



## Certification: Categories B and N

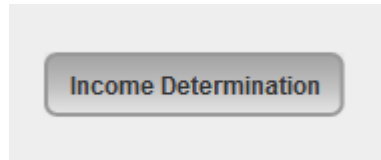
### Certification for new participant

1. Enter Family number

Participant Or Family #

### Income

1. Click on the Income Determination button (Family page)



- Click on the Income Determination button (Family page)
- Select the Household size from the dropdown (labeled A)
- Select the Source from the dropdown (labeled B)
  - See examples of Proof of income in the Appendix #1
- Select the Proof of Income from the dropdown (labeled C)
  - See examples of Proof of income in the Appendix #2
- Select the Method (labeled D)
  - See examples of Method in the Appendix #3
- Enter the income amount (labeled E)

\* Household Size is a required field.

Please enter income.

Household Size: \*  **A**

	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>
<b>1</b>	Source <input type="text"/>	<input type="text"/>	Method <input type="text"/>	\$ <input type="text"/>
	Notes (optional) <input type="text"/>			
<b>2</b>	Source <input type="text"/>	<input type="text"/>	Method <input type="text"/>	\$ <input type="text"/>
	Notes (optional) <input type="text"/>			
<b>3</b>	Source <input type="text"/>	<input type="text"/>	Method <input type="text"/>	\$ <input type="text"/>
	Notes (optional) <input type="text"/>			

2. Click the Save button

- Once the income has been saved a message will display

**Income information saved.**

**View/Edit Income Information**

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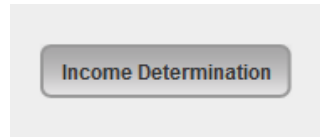
Date: 7/6/2015  
Household Size: 4

1	Employment	Check Stubs	Weekly	\$750.00
Notes:				

**TOTAL GROSS WEEKLY INCOME: \$750.00**

## Income (Adjunctively Eligible)

- Click on the Income Determination button (Family page)



- Click on the Income Determination button (Family page)
- Select the Household size from the dropdown (labeled A)
- Adjunctive Eligible will automatically display (labeled B)
- Verbal Report will automatically display (labeled C)
- Select the Method (labeled D)
  - See examples of Method in the Appendix #3
- Enter the income amount (labeled E)

\* Household Size is a required field.

**Adjunctively eligible. Need verbal income.**

Household Size: \* Please Select... **A**

1	<b>B</b> Adjunctive Eligible <b>C</b>	Verbal Report <b>D</b>	Method <b>E</b>	\$ <input type="text"/>
Notes (optional)				

Reset

- Once the income has been saved a message will display

**Income information saved.**

**View/Edit Income Information**

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Date: 7/2/2015  
Household Size: 2

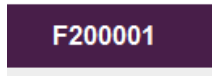
1	Adjunctive Eligible	Verbal Report	Bi-weekly	\$1,200.00
Notes:				

**TOTAL GROSS BI-WEEKLY INCOME: \$1,200.00**

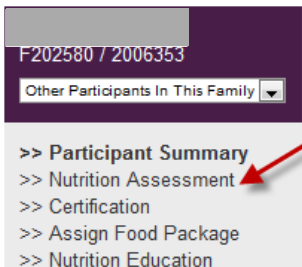
- 3. Click on the Edit button to edit the income information



- 4. Click on the Family number to return to the Participant Information page



- 5. Click on Nutrition Assessment link



## Anthropometrics

- 1. View of the Anthro page

The screenshot shows the "Anthropometrics" section of a web application. At the top, there are three tabs: "Anthropometrics", "Blood Work", and "Pregnancy". Below the tabs, the "Measurement Date" is set to "4/30/2015".

The "Weight" section includes radio buttons for "Decimal", "Fraction", and "Metric", a text input field for weight in "lbs", and a dropdown menu for "Inaccurate Reason".

The "Height / Stature" section includes radio buttons for "Decimal", "Fraction", and "Metric", a text input field for height in "in", and a dropdown menu for "Inaccurate Reason...".

The "Pre-Pregnancy Weight:" section includes radio buttons for "Decimal", "Fraction", "Metric", and "Estimated", a text input field for weight in "lbs", and radio buttons for "Gained" and "Lost".

On the right side, there is a "Charts" section with a dropdown arrow and an "Anthro History" button. Below that, the "Most Recent Measurement:" section shows "Weight: None", "Height: None", and "Date: None".

At the bottom right, there are two vertical bars representing BMI: "New BMI" and "Pre-pregnancy BMI" with the value "0".



## 2. Participants Weight:

- The date will be pre filled with today's date, but a different date can be entered up to 60 days in the past
- Enter the participants weight for today

### Health Assessment

Anthropometrics

Blood Work

Pregnancy

**Measurement Date**

**Weight**

Decimal
  Fraction
  Metric

lbs

▼

## 3. Participants Weight (Inaccurate):

- If there is a problem weighing the participant select a reason from the Inaccurate Reason dropdown

**Weight**

Decimal
  Fraction
  Metric

lbs

**Inaccurate Reason**

- Trouble Taking Measurement
- Weighed with adult
- Excess clothing
- Refused
- Disability
- Physician Collected Weight

#### 4. Participants Height:

- Enter participants Height/Stature

**Height / Stature**

Decimal  Fraction  Metric

in

Inaccurate Reason... ▼

#### 5. Participants Height (Inaccurate):

- If there is a problem measuring the participant select a reason from the Inaccurate Reason dropdown

**Height / Stature**

Decimal  Fraction  Metric  Recumbent

in

Inaccurate Reason...

- Trouble Taking Measurement
- Disability
- Refused
- Physician Collected Height

#### 6. Pre-Pregnancy Weight

- Enter the participants Pre-Pregnancy Weight

**Pre-Pregnancy Weight:**

Decimal  Fraction  Metric  Estimated

lbs

#### 7. Weight Gained/Lost:

- Enter the participants Weight gained or lost during pregnancy
- Select Gained or Lost

**Weight Gained/Lost:**

Decimal  Fraction  Metric

lbs

Gained  Lost

### 8. Save/Cancel buttons:


- Click on Save to save the entered information
- Click on Cancel to cancel the transaction



### 9. Anthro History and BMI display:

- Before the Anthro page has been Saved, the Current BMI and Pre-Pregnancy BMI will display (Example 1)
- After the Anthro page has been Saved only the Pre-Pregnancy BMI will display (Example 2)

#### Example 1

Charts 

**Anthro History**


**Most Recent Measurement:**

Weight: None  
Height: None  
Date: None

Current BMI | 21.1

Pre-pregnancy BMI | 17.94

#### Example 2

Charts 


**Anthro History**


**Most Recent Measurement:**

Weight: 139 lb (63.2 kg)  
Height: 68 in (173 cm)  
Date: 6/18/2012

Pre-pregnancy BMI | 17.94

### 10. Click on the Anthro History button

Charts 

**Anthro History** 

## 11. Anthro History Grid:

- Click on line item record to edit

Collected	Age	Weight	Inaccurate	Height	Inaccurate
6/18/2012	25 y 10 m	139		68	
4/25/2012	25 y 8 m	139		68	

## 12. Anthro History Modal display:

- Able to Edit within 24 hours (most sections)

### Measurement Date:

### Weight

 Decimal  Fraction  Metric

 lbs

### Most Recent Measurement:

Weight: 139 lb (63.2 kg)

Height: 68 in (173 cm)

Date: 6/18/2012

### Height / Stature

 Decimal  Fraction  Metric

 in

Pre-pregnancy  
BMI

17.94

### Pre-Pregnancy Weight:

 Decimal  Fraction  Metric  Estimated

 lbs

### Weight Gained/Lost:

 Decimal  Fraction  Metric

 lbs

 Gained  Lost

## Blood Work

1. Click Blood Work tab
2. Select/enter one of the following:
  - No Measurement taken
  - Hemoglobin
  - Hematocrit

### Health Assessment

Anthropometrics **Blood Work** Pregnancy

**Measurement Date:**  
7/3/2012

**Recorded Date:**  
7/3/2012  No measurement taken ←

**Hemoglobin:**  
 Minimum normal value: 11.8 ←

**Hematocrit:**  
 Minimum normal value: 35.7 ←

3. Select box if participant is currently smoking

**Currently Smoking:**  
 ←

**Clinic Altitude:**  
< 3000 Ft

4. **Historical Blood Work Grid:**
  - Collected: Date blood work was taken
  - Hemoglobin and Hematocrit: Blood work data is displayed
  - Currently Smoking: Displays the answer from the Currently Smoking question

### Historical Blood Work

Collected	Hemoglobin	Hematocrit	Currently_Smoking
3/6/2012	14.0	-	<input type="checkbox"/>
2/1/2012	13.3	-	<input type="checkbox"/>

1



## Pregnancy

1. Click Pregnancy tab
2. If babies Estimated Delivery Date is not populated, enter the date

### Health Assessment

Anthropometrics   Blood Work   **Pregnancy**

**Estimated Delivery Date:**

3. Enter the babies Actual Delivery Date

**Actual Delivery Date:**

4. Select if participant is carrying more than one child

**Multi-Fetal Gestation:**

←

5. If this is the participants first pregnancy, select No Previous Pregnancy

**Previous Pregnancy End**

No Previous Pregnancy

6. If the participant has had a Previous Pregnancy enter the Actual Due Date of that child

**Previous Pregnancy End**

**\*Please enter the Previous Pregnancy Information.**

No Previous Pregnancy

←

## 7. Select number of Infants Delivered

**NOTE:** Select the number infant(s) the mother delivered from the most previous pregnancy

**For this pregnancy only!**  
Infants Delivered:

0	
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

## 8. Select Delivery Outcome(s) from dropdown

**For this pregnancy only!**  
Delivery Outcomes:

1	Select Outcome	* Multi-Fetal includes: Alive Dead Miscarriage Stillborn
	Alive	
	Dead	
	Miscarried	
	Stillborn	

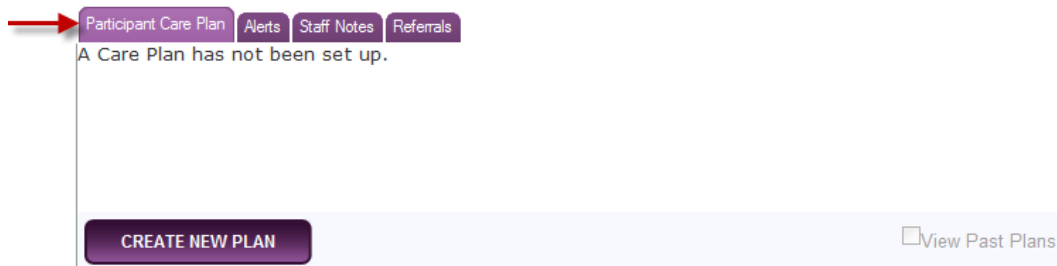
## 9. Save/Reset buttons:

- Click on Save to save the entered information
- Click on Reset to reset information

**SAVE**   **RESET**

## Participant Care Plan

1. Click on Participant Care Plan tab on the Participant summary page



2. Click on Create New Plan button



3. Participant Care Plan View:

<b>Subjective:</b>			
<b>Objective:</b>		<b>Assessment:</b>	
<b>Age:</b>	22 y	Risk 101: Underweight Woman	
<b>Bloodwork</b>	Date: 7/17/2012 Hemoglobin: 12	Risk 502: Transfer of Certification (VOC)	
<b>Anthropometrics</b>	Date: 7/17/2012 Height: 68 in Weight: 143 lbs BMI: 21.7		
<b>Pregnancy:</b>	Expected Delivery Date 1/1/2013 Multi-Fetal: N Weight Gained/Lost: Outcomes:		
<b>Topics:</b> <a href="#">edit</a>		<b>Referrals:</b> <a href="#">add more</a>	
<ul style="list-style-type: none"> <li>Adjust feeding to meet developmental/sensory needs</li> <li>Budgeting/shopping for food</li> <li>Dental concern management</li> <li>Diabetes nutrition</li> <li>Drug nutrient interaction management</li> <li>Fiber</li> <li>Food allergy/sensitivity</li> <li>Healthy balanced eating (specific to category)</li> </ul>		<ul style="list-style-type: none"> <li>BF Management Problems <a href="#">edit</a></li> <li>Medicaid/Chip <a href="#">edit</a></li> <li>RD Review <a href="#">edit</a></li> <li>SNAP <a href="#">edit</a></li> <li>Substance Abuse <a href="#">edit</a></li> <li>TANF/Cash Assistance <a href="#">edit</a></li> </ul>	
<b>Goals:</b>			
1:			

#### 4. Subjective

- Enter information in the Subjective field

**Subjective:**

#### 5. Objective

- Information for the Objective field is pre-populated from the Health Assessment
- Different Category views

Objective:	(Categories B & N)
Age:	22 y
Bloodwork	Date: 7/24/2012 Hemoglobin: 12
Anthropometrics	Date: 7/24/2012 Height: 68 in Weight: 140 lbs BMI: 21.3
Pregnancy:	Actual Delivery Date 6/4/2012 Multi-Fetal: N Weight Gained/Lost: 15 lbs Outcomes: 1: Alive

#### 6. Assessment

- Nutrition Risk Criteria assigned during the most recent certification will appear under the Assessment header

**Assessment:**

Risk 133: High Maternal Weight Gain
Risk 201: Low Hematocrit / Low Hemoglobin

#### 7. Referrals

- Referrals provided during the most recent certification will appear under the Referrals header
- Click on Add More to add more Referrals
- Click on Edit to edit Referrals

**Referrals:** [add more](#)

Breastfeeding Coordinator	<a href="#">edit</a>
Lactation Counselor	<a href="#">edit</a>
Registered Dietitian	<a href="#">edit</a>

## 8. Topics

- Click on Edit to add or delete a Topic

**Topics:** [edit](#)

Budgeting/shopping for food  
Dental concern management  
Diabetes nutrition

## 9. Handouts

- Enter any handout(s) that were given to the participant

**Handouts:**

1:	Health bennifits of fruit
2:	Easy exercise <span style="float: right;">x</span>
3:	

## 10. Goals

- Enter participant's goal(s).
- If participant is not ready to set a goal enter "No goal was set" or you may re-use a previous goal the participant is continuing to focus on

**Goals:**

1:	Plans to eat at least 2 servings of fruits for a daily snack
2:	Increase activity to swimming 3 days/week during summer

## 11. Counseling/Plan

- Type information as needed

**Counseling / Plan:**

Discussed easy vegetables to buy and prepare. Try making a menu for meals that includes vegetables

## 12. Optional

- Select a box next to the sections of the care plan to copy to other family members
  - S = Subjective O = Objective A = Assessment P = Plan
    - Note: If P is selected Topics, Goals and Referrals display, with the option for selection

Copy S O A P

**Optional**

Copy S O A P

Topics Goals Referrals Handouts

- If user selects the box next to All Participants in this family, selected sections of the Participant Care Plan will be copied to all family members that are ACT/APP/TEMP status  
OR
- User can select a participant from the dropdown to have selected sections of the Participant Care Plan to be copied

To: All Participants in this Family (ACT/APP/TEMP) ←

or Select Participant... ←

Select Participant...  
Deidra Adair  
Kinsey Adair

## 13. Select this box if the Participant Care Plan is High Risk

This is a HIGH RISK Care Plan

## 14. Save/Cancel buttons:

- Click on Save to save the entered information
- Click on Cancel to cancel the transaction

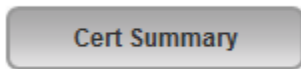
- 15. When the Participant Care Plan has been successfully saved the following Success message will display

**Care Plan Updated**

- After the Participant Care Plan has been saved the user will be directed back to the Participant Summary page.
  - The view will only show the newest plan. To view past Care Plans select the box next to View Past Plans and all plans will display in the grid

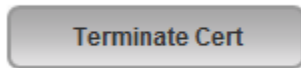
Participant Care Plan		Alerts	Staff Notes	Referrals
Date	Goals			
7/9/2012	wants to make sure she is getting at least 2 servings of fruits daily			
4/27/2012	Will cont trying to offer more veggies More activity over the summer			
<input type="button" value="CREATE NEW PLAN"/>		<input checked="" type="checkbox"/> View Past Plans		

- Click on Cert Summary to View the participants certification summary



## Terminate Certification

- Click on Terminate Cert to Terminate the participants certification



- View of Terminate Certification modal

### Terminate Certification:

Effective Date:	Termination Reason:
<input type="text" value="7/23/2012"/>	<input type="text" value="Please select a reason..."/> <ul style="list-style-type: none"> <li>Please select a reason...</li> <li>Categorically Ineligible</li> <li>Client Receiving Benefits from CSFP</li> <li>Deceased</li> <li>Dual Participation in WIC</li> <li>Error</li> <li>Failure to Pick Up Checks</li> <li>Moved out of Service Area</li> <li>Not Serving Priority</li> <li>Program Misuse</li> <li>Requested Early Certification</li> <li>Voluntary Withdrawal</li> <li>Women Category Change</li> </ul>



# Appendix A

## 1. Sources of Income

- Child Support/Alimony
- Employment
- Self-Employment
- Foster Care
- Grant/Loan
- Social Security/Disability
- Adjunctive Eligible
- Unemployment Comp
- Verbal Report
- Other Cash Income
- Lump Sum

## 2. Proofs of Income

- Check Stubs
- Child Support/Alimony Doc
- Disability Assistance (SSI)
- Foster Placement/ Award Letter
- Military LES
- Bank Account Statements
- Self-Employed Taxes/Receipts
- SNAP Eligibility Notice
- Student Award Letter
- TANF –Award Letter
- Unemployment Letter/Notice
- Verification of Certification
- Signed Statement
- W-2 Form or Income Tax Form
- Zero Income (No Proof Form)
- Verbal Report
- No Proof Form
- Forgot Documents

## 3. Method: Income Period

- Weekly
- Bi-weekly
- Semi-monthly
- Monthly
- Quarterly
- Annual
- Hourly
- Daily
- Lump Sum