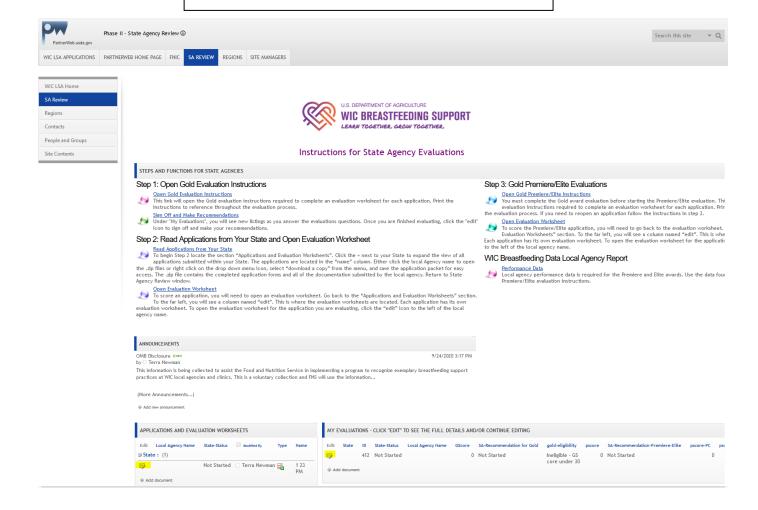
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Attachment J Gold Evaluation Worksheet



In accordance to Section 231 of the Healthy, Hunger-Free Kids Act of 2010 (HHFKA) (Public Law 111–296), this information is being collected to assist the Food and Nutrition Service in implementing a program to recognize exemplary breastfeeding support practices at WIC local agencies and clinics. This is a voluntary collection, but failure to provide the requested information in full will prevent applicants from being considered for recognition. FNS will use the information to improve the delivery and tailoring of WIC services and increase satisfaction of both staff and participants. This collection requests only minimal personally identifiable information (email address) which will not be used routinely to retrieve records under the Privacy Act of 1974. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0591. The time required to complete this information collection is estimated to average 1.2 hours 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S.

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Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5th floor, Alexandria, VA 22314 ATTN: PRA (0584-0591). Do not return the completed form to this address.

FY*	2020
State *	V
Local Agency Name *	
	Name of the applicant, as is stated in the application
FNSRO *	O NERO
	MARO
	O SERO
	MWRO
	O MPRO
	SWRO
	O WRO
	This is the region operationally responsible for the State
Prescreen for Gold	V
Prior Gold Awardee	Has your Local Agency received a Gold award in the past 4 years?
Prior Award Year	~
	If Prior Gold Awardee, choose the year the Local Agency received a Gold Award. Scroll down to the Premiere/Elite section to complete the evaluation
Gold-Q1a	
	Yea
	○ №
	0
	- Does the local agency conduct an annual needs assessment that
	identifies each of the following:
	a) the top 2 priorities for your target audience; b) where gaps exist in breastfeeding services and resources within your
	target audience that can be addressed through peer counseling; and
	c) where improvements in your program are needed?
Gold-Q1b	Yes
	○ No
	0

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	instructions?
Gold-Q2a	Yea No No Applicant Response for: Do you have a protocol that describes how peer counselors address a mother's concerns and needs outside of usual clinic hours, including how peer counselors make after-hour referrals?
Gold-Q2b	Yea No No Does the documentation meet the requirements as listed in the instructions?
Gold-Q3	Yes O No No O - Applicant Response for: Do you have opportunities for peer counselors to observe and shadow experienced lactation experts and more experienced peer counselors?
Gold-Q4	Yes No No Applicant Response for: Do you routinely monitor the work of peer counselors through spot checks, chart reviews or contact forms?
Gold-Q5	Yes No No Applicant Response for: Do you routinely observe newly trained peer counselors during contacts

with mothers to provide guidance and affirmation.

Does the documentation meet the requirements as listed in the

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Gold-Q6	Yes No No Applicant Response for: Do you schedule routine meetings to discuss case studies with your
Gold-Q7	Yes Yes No No No Applicant Response for: Do you have adequate supervision of peer counselors by staff with advanced lactation training? Adequate supervision is defined as having at least a .25 full time employee (FTE) supervisor for every 5 peer counselors.
Gold-Q8a	Yea O No O Applicant Response for: Do you have a written defined scope of practice for peer counselors, limited to supporting normal breastfeeding, that describes the peer counselor's role to provide basic breastfeeding education and support to WIC mothers?
Gold-Q8b	Yea No No Does the documentation meet the requirements as listed in the instructions?
Gold-Q9a	Yea No No Applicant Response for: Do you have a process/protocol in place that lists when the peer counselors should "yield" breastfeeding concerns and conditions that are outside the scope of practice of the peer counselor to a Designated

Breastfeeding Expert?

Gold-Q9b	Yes
	O No
	0
	Does the documentation meet the requirements as listed in the
	instructions?
Gold-Q10a	○ Yes
	0
	No
	0
	Applicant Response for:
	Do you have a process/protocol in place for WIC staff to refer WIC participants to peer counselors as part of your usual WIC certification,
	assessment and nutrition education process?
Gold-Q10b	O Yes
	0
	No
	0
	Does the documentation meet the requirements as listed in the
	instructions?
C-1-1 O44	
Gold-Q11	Yes
Gold-Q11	Yes
Gola-QII	O No
Gola-QII	0
Gola-QII	No O - Applicant Response for:
Gola-QII	No No Applicant Response for: Do peer counselors routinely contact mothers, at a minimum, monthly
Gold-Q11	No O - Applicant Response for:
Gold-Q12	No Applicant Response for: Do peer counselors routinely contact mothers, at a minimum, monthly during pregnancy and weekly 2 weeks prior to a woman's expected delivery date?
	No No Applicant Response for: Do peer counselors routinely contact mothers, at a minimum, monthly during pregnancy and weekly 2 weeks prior to a woman's expected delivery date? Yes
	No Applicant Response for: Do peer counselors routinely contact mothers, at a minimum, monthly during pregnancy and weekly 2 weeks prior to a woman's expected delivery date?
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	No No Applicant Response for: Do peer counselors routinely contact mothers, at a minimum, monthly during pregnancy and weekly 2 weeks prior to a woman's expected delivery date? Yes No No Poplicant Response for: Do peer counselors routinely contact mothers, at a minimum, every 2-3 days in the first week after delivery AND within 24 hours if the mother
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	No No Applicant Response for: Do peer counselors routinely contact mothers, at a minimum, monthly during pregnancy and weekly 2 weeks prior to a woman's expected delivery date? Yes No No Poper counselors routinely contact mothers, at a minimum, every 2-3 days in the first week after delivery AND within 24 hours if the mother reports problems with breastfeeding AND weekly throughout the rest
Gold-Q12	No Applicant Response for: Do peer counselors routinely contact mothers, at a minimum, monthly during pregnancy and weekly 2 weeks prior to a woman's expected delivery date? Yes Applicant Response for: Do peer counselors routinely contact mothers, at a minimum, every 2-3 days in the first week after delivery AND within 24 hours if the mother reports problems with breastfeeding AND weekly throughout the rest of the first month?
Gold-Q12	No Applicant Response for: Do peer counselors routinely contact mothers, at a minimum, monthly during pregnancy and weekly 2 weeks prior to a woman's expected delivery date? Yes No No Applicant Response for: Do peer counselors routinely contact mothers, at a minimum, every 2-3 days in the first week after delivery AND within 24 hours if the mother reports problems with breastfeeding AND weekly throughout the rest of the first month? Yes Yes
Gold-Q12	No Applicant Response for: Do peer counselors routinely contact mothers, at a minimum, monthly during pregnancy and weekly 2 weeks prior to a woman's expected delivery date? Yes Applicant Response for: Do peer counselors routinely contact mothers, at a minimum, every 2-3 days in the first week after delivery AND within 24 hours if the mother reports problems with breastfeeding AND weekly throughout the rest of the first month?

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	Do peer counselors routinely contact mothers after a woman's first month postpartum, at a minimum, monthly, as long as things are going well?
Gold-Q14	Yes
	O No
	0
	Applicant Response for: Do peer counselors routinely contact mothers after a woman's first
	month postpartum, at a minimum, 1-2 weeks before the mother plans to return to work or school AND 1-2 days after she returns to work or school?
Gold-Q15	○ Yes
	0
	No O
	- Applicant Response for:
	Was the partnership developed to solve an existing problem or gap in breastfeeding support services?
Gold-Q16	O Yes
	O No
	0
	Applicant Response for: Are the resources each partner brings to the partnership clearly delineated?
Gold-Q17	Yes
	O No
	0
	Applicant Response for: Does the partnership have goals that have been agreed upon by the members of the partnership?
Gold-Q18	○ Yes
	O No
	0
	- Applicant Response for:
	Are the roles and responsibilities clearly identified and understood by all members of the partnership?

Applicant Response for:

Gold-Q19	O Yes
	0
	No O
	0
	Applicant Response for:
	Does the partnership have activities that have been agreed upon by the
	members of the partnership?
Gold-Q20	0
	Yes
	O No
	0
	-
	Applicant Response for:
	Has the partnership produced results that provide an ongoing benefit?
Gold-Q21	
dold-Q21	Yes
	0
	No
	0
	- Applicant Response for:
	Do you have a supportive clinic environment for breastfeeding that
	visibly endorses breastfeeding as the preferred method of infant feeding?
	reeding?
Gold-Q22	Yes
	0
	No
	0
	-
	Applicant Response for: Do you have policies that support a clinic environment where
	participants feel comfortable breastfeeding?
Gold-Q23a	0
	Yes
	0
	No
	0
	Applicant Response for:
	Do you have policies and procedures that encourage and support
	exclusive breastfeeding among prenatal and postpartum WIC participants?
Gold-Q23b	0
and square	Yes
	0
	No
	0

	Does the documentation meet the requirements as listed in the instructions?
Gold-Q24	Yes
	O No
	0
	Do you ensure that all staff are trained to support the goal of exclusive breastfeeding with WIC participants using the FNS-developed competency-based breastfeeding curriculum?
Gold-Q25a	Yes
	O No
	0
	Do you have policies and procedures that require staff to assess, and individually tailor food packages to all breastfeeding dyads when infant formula is requested?
Gold-Q25b	Yes
	O No
	0
	Does the documentation meet the requirements as listed in the instructions?
Gold-Q26	O Yes
	O No
	0
	Does new clinic staff orientation include breastfeeding policies and procedures especially related to supporting exclusive breastfeeding?
Gold-Q27	O Yes
	O No
	0
	Applicant Response for: Do you provide ongoing training to all WIC staff using the FNS-developed competency-based breastfeeding curriculum, or similar State-developed training based on FNS-developed competency-based
	breastfeeding curriculum?
Gold-Q28	Yes
	O No

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	Do you have ongoing continuing education on breastfeeding for all staf through regularly scheduled staff trainings and other educational opportunites?
Gold-Q29a	Yes
	O No
	0
	Applicant Response for: Do you have policies and procedures that require support for breastfeeding mothers, especially during the early postpartum period, that assist mothers in continuing exclusive breastfeeding for as long as possible?
Gold-Q29b	Yes No
	0
	Does the documentation meet the requirements as listed in the instructions?
Gold-Q30	Yes
	O No
	0
	Do you have policies that ensure all participant breastfeeding concerns are addressed according to established time frames?
STOP-HERE-Gold	
	When you have considered assertions 1 through 30 could down to the

When you have completed questions 1 through 30 scroll down to the bottom of this page and click OK to view score.

State-Status	0
	Not Started
	0
	Not Finished
	0
	Finished
SA-Recommendation for Gold *	0
	Not Started
	0
	No Recommendation
	0
	Recommend Gold
SA-Recommendation-Premiere-Elite	0
	Not Started
	0
	No Recommendation
	0
	Recommend - Premiere
	0
	Recommend - Elite
Lorenzo e N. B	
Justification for No Recommendation	
	.ii
	Justification for No Recommendation
Version:	SAVE CANCEL
Created at by	SAVE CANCEL
Last modified at by	