



## Certification: Category P

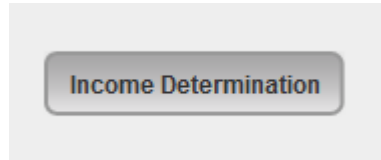
### Certification for new participant

1. Enter Family number

Participant Or Family #  go

### 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

Date: 7/6/2015

Household Size: 4

1	Employment	Check Stubs	Weekly	\$750.00
Notes:				
<b>TOTAL GROSS WEEKLY INCOME: \$750.00</b>				

## Income (Adjunctively Eligible)

- Click on the Income Determination button (Family page)

Income Determination

- 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	<span style="border: 1px solid black; padding: 2px;">Adjunctive Eligible</span> <span style="color: red; font-weight: bold;">B</span>	<span style="border: 1px solid black; padding: 2px;">Verbal Report</span> <span style="color: red; font-weight: bold;">C</span>	<span style="border: 1px solid black; padding: 2px;">Method</span> <span style="color: red; font-weight: bold;">D</span>	\$ <span style="border: 1px solid black; padding: 2px;"> </span> <span style="color: red; font-weight: bold;">E</span>
Notes (optional)				

Reset

- Once the income has been saved a message will display

**Income information saved.**

#### View/Edit Income Information

Date: 7/2/2015

Household Size: 2

1	Adjunctive Eligible	Verbal Report	Bi-weekly	\$1,200.00
Notes:				
<b>TOTAL GROSS BI-WEEKLY INCOME: \$1,200.00</b>				

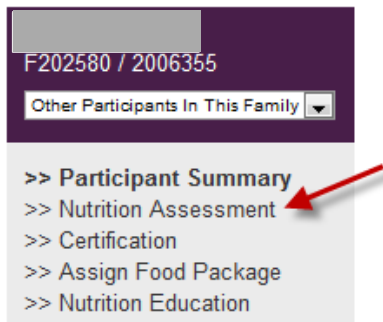
- 3. Click on the Edit button to edit the income information



- 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

**Health Assessment**

Anthropometrics | Blood Work | Pregnancy

Measurement Date: 6/19/2012

**Weight**

Decimal  Fraction  Metric

lbs

Inaccurate Reason:

**Height / Stature**

Decimal  Fraction  Metric

Height:  in

Inaccurate Reason:

**Pre-Pregnancy Weight:**

Decimal  Fraction  Metric  Estimated

0 lbs

Charts:

Anthro History

**Most Recent Measurement:**

Weight: None  
Height: None  
Date: None

Pre-pregnancy BMI: 0

SAVE | CANCEL



## 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

68 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

Length 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

118 lbs


**7. Save/Cancel buttons:**


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



8. Prenatal Weight Charts:

- Click on Prenatal Weight Gain chart

Charts 

Prenatal Weight Gain - 10/31/2012 

Anthro History

Most Recent Measurement:

Weight: 128 lb (58.2 kg)

Height: 68 in (173 cm)

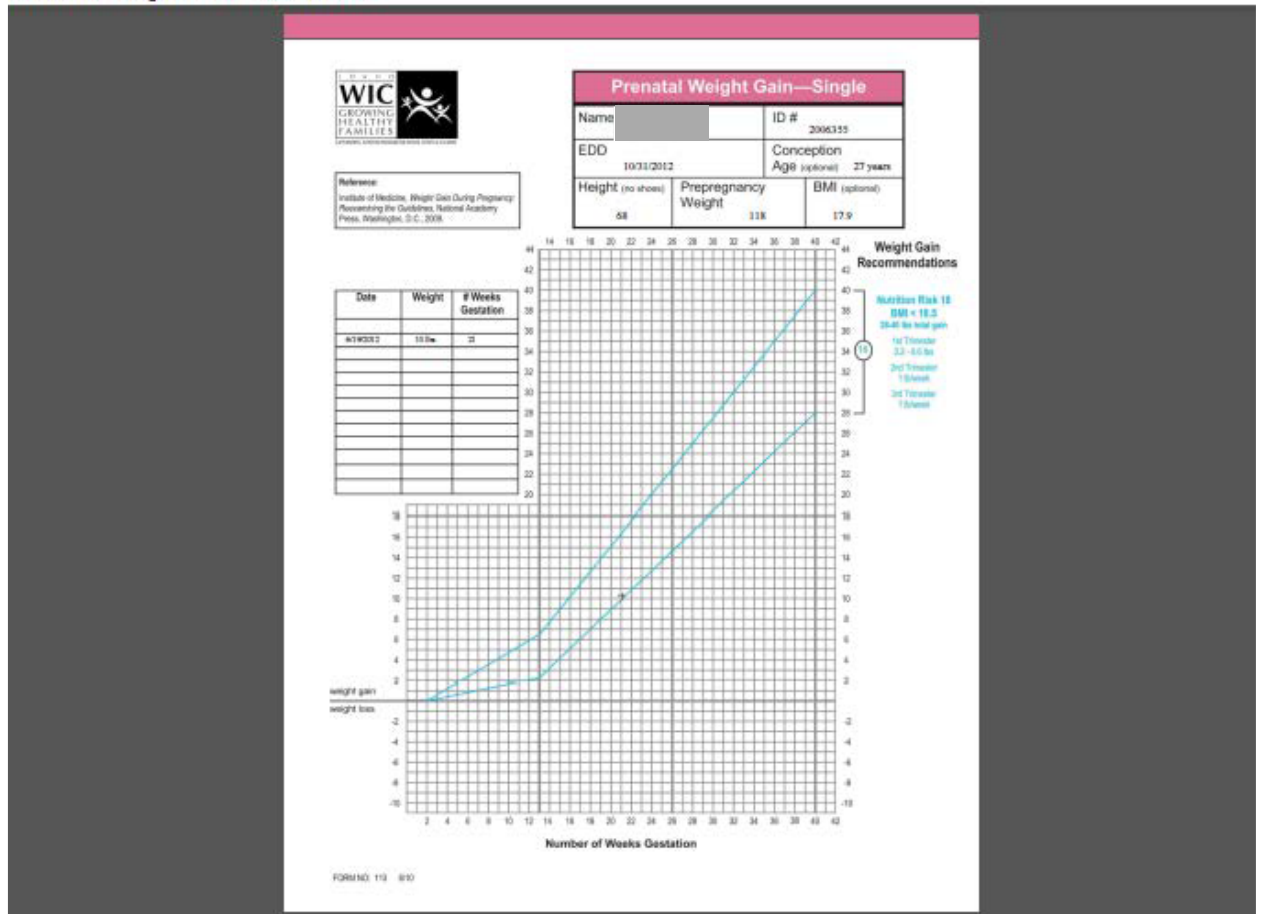
Date: 6/19/2012

9. Prenatal Weight Gain: Chart View

Pregnancy Charts

[+]Expand/Collapse

Prenatal Weight Gain - 10/31/2012



### 10. Measurement History:

- Click on line item record in Measurement History
- Able to Edit within 24 hours (most sections)

#### Measurement History

Date	Weight (lbs)	Weight Gain (lbs)	Weeks Gestation
6/19/2012	128 lbs (58.06 kg)	10.0000	21

### 11. Measurement History: View of Edit Pop up

#### Measurement Date:

#### Weight

 Decimal  Fraction  Metric

 lbs

#### Height / Stature

 Decimal  Fraction  Metric

 in

#### Pre-Pregnancy Weight:

 Decimal  Fraction  Metric  Estimated

 lbs



#### Most Recent Measurement:

Weight: 128 lb (58.2 kg)

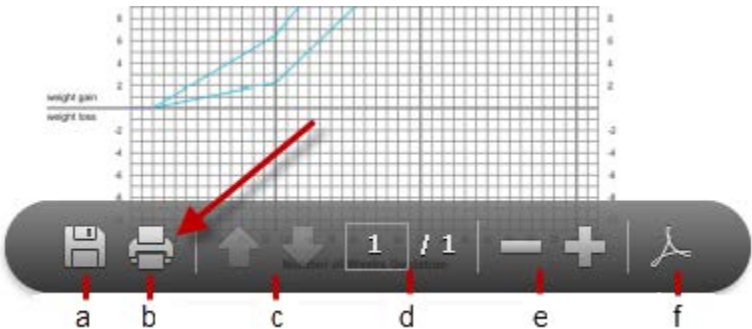
Height: 68 in (173 cm)

Date: 6/19/2012

Pre-pregnancy  
BMI

17.94

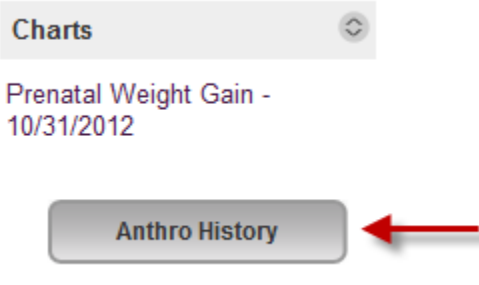
**NOTE:** To print Prenatal Weight charts: Hover cursor over chart when the menu bar displays across bottom of chart select the Printer Icon.



- a. Save
- b. Print
- c. Show previous or next page
- d. Go to a specific page
- e. Zoom in or out
- f. Show Adobe Reader toolbar

**12. Anthro History button:**

- Click on the Anthro History button



**13. Anthro History Grid:**

- Click on line item record to edit

Collected	Age	Weight	Inaccurate	Height
6/19/2012	27 y 11 m	128		68





### 14. Anthro History (pop up):

- Able to Edit within 24 hours (most sections)

Measurement Date:

6/19/2012

#### Weight

Decimal  Fraction  Metric

128 lbs

Inaccurate Reason ▼

#### Height / Stature

Decimal  Fraction  Metric

68.000 in

Inaccurate Reason... ▼

#### Pre-Pregnancy Weight:

Decimal  Fraction  Metric  Estimated

118 lbs

SAVE

CANCEL

#### Most Recent Measurement:

Weight: 128 lb (58.2 kg)

Height: 68 in (173 cm)

Date: 6/19/2012

Pre-pregnancy  
BMI

17.94



## 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:**  
7/2/2012

**Recorded Date:**  
7/2/2012    No measurement taken ←

**Hemoglobin:**  
 Minimum normal value: 10.5 ←

**Hematocrit:**  
 Minimum normal value: 32 ←

3. Select box if participant is currently smoking

**Currently Smoking:**

←

**Clinic Altitude:**  
< 3000 Ft

**Weeks Gestation:**  
22

#### 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 Estimated Delivery Date is not populated, enter the date

### Health Assessment

Anthropometrics Blood Work **Pregnancy**

**Estimated Delivery Date:**

8/2/2015

Proof: Copy Of Ultrasound With EDD

3. Select if the participant is Pregnant and Breast feeding single or multiple infant(s) less than 12 months old

Pregnant & Breastfeeding Infant < 12 months old

Pregnant & Breastfeeding Multiples < 12 months old

BF Infant DOB:

4. Select if the 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**

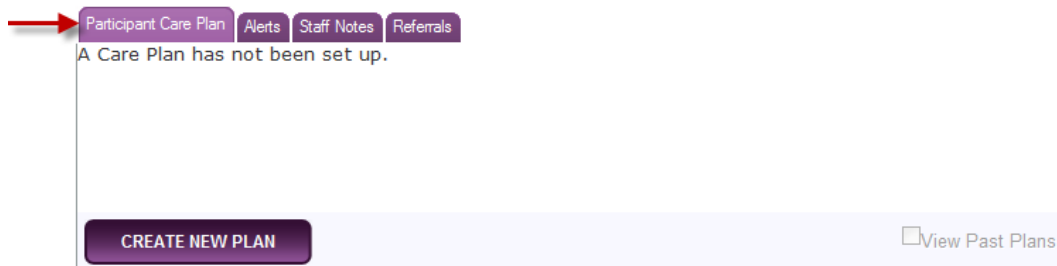
**\*Please enter the Previous Pregnancy Information.**

No Previous Pregnancy

7. Save/Reset buttons:
  - Click on Save to save the entered information

## 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:

Subjective:	
11/7/2013	Previous Goals: Try to increase calories, and protein
12/19/13	says she is feeling less nauseous and has a better appetite, but has blacked out 3-4 times recently. She has had to wear a heart monitor. Hasn't had f/u to see if that's the cause. She is planning on bing.

Objective:	Assessment:
<b>Age:</b> 24 y <b>Bloodwork</b> Date: 11/7/2013 Hemoglobin: 12.6 <b>Anthropometrics</b> Date: 12/19/2013 Height: 62.75 in Weight: 116.25 lbs BMI: 20.8 <b>Pregnancy:</b> Expected Delivery Date 5/20/2014 Multi-Fetal: N Weight Gained/Lost: 1.25 lbs Outcomes:	<b>Certification Risks:</b> Risk 131: Low Maternal Weight Gain Risk 132: Maternal weight loss in pregnancy Risk 301: Hyperemesis Gravidarum Risk 427.02: Consuming diet low in calories and/or essential nutrients +3.5 #'s gained in the last 6 weeks. Below target.

Education Topics:	Referrals:
<ul style="list-style-type: none"> <li>- Increase nutrient/calorie dense foods</li> <li>- Breastfeeding: Management</li> </ul>	Registered Dietitian

Handouts:
1:
2:
3:

Goals:
1: Try to increase calories, and protein
2:

Counseling / Plan:
Counseled on wt gain goals during 2nd and 3rd trimesters. Discussed healthy foods. Counseled on bing benefits and what to expect first few weeks. Gave bing newsletter and First 6 Weeks HO's - Plan: RD f/u

#### 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

<b>Objective:</b>	<b>(Categories B &amp; N)</b>
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 [edit](#)  
Lactation Counselor [edit](#)  
Registered Dietitian [edit](#)

## 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

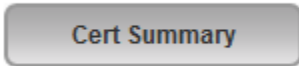
- 15. When the Participant Care Plan has been successfully saved the following Success message will display

**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

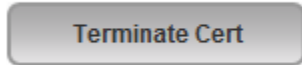
Participant Care Plan				
		Alerts	Staff Notes	Referrals
Date	Goals			
7/9/2012	wants to make sure she is getting at least 2 servings of fruits daily			
4/27/2012	Will cont trying to offer more veggies More activity over the summer			
<input type="button" value="CREATE NEW PLAN"/> <span style="float: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

- 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"/>	<div style="border: 1px solid black; padding: 2px;"> <div style="background-color: #e0e0e0; padding: 2px;">Please select a reason... ▾</div> <div style="background-color: #e0e0e0; padding: 2px;">Please select a reason...</div> <div style="padding: 2px;">Categorically Ineligible</div> <div style="padding: 2px;">Client Receiving Benefits from CSFP</div> <div style="padding: 2px;">Deceased</div> <div style="padding: 2px;">Dual Participation in WIC</div> <div style="padding: 2px;">Error</div> <div style="padding: 2px;">Failure to Pick Up Checks</div> <div style="padding: 2px;">Moved out of Service Area</div> <div style="padding: 2px;">Not Serving Priority</div> <div style="padding: 2px;">Program Misuse</div> <div style="padding: 2px;">Requested Early Certification</div> <div style="padding: 2px;">Voluntary Withdrawal</div> <div style="padding: 2px;">Women Category Change</div> </div>





# 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