caseload fluctuations.

Average Expenditure per Participant (AEP)

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- I. Forecasted and Inflated AEP:
 - a. The average monthly caseload for each LHD is multiplied by the average monthly NSA cost for each LHD. The result is the AEP per LHD. This is called the “Forecasted AEP”.
 - b. Adding a percentage amount to the Forecasted AEP to account for any cost of living increases is called the “Inflated AEP”
- II. Full Amount:
 - a. The average monthly NSA costs multiplied by the Inflated AEP for each LHD. This represents what is needed to fund the LHDs.
- III. Base Amount:
 - a. The full amount for each LHD is then normalized to the funding amount available. This is called the “Base Amount”. The funding amount available may be less than what the full amount states is needed to fund the LHDs.
- IV. Bands:
 - a. A systematic approach utilizing mathematical equations to group/cluster local agencies with similar characteristics.

Reallocation/Discretionary Funds

- I. Additional funds received by the State Agency through the federal reallocation process or other sources may be distributed to LHDs through one or both of the following methods, at the discretion of the State Agency.
 - a. The State Agency will use the NSA Funding Formula to distribute the amount of funds allocated to all LHDs, including the additional federal reallocation funding. Individual local agencies may request to receive no additional funds during this distribution process.
 - b. The State Agency will distribute funds based on individual local agency need, according to criteria (i.e. caseload growth, clinic service needs, etc.) determined by the State Agency. LHDs may be asked to submit written funding request to the State Agency during this distribution process.

Policy: Start-up Funds

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SA Funds may be provided when creation of a new local WIC agency is warranted. New local agency applicants must demonstrate the need as well as cost effectiveness to successfully begin operation of a local agency. A new agency will remain funded for 3 months of operation or until the local agency reaches its projected caseload level, whichever comes first. This may include any funds needed to be advanced to the qualifying agency. The amount of the start-up grant will be determined from the local agency's application, availability of local administrative funds, and shall be subject to any current caseload management considerations.

L.9.6. Summary Statement of Expenditures

Policy

- I. Take the total expenditures allocated to each program from each of the following statements:
 - a. Detail Statement of Wages and Salaries
 - b. Detail Statement of Fringe Benefits
 - c. Detail Statement of Travel Expenditures
 - d. Detail Statement of Current Expenditures
 - e. Detail Statement of Capital Outlay
- II. Follow the steps outlined below.
 - a. From each of the detail statements listed above, enter the total expenditures for each program, and the total expenditures for all programs for each expenditure category contained on the Summary Statement of Expenditures.
 - b. Complete the total expenditure line and verify that the total expenditures for each program are equal to total expenditures for all programs.
 - c. Collections which are a reimbursement of program expenditures should be determined from a review of the local department's cash receipts journal or its equivalent. The collection amount should be entered under the applicable program heading.

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- d. New expenditures for each program are determined by deducting collections from total expenditures.
- e. All completed detail statements and the summary statement should then be reviewed and the certification section completed.

L.9.7. Detail Statement of Wages and Salaries Certification

Policy

Compensation follows and appointments made according to State and local government laws and rules which meet Federal merit system or other requirements.

Procedure

- I. The following items should be completed from employee personnel files, payroll registers, and/or time and attendance records:
 - a. Employee name
 - b. Employee classification
 - c. Grade and step
 - d. Percent of time employed
 - e. Rate (monthly or hourly)
 - f. Gross wages and salaries.
- II. The total gross wages and salaries for each employee per the Detail Statement of Wages and Salaries Certification must equal the total gross wages and salaries for each employee per the Detail Statement of Wages and Salaries.

L.9.8. Detail Statement of Wages and Salaries

Policy

Compensation for personal services rendered during the period of performance. Compensation follows and appointments made according to State and local government laws and rules which meets Federal merit system or other requirements. Wages and salaries charged to the programs will be

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based on payrolls documented and approved in accordance with the generally accepted practice of the state or local agency.

Payrolls must be supported by time and attendance or equivalent records for individual employees. The wages and salaries of employees chargeable to more than one program will be supported by appropriate time distribution records.

Procedure

- I. The following items should be completed from payroll registers and/or time and attendance records:
 - a. Programs to which wages and salaries will be allocated,
 - b. Employee name,
 - c. Amount allocated to each program for each employee,
 - d. Total allocated for each employee,
 - e. Total allocated for each program,
 - f. Total allocated to all programs, and
 - g. The non-contract expenditure designation will be used to accumulate expenditures allocated to programs not covered by Utah Department of Health Contracts.

Policy

Registered Dietitians employed by WIC and providing nutrition assessment services for Medicaid participants at high risk during pregnancy.

Procedure

- I. Registered Dietitians working for WIC may not bill Medicaid or any other public or private health program(s) for nutrition assessment services rendered while working for, and billing time to WIC.
 - a. If a Registered Dietitian is employed by WIC as a full-time equivalent employee working 40 hours per week, that dietitian may not accrue billable hours to any other program while working on WIC time.

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- b. If a Registered Dietitian is assigned to WIC less than 40 hours per week, the remaining hours may be billed to another program as long as the Registered Dietitian provides all nutrition education/counseling outside of the scope of the WIC Program and outside of time billed for WIC services.
- c. The separation of duties must be indicated in the way the employee codes his/her time sheet.

L.9.9. Detail Statement of Fringe Benefits

Policy

Employee benefits in the form of employers' contribution or expenses for social security, employees' life and health insurance plans, unemployment insurance coverage, workman's compensation insurance, pension plans, and the like, provided such benefits are granted under approved plans and are distributed equitably to all related programs.

Procedure

- I. Determine the percentage of wages and salaries allocated to each program per the total line on the Detail Statement of Wages and Salaries. The following items should be completed from the payroll register and reports required for the reporting of fringe benefits to the various governmental agencies and private insurance companies, and from the calculated percentages:
 - a. Programs to which fringe benefits will be allocated,
 - b. The amount of fringe benefits by type allocated to each program based on the percentage of wages and salaries allocated to that program,
 - c. Total allocated by fringe benefit type,
 - d. Total allocated for each program,
 - e. Total allocated to all programs, and
 - f. The non-contract expenditure designation will be used to accumulate expenditures allocated to programs not covered by Utah Department of Health Contracts.

L.9.10. Detail Statement of Travel Expenditures

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Policy

Expenditures for transportation, lodging subsistence, and related items incurred by employees who are in travel status on official business incident to a program. Such costs may be charged on an actual basis, on a per diem or mileage basis in lieu of actual costs incurred, or on a combination of the two, provided the method used is applied to an entire trip, and results in charges consistent with those normally allowed in like circumstances in non program sponsored activities.

Procedure

- I. The following items are to be completed from the check register or equivalent and the travel claim prepared by each employee:
 - a. Programs to which travel expenditures will be allocated
 - b. Expenditure category or payee
 - c. Amount allocated to each program for each entry
 - d. Total allocated for each entry
 - e. Total allocated for each program
 - f. Total allocated for all programs
 - g. The non-contract expenditure designation will be used to accumulate expenditures allocated to programs not covered by Utah Department of Health Contracts.

L.9.11. Detail Statement of Current Expenditures

Policy

All expenditures necessary for the operation of the program that are not properly classified as wages and salaries, fringe benefits, travel, or capital outlay.

Examples include utilities, supplies, contracted services, maintenance, etc.

Procedure

- I. The following items are to be completed from the check register or equivalent and the vendor billing or invoice:

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- a. Programs to which current expenditures will be allocated,
- b. Expenditure category or payee,
- c. Amount allocated to each program for each entry,
- d. Total allocated for each entry,
- e. Total allocated for each program,
- f. Total allocated for all programs, and
- g. The non-contract expenditure designation will be used to accumulate expenditures allocated to programs not covered by Utah Department of Health Contracts.

L.9.12. Detail Statement of Capital Outlay

Policy

The cost of facilities, equipment, other capital assets, and repairs which materially increase the value or useful life of capital assets. Property having a useful life of more than one year and an acquisition cost of \$1000 or more per unit (unless otherwise specified).

Prior approval from the state WIC office is needed for capital equipment, computer equipment and some other items specified in the local agency contract.

Procedure

- I. The following items are to be completed from the check register or equivalent and the vendor billing or invoice:
 - a. Programs to which capital outlay expenditures will be allocated,
 - b. Expenditure category or payee,
 - c. Amount allocated to each program for each entry,
 - d. Total allocated for each entry,
 - e. Total allocated for each program,

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- f. Total allocated for all programs, and
- g. The non-contract expenditure designation will be used to accumulate expenditures allocated to programs not covered by Utah Department of Health Contracts.

L.10. Reporting

Policy: Reporting Form FNS-798

The “WIC Financial Management and Participation” report is prepared each month by the State and electronically sent to USDA. This report updates the financial and participation data and estimates these federal year end tables.

This report adjusts projected expenditures to account for redeemed FI's and tries to estimate future expenditures for food costs by adjusting for price increases and participation changes.

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L.11. Civil Rights

Policy

Program benefits are made available to all eligible persons without discrimination based on race, color, national origin, age, sex, or disability. On these bases no individual will be:

- I. Denied service or other benefits provided under the program.
- II. Subjected to segregation or separate treatment in any matter related to receipt of services under the program.
- III. Restricted in the enjoyment, advantage or privileges received by others within the program.

Procedure: Limited English Proficiency

- I. Local agencies must take reasonable steps to ensure meaningful access to the information and services they provide based on:
 - a. The number or proportion of LEP persons served or encountered in the eligible population.
 - b. The frequency with which LEP individuals come in contact with the program.
 - c. The resources available to the local agency and costs.
- II. Local agencies must have a plan in place to communicate and provide services in the languages spoken in the service area. This plan should include items such as:
 - a. Use of bilingual staff.
 - i. Staffing of bilingual employees should be adequate based on the percentage of LEP clients.
 - ii. Language proficiency of bilingual employees should be sufficient to effectively communicate with LEP clients.
 - b. Contracting with interpreting services. This may include:
 - i. In-person interpreting services, and
 - ii. Telephone interpreting services.
 - iii. Use of another WIC participant as an interpreter in the same clinic is not permitted due to confidentiality issues, unless this is requested by the participant.

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- iv. Local clinics cannot require applicants or participants to provide their own interpreters.
 - c. Translation of documents and forms. This should also include:
 - i. Signs and bulletin boards,
 - ii. Printed education materials,
 - iii. Audio visual materials,
 - iv. Web based information.
 - d. Use of technology and internet based tools.
 - e. Training of staff in the use of the resources available to serve LEP individuals.
- III. Record the client's preferred spoken language in the VISION system in the "Family/Intake" menu on the "family" screen.
- a. All commonly spoken languages in Utah are listed on the drop down menu. If additional language options need to be added to the drop down list contact the State Office.
 - b. Unless the client is proficient in English, staff should select the native or preferred language of the client to help with statistical reporting of languages spoken in the service area.
 - c. Indication can also be made on this screen if an interpreter is needed for the appointment by checking the check box. This code helps to alert the appointment scheduler of any special needs that must be considered for this family, which might include an interpreter, whether in person or via telephone.
 - d. The print-outs language must also be set to English or Spanish for printed notices. The print-outs language must be set appropriately so that Teletask calls will be made in the correct language.
- IV. Serving different language groups on different days for convenience purposes could be misconstrued as "segregation" and discrimination on the basis of national origin. When services are provided in different languages on certain days and times, attendance to these language specific sessions must be optional. Appointment slots must remain open for anyone. Avoid using terms such as "Spanish Day."

Procedure: Persons with Disabilities

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- I. Reasonable accommodations must be provided to persons with physical and/or mental disabilities.
 - a. The clinic must have a plan in place to provide services to disabled participants and applicants. This plan should include items such as:
 - i. Ensuring the clinic is fully accessible or other arrangements are made to serve the disabled,
 - ii. Providing appropriate information in alternative formats,
 - iii. A plan to communicate adequately with the hearing impaired.
 1. Scheduling a sign language interpreter upon request to translate for a hearing impaired applicant/participant is considered to be a reasonable accommodation and is required. Local agencies must contact the State WIC Office if they are unable to provide a sign language interpreter.
 2. Use of another WIC participant as an interpreter in the same clinic is not permitted due to confidentiality issues.

II. For persons with disabilities, when a new family member is entered in VISION, comments can also be entered regarding special needs. An "SN" will be visible in the name box when there are comments regarding special needs. This information is also available in the notes on an appointment. Staff should enter special needs comments for any disabled persons who may require reasonable accommodations.

Procedure: Public Notification

- I. Each local agency shall take positive and specific actions to implement a public notification program throughout its jurisdiction which informs potentially eligible populations, participants and applicants, of program availability, program rights and responsibilities, protection against discrimination, and the procedure for filing a complaint. This includes:
 - a. Displaying the nondiscrimination poster, "And Justice For All," in prominent places, such as clinic waiting rooms and other areas frequented by participants and applicants.
 - b. Ensuring that appropriate staff, volunteers or other translation resources are available to serve participants and applicants.
 - c. Conveying the message of equal opportunity in all photographic and other graphics that are used to provide program information by visually depicting diversity.

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- d. Making available program regulations and guidelines to the public upon request.
 - e. Upon initial visits, giving applicants specific program information which is pertinent to their participation in the program.
 - f. Providing participants and applicants access to civil rights information. This information includes procedures for filing complaints, program specifics, and rights and responsibilities of participants and applicants.
- II. Informing the public, including eligible and potentially eligible persons, of the availability of program benefits, is accomplished in conjunction with outreach (see section L.4).

Procedure: Data Collection

- I. To provide flexibility and ensure data quality, separate categories shall be used when collecting and reporting race and ethnicity. Ethnicity shall be collected first. Respondents shall be offered the option of selecting one or more racial designations. The minimum categories for data on race and ethnicity for Federal statistics, program administrative reporting and civil rights compliance reporting are defined by OMB as follows:

Ethnicity

Hispanic or Latino. A person of Cuban, Mexican, Puerto Rican, South or Central America, or other Spanish culture or origin, regardless of race. The term, "Spanish origin," can be used in addition to "Hispanic or Latino."

Race

American Indian or Alaska Native. A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian. A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

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Black or African American. A person having origins in any of the black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black or African American.”

Native Hawaiian or Other Pacific Islander. A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White. A person having origins in any of the original peoples of Europe, Middle East, or North Africa.

- II. Participants need to understand that the collection of this information is strictly for statistical reporting requirements and has no effect on the determination of their eligibility to participate in the program. Participants may be asked to self-identify their racial group only after it has been explained.
- III. Self-identification by the applicant/participant is the preferred method of obtaining characteristic data.
 - a. For reporting purposes, a participant may be included in the group to which he or she indicates belonging or identifies with, or is regarded in the community as belonging.
 - b. Where an applicant does not provide this information, the data collector shall through visual observation secure and record the information where possible.
 - c. The data collector may not second-guess, change or challenge a self-declaration made by the applicant as to his or her race or ethnic background unless such declarations are patently false.

Procedure: Pre-Award Compliance Reviews

- I. The State agency will perform thorough reviews of applicants from previously unfunded local agencies. This review will be based on information provided by applicants in their official application for program funds.
- II. Those agencies whose applicants are determined incomplete shall be notified by the State Office within 15 days of receipt of the application. This notification will specify the additional information needed to complete the application.

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- III. The applicant shall then be notified of the approval or denial of his/her application within 30 days of receipt of the completed application.
- IV. On-site reviews to determine civil rights compliance shall be made if the State agency cannot determine compliance based on the information contained in the completed application. The review will include the following:
 - a. All past substantiated civil rights problems or noncompliance situations have been corrected.
 - b. The local agency will operate within the procedures established by the State Agency.
 - c. Clinic sites do not deny access to any persons because of his or her race, color, national origin, age, sex, or disability.
 - d. Appropriate staff, volunteers or other translation resources are available in areas where a significant proportion of non-English or limited English- speaking persons reside.
 - e. Description of the racial/ethnic make-up of the service area is included in the application.

Procedure: Local Agency Reviews

- I. When a review of agency is performed, the following items must be determined as a minimum:
 - a. Do all persons have an equal opportunity to participate in the program regardless of race, color, national origin, age, sex, or disability?
 - b. Is ethnicity and race documented for all participants?
 - c. Has the local agency conducted civil rights training for all staff?
 - d. Is the nondiscrimination poster displayed in the clinic?
 - e. Is program information being provided to applicants, participants, grassroots organization or similar minority groups?
 - f. Is the nondiscrimination statement being included on all printed materials distributed to the public?

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- g. Are civil rights complaints being handled according to policy?

Procedure: Training

- I. All staff members must complete Civil Rights training each fiscal year.
- II. New State Agency or Local Agency staff members are required to complete Civil Rights Training within sixty (60) days of employment.
- III. Training may consist of:
 - a. Reading the current Civil Rights module or viewing the Civil Rights presentation either individually or in a group training session. A post test is required to document completion and understanding. Post tests must be submitted to the State agency for grading and then retained on file when returned to the clinic.
 - b. Local agencies may chose to create their own group training outline and post test. The outline and test must be pre-approved by the state. The local agency will retain on file the post tests and a copy of the outline which must cover the following topics:
 - i. Collection and using racial/ethnic data,
 - ii. Effective public notification systems,
 - iii. Complaint procedures,
 - iv. Review techniques,
 - v. Resolution of non-compliance, including development of an action plan,
 - vi. Requirements of reasonable accommodations of persons with disabilities,
 - vii. Requirements for language assistance,
 - viii. Conflict resolution,
 - ix. Customer service.
- IV. If group training is utilized, the local agency will retain on file a log of attendance, recording all staffs that completed the training.

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Policy: Complaints of Discrimination

Any persons alleging discrimination based on race, color, national origin, sex, age or disability has a right to file a complaint within 180 days of the alleged discriminatory action.

Procedure

- I. All civil rights complaints, written or verbal, shall be accepted and sent directly to the National office at the following address: USDA, Director, Office of Adjudication, 1400 Independence Avenue S.W. Washington, D.C. 20250-9410. Anonymous complaints shall be handled as any other complaint.
- II. The State WIC Program Manager or designee should always be notified immediately when complaints alleging Civil Rights discrimination are made. **The State Office will assist clinic staff in forwarding the complaint to USDA.**
- III. In the event a complainant makes the allegations verbally or through a telephone conversation and refuses or is not inclined to place such allegations in writing, the person to whom the allegations are made shall write up the elements of the complaint for the complainant. Every effort shall be made to have the complainant provide the following information:
 - a. Name, address, and telephone number of the complainant, or other means of contacting the complainant.
 - b. The specific location and name of the entity delivering the service or benefit.
 - c. The nature of the incident or action that led the complainant to feel discrimination was a factor, or an example of the method of administration which is alleged to have a discriminatory effect on the public or potential and actual participants.
 - d. The basis on which the complainant feels discrimination exists (race, color, national origin, age, sex or disability).
 - e. The names, titles, and business addresses of persons who may have knowledge of the discriminatory action.

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- f. The date during which the alleged discriminatory actions occurred, or if continuing, the duration of such actions.

Policy: Non-discrimination Clause

The following nondiscrimination statement must appear on all materials that identify or describe the WIC Program:

In accordance with Federal Law and Department of Agriculture (USDA) policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability.

To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410, or call (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer.

Spanish

De acuerdo con la ley federal y las políticas del Departamento de Agricultura de los EE.UU. (USDA, sigla en inglés), se le prohíbe a esta institución que discrimine por razón de raza, color, origen, sexo, edad, o discapacidad.

Para presentar una queja sobre discriminación, escriba a USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, DC 20250-9410 o llame gratis al (866) 632-9992 (voz). Personas con discapacidad auditiva o del habla pueden contactar con USDA por medio del Servicio Federal de Relevos (Federal Relay Service) al (800) 845-6136 (español) o (800) 877-8339 (inglés). USDA es un proveedor y empleador que ofrece oportunidad igual para todos.

Procedure

- I. When space is limited, print “**This institution is an equal opportunity provider**” in its place. This statement should be in print size no smaller than the text of the document.
- II. When providing information for radio and television public service announcements, the nondiscrimination statement does not have to be read in its entirety. Rather, a statement such as “**WIC is an equal opportunity provider**” is sufficient to meet the nondiscrimination requirement.

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- III. The statements should be in English and in languages appropriate to the local population, and in alternative means of communication (Braille, large print, audiotape, etc).
- IV. The nondiscrimination statement is required if the material:
 - a. Describes eligibility requirements of the WIC Program,
 - b. Identifies the benefits of WIC participation,
 - c. Gives instructions for WIC participation,
 - d. Provides notice of conditions to continue eligibility, and/or
 - e. Provides notice of ineligibility or disqualification.
- V. Nutrition education and breastfeeding promotion and support materials that strictly provide a nutrition message with no mention of WIC (as described above) are not required to contain the nondiscrimination statement.

L.12. Emergency Plan

Policy

The WIC Program is not intended to be a first-response disaster assistance program; however, the State WIC Office and local agencies must prepare for and follow emergency procedures in the event of an emergency. An emergency is defined as any situation that threatens the continuity of State or local agency WIC operations or the safety of its personnel. Emergencies include but are not limited to disasters and states of emergency as declared by the Governor. Emergencies may only affect one clinic or may affect multiple clinics or the statewide food benefit issuance system.

Procedure

- I. Preparing for an emergency
 - a. Participate in local agency/government preparedness planning and training.
 - b. Prepare a contact list of emergency services and personnel.
 - c. Develop or update an alternative emergency food services list.
 - d. Determine roles and duties of staff in emergency situations.
 - e. Train local agency staff on emergency procedures.
 - f. Preparing for potential pandemics should be part of the agency's emergency planning. Considerations should include items such as staff absenteeism, social distancing, disinfection of facilities, etc.
- II. Immediate actions in the event of an emergency
 - a. WIC staff and participants should be protected from immediate harm or be evacuated if necessary.
 - b. Program records, equipment and supplies should be protected from damage or destruction whenever possible.
 - c. The local WIC Director shall contact the State WIC Program Manager to report on the status of the following:
 - i. The number of WIC clinics, staff and clients affected,

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- ii. The extent of damage to service delivery,
 - iii. If program records or equipment has been damaged or destroyed,
 - iv. WIC vendors that are closed and if retail purchase is still possible,
 - v. Estimated length of service disruption,
 - vi. The number of staff available to work in the clinic,
 - vii. If utility service has been disrupted,
 - viii. The safety of the water supply,
 - ix. Estimated number of newly eligible applicants as a result of the disaster.
 - d. The State WIC Program Manager will communicate with and receive guidance from the USDA Regional Office.
 - e. The State WIC Program Manager and the local WIC Director will jointly decide whether or not WIC services will continue as normal, be interrupted or be altered.
 - f. If WIC services will not be available for a period of time, refer clients to alternative emergency food services.
- III. Providing services during an emergency
- a. The State WIC Office will follow the Utah Department of Health's Continuity of Operations Plan (COOP); local agencies will follow similar local agency plans.
 - b. Alternate methods of providing WIC food benefits during an emergency include:
 - i. Issuing checks at an alternate site.
 - ii. Mailing of checks (see Section E.4 regarding mailing of checks).

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- iii. Distribution of printed checks directly from the State Office to the local agency.
- c. When a decision is made to provide services at an alternate location:
 - i. Coordinate with emergency services and local government to establish a safe alternative site.
 - ii. Use mobile equipment as needed to provide certification and check issuance.
 - iii. Consider use of alternate staff.
 - iv. Work with the State WIC Office and Help Desk on technical and computer issues.
 - v. Inform clients and potential applicants on the availability of WIC services and how to access WIC benefits.
- d. 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 the federal 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.
- e. Disaster-related evacuees may use the affidavit option if the required proof of identity, residency, or income is not available and would cause an unreasonable barrier to service. (Please see sections C.4 and C.5.)