

U.S. Department of Agriculture, Food and Nutrition Service (FNS),
Special Supplemental Nutrition Program for Women, Infants and Children (WIC)

Loving Support Award of Excellence
Premiere and Elite Award
Evaluation Worksheet



State Verification and Approval

State WIC Breastfeeding Coordinator/Reviewer:

I have reviewed the Premiere and Elite Award application, and I attest to the accuracy of the information provided.

Name

Title

Date

State Reviewer's Phone

Email

State

FNS Region

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Please download the Premiere and Elite Evaluation Worksheet Instructions.

| Prescreening | | |
|--|-----|--|
| Applicant has completed a Gold Award application and has met the criteria to receive a Gold Award with this fiscal year's application. | Yes | |

| No partial credit. All criteria must be present to obtain credible points for each question. | Response Verified | Points |
|--|-------------------|--------|
|--|-------------------|--------|

PEER COUNSELING SECTION

| | | |
|---|------------------|--|
| <p>Question 1. (2 points) Do you have established guidelines for how many hours of observation/shadowing is required as part of peer counseling training/continuing education?</p> <p>Applicant Response</p> | <p>Yes No</p> | |
| <p>Question 2. (3 points) Do you have an IBCLC on staff or do you contract with an IBCLC to serve as a referral source for peer counselors?</p> <p>Applicant Response</p> | <p>Yes No</p> | |
| <p>Question 3. (2 points) Do you have a referral process in place between hospitals and the WIC Program to facilitate peer counselor follow-up for WIC mothers shortly after discharge?</p> <p>Applicant Response</p> | <p>Yes No</p> | |
| <p>Question 4. (2 points) Do you have a system that electronically documents and tracks peer counseling referrals and contacts?</p> <p>Applicant Response</p> | <p>Yes No</p> | |
| <p>Question 5. (3 points) Do you have policies and procedures for home visits as part of your peer counseling program?</p> <p>Applicant Response</p> | <p>Yes No</p> | |
| <p>Does the documentation meet the requirements as listed in the instructions?</p> | <p>Yes No</p> | |

| | | |
|---|-----------------------------------|--|
| <p>Question 6. (3 points) Do you have policies and procedures for hospital visits as part of your peer counseling program?</p> <p>Applicant Response</p> <p>Does the documentation meet the requirements as listed in the instructions?</p> | <p>Yes No</p> <p>Yes No</p> | |
| <p>Question 7. (2 points) Do you have a recognition program in place to acknowledge peer counselor accomplishments?</p> <p>Applicant Response</p> | <p>Yes No</p> | |
| <p>Question 8. (2 points) Do you include career path structure for upward mobility of peer co</p> <p>Applicant Response</p> | <p>Yes No</p> | |
| <p>Question 9. (3 points) Do you have policies and procedures for peer counselors to communicate via social media technologies, e.g., Facebook, text messaging, twitter, Skype, PalTalk?</p> <p>Applicant Response</p> <p>Does the documentation meet the requirements as listed in the instructions?</p> | <p>Yes No</p> <p>Yes No</p> | |
| <p>Total Points from Peer Counseling Section</p> | | |
| <p>PARTNERSHIP SECTION</p> | | |
| <p>Question 10. (2 points) Does the partnership have a written agreement or a Memorandum of Understanding?</p> <p>Applicant Response</p> <p>Does the documentation meet the requirements as listed in the instructions?</p> | <p>Yes No</p> <p>Yes No</p> | |

| | | |
|---|-----------------------------|--|
| <p>Question 11. (2 points) Have new policies or procedures been developed because of the partnership?</p> <p>Applicant Response</p> <p>Does the documentation meet the requirements as listed in the instructions?</p> | <p>Yes No</p> <p>Yes No</p> | |
| <p>Question 12. (2 points) Do the partnership have a plan for sustainability?</p> <p>Applicant Response</p> | <p>Yes No</p> | |
| <p>Question 13. (2 points) Do you partner with stakeholders such as the American Hospital Association to support the Baby-Friendly Hospital Initiative in their community?</p> <p>Applicant Response</p> | <p>Yes No</p> | |
| <p>Total Points from Partnership Section</p> | | |
| <p>OTHER CRITERIA SECTION</p> | | |
| <p>Question 14. (2 points) Do you have a supportive clinic environment that implements breastfeeding-friendly workplace policies for WIC staff?</p> <p>Applicant Response</p> <p>Does the documentation meet the requirements as listed in the instructions?</p> | <p>Yes No</p> <p>Yes No</p> | |
| <p>Question 15. (3 points) Do you provide funding or work hours for education and training for staff to pursue certifications and advanced credentials in breastfeeding? (e.g., CLC, CLE, IBCLC)</p> <p>Applicant Response</p> <p>Does the documentation meet the requirements as listed in the instructions?</p> | <p>Yes No</p> <p>Yes No</p> | |

| | | |
|---|-----------------------------------|--|
| <p>Question 16. (3 points) Do you provide around the clock assistance to assist mothers work through their breastfeeding problems?</p> <p>Applicant Response</p> <p>Does the documentation meet the requirements as listed in the instructions?</p> | <p>Yes No</p> <p>Yes No</p> | |
| <p align="center">Total Points from Other Criteria Section</p> | | |

Premiere and Elite Points Table

| Points from Peer Counseling Section | Points from Partnership Section | Points from Other Criteria Section |
|--|--|--|
| | | |
| Gold Premiere - a minimum of 10 points Gold Elite - must be 22 points | Gold Premiere - a minimum of 4 points Gold Elite - must be 8 points | Gold Premiere - a minimum of 5 points Gold Elite - must be 8 points |

Performance Data Table

| PERFORMANCE DATA | |
|---|--|
| % Exclusively Breastfed Infants Previous Year | % Exclusively Breastfed Infants Current Year |
| | |

Award Determination Table

| | Gold | Gold Premiere | Gold Elite |
|---|-------------|----------------------|-------------------|
| All 29 Gold Application Questions | Met | Met | Met |
| Premiere/Elite Questions, a minimum of 10 points | | | |
| Peer Counseling Section, equal to 22 points | | | |
| Partnership Section, minimum of 4 points | | | |
| Partnership Section Optional Questions, equal to 8 points | | | |
| Other Criteria Section, a minimum of 5 points | | | |
| Other Criteria Section Optional Questions, equal to 8 points | | | |
| Performance Data, % exclusively breastfed infants is at least 15 % or higher in the previous year and the most recently published year of data shows an increase over the previous year OR the rate of exclusively breastfed infants is at least 25 % or higher in the most recently published year of data | | | |
| Performance Data, % exclusively breastfed infants is at least 40 % or higher in the most recently published year of data | | | |

Recommended Award: Gold Gold Premiere Gold Elite