

1.15 **Comment Form Policy**

POLICY:

The purpose of the **Comment Form (WIC-16)** is to give WIC applicants and participants the opportunity to make positive comments or complaints about the Local Agency and/or staff or the vendor and/or staff.

PROCEDURE:

A. Supply of Forms

A supply of the **Comment Form (WIC-16)** will be maintained in the waiting area of each Local Agency WIC clinic to be visible and accessible to all applicants and participants.

B. Completed Forms

1. Completed forms will be mailed by the applicant/participant to:

*West Virginia WIC Program
350 Capitol Street, Room 519
Charleston, WV 25301-3717*

2. When the applicant/participant states he/she cannot afford the postage, the completed form will be mailed from the WIC clinic to the above address.

C. Problem Investigation and Resolution

1. The State Agency will process comments upon receipt to determine if any action by the Local Agency is not in compliance with policy or is of a discriminatory nature.
2. The State Agency will notify the Local Agency regarding information about alleged problems and action, if any, toward problem resolution.
3. The identity of every individual who completes a form will remain confidential **except** to the extent necessary to carry out the investigation.

D. Discrimination Complaints

See Policy 1.08, Civil Rights.