# Civil Rights Impact Analysis Survey

02/2024

## Purpose: Use this form when opening, closing, or relocating a WIC Agency site to ensure that your program will continue to provide or improve access for potential and current WIC participants and applicants from a protected class. Please review Disability Compliance and Prohibited Discriminatory Practices in [Section 1.10: Civil Rights](https://www.health.state.mn.us/docs/people/wic/localagency/program/mom/chsctns/ch1/sctn1_10.pdf) for additional information about protected classes.

**Agency: Date:**

**Contact Name:**

**Will your agency be:**

[ ]  Opening a new clinic: (new Address)

[ ]  Closing a clinic: (old Address)

[ ]  Relocating: (new address)

 (old address)

**Note:** Please notify your State Consultant when you first learn about any changes in locations so your State Consultant can assist with planning.

Assessment for Opening/Relocating/Closing a Clinic

| **Considerations** | **Comments** |
| --- | --- |
| 1. **What is the overall purpose of the change?**

What considerations are you making to provide meaningful access to your participants?How will this better serve your community?Identify potential barriers and mitigations to program access for eligible individuals in the area. |  |
| 1. **When will the change occur?**
 |  |
| 1. **Distance from the old clinic to the new clinic?**

If this is a brand new site, what is its proximity to the 2 closest sites, even if it’s at a different local agency?If closing a site, how will those participants be served (what are the closest sites to the closing location)? What are the current caseloads of these closest sites? How will those sites be able to serve the additional applicants and participants from the closing site, including its vulnerable populations? |  |
| 1. **Hours and days of clinic operations?**

Will hours be changed from current hours (reduced or increased)? If reduced, how will impacts be mitigated? |   |
| 1. **Demographic assessment comparing old and new location.**

WILL RELOCATION CHANGE WHO IS BEING SERVED: How will the new clinic/move/closure affect access to the program? Will you continue to provide the same level of access to at-risk groups, including persons with disabilities or limited English proficiency?**Depending on the move, your consultant may work with you to obtain additional information including:*** Demographic map
* Racial composition of the area neighborhoods
* Census data
* Languages spoken by individuals with LEP in the impacted service area(s)
* InfoView Report-Participation by zip code
* Community Health Assessment
 |  |
| 1. **Communication**

Public Notification: * How will you let your participants and community know about the change?
* How will the information be made available in other languages for people with Limited English Proficiency and alternate formats for people with disabilities?
 |  |
| 1. **Availability of other community resources:**
* Co-located
* Locally
 |  |
| 1. **Is the new location in an area where at risk populations or low-income housing are located?**

What are you doing to serve at risk populations or families who live in low-income housing? |  |
| 1. **Proximity of location to WIC authorized vendors**

Consider availability of WIC authorized vendors and geographic barriers to them. |  |

Additional questions on following pages for New Clinic Locations

Clinic-Physical Assessment for New Clinic Locations

| **Considerations** | **Comments** |
| --- | --- |
| 1. **Accessible Location**
* Describe the facility and surrounding area of the new location
* (e.g., inside a mall, at a service center, inside a church, free standing building on a busy road, etc.)
* e.g., describe the proposed neighborhood/community for the site
* Will participants be able to find the clinic easily?
* Is it on a bus route or accessible by public transportation?
* Is there adequate, safe, and accessible parking at the building?
 |  |
| 1. **Safety of site**
* Are there personal safety concerns with the new site - building and/or surrounding environment? If so, please explain.
* If there are safety concerns, is there adequate exterior lighting and access to security?
* How is the clinic space and waiting area child-friendly and safe?
	+ Are outlets for measurement/lab equipment out of arms reach for a child?
* Will area that lab work is being completed have a sink?
 |  |
| 1. **Does the Clinic have clear and visible signage?**
 |  |
| 1. **Describe accessibility of the building:**
* Entrance
* Doors (e.g. how easily do they open, are they wide enough, etc.)
* Accessible bathrooms
* Ramps/elevators (if needed)
* Is it comfortable for those with special needs, expectant moms, etc. (wide chairs, variety of seating options, bathrooms with changing areas, etc.)?
* Is there space for additional family members, strollers, or a wheelchair?
 |  |
| 1. **How will personal information and data privacy be maintained?**

Please consider:* Reception/intake area
* Is this a dedicated WIC space or a shared space?
* Does the building require participants to sign in? If so, how is this information kept private?
* Clinic rooms (i.e. thin walls, cubicles, temporary walls?)
* Where will bloodwork and measurements be taken; is it a private space?
* Is there noise from other areas?
 |  |
| 1. **Any barriers related to internet access?**
* Who will provide IT support?
* See [Network and New Site Preparation](https://www.health.state.mn.us/docs/people/wic/localagency/infosystem/techinfo/siteprep.pdf) for additional IT planning considerations.
 |  |

**Please include any other additional relevant information about the site on separate pages, if needed.**

## Reference – Complete Listing of Hyperlinks

[Section 1.10: Civil Rights (https://www.health.state.mn.us/docs/people/wic/localagency/program/mom/chsctns/ch1/sctn1\_10.pdf)](https://www.health.state.mn.us/docs/people/wic/localagency/program/mom/chsctns/ch1/sctn1_10.pdf)

[Network and New Site Preparation (https://www.health.state.mn.us/docs/people/wic/localagency/infosystem/techinfo/siteprep.pdf)](https://mn365.sharepoint.com/teams/MDH/bureaus/hib/cfhd/wic/nutrition/MOM%20Policies/Network%20and%20New%20Site%20Preparation%20%28https%3A/www.health.state.mn.us/docs/people/wic/localagency/infosystem/techinfo/siteprep.pdf%29)

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