

Appendix A3

WIC Combination Web Survey

Exhibit 1: Agency Login



Welcome to the WIC NSA Cost Collection Instrument.
Please log in using the username and password that was provided to you via email.

Agency Login

Username: Password:

[Change Password](#)

Need help logging in?

Click on the link above to send an email for help. Please include your username in the e-mail text, describe the problem you are having with the Login screen, and send the e-mail to the address indicated. For other questions or concerns, please contact the help desk at RTI International by email (XXX@rti.org) or by phone at 1-800-XXX-XXX.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0584-XXXX. The time required to complete this information collection is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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Exhibit 2: Home Screen

Home Agency Information State Survey Questions ▼ State Agency Costing Tool ▼ Local Survey Questions ▼ Cost Reduction Strategies Confirmation Logout combo

Welcome to the WIC NSA Cost Collection Instrument.

WIC Combination State and Local Agency Survey

Thank you for participating in the Nutrition Services and Administration (NSA) Cost Study, sponsored by U.S. Department of Agriculture's Food & Nutrition Service (FNS) and administered by Altarum Institute and RTI International.

This survey is designed to capture information from State WIC Agencies that also operate local service delivery systems using state agency employees. The survey is in two parts, the first covering traditional state-level functions, and the second part covering local service delivery functions. Please complete each section for the indicated functions only. Overall, this study will be useful in informing decision-makers about the full range of valuable services that are performed with WIC NSA funds. Please refer to the accompanying email for full details of the research effort.

You can navigate through the survey using the menu above. The web survey is self-guiding and has a Help menu should you encounter difficulties. We recommend that you use the [User's Guide](#) which contains survey screen shots and more detailed instructions about how to complete the survey. If you need assistance accessing the survey, entering responses, or answering questions, you can call the RTI toll-free survey help line at 1-800-xxx-xxxx, which is available Monday-Friday from 9 a.m. to 7 p.m. EST.

The survey is estimated to take 60 minutes to complete.

Please navigate through the WIC NSA cost collection instrument screens using the menu buttons located on top of the screen and review and/or enter the required information. Clicking on the Confirmation button will confirm that you have entered all information on that screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time. You may exit and return to this survey at any time. After completing each page, please confirm your information to ensure that none of your entries are lost.

There is a space for additional comments at the very end.

You are logged in with:

username: **combo**

agency: Test Combo State-Local



Please click on the dictionary icon to access the User's Guide.

Exhibit 3: Agency Information Screen

Agency Information

You are logged in as Test Combo State-Local

Based on information gathered from FNS on your FFY13 NSA Grant, we've pre-populated the field below. The NSA Grant includes the formula grant, operational adjustments (OA), and any reallocations you received in FFY 2013. In a separate section, we have obtained information on special funding you received from FNS, such as MIS planning or development funding, EBT funding, breastfeeding peer support funding, or WIC special project or infrastructure funding. In addition, average monthly participation and infant formula rebate data were obtained from your FNS reporting. Please review these numbers and make any corrections.

-
- | | |
|---|-------------------------|
| 1. FFY 2013 Final NSA Allocation, including operational adjustment (OA) funds | \$ <input type="text"/> |
| 2. FFY 2013 Final NSA Closeout Expenditures | \$ <input type="text"/> |
| 3. FFY 2013 Closeout Expenditures reported by FNS 798-A Categories | |
| a. Program Management | \$ <input type="text"/> |
| b. Client Services | \$ <input type="text"/> |
| c. Nutrition Education | \$ <input type="text"/> |
| d. Breastfeeding | \$ <input type="text"/> |

4. Total NSA dollar amount allocated for State-level functions (including indirect costs) in FFY 2013 \$
5. Total NSA dollar amount allocated for all local-level services in FFY 2013 \$
6. Other sources of Federal WIC funds:
- a. Infrastructure Funding \$
 - b. Breastfeeding Peer Counseling Funding \$
 - c. WIC Special Project Funding \$
 - d. Special MIS Funding \$
 - e. Special EBT Planning or Implementation Funding \$
7. Total infant formula rebate and all other WIC rebates for FFY 2013 \$

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

Agency: Test Combo State-Local
Contact Name:

Please contact the help desk at RTI International by e-mail (XXX@rti.org) or by phone at 1-800-XXX-XXX if you have any questions or concerns.

State Level Survey Questions

Exhibit 4: Demographic Questions screen

Home Agency Information State Survey Questions State Agency Costing Tool Local Survey Questions Cost Reduction Strategies Confirmation Logout combo

Questions About Program Demographics

Please confirm

Please respond to the following demographic questions about your agency.
You can answer each question by selecting the correct radio button/box or by indicating *Other* and providing an explanation in the text box as appropriate.
When finished, click Confirm and then navigate to the next screen.

1. Which of the following best describes the method by which you fund local services (answer only one):
 - Local services are budgeted along with state-level functions and are not separated as such
 - Local services are provided by districts or regions, which have their own budget separate from state-level functions
 - Local services are budgeted separately from state-level functions, but all local services are combined into a single budget
 - Other [Please explain.]
2. Which of the following factors are considered in determining the amount of funds allocated for local services (check all that apply):
 - Prior year caseload served
 - Projected current year caseload
 - Urban/rural salary differentials
 - Need for bilingual staff or interpreter services
 - Local travel for clinic sites
 - Staff training needs
 - Other [Please explain.]
3. Did your total infant formula rebate amount change in FFY 2013?
 - Yes, it increased
 - Yes, it decreased
 - No, it stayed about the same

3-A. Which if any of the following factors affected your infant formula rebate in FFY 2013?

- Per-can reimbursement was lower than prior year
- Per-can reimbursement was higher than prior year
- The overall percentage of infants breastfeeding increased; thus, fewer cans of infant formula were purchased
- The overall percentage of infants breastfeeding decreased; thus, more cans of infant formula were purchased
- Overall number of infants increased or decreased
- Other [Please explain.]
- None of the above

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

Exhibit 5: Change in Costs Questions Screen

Questions about Changes in Program Costs

Please confirm

Please respond to the following questions related to factors that may drive costs of all WIC Program operations. You can answer each question by selecting the correct radio button/box or by indicating *Other* and providing explanation in the text box as appropriate. When finished, click Confirm and then navigate to the next screen.

1. Since FFY 2010, which of the following have resulted in increases of State agency-level staffing costs? (Check all that apply.)

- Increase in FTEs or permanent staff
- Increase in staff salaries
- Increase in fringe benefits costs
- Decrease in staff vacancy rates
- Hiring temporary staff
- Increase in staff training costs
- Increase in staff travel costs
- Increase in staff awards
- None of the above
- Other (Describe)

2. Since FFY 2010, which of the following have resulted in decreases of State agency-level staffing costs? (Check all that apply.)

- Decrease in FTEs or permanent staff
- Decrease in staff salaries (e.g., from salary freezes, furloughs)
- Decrease in fringe benefits costs
- Increase in staff vacancy rates (e.g., from hiring freezes)
- Hiring temporary staff
- Decrease in staff training costs
- Decrease in staff travel costs
- Decrease in staff awards
- None of the above
- Other (Describe)

3. Since FFY 2010, which of the following have resulted in increases of State agency-level costs? (Check all that apply.)

- Increase in costs of facility space (e.g., rent, utilities)
- Increase in costs of facility services (e.g., maintenance, security)
- Increase in costs of equipment and/or supplies
- Increase in telecommunication costs
- Increase in information technology support services
- Increase in costs of banking services
- None of the above
- Other (Describe)

4. Since FFY 2010, which of the following have resulted in decreases of State agency-level costs? (Check all that apply.)

- Decrease in costs of facility space (e.g., rent, utilities)
- Decrease in costs of facility services (e.g., maintenance, security)
- Decrease in costs of equipment and/or supplies
- Decrease in telecommunication costs
- Increase in information technology support services
- Decrease in costs of banking services
- None of the above
- Other (Describe)

5. Since FFY 2010, which of the following factors have contributed to increases of State agency-level costs? (Check all that apply.)

- Increase in indirect cost rates and/or indirect costs
- Increase in program participation
- Increase in number of local agencies
- Increase in local agency monitoring costs
- Increase in vendor management costs
- Decrease in State-appropriated WIC funds
- Decrease in in-kind contributions
- Decrease in outside funding sources
- None of the above
- Other (Describe)

6. Since FFY 2010, which of the following factors have contributed to decreases of State agency-level costs? (Check all that apply.)

- Increase in local agency's WIC NSA grant funds
- Increase in program participation
- Increase in local agency size (e.g., due to consolidation of local agencies)
- Increase in number of clinic sites
- Increase in indirect cost rates and/or indirect costs
- Decrease in in-kind contributions
- Decrease in outside funding sources
- None of the above
- Other (Describe)

7. How old is the MIS system used by WIC local agencies during FFY 2013?

- 1-4 years old
- 5-9 years old
- 10-15 years old
- Over 15 years old

7a. What net impact has the new MIS system had on total NSA expenditures?

- Reduced overall cost of operating WIC
- Costs have stayed about the same
- Increased overall cost of operating WIC
- Do not know the impact on overall cost

8. What stage of EBT development is your State agency in?

- Have not started
- Planning
- Piloting EBT
- Implementation

8a. Since FFY 2010, what net impact has EBT had on total NSA expenditures?

- Reduced overall cost of operating WIC
- Costs have stayed about the same
- Increased overall cost of operating WIC
- Do not know the impact on overall cost

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

Agency Costing Tool

Exhibit 6: Labor/Personnel Expenditure

Home Agency Information State Survey Questions State Agency Costing Tool Local Survey Questions Cost Reduction Strategies Confirmation Logout combo

Labor/Personnel Expenditures

Below are two tables to capture information about personnel providing support for state-level and local-level functions. Please enter the requested information in these tables and answer the questions at the bottom of the screen.

Personnel Supporting State-Level Function

The state-level functions are divided by the type of function, and we only need the number of FTEs and the total cost for each function. These have been divided out by the four cost categories included in the 798-A report.

State Agency Function	Total FTEs <input type="text"/>	Estimated Dollar Amount Allocated to: <input type="text"/>			
		Program Management	Client Services	Nutrition Education	Breastfeeding
A. General Program Administration and Supervision <input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
B. Local Program Support <input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
C. Vendor Management <input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
D. Food Delivery <input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
E. Breastfeeding Support and Promotion <input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
F. Nutrition Education and Policy <input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
G. MIS Management funded from NSA Grant <input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
H. Other State-Level Functions <input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
I. Training: Nutrition Educator Skills <input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

Personnel Supporting Local-Level Function

For the local functions, we need more detail on the types of staff providing service.

The local-level personnel table is designed to capture the number of FTEs and the cost of staff by type of staff typically used by WIC programs to delivery service. Please complete these for the type of staff indicated.

Type of Staff	Total FTEs <input type="text"/>	Total Gross Salary (net of fringe benefits) <input type="text"/>
A. Program Manager/Supervisor	<input type="text"/>	\$ <input type="text" value="0.00"/>
B. Registered Dietitian	<input type="text"/>	\$ <input type="text" value="0.00"/>
C. Bachelor's Degreed (or higher) Nutritionist	<input type="text"/>	\$ <input type="text" value="0.00"/>
D. Non-Degreed Paraprofessional Nutrition Educator	<input type="text"/>	\$ <input type="text" value="0.00"/>
E. Lab Tech/Specialist	<input type="text"/>	\$ <input type="text" value="0.00"/>
F. WIC Clerk	<input type="text"/>	\$ <input type="text" value="0.00"/>
G. Bachelor's Degreed (or higher) Breastfeeding Specialist	<input type="text"/>	\$ <input type="text" value="0.00"/>
H. Breastfeeding Peer Counselor	<input type="text"/>	\$ <input type="text" value="0.00"/>
I. Receptionist	<input type="text"/>	\$ <input type="text" value="0.00"/>
J. Public Health Nurse	<input type="text"/>	\$ <input type="text" value="0.00"/>
K. Social Worker	<input type="text"/>	\$ <input type="text" value="0.00"/>
L. Computer Support/Maintenance	<input type="text"/>	\$ <input type="text" value="0.00"/>
M. Vendor Specialist/Liaison	<input type="text"/>	\$ <input type="text" value="0.00"/>
N. Accounting/Financial Staff	<input type="text"/>	\$ <input type="text" value="0.00"/>
O. Other Health Professionals	<input type="text"/>	\$ <input type="text" value="0.00"/>
P. Research/Evaluation Specialist	<input type="text"/>	\$ <input type="text" value="0.00"/>
Q. Other: SPECIFY <input type="text"/>	<input type="text"/>	\$ <input type="text" value="0.00"/>

1. What is your fringe benefit rate? %

2. Does your WIC agency share staff with other programs (e.g. SNAP, SCHIP MCH, Immunization)?

Yes

No

3. How are WIC staff salaries and benefits charged to WIC and other programs that staff may work on?

100% time reporting (for staff assigned to one functional area only)

Continuous time reporting (i.e., reported on a daily basis across more than one cost area)

Periodic time reporting (once a week/month/quarter)

Random moment-in-time sampling

Costs are shared based on negotiations

Costs are shared based on historical contributions by both programs

Other (Describe):

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

Exhibit 7: Contracted Services Screen

Expenditures Associated with Contracted Services

Please confirm

In the table below, please enter the amount of NSA expenditures ONLY on contracted services. Do NOT include expenditures associated with breastfeeding peer counselor support, EBT grants, etc.

1. Did your agency incur any expenditures associated with contracted services? Yes No

Contracted Services Paid for by NSA Funds ?	Estimated Dollar Value ?	Estimated Percentage Allocated To: ?			
		Program Management	Client Services	Nutrition Education	Breastfeeding
A. Staff training	\$ 0.00	0 %	0 %	0 %	0 %
B. Equipment or computer maintenance	\$ 0.00	0 %	0 %	0 %	0 %
C. Consulting Nutrition Professionals	\$ 0.00	0 %	0 %	0 %	0 %
D. Program evaluation services	\$ 0.00	0 %	0 %	0 %	0 %
E. Clerical support or temporary help	\$ 0.00	0 %	0 %	0 %	0 %
F. Other professional consultation	\$ 0.00	0 %	0 %	0 %	0 %
G. Software development or computer programming	\$ 0.00	0 %	0 %	0 %	0 %
H. Referral or outreach services provided by another agency	\$ 0.00	0 %	0 %	0 %	0 %
I. Other: SPECIFY <input type="text"/>	\$ 0.00	0 %	0 %	0 %	0 %
J. Other: SPECIFY <input type="text"/>	\$ 0.00	0 %	0 %	0 %	0 %
K. Other: SPECIFY <input type="text"/>	\$ 0.00	0 %	0 %	0 %	0 %

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey.
Clicking the Save button will save the data entered and allow you to complete the information at a later time.

Exhibit 8: Materials, Services, and Travel Screen

Expenditures Associated with Materials, Services, and Travel

Please confirm

?

In the table below, please enter the amount of NSA expenditures ONLY on materials, services, and travel. Do NOT include expenditures associated with breastfeeding peer counselor support, EBT grants, etc. Please also answer the questions at the bottom of the screen.

1. Did your agency incur any expenditures associated with materials, services, or travel? Yes No

Description	Estimated Yearly Expenditure ?	Estimated Percent Allocated To: ?			
		Program Management	Client Services	Nutrition Education	Breastfeeding
A. Supplies	\$ 0.00	0 %	0 %	0 %	0 %
B. Equipment	\$ 0.00	0 %	0 %	0 %	0 %
C. Travel and Conference Costs	\$ 0.00	0 %	0 %	0 %	0 %
D. Communications/Internet	\$ 0.00	0 %	0 %	0 %	0 %
E. Computer Equipment/MIS Training	\$ 0.00	0 %	0 %	0 %	0 %
F. Employee Training	\$ 0.00	0 %	0 %	0 %	0 %
G. Other: SPECIFY <input type="text"/>	\$ 0.00	0 %	0 %	0 %	0 %
H. Other: SPECIFY <input type="text"/>	\$ 0.00	0 %	0 %	0 %	0 %
I. Other: SPECIFY <input type="text"/>	\$ 0.00	0 %	0 %	0 %	0 %
J. Other: SPECIFY <input type="text"/>	\$ 0.00	0 %	0 %	0 %	0 %

2. For state-level functions only, does your state agency share costs such as staffing, office space, or materials with any other organizational entity?

- Yes
- No

3. What is the method used by your state agency to distribute shared costs across multiple programs? (check all that apply)

- Fixed dollar amount based on negotiated agreement
- Amount based upon percentage of time working in programs or space used
- Formula allocation based on negotiated rate
- Historical expenditures
- Other (Describe):
- We do not know how the shared costs are allocated

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

Exhibit 9: Indirect Costs

Indirect Costs

Please confirm

Please respond to the following questions about indirect costs.

1. Total program indirect costs (Please indicate amount paid) \$

2. Allocation methodology

- Calculated using a percentage of our total budget
- Calculated using a percentage of salaries and benefits only
- Set as a fixed dollar amount of the WIC budget
- Direct charged and negotiated every year
- Other (describe):

3. Types of costs included in the indirect costs

Many times, indirect costs are used to support both overall state departmental expenditures related to departmental administration or activities of offices outside of WIC. However, sometimes WIC programs receive support for activities that are necessary for program activities, such as accounting services, MIS support, space, or HR support. For your State WIC Agency, which, if any, of the following services that might be provided to your State WIC Agency are paid for through the use of indirect costs? (Check all that apply.)

- 3-A. Resource services, such as staff recruitment, hiring, and employee benefit management, or payroll
- 3-B. Accounting services
- 3-C. Utilities
- 3-D. Cost of space
- 3-E. Equipment maintenance
- 3-F. Computer and MIS support
- 3-G. Office equipment and/or supplies
- 3-H. General space maintenance and repair
- 3-I. Communications, such as telephone, fax, or Internet service
- 3-J. Fair hearings for participants

3-K. Administrative hearings for vendors



3-L. Local agency audits



3-M. Other benefits to WIC funded from indirect cost not covered in the categories above:

Specify:

Specify:

Specify:

Specify:

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

Exhibit 10: Other Sources of Funds

Other Sources of Funds ?

Please confirm

In the table below, please list other sources your State WIC Agency has received in FFY 2013 and their dollar amount.

Source of Funds	Estimated Annual Dollar Amount
A. Non-federal state-appropriated funds	<input type="text" value="\$0.00"/>
B. Other: SPECIFY <input type="text"/>	<input type="text" value="\$0.00"/>
C. Other: SPECIFY <input type="text"/>	<input type="text" value="\$0.00"/>
D. Other: SPECIFY <input type="text"/>	<input type="text" value="\$0.00"/>
E. Other: SPECIFY <input type="text"/>	<input type="text" value="\$0.00"/>

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

Exhibit 11: In-kind Contributions

In-Kind Contributions Please confirm

In-kind contributions in the State WIC office are defined as support for WIC activities funded and provided by another entity not directly supported by WIC program funds (Federal or State) or from departmental indirect costs. In-kind contributions at the State level are rare, but do exist in some cases and may be more common in ITOs or Trust Territory WIC programs. Some examples of in-kind support may include:

- An epidemiologist supported by CDC funding but working on WIC studies or providing data analysis support for WIC evaluations.
- A staff person assigned to WIC from the immunization program to help coordinate state efforts to increase immunization rates for WIC clients.
- Support staff that answer phones for WIC, but are funded from Maternal and Child Health Block Grant funds.
- Nutrition education materials developed and supplied by the state's SNAP Education program for distribution and use at local WIC sites.
- A nutritionist paid for by Indian Health Services but providing services to WIC around high-risk nutrition education policies in an ITO State Agency.

1. Are you able to estimate the total dollar value of all in-kind contributions to the WIC Yes No

If yes, provide total dollar value \$

Area of in-kind contribution	In-kind received?	Can you estimate the dollar value? ?
A. Staff providing research support or training	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
B. Staff providing support for other state-level activities	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
C. Staff to support computer systems and networks	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
D. Facilities or other space considerations	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
E. Utilities	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
F. Telecommunications	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>

G. Computer equipment or maintenance	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
H. Office or other equipment	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
I. Office or other types of supplies	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
J. Vehicles for WIC use	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
K. Other: SPECIFY <input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>

Comments:

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

Local Level Survey Questions

Exhibit 12: Demographic Questions Screen

Home Agency Information State Survey Questions State Agency Costing Tool Local Survey Questions Cost Reduction Strategies Confirmation Logout combo

Questions About Program Demographics

Please confirm

Please respond to the following demographic questions about your agency. You can answer each question by selecting the correct radio button/box or by indicating *Other* and providing an explanation in the text box as appropriate. When finished, click Confirm and then navigate to the next screen.

1. Are local WIC services provided at any sites where services other than WIC are provided? These services could be public health, primary care, or other social services.

Yes
 No

2. Which, if any, of the following services are provided at sites where WIC services are provided:

Primary care medical services
 Dental services
 Immunizations
 Screenings (e.g., vision, hearing, lead, or other environmental screenings)
 Prenatal care
 Well-child exams
 Mental health services
 Family planning
 Childcare/parenting support
 Substance abuse or smoking cessation counseling
 Home heating or weatherization support
 Food bank/food pantry services
 Other medical services
 Other social services

3. Does the WIC program share the cost of staff or facilities with other programs providing services in your sponsoring agency?

Yes
 No

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

Exhibit 13: Services Provided Questions Screen

Questions About the Services Provided

Please confirm

Now we would like you to think about the local provision of WIC services only. Please answer the following questions related to your service delivery at local sites. You can answer each question by selecting the correct radio button/box or by indicating Other and providing explanation in the text box as appropriate.

1. How many fixed sites do you have that provide WIC services that are owned, leased, or rented by your agency?

2. How many "satellite sites" (such as a Church, Community Center, etc.) do you have where WIC services are provided?

3. How many mobile vans do you have that provide WIC services?

4. Are services provided at any of your sites in languages other than English?

- Yes
 No

5. If services are provided in languages other than English, which of the following methods are used by your local agency? (Check all that apply.)

- Bilingual staff
 Language line using telephone
 Language interpreters are available for staff use
 Clients are asked to bring their own interpreters
 Other (Describe)

6. In addition to providing direct WIC services, do staff in local programs also conduct vendor monitoring activities?

- Yes
 No

7. Does your state agency receive separate funding for a breastfeeding peer counseling program?

- Yes, we have a breastfeeding peer counseling program at all or most of our sites
- Yes, we have a breastfeeding peer counseling program at some of our sites
- No, we do not have a breastfeeding peer counseling program

8. How is anthropometric information collected for determining client eligibility?

- Height, weight, or blood tests are completed at the clinic site
- Height, weight, or blood tests are provided by medical providers and clients bring the information to the clinic
- Both methods above are used

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

Exhibit 14: Change in Costs Questions Screen

Questions about Changes in Program Costs

Please confirm

Please respond to the following questions related to factors that may drive the cost of WIC services at your agency. You can answer each question by selecting the correct radio button/box or by indicating *Other* and providing explanation in the text box as appropriate. When finished, click Confirm and then navigate to the next screen.

1. Choose the option that best describes changes in your agency's costs since FFY 2010.
 - Steadily increased
 - Steadily decreased
 - Stayed about the same
 - Fluctuated up and down, depending on circumstances
2. Since FFY 2010, which of the following have resulted in increases of your agency's staffing costs for local-level functions? (Check all that apply.)
 - Increase in FTEs or permanent staff
 - Increase in staff salaries
 - Increase in fringe benefits costs
 - Decrease in staff vacancy rates
 - Hiring temporary staff
 - Increase in staff training costs
 - Increase in staff travel costs
 - Increase in staff awards
 - None of the above
 - Other (Describe)
3. Since FFY 2010, which of the following have resulted in decreases of your agency's staffing costs for local-level functions? (Check all that apply.)
 - Decrease in FTEs or permanent staff
 - Decrease in staff salaries (e.g., from salary freezes, furloughs)
 - Decrease in fringe benefits costs
 - Increase in staff vacancy rates (e.g., from hiring freezes)
 - Hiring temporary staff
 - Decrease in staff training costs
 - Decrease in staff travel costs
 - Decrease in staff awards
 - None of the above
 - Other (Describe)

4. Since FFY 2010, which of the following have resulted in increases of your agency's costs for local-level functions? (Check all that apply.)

- Increase in costs of facility space (e.g., rent, utilities)
- Increase in costs of facility services (e.g., maintenance, security)
- Increase in costs of equipment and/or supplies
- Increase in telecommunication costs
- Increase in information technology support services
- Increase in costs of banking services
- None of the above
- Other (Describe)

5. Since FFY 2010, which of the following have resulted in decreases of your agency's costs for local-level functions? (Check all that apply.)

- Decrease in costs of facility space (e.g., rent, utilities)
- Decrease in costs of facility services (e.g., maintenance, security)
- Decrease in costs of equipment and/or supplies
- Decrease in telecommunication costs
- Increase in information technology support services
- Decrease in costs of banking services
- None of the above
- Other (Describe)

6. Since FFY 2010, which of the following factors have contributed to increases of your agency's costs for local-level functions?

- Increase in local agency's WIC NSA grant funds
- Increase in program participation
- Increase in local agency size (e.g., due to consolidation of local agencies)
- Increase in number of clinic sites
- Increase in indirect cost rates and/or indirect costs
- Decrease in in-kind contributions
- Decrease in outside funding sources
- None of the above
- Other (Describe)

7. Since FFY 2010, what net impact has EBT had on your agency's total NSA expenditures?

- Decrease in local agency's WIC NSA grant funds
- Decrease in program participation
- Decrease in local agency size (e.g., due to lower participation)
- Decrease in number of clinic sites
- Decrease in indirect cost rates and/or indirect costs
- Increase in in-kind contributions
- Increase in outside funding sources
- None of the above
- Other (Describe)

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

Exhibit 15: Cost Reduction Strategies

Home Agency Information State Survey Questions State Agency Costing Tool Local Survey Questions Cost Reduction Strategies Confirmation Logout combo

Cost Reduction Strategies ? Please confirm

FNS is interested in knowing of any innovative practices or policies your agency may have implemented since FFY 2010 that have helped you to contain NSA costs while still maintaining or improving your overall service delivery. When considering whether a practice or policy meets the criteria of being innovative, please consider that the practice should: continue quality services at a lower or reduced cost, meet challenges of reduced or same-level grant amounts, or replace older, less efficient practices or policies. If you have made any changes in the past three years that you consider to be innovative or cost effective, please provide a brief description, along with the impact these changes have had on your WIC Program NSA costs, in the text boxes provided below. FNS is interested in knowing of any innovative practices or policies your agency may have implemented since FFY 2010 that have helped you to contain NSA costs while still maintaining or improving your overall service delivery.

Brief description of innovative practice:

Impact on WIC NSA costs:

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

Exhibit 16 Confirmation Screen

Confirmation of Data Confirmation of Data ?

Please confirm

This section summarizes expenditure data that you entered in the Survey Questions and Agency Costing Tool screens.

The tables display whether the data entered in each screen have been confirmed by you.

You must confirm the data entered in all of the screens in order for your submission to be considered complete.

The Confirmation screen will display error messages until all entries in all other screens have been confirmed.

To confirm the data, go to the appropriate screen and click on the *Confirm* button.

Making any changes in a screen that has been previously confirmed will automatically undo the confirm action; the confirmation stamp will disappear, and the Please Confirm message will be displayed again.

The user must re-confirm the screen if any changes are made since the previous confirmation.

Survey Questions

Category	Confirmation Status
State level functions	
Demographics	Please confirm
Changes in Costs	Please confirm
Local level functions	
Demographics	Please confirm
Services Provided	Please confirm
Changes in Costs	Please confirm

Agency Costing Tool

Category	Yearly Expenditures	Confirmation Status
Labor/Personnel Expenditures	\$0.00	Please confirm
Expenditures Associated with Contracted Services	\$0.00	Please confirm
Expenditures Associated with Materials, Services and Travel	\$0.00	Please confirm
Indirect Costs	\$0.00	Please confirm
Other Sources of Funds	\$0.00	Please confirm
Agency Costing Total	\$0.00	

Totals

Costing Type	Total from Individual Costing Screens	FFY 2013 Final NSA Closeout Expenditures
Agency	\$0.00	\$0.00
Totals	\$0.00	\$0.00
Agency Yearly Expenditure		Please confirm

You must correct the following issue before you can confirm data entry:

You must confirm the following screen: s: Labor/Personnel Expenditures,Expenditures Associated with Contracted Services,Expenditures Associated with Materials, Services and Travel,Indirect Costs,Other Sources of Funds,In-Kind grantee Costing,Yearly Funding Summary for grantees