



# **WIC Local Agency Monitoring Process**

## **Overview**

The Montana WIC State Office will complete a comprehensive monitoring evaluation for each independently operating clinic within each contracted agency at least bi-annually. This document outlines the components of the general program monitoring process, timelines for each activity, and reference to associated materials. In addition to ensuring program compliance, our goal is also to support local agencies through technical assistance, recognize areas of best practice, and exceptional work with this process.

Additional program reviews for Farmers Market Nutrition Program (FMNP) and the Breastfeeding Peer Counselor Program (BFPCP) will be conducted during the same time as the regular program reviews. Separate forms for process and documentation will be used and referenced.

## **Communication**

All monitoring activities will be communicated in the following way:

- Written material will be mailed certified to the contract liaison identified during the contracting process for the current federal fiscal year.
- A copy of materials will be emailed to the WIC Director and agency Health Officer (or equivalent position) identified during the contracting process of the current federal fiscal year.
- It is expected that the individuals receiving the communication will share relevant information with interested parties which may include, but are not limited to, agency staff and contract signors.
- The dates of correspondence will be documented based on the signed receipts of certified mail, and/or email read receipt, and will start each timeline in the corresponding process.
  - If certified mail receipt is not received, follow-up will take place with the intended recipient to verify notification was received or needs to be re-sent.
  - This documentation will be maintained in the electronic monitoring file at the State Office.

## **Scheduling**

By July 31<sup>st</sup> of each year, State agency staff will determine the list of agencies to be monitored, and tentative schedule of site visit for the upcoming fiscal year. A clinic services staff member will be assigned to each agency and will then be responsible to follow through on all monitoring activities, beginning with confirmation and notification of the on-site visit with local agency leadership staff.

## **Initial Notification Packet**

A packet of information will be sent to the agency contacts *at least 60 days* prior to the on-site monitoring visit. Several items will be due back to the State Office for review, these items must be received *no later than 30 days* prior to the on-site visit. This packet will include:



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- An official notification letter specifying the details of the visit, including date(s) of visit, times of entrance and exit, months of interest for financial review, and information about associated materials included. The notification will also include if a BFPCP and/or FMNP review will be completed in conjunction with general monitoring.
- This Monitoring Process document
- A flowsheet showing the overall monitoring process at a glance, including timelines for each activity.
- The Financial Questionnaire and copies of expenditure reports for the months being reviewed.
- Computer Inventory List for local agency verification

### **Pre-Monitoring Activities**

The State WIC staff completes the following activities prior to the visit on-site.

#### Pre-Monitoring Worksheet:

The State WIC staff completes an internal pre-visit worksheet to review local agency program areas that cannot be evaluated in the chart review or on-site during observation. This worksheet includes a review of the following:

- Agency information and structure
- Review of last monitoring
- Contract/Fiscal Compliance
- Time study
- Integrity
  - Separation of Duties
  - Over issuance of WIC foods
  - Card Replacements
- Local Agency Clinic Roles
- Training
- Complaints
- State Office Compliance Checks
- Nutrition/Breastfeeding
- Breast Pump Inventory
- Outreach
- Information technology

For each of the areas identified in the pre-visit worksheet, State Office staff will determine if a finding is warranted, or if it is a discussion item, based on severity of the issues and if trends are identified.



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### Chart Reviews:

State WIC staff will review WIC participant charts for compliance prior to the on-site visit. The finding areas reviewed are clearly outlined in the *Chart Review Form* and the *Chart Review Areas Explained Form*. These finding areas are set for each two-year review cycle, however they may change over time to best ensure regulatory and policy compliance as well as program quality and integrity.

The size of the agency, based on participation identified in the current contract funding formula, will determine how many charts to review:

- Small Clinics (0-400 Participants): 10 Charts
  - 4 children, 2 pregnant women, 1 breastfeeding mother and her infant, 1 non-breastfeeding mother and her infant
- Medium Clinics (401-800 Participants): 15 Charts
  - 4 children, 3 pregnant women, 2 breastfeeding mothers and their infants, 2 non-breastfeeding mothers and their infants
- Large Clinics (>801 Participants): 20 Charts
  - 4 children, 4 pregnant women, 3 breastfeeding mothers and their infants, 3 non-breastfeeding mothers and their infants

*Note: If a chart pulled for a mother-infant dyad can only be reviewed for one of the members (i.e., foster care situation), the State staff may select another chart at their discretion to make up the total number of charts to be reviewed. The State staff has the discretion to change ratios of the chart to review.*

\*Agencies with more than 3 independently operating clinics will have 4 charts reviewed from each of the clinics (1 mother-infant dyad, 1 child, and 1 pregnant woman)

Charts to be reviewed will be obtained from a random data pull and will be selected based on the following criteria:

- Verified to have been certified (including VOC) and served within relevant local agency
- Include at least 2 visits, preferably more (i.e., at least certification, follow-up and mid-certification is ideal)
- At least one “high-risk” chart based on nutrition risk criteria and/or food package III designation

The chart review period may include any timeframe since the last monitoring evaluation, however, only one certification period will be considered, and this will be clearly identified in the report.

### **FMNP and/or BFPCP Review**

If the local agency receives funds for, and administers, one of these programs they will also be monitored in conjunction with general program monitoring. Each of the programs has a separate form for pre-visit activities, chart review, and on-site observation.

- Pre-visit activities, including chart reviews, will be completed by the FMNP and/or the BFPCP accordingly



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- Some aspects of monitoring for those programs will cross reference with general monitoring (i.e., financial integrity and processes, staff training, program management, complaints, and civil rights)
- The final report will incorporate findings from all reviews completed
- Corrective Action Plans will be completed and submitted using the same forms for the regular monitoring, and on the same timeline
- If an agency is Tier 3 in regular monitoring, but has no (or minimal) findings in BFPCP or FMNP monitoring, the State Agency may opt to not review these programs during the additional monitoring evaluation that will take place the following year

### **On-Site Review**

The purpose of an on-site visit is to confirm and witness those programmatic activities are taking place according to regulation and policy, as well as to confirm that what is being documented in chart is what is happening in the clinic. Additionally, this is an opportunity for State and Local staff to share information and answer questions about the clinic operations and monitoring process.

The following activities will take place on-site:

- Entrance Interview- this will take place at the beginning of the first day to introduce staff and review the expectations of the visit. This is a very brief meeting intended for staff who will be directly participating in the clinic review.
- Observation- the State staff will observe clinic appointments, processes, and environment to document information in a variety of areas of interest. The areas observed are clearly identified in the observation forms.
  - If an appointment or activity is not available for observation, there will be interviews with staff to describe the process that would have been observed
- Exit Interview- at the conclusion of the monitoring visit, State staff will conduct an exit interview recapping the preliminary findings from the monitoring evaluation. Final score and findings will not be known at this time. All pertinent WIC and management staff should plan on attending the exit interview. This will be a more formal discussion of the monitoring process status to date.

### **Follow-up Procedures**

After on-site review, staff will compile the results of the monitoring and document this information in a monitoring report. The report, along with associated cover letter, scoring sheet, and (if applicable) FMNP and/or BFPCP forms will be sent to the agency within 30 days of the on-site visit. The local agency is welcome to review the report and consult with the State Office on any findings or questions that arise.

A corrective action plan (CAP)\* addressing the finding areas identified in the monitoring report will be submitted to the State Office within 30 days of receipt. Charts with eligibility errors, must be fixed as part of the CAP submission. A letter will be sent to the Local Agency indicating acceptance or denial of the CAP within 30 days of receipt. If the CAP is denied, the local agency



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will be given an additional 15 days to update and re-submit their CAP. Documentation of completed activities will be submitted to the State Office within 60 days.

*\*Note: The CAP is developed by the local agency and should incorporate specific activities to address each finding area to avoid deficiencies going forward. The State Office will provide a template. The local agency can choose to use it or create their own.*

### Scores and Tiers

The State Office will use an objective method to determine the “tier” a local agency falls into, which will ultimately determine follow-up activities.

Scoring (BFPCP and FMNP are not scored):

- Each chart, observation and pre-visit finding area will be assigned a point value
- Findings will be entered into scoring spreadsheet with pre-set calculations to determine a percent “compliance”
- Staff will look for trends to determine whether an issue is a finding or not, which will include the following criteria:
  - More than 1 issue in an identified chart review area for small agencies
  - More than 2 issues in an identified chart review area for medium agencies
  - More than 3 issues in an identified chart review area for large agencies
- Issues identified but not considered “trends” will be listed in the discussion section of the monitoring report rather than scored, and will not require a CAP.
- An additional factor in the scoring sheet will include a calculation related to how many areas have findings in them. The purpose of this is to account for the range of non-compliance in the overall monitoring process.
- Observation and Pre-Visit review areas are also assigned a point value which will be calculated if a finding is assessed.

Tier 1 (≥80%) follow-up:

Self-monitoring is required to be completed at the local level using State forms for chart review and observation the following year. The Local Agency will request the charts from the State Office to be used in this review. Any issues found during this review will be addressed within 60 days of the review. Results of this monitoring will be maintained on file and reviewed at the next State on-site monitoring visit.

Tier 2 (65-79%) follow-up:

Six months after the monitoring report is received, the local agency will complete self-chart reviews on 10 charts. A meeting will be set up with State Office staff to review the self-chart audit. If, after the 6-month self-review, the state agency has not seen significant improvement, they may assign 9 month and/or 12-month additional self-chart reviews. All documentation from the review(s) will be submitted to the State Office (including observation forms).



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Tier 3 (<65%) follow-up:

Self-chart reviews are required on 10 charts at 6 and 9 months after the monitoring report is received/ All documentation from the reviews will be submitted to the State Office (including observation forms). A meeting will be set up with State Office staff to review each self-chart audit. An additional full monitoring evaluation will be completed one year after the initial visit (agency will continue to remain on cycle for future monitoring).

## Scoring Example for Small Agency (<400 participants):

Since this is a small agency, only review areas with 2 or more findings are considered a trend and added to the score sheet.

- Files: Number of charts reviewed by State Office.
- Occurrences: Number of finding(s) in review area. In example below, 4 occurrences in Risk Code Assignment means 4 charts of the 10 reviewed were noncompliant in this area.
- Weight: Maximum number of points possible assigned to each review area.

Review Areas	Files	Occurrences	Weight	Percentage	Score
Eligibility Det. Timeline	10	2	10	80%	8.0
Participant ID	10	0	10	100%	10.0
Authorized Rep. ID	10	0	10	100%	10.0
Residence Doc.	10	0	10	100%	10.0
Income/Adj. Verif.	10	2	20	80%	16.0
VOC	10	0	5	100%	5.0
Risk Code Assignment	10	4	10	60%	6.0
Anthro./Hgb. Measures	10	0	10	100%	10.0
Food Package	10	0	10	100%	10.0
Nutrition and BF Ed.	10	0	10	100%	10.0
NAQ	10	0	5	100%	5.0
Goals	10	0	10	100%	10.0
Referrals	10	3	10	70%	7.0
EOC/NOI	10	0	10	100%	10.0
Pre-Monitoring	10	0	50	100%	50.0
Observation	17	2	50	88%	44.1
Fields/Findings	14	4	60	71%	42.9
Total Score			300.0	88%	264.0
Tier 1 ≥ 80%					
Tier 2 65% to 79%					
Tier 3 ≤ 64%					

264 (points earned) / 300 (maximum points) = .88 or 88% (Score)