**Oregon WIC Program**

**Local Agency Biennial Review**

**Pre-visit Checklist**

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| **Instructions:*** Please review the following pages and submit the requested materials in preparation for your upcoming WIC Program, Farm Direct Nutrition Program, and/or Breastfeeding Peer Counseling Program reviews.
* If you have questions, please contact your assigned nutrition consultant, «ANC\_Full\_Name».
* Please note that pages 3-4 specify items that need to be available during your on-site visit and do not need to be submitted prior to the on-site visit.
* Please submit the requested materials no later than **«LA\_Materials\_Due\_by»**.
* Send all requested materials to Caroline Tydings at:

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| E-mail *(preferred)*: | Caroline.d.tydings@state.or.us |
| Mail: | Oregon WIC Program800 NE Oregon St, Suite 865Portland, OR 97232 |
| Fax: | 971-673-0071 |

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| Please e-mail the following materials 30 Days BEFORE your on-site visit: |
| WIC Program materials: |
| [ ]  Copies of any local policies that are more restrictive than state WIC policy [ ]  Our clinic does not have any local policies that are more restrictive than state WIC policy [ ]  Copies of any locally developed WIC forms that replace state-developed forms [ ]  Our clinic does not have any locally developed WIC forms that replace state-developed forms[ ]  WIC Personnel Summary (enclosed) completed by the Business Manager for your health department, non-profit, or tribal organization—including employees paid with Breastfeeding Peer Counseling Funds (if applicable). Do not include personnel paid through indirect costs. [ ]  A copy of your completed Pre-visit Checklist. (Please check off each item as it is returned and submit the pre-visit checklist once all other items have been sent in)An electronic copy of your program’s procedures/policies for the following:[ ]  High-risk protocol: referring high-risk participants to the WIC RD/Nutritionist (Policy 661, 4.0)If applicable: [ ]  WIC services delivered in the home (Home Visiting Policy 621, 4.0) [ ]  N/A[ ]  Quarterly Nutrition Education using online and/or self-paced lessons (Policy 820, 7.0) [ ]  N/A[ ]  Alternative Hemoglobin Screening Procedure (Policy 626 18.0) [ ]  N/A[ ]  Electronic Record Policy and Procedure (Policy 426 2.3) [ ]  N/ANOTE: These are the only local procedures you are required to submit. |

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| BEFORE your on-site visit: Please ensure certification and/or recertification appointments are scheduled for observation during the review. |
| [ ]  Certification and/or recertification appointments are scheduled during review dates. |

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| Please fax, mail or email the following Farm Direct Nutrition Program materials 30 Days BEFORE your on-site visit: |
| [ ]  10 pages of check registers from the most recent, complete Farm Direct Nutrition Program season. |

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| If you have a Breastfeeding Peer Counseling Program (BFPC), please submit the following materials 30 Days BEFORE your on-site visit: |
| [ ]  A copy of your BFPC program’s procedures/protocols (Policy 716, 10.0)[ ]  Electronic copies of any locally developed BFPC forms [ ]  Our clinic does not have any locally developed BFPC forms[ ]  BFPC Staff Continuing Education/Training Log. Include all continuing education and training beyond required training listed in Policy 440 – Staff Training Requirements. Include special training courses, conferences, workshops and in-services.[ ]  List of lactation referral resources available in your community.[ ]  BFPC Monthly Meeting Log documenting attendees, dates, and main topics discussed.[ ]  Daily time sheet(s) for BFPC Coordinators who split time/pay between the BFPC Program and WIC Program. Send time sheets covering 1 month and which coincides with the most current quarterly time study. |

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| Please have the following Farm Direct Nutrition Program materials available DURING your on-site review: |
| [ ]  Farm Direct class outline with learning objectives[ ]  FDNP Check Stock Physical Inventory form[ ]  Be prepared to explain how you verify FDNP eligibility prior to issuance (if applicable). |

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| Please review and have the following materials available DURING your on-site review: |
| [ ]  Group nutrition education lesson plans with and learning objectives. This includes all types of group education including health/nutrition fairs and those led by partners. [ ]  Documentation of completed program self-evaluation[ ]  Locally developed participant education and outreach materials[ ]  Log of outreach activities[ ]  USDA non-discrimination and “Moving?” poster in each clinic[ ]  Lab equipment cleaning and temperature log and CLIA certificate or waiver. [ ]  Files for:* Medical Documentation
* Participant Signature Forms
* Breast Pump Forms
* Employee Signature Forms

[ ]  Documentation of staff training: [ ]  Module completion in TWIST[ ]  Quarterly in-services [ ]  Civil Rights training[ ]  Copies of any written agreements your program has with other agencies for WIC-related services (such as):* Non-WIC Nutrition Education (provided by non-WIC staff)
* WIC breast pump partnerships
* Data sharing agreements/MOU’s
* WIC Requirements for Homeless Facilities

[ ]  Be prepared to explain how you handle security and inventory for:* eWIC Cards
* Breast Pumps
* Formula cans returned to the clinic
* Farm Direct checks
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