I. **Background:**
The WIC Program is designed to provide food to low-income pregnant, postpartum and breastfeeding women, infants and children until the age of five and offer a combination of nutrition education, supplemental foods, breastfeeding promotion and support, and referrals for health care. The WIC Program has proven effective in preventing and improving nutrition related health problems within its population. The requirements and regulations of the WIC Program fall within Section 17(a) of Public Law 95-627 (Child Nutrition Amendments of 1978). Funding for the WIC Program is allocated through the United States Department of Agriculture, Special Supplemental Nutrition Program for WIC, Award NC700705, 7 CFR 246, CFDA 10.557

II. **Purpose:**
To improve pregnancy outcomes, reduce maternal and early childhood morbidity and mortality, and maximize the growth and development of children through improved nutritional status.

III. **Scope of Work and Deliverables:**
Deliverables 1 to 5 are process outcome objectives. The Local Health Department agrees to improve the percentage for each of the five (5) quality assurance indicators. All WIC Program-related activities should be completed within the confines of the Local Health Department’s local WIC agencies or designated...
satellite site(s) and performed by qualified WIC Program staff. Local Health Department-specific and State-specific trend data is included in Attachment A.

For Deliverables #1 through #5, the percent achieved this year shall be an increase from the percent achieved in the previous year. The previous year’s local agency data is in the Agreement Addenda Data section of the WIC website, located at http://www.nutritionnc.com/wic/wicLAR.htm.

The Local Health Department shall:

**Deliverable #1 - Coordinate with Medicaid**
A. Increase the percent of pregnant women enrolled in Medicaid who receive prenatal WIC Program services.
B. Increase the percent of children less than 12 months of age enrolled in Medicaid who receive WIC Program services.
C. Increase the percent of children 1-5 years of age enrolled in Medicaid who receive WIC Program services.

**Deliverable #2 - Provide Access to Program Services for Women**
A. Increase the percent of pregnant women enrolled in the WIC Program who receive WIC Program services during the 1st trimester of pregnancy.
B. Increase the percent of postpartum women who participated in WIC Program during pregnancy and are recertified for WIC participation by 6 weeks postpartum.

**Deliverable #3 - Provide Access to Program Services for Children**
A. Increase the percent of children less than 12 months of age served in the Child Health Clinic who receive WIC Program services.
B. Increase the percent of children 1 to 5 years of age served in the Child Health Clinic who receive WIC Program services.

**Deliverable #4 - Promote Healthy Weights**
A. Increase the percent of children 2 to 4 years of age who receive WIC Program services who have a Body Mass Index (BMI) below the 85th percentile but above the 5th percentile for age and gender.
B. Increase the percent of women with live term singleton births who receive WIC Program services prenatally and gain weight within the National Academy of Sciences - Institute of Medicine (IOM) Recommended Total Weight Gain Ranges During Pregnancy.

**Deliverable #5 - Breastfeeding Promotion and Support**
A. Increase the percent of women participating in WIC who initiate breastfeeding.
B. Increase the percent of women participating in WIC who exclusively breastfeed.
C. Increase the percent of infants participating in WIC who are breastfeeding at 6 weeks of age.
D. Increase the percent of infants participating in WIC who are breastfeeding at 6 months of age.

**Deliverable #6 - Required Meetings**
Require at least one staff person to attend each Nutrition Service Branch sponsored WIC meeting or training session that addresses new program policy and procedures and/or changes in current policies and procedures.

**Deliverable #7 - Nutrition Education Plan**
A. Write and submit a Fiscal Year 2013-2014 Nutrition Education Plan which addresses at least one of these focus areas:
• Establish or expand activities that promote physical activity;
• Establish or expand activities that promote eating more fruits and vegetables;
• Establish or expand activities that promote drinking low-fat or non-fat milk (1% or less) among persons 2 years of age or older;
• Establish or expand community partnerships dedicated to breastfeeding promotion;
• Acquire training to improve the counseling or clinical skills of WIC Program staff;
• Implement a new strategy for delivering nutrition education;
• Establish or expand activities that promote meal preparation at home;
• Establish or expand activities that promote healthy beverage choices;
• Other focus area pre-approved by the respective Regional Nutrition Consultant.

B. Describe at least one activity that the Local Health Department’s WIC Program will implement this fiscal year to address the selected focus area. Include at a minimum, a description of what the activity is, how it will be implemented, who will take the lead responsibility for implementation, who the target audience is, and the estimated timeline for development and implementation.

**Deliverable #8 - Evaluation of Prior Year's Nutrition Education Plan**

Write and attach a brief evaluation of the Local Health Department’s Fiscal Year 2012-2013 Nutrition Education Plan. Address the following questions as applicable along with any other pertinent information about the activities. Was the plan implemented? If not, why not? To what degree was the plan successful? What was the participant response to the activities? Will the Local Health Department continue the activities? If not, why not? Will you modify any of the activities? If so, how?

**Deliverable #9 - Staffing**

A. The Local Health Department shall ensure that any nutritionist hired into or contracted with to determine eligibility for clients within the WIC Program meets or exceeds the education and experience required by the Office of State Personnel for a Nutritionist I.

B. The Local Health Department shall ensure that any Registered Dietetic Technician (DTR) hired into or contracted with to determine eligibility for clients within the WIC Program meets or exceeds the education and experience required by the Office of State Personnel for a Dietetic Technician Registered-Local. The DTR must be supervised by a Registered Dietitian or a Nutritionist.

**IV. Performance Measures/Reporting Requirements:**

Maintain active participation in the WIC Program, which is at least 97% of the base caseload. Base Caseload for each Local Health Department’s local WIC agency is provided in Attachment B.

**V. Performance Monitoring and Quality Assurance:**

A. Caseload participation is tracked and monitored monthly.

B. The Nutrition Services Plan is reviewed by Nutrition Services Branch staff and approved annually.

C. According to federal regulations, the State Program Office is required to conduct a comprehensive monitoring visit of each agency every two years. If areas of concern are found, the agency is required to write a corrective action plan, which is reviewed and approved by the team that monitored the agency.

D. Regional Nutrition Consultants make periodic site visits to local agencies to ensure full implementation of the corrective action plan, as well as to follow-up on any issues of concern.

E. Every two years, the Local Health Department’s local WIC agency conducts a comprehensive self-assessment. If areas of concern are found, the agency develops a corrective action plan. This plan is reviewed and approved by Division staff, and later assessed to ensure full implementation.
VI. Funding Guidelines or Restrictions:

A. The Local Health Department must complete Attachment C, “WIC Budget Page” to allocate funds among the four WIC activities. The Local Health Department must follow the instructions on the Budget Page so that the total allocations match the total on the Budgetary Estimate, Attachment D. This form is to be signed and returned with the WIC Agreement Addendum to the Division’s Contract Unit.

B. Final reconciliation must occur no later than November 30, 2013 for Federal Fiscal Year 2013 funding. This funding is delineated by the code “GD” and shall be used to support program costs incurred during the time period of June 1, 2013 through September 30, 2013.

C. Final reconciliation must occur no later than July 31, 2014 for Federal Fiscal Year 2014 funding. This funding is delineated by the code “GE” and shall be used to support program costs incurred during the time period of October 1, 2013 through May 31, 2014.

D. At the discretion of the Director of the Nutrition Services Branch, funding may be reduced if the average monthly participation falls below 97% of the base caseload.

E. Local agencies must meet the minimum/maximum thresholds as applicable for specific program areas. Attachment C includes the total budget and thresholds for the various program areas.