Local Agency Profile

Local Agency Profile

Save & Return

Log in

ATTENTION WIC DIRECTORS: Please do not create a new log in. Information for logging in will be provided at the Regional WIC Directors Meeting in January.

Local Agency Name: *

Regional Nutrition Consultant: *

Local Agency Overview

Consolidated Human Services Agency: ?

○ Yes
○ No

Health Director Information

Federally Qualified Health Center's Director

Name:

Title ?

Credentials:

Direct Office Phone Number *(include area code)* ?

Work Cell Phone Number: *(include area code)* ?

Email Address:

Confirm Email Address:

Health Director's Status? ○ Permanent ○ Interim

FQHC's Director's Status? ○ Permanent ○ Interim

Is the Health Director the WIC Director's direct supervisor?

○ Yes
○ No

Nursing Director/Supervisor Information

Nursing Director/Supervisor Name:

Nursing Director/Supervisor Status? ○ Permanent ○ Interim

Is the Nursing Director the WIC Director's direct supervisor?

○ Yes
○ No

WIC Director Information

WIC Director Name:

Credentials:

Local Agency Class Specifications:

Direct Office Phone Number: *(include area code)* ?

Work Cell Phone Number: *(include area code)* ?

Email Address:

Confirm Email Address:

WIC Director's status? ◯ Permanent ◯ Interim

Provide emergency contact information for the WIC Director should the CNSS need to contact him or her outside of business hours.

WIC Director's Supervisor's Information

WIC Director's Supervisor Name:

Credentials:

Title

Direct Office Phone Number:
(include area code) ?

Email Address:

Confirm Email Address:

Budget/Fiscal Officer Information

Budget/Fiscal Officer Name:

Email Address:

Confirm Email Address:

Phone Number:
(include area code) ?

Maternal Child Health Services

Maternal Child Health Services Provided by the Local Agency:
(select all that apply) ?

- ☐ Care Management for At-Risk Children (CMARC)
- ☐ Care Management for High-Risk Pregnancies (CMHRP)
- ☐ Child Health
- ☐ Dental Services
- ☐ Family Planning
- ☐ Immunizations
- ☐ Medical Nutrition Therapy
- ☐ Prenatal Care

WIC Program Information

Enter the requested information for each required position in the local agency.

Does your local agency use the State Office Of Human Resources (OSHR) for human resources management?

- ○ Yes
- ○ No

Does your agency receive funding for operations in addition to WIC funds provided via Agreement Addenda 403?

- ○ Yes
- ○ No

Please indicate your source of additional funding.

Breastfeeding Program Management

Breastfeeding Support Phone Number: *(include area code)* ?

Breastfeeding Coordinator

Breastfeeding Coordinator Name:

Credentials:

Email Address:

Confirm Email Address:

Does the Breastfeeding Coordinator serve as the Peer Counselor Coordinator?

- ○ Yes
- ○ No

Peer Counselor Coordinator

Peer Counselor Coordinator Name:

Credentials:

Email Address:

Confirm Email Address:

Vendor Coordinator

Vendor Coordinator Name:

Email Address:

Confirm Email Address:

Phone Number:
(include area code) ?

WIC Farmer's Market Nutrition Program

Does your local agency operate a WIC Farmer's Market Nutrition Program?

- ◯ Yes
- ◯ No

Local Agency Texting Messaging

Has your local agency implemented two-way texting?

◯ Yes ◯ No

Which platform(s) do you use currently to text participants?

- ☐ TeleTask
- ☐ Other

National Voter Registration Act (NVRA)

List your local agency's primary and second contacts responsible for NVRA forms.

Primary NVRA Contact Name:

Primary NVRA Email Address:

Confirm Email Address:

Second NVRA Contact Name:

Secondary NVRA Email Address:

Confirm Email Address:

Civil Rights

Please provide the name of your Civil Rights Coordinator:
(e.g. Title VI, Title IX, and Language Access Coordinator)

Does your local agency have 15 or more employees?

- ○ Yes
- ○ No

A designated Section 504 Coordinator is required for an local agency's with 15 or more employees. Provide the name of your local agency's designated Section 504 Coordinator:

Does your local agency have 50 or more employees?

- ○ Yes
- ○ No

A designated American Disabilities Act (ADA) Coordinator is required for an local agency's with 50 or more employees. Provide the name of your local agency's designated ADA Coordinator:

How does your agency inform the public about their right to file a discrimination complaint in WIC with the USDA?

What public notifications are posted in your WIC clinics? (select all that apply)

- ☐ And Justice For All (AJFA) Poster
- ☐ Multilingual Notice for Language Assistance
- ☐ Disability Rights Notice
- ☐ Other (please specify below):

How does your local agency ensure meaningful access to WIC services for Limited English Proficiency (LEP) applicants/participants, including but not limited to how your Agency provides qualified and competent language assistance services? (select all that apply)

- ☐ Bi-Lingual Staff Available
- ☐ Contract Interpreters
- ☐ Telephonic Language Line
- ☐ Translated Materials
- ☐ Others (please specify below):

What reasonable modifications (change in policy or practice) and auxiliary aids and services does your local agency offer to ensure equal opportunity access and equally effective communication for individuals with disabilities accessing WIC; including, but not limited to individuals with hearing, visual, and/or speech disabilities? (e.g. modifications to the food package, sign language interpreters, braille, or large print materials)

WIC Outreach

WIC Outreach Network/Community Partners:
(*select all that apply*)

- ☐ Head Start
- ☐ Childcare Centers/Schools
- ☐ Division Social Services /Food Nutrition Service
- ☐ Faith-based Organizations
- ☐ Food Banks
- ☐ Foster Parent Programs
- ☐ Homeless Facilities
- ☐ Hospitals
- ☐ Medicaid
- ☐ Migrant Workers Organizations
- ☐ Private Health Care Providers
- ☐ Refugee Assistance Programs
- ☐ Other

Specify Other WIC Outreach Network and Community Partners:

Does your local agency participate in NCCARE360?

○ Yes
○ No

How does your local agency utilize NCCARE360?
(Select all that apply)

☐ Receive referrals
☐ Make referrals to community resources
☐ Participate in the community engagement team powered by Unite Us

Caseload Information

Current Caseload Assignment:

Average Monthly Participation Through:
(Enter the date and month for the most recent available data)

Month **Year**

Enter the Average Monthly Participation Through the Month and Year Selected Above:

Enter the Population at Risk (PAR) for your agency:
(To look up your agency's PAR, use the linked table above and enter the number from the last / right-most column.)
To open in a new tab, right click on the link and select "Open Link in New Tab". This will allow you to stay in the Profile Form and separately open the PAR document.

Percent of PAR Served
(Select Calculate to Show the Percentage of PAR Served):

0% Calculate

Local Agency Staffing Profile

Positions Paid by WIC:
(select all that apply) ?

- ☐ Nutritionist
- ☐ Registered Nurse
- ☐ Lab Technician/MOA
- ☐ Management Support
- ☐ Language Interpreter
- ☐ Peer Counselor
- ☐ Other

Specify Other Staff Paid by WIC:

Staff FTEs and Current Vacancies

Enter the total number (#) of Full Time Equivalents (FTEs) for each staff group paid by WIC, whether vacant or filled:

Nutritionist FTEs:

Of the FTEs listed, how many Nutritionist positions are currently vacant?

Registered Nurse FTEs:

Of the FTEs listed, how many Registered Nurse positions are currently vacant?

Management Support FTEs:

Of the FTEs listed, how many Management Support positions are currently vacant?

Peer Counselor FTEs:

Of the FTEs listed, how many Peer Counselor positions are currently vacant?

Lab Technician FTEs:

Of the FTEs listed, how many Lab Technician positions are currently vacant?

Language Interpreter FTEs:

Of the FTEs listed, how many Language Interpreter positions are currently vacant?

Other Staff FTEs:

Of the FTEs listed, how many Other positions are currently vacant?

Shipping Information

Please list the local agency's ground shipping address.

Building Name:

To the Attention Of:

Street Address

Street Address (Continued):

City

State

North Carolina

Zip Code

Phone Number for Shipping Questions: ***(include area code)*** ?

Fax Number for Shipping Confirmations: ***(include area code)*:** ?

Does your local agency have a post office (PO) box for mailing?

○ Yes ○ No

Post Office Box

Enter the **P.O. Box** address for shipments.

P.O. Box Address:

City

State

North Carolina

Zip Code

Main WIC Office Contact Information

What is your local agency's main phone number?

Must include area code and dashes (ex: 919-555-5555). Accepts extensions as x1234. ?

What is your local agency's main fax number?

Must include area code and dashes (ex: 919-555-5555). Accepts extensions as x1234. ?

Local Agency WIC Sites

Enter the name for each of your ACTIVE local agency sites currently in operation.

Clinic Site Status	Site Name
Site #1: ○ Active ○ N/A	
Site #2: ○ Active ○ N/A	
Site #3: ○ Active ○ N/A	
Site #4: ○ Active ○ N/A	
Site #5: ○ Active ○ N/A	
Site #6:	

○ Active ○ N/A

Site #7:

○ Active ○ N/A

Site #8:

○ Active ○ N/A

Site #9:

○ Active ○ N/A

Site #10:

○ Active ○ N/A

Does your agency have any INACTIVE sites?

○ Yes
○ No

Inactive Site #1 Name:

Inactive Site #2 Name:

NORTH CAROLINA

Local Agency Profile

Local Agency WIC Site Information

Site #1: [pipe:499]

Enter the information requested below for:
Site #1: [pipe:499]
Status: [pipe:500]

Building Name:

Admin Item:

Physical Street Address:

Physical Street Address (continued):

City

State *

North Carolina

Zip Code

Phone Number for [pipe:499]:
(include area code) ?

Participant Appointment Scheduling Phone Number for [pipe:499]:
(include area code) ?

Is this Participant Appointment Scheduling phone number a Scheduling Call Center phone number for all sites?

- ○ Yes
- ○ No

Courier Services Number for [pipe:499]:

WIC Services Provided at [pipe:499]:

- ☐ Applications
- ☐ Certifications
- ☐ Nutrition Education
- ☐ Issuance

Site's Designated Breastfeeding Expert (DBE) Name:

Site's DBE Credentials:

What is the DBE's primary role within WIC?

Schedule of Operation for [pipe:499]:

Is [pipe:499] Open Access?

- Yes
- No

Is [pipe:499] Mobile Site?

- Yes
- No

Additional Comments Specific to [pipe:499]:

NORTH CAROLINA

Local Agency Profile

Local Agency WIC Site Information

Site #2: [pipe:502]

Enter the information requested below for:
Site #2: [pipe:502]
Status: [pipe:501]

Building Name: ?

Physical Street Address:

Physical Street Address (continued):

City

State *

North Carolina

Zip Code

Phone Number for [pipe:502]:
(include area code) ?

Participant Appointment Scheduling Phone Number for [pipe:502]:
(include area code) ?

Does this site have courier services?

- ○ Yes
- ○ No

Courier Services Number for [pipe:502]:

- ○ Same as [pipe:499]?
- ○ Other:

WIC Services Provided at [pipe:502]:

- ☐ Applications
- ☐ Certifications
- ☐ Nutrition Education
- ☐ Issuance

Site's Designated Breastfeeding Expert (DBE) Name:

Site's DBE Credentials:

What is the DBE's primary role within WIC?

Schedule of Operation for [pipe:502]: ?

Is [pipe:502] Open Access?

- ○ Yes

Is [pipe:502] Mobile Site?

- ○ Yes

○ No ○ No

Additional Comments Specific to [pipe:502]:

Local Agency Profile

Local Agency WIC Clinic Information

Site #3: [pipe:504]

Enter the information requested below for:
Site #3: [pipe:504]
Status: [pipe:503]

Building Name: ?

Physical Street Address:

Physical Street Address (continued):

City

State *

North Carolina

Zip Code

Phone Number for [pipe:504]:
(include area code)

Participant Appointment Scheduling Phone Number for [pipe:504]:
(include area code)

Does this site have courier services?

- ○ Yes
- ○ No

Courier Services Number for [pipe:504]:

- ○ Same as [pipe:499]
- ○ Same as [pipe:502]
- ○ Other:

WIC Services Provided at [pipe:504]:

- ☐ Applications

- [ ] Certifications
- [ ] Nutrition Education
- [ ] Issuance

Site's Designated Breastfeeding Expert (DBE) Name:

Site's DBE Credentials:

What is the DBE's primary role within WIC?

Schedule of Operation for [pipe:504]: ?

Is [pipe:504] Open Access?

- ○ Yes
- ○ No

Is [pipe:504] Mobile Site?

- ○ Yes
- ○ No

Additional Comments Specific to [pipe:504]:

NORTH CAROLINA

Local Agency Profile

Local Agency WIC Clinic Information

Site #4: [pipe:506]

Enter the information requested below for:
Site #4: [pipe:506]
Status: [pipe:505]

Building Name: ?

Physical Street Address:

Physical Street Address (continued):

City

State *

North Carolina

Zip Code

Phone Number for [pipe:506]:
(include area code) ?

Participant Appointment Scheduling Phone Number for [pipe:506]:
(include area code) ?

Does this site have courier services?

- ○ Yes
- ○ No

Courier Services Number for [pipe:506]:

- ○ Same as [pipe:499]
- ○ Same as [pipe:502]
- ○ Same as [pipe:504]
- ○ Other:

WIC Services Provided at [pipe:506]:

- ☐ Applications
- ☐ Certifications
- ☐ Nutrition Education
- ☐ Issuance

Site's Designated Breastfeeding Expert (DBE) Name:

Site's DBE Credentials:

What is the DBE's primary role within WIC?

Schedule of Operation for [pipe:506]:

Is [pipe:506] Open Access?

- Yes
- No

Is [pipe:506] Mobile Site?

- Yes
- No

Additional Comments Specific to [pipe:506]:

NORTH CAROLINA

Local Agency Profile

Local Agency WIC Clinic Information

Site #5: [pipe:508]

Enter the information requested below for:
Site #5: [pipe:508]
Status: [pipe:507]

Building Name: ?

Physical Street Address:

Physical Street Address (continued):

City

State *

North Carolina

Zip Code

Phone Number for [pipe:508]:
(include area code) ?

Participant Appointment Scheduling Phone Number for [pipe:508]:
(include area code) ?

Does this site have courier services?

- ◯ Yes
- ◯ No

Courier Services Number for [pipe:508]:

- ◯ Same as [pipe:499]
- ◯ Same as [pipe:502]
- ◯ Same as [pipe:504]
- ◯ Same as [pipe:506]
- ◯ Other:

WIC Services Provided at [pipe:508]:

- ☐ Applications
- ☐ Certifications
- ☐ Nutrition Education
- ☐ Issuance

Site's Designated Breastfeeding Expert (DBE) Name:

Site's DBE Credentials:

What is the DBE's primary role within WIC?

Schedule of Operation for [pipe:508]: ?

Is [pipe:508] Open Access?

Is [pipe:508] Mobile Site?

○ Yes ○ Yes
○ No ○ No

Additional Comments Specific to [pipe:508]:

NORTH CAROLINA

Local Agency Profile

Local Agency WIC Clinic Information

Site #6: [pipe:510]

Enter the information requested below for:
Site #6: [pipe:510]
Status: [pipe:509]

Building Name: ?

Physical Street Address:

Physical Street Address (continued):

City

State *

North Carolina

Zip Code

Phone Number for [pipe:510]:
(include area code) ?

Participant Appointment Scheduling Phone Number for [pipe:510]:
(include area code) ?

Does this site have courier services?

- ○ Yes
- ○ No

Courier Services Number for [pipe:510]:

- ○ Same as [pipe:499]
- ○ Same as [pipe:502]
- ○ Same as [pipe:504]
- ○ Same as [pipe:506]
- ○ Same as [pipe:508]

○ Other:

WIC Services Provided at [pipe:510]:

- ☐ Applications
- ☐ Certifications
- ☐ Nutrition Education
- ☐ Issuance

Site's Designated Breastfeeding Expert (DBE) Name:

Site's DBE Credentials:

What is the DBE's primary role within WIC?

Schedule of Operation for [pipe:510]: ?

Is [pipe:510] Open Access?

- ○ Yes
- ○ No

Is [pipe:510] Mobile Site?

- ○ Yes
- ○ No

Additional Comments Specific to [pipe:510]:

NORTH CAROLINA

Local Agency Profile

Local Agency WIC Clinic Information

Site #7: [pipe:512]

Enter the information requested below for:
Site #7: [pipe:512]
Status: [pipe:511]

Building Name: ?

Physical Street Address:

Physical Street Address (continued):

City

State *

North Carolina

Zip Code

Phone Number for [pipe:512]:
(include area code)

Participant Appointment Scheduling Phone Number for [pipe:512]:
(include area code)

Does this site have courier services?

- ○ Yes
- ○ No

Courier Services Number for [pipe:512]:

- ○ Same as [pipe:499]
- ○ Same as [pipe:502]
- ○ Same as [pipe:504]
- ○ Same as [pipe:506]
- ○ Same as [pipe:508]
- ○ Same as [pipe:510]
- ○ Other:

WIC Services Provided at [pipe:512]:

- [ ] Applications
- [ ] Certifications
- [ ] Nutrition Education
- [ ] Issuance

Site's Designated Breastfeeding Expert (DBE) Name:

Site's DBE Credentials:

What is the DBE's primary role within WIC?

Schedule of Operation for [pipe:512]:

Is [pipe:512] Open Access?

- ○ Yes
- ○ No

Is [pipe:512] Mobile Site?

- ○ Yes
- ○ No

Additional Comments Specific to [pipe:512]:

NORTH CAROLINA

Local Agency Profile

Local Agency WIC Clinic Information

Site #8: [pipe:514]

Enter the information requested below for:
Site #8: [pipe:514]
Status: [pipe:513]

Building Name: ?

Physical Street Address:

Physical Street Address (continued):

City

State *

North Carolina

Zip Code

Phone Number for [pipe:514]:
(include area code) ?

Participant Appointment Scheduling Phone Number for [pipe:514]:
(include area code) ?

Does this site have courier services?

- ○ Yes
- ○ No

Courier Services Number for [pipe:514]:

- ○ Same as [pipe:499]
- ○ Same as [pipe:502]
- ○ Same as [pipe:504]
- ○ Same as [pipe:506]
- ○ Same as [pipe:508]
- ○ Same as [pipe:510]
- ○ Same as [pipe:512]
- ○ Other:

WIC Services Provided at [pipe:514]:

- ☐ Applications
- ☐ Certifications
- ☐ Nutrition Education
- ☐ Issuance

Site's Designated Breastfeeding Expert (DBE) Name: **Site's DBE Credentials:**

What is the DBE's primary role within WIC?

Schedule of Operation for [pipe:514]:

Is [pipe:514] Open Access?

- Yes
- No

Is [pipe:514] Mobile Site?

- Yes
- No

Additional Comments Specific to [pipe:514]:

NORTH CAROLINA

Local Agency Profile

Local Agency WIC Clinic Information

Site #9: [pipe:516]

Enter the information requested below for:
Site #9: [pipe:516]
Status: [pipe:515]

Building Name: ?

Physical Street Address:

Physical Street Address (continued):

City

State *

North Carolina

Zip Code

Phone Number for [pipe:516]:
(include area code) ?

Participant Appointment Scheduling Phone Number for [pipe:516]:
(include area code) ?

Does this site have courier services?

- ○ Yes
- ○ No

Courier Services Number for [pipe:516]:

- ○ Same as [pipe:499]
- ○ Same as [pipe:502]
- ○ Same as [pipe:504]
- ○ Same as [pipe:506]
- ○ Same as [pipe:508]
- ○ Same as [pipe:510]
- ○ Same as [pipe:512]
- ○ Same as [pipe:514]
- ○ Other:

WIC Services Provided at [pipe:516]:

- ☐ Applications
- ☐ Certifications
- ☐ Nutrition Education
- ☐ Issuance

Site's Designated Breastfeeding Expert (DBE) Name:

Site's DBE Credentials:

What is the DBE's primary role within WIC?

Schedule of Operation for [pipe:516]:

Is [pipe:516] Open Access?

- Yes
- No

Is [pipe:516] Mobile Site?

- Yes
- No

Additional Comments Specific to [pipe:516]:

NORTH CAROLINA

Local Agency Profile

Local Agency WIC Clinic Information

Site #10: [pipe:518]

Enter the information requested below for:
Site #10: [pipe:518]
Status: [pipe:517]

Building Name: ?

Physical Street Address:

Physical Street Address (continued):

City

State *

North Carolina

Zip Code

Phone Number for [pipe:518]:
(include area code) ?

Participant Appointment Scheduling Phone Number for [pipe:518]:
(include area code) ?

Does this site have courier services?

○ Yes

○ No

Courier Services Number for [pipe:518]:

○ Same as [pipe:499] ○ Same as [pipe:502]
○ Same as [pipe:504] ○ Same as [pipe:506]
○ Same as [pipe:508] ○ Same as [pipe:510]
○ Same as [pipe:512] ○ Same as [pipe:514]
○ Same as [pipe:516] ○ Other:

WIC Services Provided at [pipe:518]:

☐ Applications
☐ Certifications
☐ Nutrition Education
☐ Issuance

Site's Designated Breastfeeding Expert (DBE) Name:

Site's DBE Credentials:

What is the DBE's primary role within WIC?

Schedule of Operation for [pipe:518]: ?

Is [pipe:518] Open Access?

○ Yes

Is [pipe:518] Mobile Site?

○ Yes

○ No ○ No

Additional Comments Specific to [pipe:518]:

This is the end of your profile form. Click SUBMIT below to submit your information.

Date form reviewed:

MM/DD/YYY

[blank line]
[blank line]