



## **MEMORANDUM**

24-015

To: WIC Regional Directors  
WIC Local Agency Directors

From: Amanda Hovis, Director  
Nutrition Education/Clinic Services Unit  
Texas WIC

Date: March 19, 2024

Subject: **Updated WIC Director's Planning Calendar, Revised 2024**

The *WIC Directors' Planning Calendar of State Requirements* has been redesigned and updated in collaboration with the TALWD Administration Committee. The calendar is intended to assist WIC Directors with specific State requirements and due dates.

In addition to a new look, the redesign includes the Action (requirement), Description and a SME/Contact. The revised calendar is attached and is also available for downloading from the Director webpage at [WIC Directors | Texas Health and Human Services](#).

The calendar is posted to be viewed as a complete document or to view by specific timeframes as shown below.

### **WIC Director Planning Calendar of State Requirements**

- WIC Directors' Planning Calendar of State Requirements - Complete (PDF)
- Quarterly (PDF)
- Monthly (PDF)
- Once and Twice per Fiscal Year (PDF)
- Twice per Calendar Year and Annually (PDF)
- Every 2 Years (PDF)
- Every 5 Years and Ongoing (PDF)

If you have any questions, contact Paula Kanter, Quality Assurance Coordinator, at [paula.kanter@hhs.texas.gov](mailto:paula.kanter@hhs.texas.gov).

# WIC Directors' Planning Calendar of State Requirements

## Quarter 1 (Oct. & Dec.)

October	Description	SME/Contact
2 <sup>nd</sup> Quarter Funding Survey	Complete this survey for 2nd quarter funding (this survey is available only when additional funds are available).	<a href="mailto:Tammye.FarmerHolloman@hhs.texas.gov">Tammye.FarmerHolloman@hhs.texas.gov</a>
Submit the 4 <sup>th</sup> quarter FSR.	FSR for July, August and September (AC: 28.0)	<a href="mailto:WICInvoices@hhs.texas.gov">WICInvoices@hhs.texas.gov</a>
Review the 4 <sup>th</sup> Quarter Performance Measures.	Review performance measures using Power BI (Families NE Refused, Certified 1 <sup>st</sup> Trimester and Active Participants) and Qualtrics (Customer Service).	<a href="mailto:Paula.kanter@hhs.texas.gov">Paula.kanter@hhs.texas.gov</a>
December	Description	SME/Contact
Close out all reports by December 29th (90 days following contract term).	Close Out Reports (Final FYXX invoices and FSRs) (AC: 28.0)	<a href="mailto:WICInvoices@hhs.texas.gov">WICInvoices@hhs.texas.gov</a>

## Quarter 2 (Jan., Feb., Mar.)

January	Description	SME/Contact
Submit the 1 <sup>st</sup> Quarter FSR.	FSR for October, November and December (AC: 28.0)	<a href="mailto:WICInvoices@hhs.texas.gov">WICInvoices@hhs.texas.gov</a>
Review the 1 <sup>st</sup> Quarter Performance Measures.	Review performance measures using Power BI (Families NE Refused, Certified 1 <sup>st</sup> Trimester and Active Participants).	<a href="mailto:Paula.kanter@hhs.texas.gov">Paula.kanter@hhs.texas.gov</a>
February	Description	SME/Contact
1st Quarter (Initial) Funding Survey	Complete this survey for the following fiscal year funding.	<a href="mailto:Tammye.FarmerHolloman@hhs.texas.gov">Tammye.FarmerHolloman@hhs.texas.gov</a>
March	Description	SME/Contact
By March 1 <sup>st</sup> , submit the <a href="#">Certification of LA Hours of Operation form</a> .	The form submitted is a verification that permanent business hours are listed correctly in TXIN.	<a href="mailto:AnnualPlanforOPS@hhs.texas.gov">AnnualPlanforOPS@hhs.texas.gov</a>
During March, track expenses by Client Services, General Administration, NE and BF. This activity is for the WIC Report due April 30th to the SA.	Follow the instructions provided in the annual memo.	<a href="mailto:Shery.Gurguis@hhs.texas.gov">Shery.Gurguis@hhs.texas.gov</a>

### Quarter 3 (April, May, June)

April	Description	SME/Contact
Submit the 2nd Quarter FSR.	FSR for January, February and March (AC: 28.0)	<a href="mailto:WICInvoices@hhs.texas.gov">WICInvoices@hhs.texas.gov</a>
Submit the WISE Report by April 30th.	Follow the instructions provided in the annual memo.	<a href="mailto:Shery.Gurguis@hhs.texas.gov">Shery.Gurguis@hhs.texas.gov</a>
Review the 2 <sup>nd</sup> Quarter Performance Measures.	Review the performance measures using Power BI (Families NE Refused, Certified 1 <sup>st</sup> Trimester and Active Participants).	<a href="mailto:Paula.kanter@hhs.texas.gov">Paula.kanter@hhs.texas.gov</a>
May	Description	SME/Contact
By May 31 <sup>st</sup> , update the Appendix B Disaster Point of Contact Information and local point of contact list with information concerning staff and emergency resources/contacts, conduct/attend disaster training and maintain the disaster kit.	The plan must be updated annually in TXIN. Refer to the Annual Disaster memo for processing disaster victims.	<a href="mailto:WICClinics@hhs.texas.gov">WICClinics@hhs.texas.gov</a> <a href="mailto:Tiffany.brown@hhs.texas.gov">Tiffany.brown@hhs.texas.gov</a>
June	Description	SME/Contact
By June 15 <sup>th</sup> , submit the Plan to Allocate Direct Costs (PADDC) for the following fiscal year.	Submit amendments to PADDC as they become effective (AC: 03.0).	<a href="mailto:WICPADDC@hhs.texas.gov">WICPADDC@hhs.texas.gov</a>

## Quarter 4 (July & Sept.)

July	Description	SME/Contact
Submit the 3rd Quarter FSR.	FSR for April, May and June (AC: 28.0)	<a href="mailto:WICInvoices@hhs.texas.gov">WICInvoices@hhs.texas.gov</a>
Review the 3 <sup>rd</sup> Quarter Performance Measures.	Review performance measures using Power BI (Families NE Refused, Certified 1 <sup>st</sup> Trimester and Active Participants).	<a href="mailto:Paula.kanter@hhs.texas.gov">Paula.kanter@hhs.texas.gov</a>
September	Description	SME/Contact
By September 30 <sup>th</sup> , submit a minimum of 5 continuing education credits/hours every fiscal year to maintain WCS certification for LAs with WCS Programs.	Trainings may include SA trainings, LA trainings or subject appropriate trainings offered by outside entities that fall within the WCS CEC guidelines (CS: 16.0).	<a href="mailto:WCSProgram@hhs.texas.gov">WCSProgram@hhs.texas.gov</a>
By September 30 <sup>th</sup> , FYXX outstanding obligations.	Retain documentation at the LA (AC 02.0).	
By September 30 <sup>th</sup> , complete Physical Inventory of Reportable Assets in WIC Asset Management System (WAMS) AssetTiger or other inventory system comparable to WAMS.	Ensure WAMS or other inventory system comparable to WAM is updated with new assets, anything removed (disposed of, etc.), transferred to another LA or moved to another site (AC: 07.0).	<a href="mailto:Amber.oltmann@hhs.texas.gov">Amber.oltmann@hhs.texas.gov</a> <a href="mailto:Noemi.hernandez2@hhs.texas.gov">Noemi.hernandez2@hhs.texas.gov</a> (Disposition)

## Monthly

Action	Description	SME/Contact
Submit WIC invoices by the last business day of the month following the reporting month.	Reimbursement invoices (AC: 28.0)	<a href="mailto:WICInvoices@hhs.texas.gov">WICInvoices@hhs.texas.gov</a>
Provide monthly staff <b>training/education.</b>	Retain documentation at the LA, including attendees' names, job titles, training topics and the date the training was completed (TR 03.0).	<a href="mailto:Angela.Gil@hhs.texas.gov">Angela.Gil@hhs.texas.gov</a>
Conduct monthly meetings or trainings for <b>Breastfeeding Peer Counselors.</b>	Retain documentation at the LA, including attendees' names, topics and the date the meeting or training was completed (BF 03.0 and 04.0).	<a href="mailto:Asia.Sartor@hhs.texas.gov">Asia.Sartor@hhs.texas.gov</a>
Reconcile all SA-purchased <b>breast pump inventory</b> against the Texas MIS system breast pump inventory.	The reconciliation should be done monthly, at a minimum (BF 03.0 and BF: 06.0).	Lost or stolen breast pumps <a href="mailto:Leticia.delaRosa@hhs.texas.gov">Leticia.delaRosa@hhs.texas.gov</a> System issues <a href="mailto:WICClinics@hhs.texas.gov">WICClinics@hhs.texas.gov</a>

## Once per Fiscal Year

Action	Description	SME/Contact
Conduct <b>QA evaluation of the facility</b> at all sites using the facility section of the <a href="#">Local Agency Self-Audit Clinical Monitoring Tool</a> .	If errors are identified, a Corrective Action Plan must be developed. Retain documentation of the self-audit and corrective actions electronically at the LA. If LA uses a different form/checklist, they must include all review criteria listed on the current fiscal year Quality Management checklists (QA: 02.0).	<a href="mailto:QMB@hhs.texas.gov">QMB@hhs.texas.gov</a>
Conduct <b>Food Delivery self-audit</b> at all clinic sites using <a href="#">SA worksheets FDA-1 and FDA-2</a> .	If errors are identified, a Corrective Action Plan must be developed. Retain documentation of the self-audit and corrective actions electronically at the LA. If LA uses a different form/checklist, they must include all review criteria listed on the current fiscal year Quality Management checklists (QA: 02.0).	<a href="mailto:QMB@hhs.texas.gov">QMB@hhs.texas.gov</a>

## Twice per Fiscal Year

Action	Description	SME/Contact
Conduct multi-disciplinary <b>quality management committee meetings</b> .	Retain documentation at the LA (QA 02.0).	<a href="mailto:QMB@hhs.texas.gov">QMB@hhs.texas.gov</a>

**Twice per Calendar Year**

Action	Description	SME/Contact
Distribute <b>outreach information</b> to organizations and agencies that serve potentially eligible persons.	Retain documentation at the LA (OR: 01.0).	<a href="mailto:Jessica.leyendecker@hhs.texas.gov">Jessica.leyendecker@hhs.texas.gov</a>

**Annually**

Action	Description	SME/Contact
<b>Conflict of Interest statements</b> are to be signed by each employee (new employees upon employment).	Retain documentation at the LA (GA: 20.0).	<a href="mailto:Paula.kanter@hhs.texas.gov">Paula.kanter@hhs.texas.gov</a>
<b>Trainings:</b> Complete Civil Rights, Cybersecurity Awareness (replaces Security Awareness and Computer Usage training), Hospitality, Human Trafficking and Intimate Partner Violence trainings for all employees.	Retain documentation at the LA, including attendees' names, job titles, training topics and the date the training was completed (AUT: 08.0, CR: 08.0 & TR: 03.0). DIR website: <a href="#">Statewide Cybersecurity Awareness Training   Texas Department of Information Resources.</a>	<a href="mailto:Angela.Gil@hhs.texas.gov">Angela.Gil@hhs.texas.gov</a>



<p><b>NE Coordinator and BF Coordinator</b> attend the Texas Nutrition and Breastfeeding Conference.</p>	<p>Retain documentation at the LA. With SA approval, coordinators may attend other conferences/trainings in lieu of the NBF conference (NE: 02.0 and BF: 02.0). Contact SAP for these circumstances.</p>	<p><a href="mailto:Akata.Sanghani@hhs.texas.gov">Akata.Sanghani@hhs.texas.gov</a> (NE)  <a href="mailto:Safia.Hussain@hhs.texas.gov">Safia.Hussain@hhs.texas.gov</a> (BF)</p>
<p>Submit the <b>LA NEBF Plan</b>.</p>	<p>Submit plans including class schedule, staff BF referral protocol, client BF resource list and outreach plan (NE: 2.0, BF: 2.0, OR 1.0). Follow the instructions in the memo, which is usually sent in May/June, with plans due in July.</p>	<p><a href="mailto:Akata.Sanghani@hhs.texas.gov">Akata.Sanghani@hhs.texas.gov</a> (NE plan)  <a href="mailto:Safia.Hussain@hhs.texas.gov">Safia.Hussain@hhs.texas.gov</a> (BF plan)  <a href="mailto:Jessica.Leyendecker@hhs.texas.gov">Jessica.Leyendecker@hhs.texas.gov</a> (Outreach plan)</p>
<p><b>Annual breastfeeding updates</b> for all employees</p>	<p>Retain documentation at the LA (BF: 04.0).</p>	<p><a href="mailto:Safia.Hussain@hhs.texas.gov">Safia.Hussain@hhs.texas.gov</a></p>
<p><b>Contact each homeless facility</b> where current WIC participants reside to verify that the required conditions are being met.</p>	<p>Contact is only applicable if LA or clinic has a homeless facility in the area served (OR: 01.0).</p>	<p><a href="mailto:Tiffany.Brown@hhs.texas.gov">Tiffany.Brown@hhs.texas.gov</a></p>
<p><b>Fire extinguisher</b> inspection</p>	<p>Occupational Safety and Health Administration <a href="#">e-CFR for portable fire extinguishers</a></p>	<p><a href="mailto:QMB@hhs.texas.gov">QMB@hhs.texas.gov</a></p>

**Every 2 Years**

Action	Description	SME/Contact
<p>Renew the <b>CLIA</b> Certificate of Waiver when needed.</p>	<p>The CLIA Certificate of Waiver or copy must be kept on file at the LA (GA: 16.0). A Certificate of Waiver is valid for two years.</p>	<p><a href="mailto:Leona.duong@hhs.texas.gov">Leona.duong@hhs.texas.gov</a></p>
<p>Conduct <b>clinical self-audits</b> using the <a href="#">Local Agency Self-Audit Administrative, Clinical Monitoring and Record Review Tools and Record Review worksheets</a>.</p>	<p>If errors are identified, a Corrective Action Plan must be developed. Retain documentation of self-audits and corrective actions electronically at the LA. If LA uses different form/checklist for self-audits, they must include all review criteria listed on current fiscal year Quality Management Monitoring Tools (QA 02.0).</p>	<p><a href="mailto:OMB@hhs.texas.gov">OMB@hhs.texas.gov</a></p>
<p>Conduct <b>financial management self-audit</b> using the <a href="#">Local Agency Self-Audit Fiscal Monitoring Tool and worksheet FA-1</a>.</p>	<p>If errors are identified, a Corrective Action Plan must be developed. Retain documentation of self-audits and corrective actions electronically at the LA. If LA uses different form/checklist for self-audits, they must include all review criteria listed on current fiscal year Quality Management Monitoring Tools (QA 02.0).</p>	<p><a href="mailto:OMB@hhs.texas.gov">OMB@hhs.texas.gov</a></p>

## Every 5 Years

Action	Description	SME/Contact
<b>BF Coordinator and all Cas/WCS</b> are required to retake HHSC BF training.	Retain documentation at the LA, including the attendees' names, job titles, training topics and the date the training was completed (BF 04.0).	<a href="mailto:Safia.Hussain@hhs.texas.gov">Safia.Hussain@hhs.texas.gov</a> (BF Coordinator) <a href="mailto:Paula.kanter@hhs.texas.gov">Paula.kanter@hhs.texas.gov</a> (Cas) <a href="mailto:Tammy.jimenez@hhs.texas.gov">Tammy.jimenez@hhs.texas.gov</a> (WCS)

## Ongoing

Action	Description	SME/Contact
Complete the <b>504 Checklist</b> for all new sites, sites that have changed location or have been remodeled.	Retain the documentation at the LA for three years plus current year (CR 06.0).	<a href="mailto:Paula.kanter@hhs.texas.gov">Paula.kanter@hhs.texas.gov</a>
Email changes to <b>permanent clinic hours</b> by attaching the updated <a href="#">Certification of LA Hours of Operation form</a> .	List the new clinic hours in the body of the email.	<a href="mailto:AnnualPlanforOPS@hhs.texas.gov">AnnualPlanforOPS@hhs.texas.gov</a>
Email changes to <b>temporary clinic hours</b> or closures to the state agency.	Examples: staff meetings, emergency situations, etc.	<a href="mailto:WICClinics@hhs.texas.gov">WICClinics@hhs.texas.gov</a>
Submit the <b>Clinic Site Justification Form</b> for approval when opening, closing or relocating a clinic.	Form found at <a href="#">WIC Directors   Texas Health and Human Services</a> Site Justification Forms (GA: 21.0).	<a href="mailto:ClinicSiteRequests@hhs.texas.gov">ClinicSiteRequests@hhs.texas.gov</a>

Maintain up-to-date <b>local resource list</b> of healthcare/drug/substance abuse counseling/treatment.	Retain documentation at the LA (CS: 21.0).	<a href="mailto:Leona.duong@hhs.texas.gov">Leona.duong@hhs.texas.gov</a>
<b>Calibrate scales and hemoglobin/hematocrit equipment</b> as needed per manufacturers' instructions.	Retain documentation of calibration at the LA (CS: 17.0 and Guidelines for Nutrition Assessment).	<a href="mailto:Tiffany.Brown@hhs.texas.gov">Tiffany.Brown@hhs.texas.gov</a>
For an <b>existing WCS Program</b> , submit changes to WCS Plan (CS: 16.0).	Submit changes and names of new WCS candidates for SA approval prior to beginning the WCS Training Program.	<a href="mailto:WCSProgram@hhs.texas.gov">WCSProgram@hhs.texas.gov</a>
Ensure the LA has designated <b>NE, BF, Training, 504 Coordinators</b> (504 if 15 or more employees) and a <b>NVRA Liaison</b> .	The names of the NE, BF, and training coordinators need to be submitted to Nutrition Services with NE & BF Plans. (NE:02.0, BF:02.0, TR:03.0, CR: 06.0 & GA:19.0).	
<b>Employees complete required trainings.</b> Refer to <a href="#">Training Requirements Chart</a> for ongoing training requirements for all staff based on staff role.	Retain documentation (AUT: 08.0, BF: 01.0, BF: 04.0, CR: 08.0, GA:24.0 and TR: 03.0).	<a href="mailto:Angela.gil@hhs.texas.gov">Angela.gil@hhs.texas.gov</a>
Ensure new employees have current <b>registration/licensure</b> and existing employees maintain current licensure.	Retain documentation at the LA. May use these websites for verification: Nurses <a href="http://www.bon.texas.gov/licensure_verification.asp.html">www.bon.texas.gov/licensure_verification.asp.html</a> ; RDs <a href="http://www.cdrnet.org/">www.cdrnet.org/</a> ; LDs <a href="https://vo.licensing.tdlr.texas.gov/datamart/login.do">https://vo.licensing.tdlr.texas.gov/datamart/login.do</a> and LCs <a href="https://iblce.org/public-registry/">https://iblce.org/public-registry/</a> .	