

# Division of Public Health

## Agreement Addendum

### FY 21-22

Women's and Children's Health Section /  
Nutrition Services Branch

**DPH Section / Branch Name**

Lisa D. Dupree, (919) 707-5708  
Lisa.dupree@dhhs.nc.gov

**DPH Program Contact**

(name, phone number, and email)

**Local Health Department Legal Name**

403 WIC

**Activity Number and Description**

06/01/2021 – 05/31/2022

**Service Period**

07/01/2021 – 06/30/2022

**Payment Period**

**DPH Program Signature**

**Date**

(only required for a negotiable agreement addendum)

**Original Agreement Addendum**

**Agreement Addendum Revision #** \_\_\_\_

**I. Background:**

The WIC Program is designed to provide food to low-income pregnant, breastfeeding, and postpartum women and their 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 Healthy People 2030 objectives launched by the US Department of Health and Human Services, while general in nature, has target areas where action must be taken. The Women's and Children's Health Section has proceeded in accordance with the Healthy People 2030 objectives and has the goal to increase and sustain the proportion of North Carolina infants who are breastfed exclusively through age 6 months to 42.4% and who are breastfed at 1 year to 54.1%. Currently, North Carolina fails to meet the objectives in the areas of breastfeeding exclusivity and duration. Breastfeeding promotion and support are required components of the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) Program. The North Carolina WIC Program strives to increase the incidence and duration of breastfeeding among women enrolled in the Program.

The requirements and regulations of the WIC Program fall within Section 17(a) of Public Law 95-627 (Child Nutrition Amendments of 1978) and the Healthy, Hunger-Free Kids Act of 2010. 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.

Health Director Signature

(use blue ink)

Date

Local Health Department to complete:  
(If follow-up information is needed by DPH)

LHD program contact name: \_\_\_\_\_

Phone number with area code: \_\_\_\_\_

Email address: \_\_\_\_\_

**Signature on this page signifies you have read and accepted all pages of this document.**

**II. Purpose:**

To improve pregnancy outcomes, increase breastfeeding initiation and duration rates, 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:**

- A. The Activity 403 WIC Agreement Addendum requires further negotiation between the Nutrition Services Branch and the Local Health Department. For this Agreement Addendum, the Local Health Department shall complete the Attachment B “WIC Budget Page” to allocate funds among the four WIC activities (Client Services, Breastfeeding Promotion, Nutrition Education, and General Admin) as described in Paragraph 2 of Section VI Funding Guidelines and Restrictions. The Attachment B is to be returned with the signed and dated Agreement Addendum. When the Nutrition Services Branch representative and the Local Health Department reach an agreement on the information contained in Attachment B, the Nutrition Services Branch representative will sign the Agreement Addendum to execute it.
- B. The Local Health Department shall maintain active participation in the WIC Program, which is at least 97% of the base caseload. The base caseload for the Local Health Department’s local WIC agency is provided in Attachment A.
- C. Deliverables #1 to #3 are process outcome objectives. The Local Health Department agrees to improve the percentage from the last available data for each of these three 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 sites and performed by qualified WIC Program staff.

The last available Local WIC agency data and Local Health Department-specific and state-specific trend data is in the Agreement Addenda Data section of the WIC website, located at <https://www.nutritionnc.com/wic/wicLAR.htm>.

The Local Health Department shall:

**1. Deliverable #1 – Provide Access to Program Services for Women**

- a. Increase the percentage of pregnant women enrolled in Medicaid who receive prenatal WIC Program services.
- b. Increase the percentage of pregnant women enrolled in the WIC Program who receive WIC Program services during the first trimester of pregnancy.
- c. Increase the percentage of pregnant women who enrolled in the WIC Program and who subsequently certify as a Breastfeeding Woman, Partially Breastfeeding Woman or Postpartum Woman within 42 days (6 weeks) of the actual delivery date.

**2. Deliverable #2 – Promote Healthy Weights**

- a. Increase the percentage 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 5<sup>th</sup> percentile for age and gender.
- b. Increase the percentage of women with live term singleton births who gain weight within the National Academy of Sciences – Institute of Medicine (IOM) Recommended Total Weight Gain Ranges During Pregnancy.

**3. Deliverable #3 - Breastfeeding Promotion and Support**

- a. Increase the percentage of women participating in WIC who initiate breastfeeding.
- b. Increase the percentage of infants participating in WIC who are breastfeeding at 6 weeks of age.
- c. Increase the percentage of infants participating in WIC who are breastfeeding at 3 months of age.
- d. Increase the percentage of infants participating in WIC who are breastfeeding at 6 months of age.
- e. Increase the percentage of infants participating in WIC who are breastfeeding at 12 months of age.
- f. Assess current proportion of infants who are breastfed exclusively at 6 months and who are breastfed at 1 year to aid in establishing future objectives in accordance with the Healthy People 2030.

**4. Deliverable #4 – Compliance**

- a. Complete all work under this Agreement Addendum in compliance with all applicable federal and state statutes, rules, regulations, and policies, including 42 U.S.C. 1786, 7 C.F.R. Part 246, Title 10A, Subchapter 43D of the North Carolina Administrative Code, and the *North Carolina WIC Program Manual*.
- b. Maintain active inventory and record of any medical or computer equipment purchased for use by the local agency WIC Program using WIC funds, having an acquisition cost of \$500 or more, as outlined in the WIC Program Manual. In accordance with the November 2018 North Carolina Association of Local Health Directors (NCALHD) Maternal and Child Health WIC Committee Meeting, the following data elements shall also be included on the inventory:
  - (1) Funding Source
  - (2) Asset Number
  - (3) Acquisition Date – Year/Month
  - (4) Cost
  - (5) Manufacturer
  - (6) Model
  - (7) Serial Number
  - (8) Location

**5. Deliverable #5 - 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.

**6. Deliverable #6 - Nutrition Education Plan**

- a. With this WIC Agreement Addendum, write and submit a Fiscal Year 2021-2022 Nutrition Education Plan which addresses at least one of these focus areas:
  - (1) Establish or expand activities that promote physical activity;
  - (2) Establish or expand activities that promote eating more fruits and vegetables;
  - (3) Establish or expand activities that promote eating more whole-grain food;

- (4) Establish or expand activities that promote drinking low-fat or non-fat milk (1% or less) among persons 2 years of age or older;
  - (5) Establish or expand community partnerships dedicated to breastfeeding promotion;
  - (6) Acquire training to improve the counseling or clinical skills of WIC Program staff;
  - (7) Implement a new strategy for delivering nutrition education;
  - (8) Establish or expand activities that promote meal preparation at home;
  - (9) Establish or expand activities that promote healthy beverage choices;
  - (10) Other focus area pre-approved by the respective Regional Nutrition Consultant.
- b. In the Fiscal Year 2021-2022 Nutrition Education Plan, describe at least one activity that the Local Health Department's WIC Program will implement this fiscal year to address the selected focus area. At a minimum, include:
- (1) A description of what the activity is;
  - (2) How it will be implemented;
  - (3) Who will take the lead responsibility for implementation;
  - (4) Who the target audience is, and;
  - (5) The estimated timeline for development and implementation.

#### **7. Deliverable #7 - Evaluation of Prior Year's Nutrition Education Plan**

With this WIC Agreement Addendum, write and submit a brief evaluation of the Local Health Department's Fiscal Year 2020-2021 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 will the activities be modified?

#### **8. Deliverable #8 - WIC Program Recruitment and Retention Plan**

- a. With this WIC Agreement Addendum, write and submit a description of a least one activity that the Local Health Department's WIC Program will implement this fiscal year to address the selected population which targets the recruitment or retention of a specific WIC participant category.
- b. At a minimum include:
  - (1) Identification of the target population
  - (2) Why the target population was selected
  - (3) How success will be defined (e.g., improved show rates; improved Enrollment to Participation rates; improved coverage as shown in the annual Population at Risk report)
  - (4) A description of the specific activity or activities that will be used, and
  - (5) The estimated timeline for development, implementation, and evaluation

#### **9. Deliverable #9 - WIC Program Staffing**

- a. Ensure that any person hired to determine nutrition risk eligibility and prescribe a food package for the WIC Program is a Competent Professional Authority (CPA). A CPA may be a nutritionist, registered dietitian, dietetic technician registered (DTR), registered nurse, nurse practitioner, physician assistant, or physician. A CPA shall determine if a person is at nutritional risk and eligible for the WIC Program through a comprehensive

- nutrition assessment. At a minimum, the CPA shall meet or exceed the education and experience required by the Office of State Human Resources for a Nutritionist I-Local.
- b. Ensure that any Dietetic Technician Registered (DTR) hired or contracted with, who has the responsibility for determining the eligibility of clients, meets or exceeds the education and experience required by the Office of State Human Resources for a Dietetic Technician Registered-Local. The DTR must be supervised by a Registered Dietitian or a Nutritionist.
  - c. Ensure that any staff member whose salary is paid in whole or in part by WIC Program funds is not an owner, officer or manager, or the spouse, child, or parent of an owner, officer or manager of any authorized WIC vendor in the same county served by the Local WIC Program. Ensure that any staff member whose salary is paid in whole or in part by WIC Program funds is not an employee of an authorized WIC vendor or the spouse, child, or parent of an employee who handles or transacts WIC food benefits at any authorized WIC vendor in the same county served by the Local WIC Program. Such situations present a conflict of interest.
  - d. Ensure compliance with the federal regulation related to Separation of Duties as outlined in the WIC Program Manual.
  - e. All standing orders or protocols developed for nurses in support of this program must be written in the North Carolina Board of Nursing format. All local health departments shall have a policy in place that support nurses working under standing orders.  
<https://www.ncbon.com/vdownloads/position-statements-decision-trees/standing-orders.pdf>

#### **10. Deliverable #10 - Vendor Management**

- a. The Local Health Department shall ensure that designated staff perform the following vendor management activities:
  - (1) Provide and accept vendor applications at least one month every quarter.
  - (2) Review vendor applications in addition to related forms and work with applicants to ensure documentation is complete.
  - (3) Provide or facilitate orientation training to vendor applicants in their service area.
  - (4) Enter information from each vendor's application for authorization into the Crossroads system and then submit the vendor application and related forms to the Division once the vendor applicant's application packet is complete.
  - (5) Perform a pre-authorization monitoring visit of the vendor applicant.
  - (6) Provide vendors with the WIC Vendor Manual, all other Vendor Manual amendments, and any other documents and materials required for the vendors' participation as authorized vendors.
  - (7) Provide or facilitate annual vendor training for authorized vendors in the service area. Maintain attendance rosters for this training and add the vendors' training attendance dates to the Crossroads system to track the vendors' completion of this annual training.
  - (8) Offer additional training to vendors upon request by the vendor or Nutrition Services Branch. Maintain attendance rosters for this additional training in the local agency and have available for State agency monitoring visits.
  - (9) Assist vendors with questions regarding their participation in the WIC Program.

- (10) Conduct on-site routine monitoring, including verification of minimum inventory requirements, of all vendors in its service area at least once every three federal fiscal years (FFY), and conduct routine monitoring of at least one-third of its vendors each FFY; The Local Health Department vendor staff must also monitor a vendor as follows:
  - (a) Within three weeks of a routine monitoring visit during which WIC Program violations are found;
  - (b) Within seven days of a request by the Nutrition Services Branch;
  - (c) When the vendor has had two or more violations assessed (same or different) by the Nutrition Services Branch during the previous FFY;
  - (d) When a vendor has been disqualified from the Program within the last three years and is now participating, and;
  - (e) New vendors by end of the federal fiscal year following the date of their authorization approval.
- (11) Document all monitoring visits on the Vendor Monitoring Report form (DHHS 2925) on the date of the monitoring visit and in the Crossroads system, prior to sending the Vendor Monitoring Report form to the Nutrition Services Branch for review.
- (12) Provide requested information to the Nutrition Services Branch or the Nutrition Services Branch's attorney and ensure the appropriate staff members are available to prepare for and testify at vendor hearings.
- (13) Report immediately to the Nutrition Services Branch complaints related to a vendor's business integrity or suspected fraud.
- (14) Report immediately to the Nutrition Services Branch any requests for technical assistance received from WIC vendors that cannot be resolved by the vendor's eWIC point of sale provider or local WIC staff.
- (15) Disseminate promotional materials and resources for eWIC provided by the Nutrition Services Branch to authorized vendors.
- (16) Participate in Level 3 certification testing, as necessary, to ensure that new vendors are able to properly transact eWIC benefits prior to authorization and authorized vendors can continue to accurately transact eWIC benefits if they obtain a new point of sale system, upgrade their point of sale system from a stand beside device to an integrated system.
- (17) Prohibit the use and disclosure of confidential vendor applicant and vendor information in accordance with 7 C.F.R. § 246.26.

### **11. Deliverable #11 – National Voter Registration Act (NVRA)**

Comply with the requirements of the National Voter Registration Act (NVRA) of 1993 whenever an individual applies for WIC Program services, is subsequently certified for Program services, or notifies staff of a change in address or name. For infants/children, the NVRA requirements apply to their parents/guardians/caretakers.

### **12. Deliverable #12 – Assurance of Civil Rights Compliance**

Comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C.2000d et seq.), Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C.794), Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.); Title II and Title III of the Americans with Disabilities Act (ADA) of 1990 as amended by the ADA Amendment Act of 2008 (42 U.S.C. 12131-12189) as implemented by Department of Justice

regulations at (28 CFR Parts 35 and 36); Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency." (August 11, 2000), all provisions required by the implementing regulations of the U.S. Department of Agriculture (7 CFR Part 15 et seq); and FNS directives and guidelines to the effect that no person shall, on the ground of race, color, national origin, age, sex, or disability, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity for which Federal financial assistance is received for the administration of the WIC Program; and hereby gives assurances that it will immediately take measures necessary to effectuate this agreement.

By providing this assurance, the Local Health Department agrees to compile data, maintain records and submit records and reports as requested by the Nutrition Services Branch to permit effective enforcement of the nondiscrimination laws, and to permit the Nutrition Services Branch personnel during normal working hours to review and copy such records, books and accounts, access such facilities, and interview such personnel as needed to ascertain compliance with the non-discrimination laws. If there are any violations of this assurance, the Nutrition Services Branch shall have the right to seek judicial enforcement of this assurance.

This assurance is given in consideration of and for the purpose of obtaining any and all Federal financial assistance, grants, and loans of Federal funds, reimbursable expenditures, grant, or donation of Federal property and interest in property, the detail of Federal personnel, the sale and lease of, and the permission to use Federal property or interest in such property or the furnishing of services without consideration, or at a consideration that is reduced for the purpose of assisting the recipient, or any improvements made with Federal financial assistance extended to the Program applicant by USDA. This includes any Federal agreement, arrangement, or other contract that has as one of its purposes the provision of cash assistance for the purchase of food, and cash assistance for the purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreement made in this assurance.

### **13. Deliverable #13 – Nondiscrimination Statement**

To be in compliance with the requirements of the USDA, the following nondiscrimination statement must be included with exact language on all notifications and administrative forms that relate to program eligibility and certification:

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotope, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: [How to File a Complaint](#), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) mail: US Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410; or
- (2) fax: (202) 690-7442; or
- (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov).

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

**A. Performance Measures:**

- 1. Maintain active participation in the WIC Program, which is at least 97% of the base caseload. The base caseload for the Local Health Department's local WIC agency is provided in Attachment A.
- 2. Prepare and maintain attendance rosters for the annual vendor training and other vendor training described in Section III, Paragraphs C.9.a.(7) and C.9.a.(8). Original copies of rosters shall be made available for review by the Nutrition Services Staff during monitoring visits.

**B. Reporting Requirements:**

- 1. With the signed Agreement Addendum, submit the Nutrition Education Plan for Fiscal Year 2021-2022 as described in Section III, Paragraph C.6.
- 2. With the signed Agreement Addendum, submit an evaluation of the 2020-2021 Nutrition Education Plan as described in Section III, Paragraph C.7.
- 3. With the signed Agreement Addendum, submit the Recruitment and Retention Plan for Fiscal Year 2021-2022 as described in Section III, Paragraph C.8.

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

- A. The Nutrition Services Branch staff uses the Crossroads system to track participation. Monthly participation reports are prepared, analyzed, and distributed to Local WIC Directors and Local Health Directors for evaluation and to inform trend analysis.
- B. The Nutrition Education Plan is reviewed by Nutrition Services Branch staff and approved annually.
- C. The Recruitment and Retention Plan is reviewed by Nutrition Services Branch staff and approved annually.
- D. According to federal regulations, the Nutrition Services Branch is required to conduct a comprehensive monitoring visit of each WIC agency every two years. If areas of concern are found, the WIC agency is required to write a corrective action plan, which is reviewed and approved by the Nutrition Service Branch staff who monitored the WIC agency.
- E. Nutrition Service Branch staff shall follow up on the implementation of any corrective action plan within six months of the initial site visit. To close the corrective action plan, Nutrition Service Branch staff will follow up to verify full implementation of the corrective action plan. If the Local Health Department is deemed out of compliance, Nutrition Services Branch staff shall provide technical assistance, and funds may be withheld until the Local Health Department is back in compliance with deliverables.

- F. In the year between the Nutrition Services Branch’s comprehensive monitoring visits, the Local Health Department’s local WIC agency shall conduct a comprehensive self-assessment. If areas of concern are found, the WIC agency shall develop a corrective action plan. This plan is reviewed and approved by Nutrition Services Branch staff, and later assessed to ensure full implementation.
- G. Local WIC agency inventory records are reviewed by Nutrition Services Branch staff during routine monitoring visits.

## VI. Funding Guidelines or Restrictions:

- A. Requirements for pass-through entities: In compliance with 2 *CFR* §200.331 – *Requirements for pass-through entities*, the Division of Public Health provides Federal Award Reporting Supplements to the Local Health Department receiving federally funded Agreement Addenda.
  - 1. Definition: A Supplement discloses the required elements of a single federal award. Supplements address elements of federal funding sources only; state funding elements will not be included in the Supplement. Agreement Addenda (AAs) funded by more than one federal award will receive a disclosure Supplement for each federal award.
  - 2. Frequency: Supplements will be generated as the Division of Public Health receives information for federal grants. Supplements will be issued to the Local Health Department throughout the state fiscal year. For federally funded AAs, Supplements will accompany the original AA. If AAs are revised and if the revision affects federal funds, the AA Revisions will include Supplements. Supplements can also be sent to the Local Health Department even if no change is needed to the AA. In those instances, the Supplements will be sent to provide newly received federal grant information for funds already allocated in the existing AA.
- B. The Local Health Department must complete Attachment B, “WIC Budget Page” to allocate funds among the four WIC activities (Client Services, Breastfeeding Promotion, Nutrition Education, and General Admin) with a current participant rate of \$16.50 per participant per month. The Local Health Department must follow the instructions on the Budget Page so that the total allocations match the total on the Budgetary Estimate. Local WIC agencies must meet the minimum/maximum thresholds as applicable for specific program areas. The WIC Budget Page form is to be signed and returned with the WIC Agreement Addendum to the Division’s Contract Unit.
- C. Final reconciliation by Federal Funding Year which shall be used to support program costs during these periods:

Priority	Code	Service Period	Final Reconciliation Date
1	GB	June 1, 2021 – September 30, 2021	November 30, 2021
2	GC	October 1, 2021 – May 31, 2022	June 30, 2022

- D. At the discretion of the Nutrition Services Branch Head, funding may be reduced if the average monthly participation falls below 97% of the base caseload.
- E. At the discretion of the Nutrition Services Branch Head, additional funding may be provided to the Local Health Department if the average monthly participation rises above 100% of the base caseload assignment, at which time the base caseload assignment will also increase through the issuance of an Agreement Addendum Revision.
- F. The Local Health Department shall develop a process for monitoring spending in an effort to avoid lapsing funds. At the discretion of the Nutrition Services Branch Head, funding allocation may be reduced if it is determined the local agency is at risk of lapsing funds.