**POLICY**
Local programs shall comply with the WIC Program Elements as written by the Oregon Health Authority, Public Health Division in the Financial Assistance Contract and shall notify the state WIC office of program changes and issues requiring state program approval.

**PURPOSE**
To clarify the responsibilities of the local program and to ensure compliance with USDA and state rules and regulations for local program operation.

**RELEVANT REGULATIONS**
- 7 CFR §246.6 Agreements with local programs
- 7 CFR §246.8—Nondiscrimination
- 7 CFR §246.25—Records and reports
- ORS 433.835-433.990 – Oregon Indoor Clear Air Act
- FFY 1994 Agriculture, Rural Development, Food & Drug Administration, and Related Agency Appropriations Act (Public Law 103-111)
- FNS Instruction 113-2 (Rev.-1)

**OREGON WIC PPM REFERENCES**
- 215—Local Program Monitoring and Review
- 310—Annual Plan/Contract Payment Process for Local Programs
- 325—Caseload Management
- 420—Approval Process for Local Program Policies and Procedures
- 440—Staff Training Requirements
- 452—Civil Rights
- 470—Local Program Outreach
- 590—Program Integrity: Participant Violations
- 650—WIC Transfer/VOC and WIC Overseas Program
- 660—Competent Professional Authority: Requirements
- 820—Quarterly Nutrition Education Contacts

**DEFINITION**
**WIC Program Elements**: Services WIC Programs agree to provide based on a contract with the Oregon Health Authority, Public Health Division.
PROCEDURE

WIC Program Elements

1.0 The local program has agreed to comply with the Oregon Health Authority, Public Health Division WIC Program Elements in accepting USDA federal funds. See 🔗310—Annual Plan/Contract Payment Process for Local Programs.

1.1. A complete list of WIC Program Elements can be found at https://www.oregon.gov/oha/ph/ProviderPartnerResources/LocalHealthDepartmentResources/Pages/program-elements.aspx

WIC Policy and Procedure Manual

2.0 The local program shall comply with all minimums stated in this manual. Terms used in this manual to indicate state and federal requirements are “will,” “shall,” and “must.”

2.1. Policies are updated as needed or at a minimum of every 3 years.

2.1.1. Policy updates are sent out quarterly and are reviewed with WIC Coordinators at the Oregon WIC Coordinators Association (OWCA) meetings.

2.1.2. Policy updates that result in a change to how WIC compliance findings are reviewed have a 6-month transition period from policy implementation date before they are cited.

If unable to provide required services

3.0 If a designated local program cannot provide some of the health services needed to determine nutritional risk for WIC or other WIC administrative services, the local program must contract or enter into a written agreement with a health facility/clinic to perform some or all of these services. Notify the state WIC office if you are considering this option.

EXAMPLE: If a WIC clinic does not conduct a blood test screen for anemia, height or weight measurements, or any additional assessments necessary to determine the existence of medical and dietary risks, the WIC program is required to have a written agreement with a health entity as described above.

3.1. If a designated local program is unable to or does not want to provide any WIC services, they must contact the Oregon Health Authority and the state WIC program to determine a plan for continued WIC services in the service area. Local Public Health Authorities (LPHA) have right of first refusal to provide WIC services. If the LPHA decides not to provide WIC service, the state WIC program can contract directly with another entity to ensure WIC services are provided to all geographical regions of the state.

Oregon’s Clean Indoor Air Act

4.0 To be eligible to receive WIC administrative funds, local agencies must comply with ORS 433.835-433.990 Oregon Clean Indoor Air Act.

Issues requiring state notification

5.0 Local programs will notify the state WIC program of issues requiring state approval and program changes affecting communications between the agencies and/or uniform delivery of services.
5.1. Notify the state WIC program and update the WIC data system immediately with any changes in:
   - program mailing address (for correspondence or shipments)
   - program telephone/fax numbers
   - program personnel involving management and administration, program coordinator, training supervisor, WIC nutritionist/RDN, or breastfeeding coordinator

5.2. Notify your state WIC program nutrition consultant concerning the following items or issues. See ♦325—Caseload Management.
   5.2.1. Opening a new WIC clinic or closing an existing clinic.
   5.2.2. Requests for changes in local program operations, such as caseload allocation or geographic service area.
   5.2.3. Notify your nutrition consultant before making any changes in priorities served or starting a waiting list.

5.3. Notify the state WIC compliance coordinator concerning the following items or issues. See ♦590—Program Integrity: Participant Violations.
   5.3.1. Participant requests for fair hearings.
   5.3.2. Participant program abuse cases where the sanction is possible program suspension.
   5.3.3. Situations where theft of eWIC card stock, or WIC computer hardware (such as WIC laptops, aircards, PIN machines, or document printers) is suspected.
   5.3.4. Situations where unauthorized use of the WIC data system is suspected.
   5.3.5. Suspected fraud or abuse by a staff member.

5.4. Notify the state WIC program manager regarding plans for major changes in the local program’s data system.

5.5. Notify the state WIC compliance coordinator about any complaints of discrimination. See ♦452—Civil Rights.

Materials requiring state approval

6.0 Submit policies and procedures requiring state WIC program approval to your state WIC program nutrition consultant before implementation as described in ♦420—Approval Process for Local Program Policies and Procedures.

7.0 Submit to your state WIC program nutrition consultant for approval any locally produced forms (either new or revised) that would replace the state forms listed below in ¶7.1. These forms were selected because they include information on documentation required by USDA regulation. The local program must submit a draft of the locally produced form(s) to the assigned state WIC program nutrition consultant to request approval before implementation.

7.1. When the state forms listed below are revised, the local program must revise locally produced materials to reflect these changes and resubmit the form(s) to
the state WIC program for approval. Local programs have 60 days from receipt of the revised state form(s) to submit revisions of the locally produced form(s) for approval. These forms can be found in multiple languages on the Clinic Forms page of the State WIC website.

- Oregon WIC Employee Signature Form (form 57-200)
- WIC Customer Complaint Data Entry Document (form 57-500)
- Notice of WIC Ineligibility (form 57-607)
- Notice of Change in WIC Benefits (form 57-608)
- Certification Data Entry Document (form 57-615)
- Health Questionnaire: Infants/ Children (form 57-617)
- Health Questionnaire: Pregnant Women (form 57-618)
- Health Questionnaire: Postpartum Women (form 57-619)
- Your Baby’s Diet Questions (form 57-622)
- Your Child’s Diet Questions (form 57-624)
- Your Diet Questions (form 57-626)
- Participant Signature (form 57-629)
- Rights and Responsibilities (form 57-630)
- What Proof to Bring to WIC (form 57-632)
- No Proof Form (form 57-633)

**Records for state program review**

8.0 Maintain on file at the local program the following records for review by the state WIC program:

8.1. Current list of staff approved as certified professional authorities (CPA). See ◆660—Competent Professional Authority: Requirements.

8.2. WIC Transfer Card (VOC) Log or comparable TWIST reports documenting card issuance. See ◆650—WIC Transfers/VOC and WIC Overseas Program.

8.3. Local WIC policies and procedures. See ◆420—Approval Process for Local Agency Policy and Procedures

8.4. WIC Training Module completion forms for local program WIC staff. See ◆440—Staff Training Requirements

8.5. Documentation of completed local program self-evaluations. See ◆215—Local Program Monitoring and Review.

8.6. Copies of any written agreements or contracts your program has with other programs for providing WIC-related services. For example:

- Nutrition education provided by non-WIC staff
- WIC breast pump issuance by partners
- Lactation services
- Outreach and referral
8.7. Written log of outreach activities. See ♦️470—Local Program Outreach.

8.8. Local program nutrition education class lesson plans and learning objectives, including those being provided by an outside agency through a Memorandum of Understanding (MOU). See ♦️820—Quarterly Nutrition Education Contacts.

If you need this in large print or an alternate format, please call 971-673-0040.

This institution is an equal opportunity provider.

POLICY HISTORY

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<tr>
<th>Date</th>
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The date located at the top of the policy is the implementation date unless an “effective date” is noted on the policy. Policies will become compliance findings 6 months from the implementation date.

Release notes can be found in the corresponding document on the Policy and Procedure Manual page.

*Major Revisions: Significant content changes made to policy.

Minor Revisions: Minor edits, grammatical updates, clarifications, and/or formatting changes have occurred.

Date of Origin: Date policy was initially released.