

Remote Certification During Disaster – Staff Reference

(Remote throughout this document means by phone)

This Staff Reference is for Certification visits during a disaster. It contains information and guidance that is allowed during the disaster declaration.

Policy: To allow the Certifier to complete a WIC Certification without the participant being physically present due to disaster-related events. Remote certifications include:

- Initial Certification
- Re-Certification

The Certifier completes the contact by phone. Ensure participant, parent or caregiver is in a safe location (i.e. not driving). For participants with Limited English Proficiency (LEP) or who are hard of hearing, staff should use the interpreter services available.

For new prenatal applicants, complete the certification following the remote certification guidance. You do not need to follow the Presumptive Eligibility as we will be able to certify the applicant remotely.

Procedure:

When confirming appointment time, direct applicant to the WIC webpage which contains the Rights and Responsibilities, Vermont WIC Foods Guide, WIC Program and Shopping Guide and other information that will be helpful during the phone certification.

<https://www.healthvermont.gov/family/wic>

https://www.healthvermont.gov/sites/default/files/documents/pdf/cyf_WIC_VT-WIC-Foods-2019-2021.pdf

https://www.healthvermont.gov/sites/default/files/documents/pdf/cyf_WIC_program_guide.pdf

The Certifier will:

- A. Give a brief description of the WIC program and certification process. Let the participant know the information is confidential and how long the appointment will take.
 - a. Let the participant know you'll ask questions about potentially personal information so they can decide if they're in an area where they can answer these questions.
 - b. Let the participant know staff will enter the information into a computer so they're aware of what is occurring during the interaction.

Family/Intake:

- B. Document all required information on the participant's family/intake screens.

- a. Race/Ethnicity – select the participant’s race and ethnicity based on their declared information
- b. Identification/Residency/Income can be sent electronically via images of documents sent to the local office secure state email (Medicaid portal review verifies residency and income). **Staff can direct families to take photos of documents and email them to the Local WIC Office secure email. Staff should not print off proof documents, nor scan into Ceres. Document proofs viewed on the Identity, Residency or Income Screen.**
- c. **Identity** – In the drop down for Proof of Identity, choose the document family has provided electronically. (If you have not received it yet, leave blank. You will then complete a Provisional Certification. Once you receive the proof, you edit the Identity record and fulfill the Provisional Certification).
- d. Physical Presence – select No and choose Disaster in Reason drop down
- e. Contact/Address – confirm home phone and/or cell phone number and ask if accepts WIC texts. Obtain email address.
- f. Income - The participant can provide proof of income or adjunct eligibility as listed in b. above. Complete Adjunctive Eligibility screen and enter verbal self-reported income on front screen. For traditional income document using options listed in b above. Ensure separation of duties.
- g. Voter Registration – answer accordingly.

Assessment:

Complete a health assessment including:

- A. Measurements – height or length and weight.

Anthropometric Guidance for Remote Certification during Disaster:

- a. Document measurements if available from Health Care Provider if taken within 60 days of the appointment.
- b. **If measurements are unavailable, re-enter the most recent measurements in Ceres and re-enter the date of those measurements.**
- c. If applicant is new to WIC and measurements are unavailable:
 - i. **Women** – accept self-reported height and weight. Use Inaccurate Reason of Disaster¹.
 - ii. **Infants/Children** – If new infant re-enter birth measurements and date of birth. Use the 50% for age in below table. Use Inaccurate Reason of Disaster¹. This may trigger a risk that may not be applicable or may not capture a current risk. Growth should be

assessed at next visit and family should be followed up with at next appointment.

- iii. Children under 24 months can leave **head circumference blank**.

If you cannot find nearest age, can use Growth Chart in Ceres to find approximate 50thile for age.

Age (find nearest age)	Weight*	Length/Height*
6 weeks	10.8	22.5
6 months	17.8	26.5
12 months	22.9	29.7
18 months	26.0	32.3
2 years	28.0	34.2
2.5 years	29.8	36.0
3 years	31.5	37.5
3.5 years	34.0	39.0
4 years	36.0	40.5
4.5 years	38.0	41.5

*this number is the approximate 50th percentile value for weight, length or height for age. This may apply a risk in Ceres or miss assigning a risk which should be assessed at next appointment.

¹These values will be excluded from data collected for monitoring purposes.

Source: https://www.cdc.gov/growthcharts/html_charts/wtageinf.htm (boys but use for either gender)

B. Blood

- a. Document hemoglobin/hematocrit value if available from health care provider if taken within 90 days of the certification date. **If was done at provider but not available at this time, can choose Results Deferred and enter when they are obtained. If not available, on Blood screen choose No for Blood Work Taken and Disaster in the No Test Performed Reason drop down.**

C. Nutrition Interview

- a. Assess for all potential risks by asking all the required assessment questions for the participant’s category and age. Use interpreter services, when appropriate.
- a. Promote breastfeeding to pregnant participants by exploring questions and concerns about breastfeeding. Offer information to address concerns and document in participant’s file. Offer breastfeeding peer support, if available.
- b. Offer nutrition education based on the participant’s interests and relevant concerns or needs.
- c. Limit education to one topic, addressing high risks as needed, and set goals with the participant, parent, guardian or caretaker as appropriate.

D. Risk

- a. Assign all appropriate risk factors. **Be aware that Anthropometric risks may be inaccurate and plan education accordingly.**

Certification:

E. Complete Certification

- a. On the Certification screen, hit the Certify button
- b. Let the participant, parent, guardian or caretaker know how long the participant is eligible for WIC.
- c. Share that WIC will reassess the participant's eligibility at the end of the certification period.

Rights and Responsibilities:

- d. Ask the participant if they have read or have access, by phone or on a computer, to read the Rights and Responsibilities form on the Vermont WIC website, or read the entire form to the participant, parent or caregiver.
- e. Direct the participant to the Rights and Responsibilities form in their language, read the form to the person in their language, or ask the interpreter to read the form to the person in their language.
- f. Once the participant, parent or caregiver has read or had the Rights and Responsibilities form read to them, ask for verbal confirmation that they agree to the information.
- g. If the participant, parent or caregiver agrees to the Rights and Responsibilities, choose No Signature Available, and choose Disaster in the Reason drop down.
- h. After the appointment, create an Alert to have the participant, parent or caregiver sign the Rights and Responsibilities at the next appointment using the R&R Signature Capture from the File drop down menu.

Education and Care:

- F. Discuss and document referrals.
- G. Document Nutrition Education topics discussed, and materials provided.
- H. Complete Care Plan

Foods:

- I. Prescribe food benefits by choosing appropriate food package.

- a. Share information about WIC foods and how they contribute to a healthy diet.
 - b. Let the participant, parent, or caregiver know WIC foods are for the participant and alone won't meet all the nutritional needs of the participant. WIC is a supplemental food program.
- J. Issue the family a WIC card as needed. Instruct new families on how to set PIN.
- a. Explain that you will mail the WIC card and include the Family Food Benefit list, WIC Program and Shopping Guide and WIC Foods Guide.
 - b. Mailing of new or replacement WIC cards can be offered while staff are performing duties from the local office. Another system of providing the card to a family can be determined at the local level as needed such as an in-person option.**
- K. Issue food benefits.
- a. Issue food benefits for the appropriate number of months based on required documentation and next appointment needs.
 - b. Choose No Signature available and select Disaster in drop down.
- L. Offer WIC shopping education and information about how to use the WIC card as needed.
- a. Ask if the participant can download and view the Vermont WIC Foods Guide and Shopping Videos on the Vermont WIC website, to see the foods while Certifiers review them on the phone during the phone appointment.
 - b. Encourage the participant to consider downloading the WIC Shopper App.
 - c. Opt new families into shopping video text message series.
- M. Let the participant, parent, or caregiver know:
- a. When their next appointment is based on their needs and if any missing documentation is required.
 - b. What to bring to the next appointment, for example missing proofs, iron test results, or current measurements.
 - c. They can transfer their WIC eligibility if they move within the state and can be provide a Verification of Certification (VOC) if they move out of state.
- N. Thank the participant for using WIC and provide the local office phone number and email for any additional nutrition or breastfeeding questions.

Remind families as needed to check local Facebook page, WIC website and VDH website for additional information. Offer WICHealth.org as a resource as needed.

- O. **Consent Forms** – If a new consent form is needed, please go over the consent form with the family via phone and check off any partners they agree to on the Authorization to Share Information (Consent) Form.
- a. Explain to family that you will mail the form to them with a self-addressed stamped envelope and they can mail the form back. If not received, wait until the next in-person visit.

Additional guidance for working and conducting phone appointments when not located at the local WIC office, per AHS and ADS :

1. Employees should not be taking multifunction printers or copiers home-- please encourage paperlessness with your staff especially with confidential information as there are no secured bins at homes. Printing to pdf is a good alternative.
2. Remote location internet connectivity is the responsibility of the employee. Employees can work with business offices directly to activate tethering on phones or mifi devices where approved by the departments. Unfortunately, we don't have the capability to help troubleshoot home internet connections so rely on your internet provider for this sort of basic connection help. If you can get on the internet with help from your provider, you should be good to go.
3. Please don't use personal portable storage drives such as USB flash drives or external hard drives unless they are state-provided and encrypted.
4. Change your password now here at work proactively. It is not easy to change your password at home if it is expired. To do this, press ctrl-alt-delete, then select change password. Make sure you remember it! In addition, you must connect your laptop to the AHS Network using the new password before using it remotely.

Here is the official guidance from AHS for teleworking with Confidential Information, Protected Health Information (PHI), and Personally Identifiable Information (PII):

Keep your work physically secure

- Do not run errands or leave your car unattended with your laptop or files containing confidential information, PHI, or PII inside
- Keep your laptop in a secure, locked location when unattended

Unless approved by your supervisor, do not create or use confidential information, PHI, or PII in paper form

- Do not print records containing confidential information, PHI, or PII
- Do not remove paper records containing confidential information, PHI, or PII from State offices
- Do not include identifying information in handwritten notes

If it is necessary to handle confidential information, PHI, or PII in paper form:

- Your supervisor must approve the use of paper documents containing confidential information, PHI, or PII in your home
- All paper copies of confidential information, PHI, or PII must be kept in a locked briefcase or secure locking container when not in use
- Do not shred documents contain confidential information, PHI, or PII at home locations. Those documents must be returned to State offices for shredding

Make sure your family and household members do not have access to and cannot read confidential information, PHI, or PII.

- Password-lock your computer when unattended
- Avoid conducting business on the phone within earshot of family members
- Arrange monitors and computer screens so they are not visible to other family members

Ensure that appropriate technological safeguards are in place

- Use only password-protected wireless connections that are not shared with anyone outside your household
- Avoid emailing files containing confidential information, PHI, or PII to yourself and do not store those files on your laptop or unencrypted removable media (Encrypted flash drives must be approved by ADS)

Please contact the AHS Privacy Office if you have questions about how to handle confidential information, PHI, or PII from your home location.

AHS Privacy Office: Phone: 802-241-0225 Email: AHS.PrivacyAndSecurity@vermont.gov