



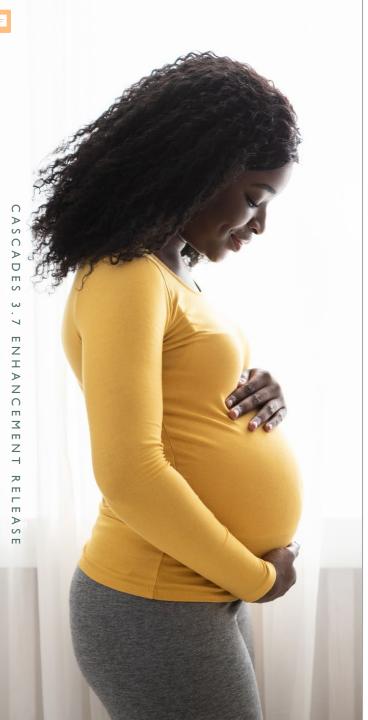
Cascades 3.7 Training Materials Non-food Benefit Changes

Cascades 3.7

- We'll implement on Monday, October 18th
- We divided the training into 2 PowerPoints
 - Each PowerPoint is self-guided
 - The PowerPoints aren't narrated
 - We provided additional information in the PowerPoint Notes handout
 - You can also view the PowerPoint notes using the Annotations view
- This PowerPoint covers the non-food benefit related changes listed on the next slide







TOPICS

- Current pregnancy weight status
- Low Pregnancy Weight Gain
- High Pregnancy Weight Gain
- Transfer Into State
 - During the month the child turns 5 years of age
 - Infants certified between 7 12 months of age
- Presume Eligible (PE) participant with missing proof(s)
- Journal of Transactions Family ID
- Family Services Analysis
- View scanned documents
- Detailed participant information
- Spell check icon

Please review the topics relevant to your role in the clinic



Current Pregnancy Weight Status

Cascades now only uses current pregnancy weights to determine risk

CURRENT PREGNANCY WEIGHT

<u>Current</u> pregnancy status is used to determine risk

- Cascades will only use measurements from the current pregnancy to determine weight-related risks.
- Previously Cascades used measurements entered from a prior pregnancy in some cases.





Low Pregnancy Weight Gain

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Cascades correctly assesses Low Weight Gain for all trimesters



LOW WEIGHT GAIN

The Low Weight Gain (131) risk has 2 parts:

- Weight gain that plots below the bottom line of the appropriate weight gain grid at any point during the pregnancy.
- Weight gain that meets the definition of low rate of weight gain in the 2nd and 3rd trimesters from the nutrition risk criteria.



LOW WEIGHT GAIN

Low Weight Gain that plots below the bottom line of the prenatal grid

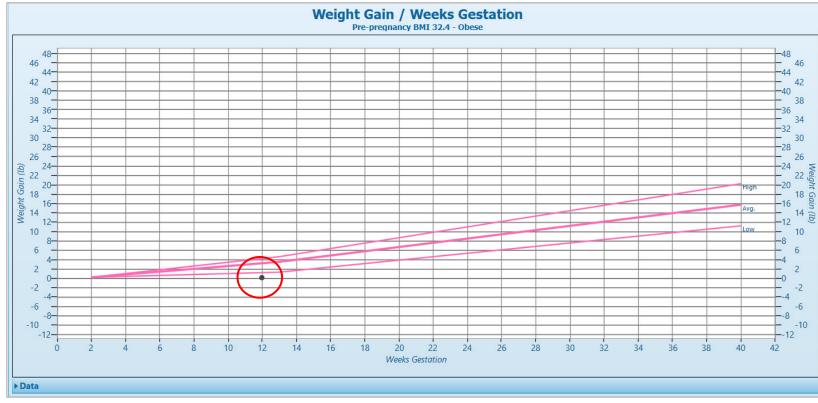
- Requires only 1 weight measurement that plots **below the bottom line** of the appropriate weight gain grid at any time in the pregnancy
- When this occurs, Cascades assigns:
 - "Low Weight Gain" in the 1st trimester not high risk
 - "Low Weight Gain (2nd & 3rd tri)" in the 2nd & 3rd trimester high risk

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LOW WEIGHT GAIN THAT PLOTS BELOW THE GRID EXAMPLE

Anthro/Lab screen – Prenatal Grid



Assigned Risk Factors screen

Risk Code	Description	High Risk Priority	Assigned By Comme
131	Low Weight Gain - BMI >= 30	Ι	System
111	BMI >= 25	1	System
332	Two Pregnancies in Two Years	I	System
321	Spontaneous Abortion (Hx)	I	System
			Select Risk Fact

- 1 measurement is entered in Cascades.
- Weight plots below the bottom line of the grid in the 1st trimester.
- Cascades assigns the risk "Low Weight Gain" for the participant's BMI status.
- The risk isn't high risk in the first trimester.
- Additional risks are assigned based on information entered in the participant's file.

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LOW WEIGHT GAIN

Low Weight Gain in the 2nd & 3rd trimesters

Cascades assigns the high-risk factor "Low Weight Gain – (2nd & 3rd tri)" when:

- 1 measurement plots below the bottom line of the grid in the 2nd or 3rd trimester,
 or
- 2 or more measurements in the 2nd or 3rd trimesters (taken at least 1 week apart) meet the nutrition risk definition of low rate of weight gain for the participant's pre-pregnant BMI classification

The low rate of weight gain definition from the nutrition risk criteria is shown on next slide

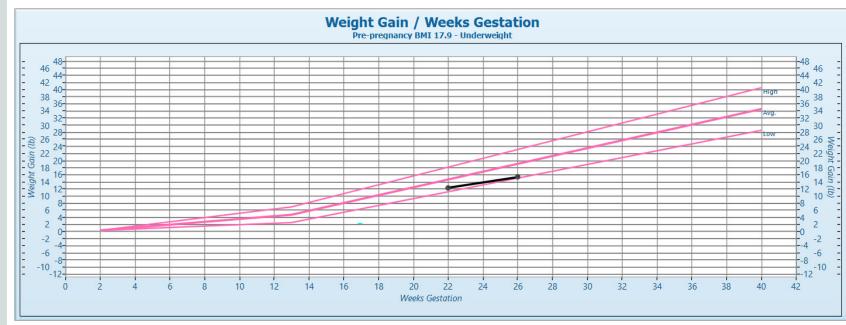
LOW WEIGHT GAIN 2ND & 3RD TRIMESTER

Pre-pregnancy Weight Classification	BMI	Total Weight Lbs./week	
Underweight	< 18.5	< 1	
Normal weight	18.5 to 24.9	< 0.8	
Overweight	25.0 to 29.9	< 0.5	
Obese	≥ 30.0	< 0.4	
Multi-fetal Pregnancies	Cascades doesn't assess low weight gain for multi-fetal pregnancies		

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LOW WEIGHT GAIN 2ND & 3RD TRIMESTER EXAMPLE

Anthro/Lab screen – Prenatal Grid



Assigned Risk Factors screen

As	Assigned Risk Factors Total Items: 3			tems: 3 🕐		
	Risk Code	Description	High Risk	Priority	Assigned By	Comments
	904	Secondhand Smoke	(I	System	
	101	RMI < 18.5	9	I	System	
X	131	Low Weight Gain - BMI < 18.5 (2nd & 3rd tri)	Yes	I	System	
					Select	Risk Factors

- 2 measurements are entered in Cascades for the 2nd trimester.
- The measurements are 4 weeks apart.
- The weight gain meets the definition of low rate of weight gain. (See next slide for the calculation.)
- Cascades assigns "Low Weight Gain – (2nd & 3rd tri)" for the BMI status.
- The risk is high risk in the 2nd & 3rd trimesters.
- Additional risks are assigned based on information entered in the participant's file.

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PRENATAL WEIGHT GAIN DATA GRID



Expected weight gain - displayed in the data grid:

• The weight gain **reflected by the bottom line of the graph** for the number of weeks gestation.

Low rate of weight gain - not displayed in the data grid:

• The rate of weight gain from the **nutrition risk criteria** for the 2nd & 3rd trimesters that qualifies as low rate of weight gain.

Data Grid

- Open the Data Grid by pressing the word "Data" below the prenatal grid
- The Data Grid lists measurements for the current pregnancy

Rate of Weight Gain

Even though the participant's weight plots above the bottom line of the graph, it **meets the risk definition for low rate of weight gain** from the nutrition risk criteria.

- The participant gained 3 pounds in 4 weeks = 0.75 pounds/week
- The rate of gain falls below the recommendation of 1 pound/week for the participant's BMI status



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High Pregnancy Weight Gain

Cascades correctly assesses High Weight Gain for all portions of the risk definition

HIGH WEIGHT GAIN

The High Weight Gain (133) risk has 2 parts:

- High weight gain that plots above the top line of the appropriate weight gain grid at any point during the pregnancy.
- Weight gain in the 2nd and 3rd trimesters that meets the definition of high rate of weight gain from the nutrition risk criteria.



HIGH WEIGHT GAIN

High Weight Gain that plots above the top line of the prenatal grid

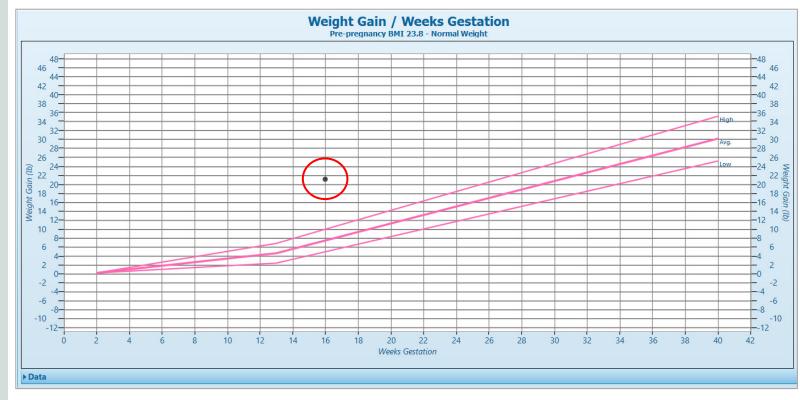
- Requires only 1 weight measurement that plots above the top line of the appropriate weight gain grid
- Can occur at any point in the pregnancy
- Cascades assigns "High Weight Gain" staff no longer have to manually assign this risk factor
- Is high risk factor

Example on next slide

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HIGH WEIGHT GAIN THAT PLOTS ABOVE THE GRID EXAMPLE

Anthro/Lab screen – Prenatal Grid



Assigned Risk Factors screen



- 1 measurement is entered in Cascades.
- Weight plots above the top line of the grid in the 2nd trimester.
- Cascades assigns the High Weight Gain risk for the participant's BMI status.
- The risk is high risk.
- Additional risks are assigned based on information entered in the participant's file.

HIGH WEIGHT GAIN

High Weight Gain in the 2nd & 3rd trimesters

- Requires 2 or more measurements taken in the 2nd or 3rd
 trimesters that are at least 1 week apart.
- Cascades compares the rate of weight gain to the nutrition risk criteria definition (see next slide).
- Cascades assigns the High Weight Gain risk
 - There isn't a separate 2nd & 3rd trimester risk for high weight gain at this time
 - High risk factor



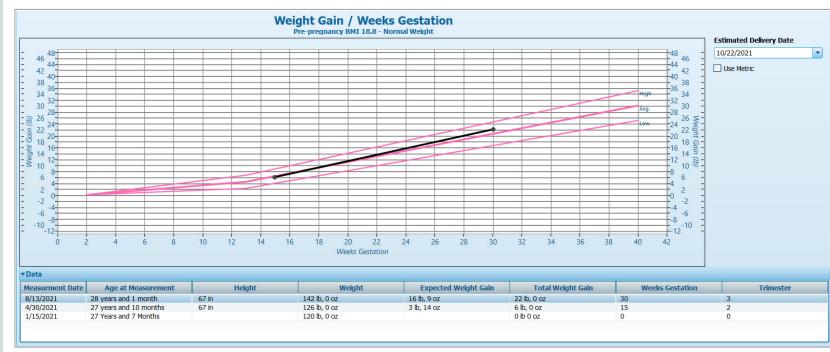
HIGH WEIGHT GAIN 2ND & 3RD TRIMESTER

Pre-pregnancy Weight Classification	BMI	Total Weight Lbs./week		
Underweight	< 18.5	> 1.3		
Normal weight	18.5 to 24.9	> 1		
Overweight	25.0 to 29.9	> 0.7		
Obese	≥ 30.0	> 0.6		
Multi-fetal Pregnancies	Cascades doesn't assess high weight gain for multi-fetal pregnancies			

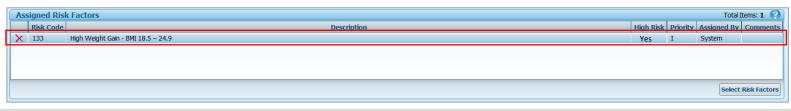
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HIGH WEIGHT GAIN 2ND & 3RD TRIMESTER EXAMPLE

Anthro/Lab screen – Prenatal Grid



Assigned Risk Factors screen



- 2 measurements are entered in Cascades for the 2nd & 3rd trimesters.
- The measurements are at least 1 week apart.
- Even though the weight gain plots within the graph, it meets the high rate of weight gain definition.
- Cascades assigns the High Weight Gain risk for the participant's BMI status.
- The risk is high risk.
- Additional risks are assigned based on information entered in the participant's file.

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LOW & HIGH WEIGHT GAIN

It's possible to have BOTH low and high weight gain at the same time

- A participant's weight gain can meet the definition for both low and high weight gain at the same time.
- Cascades assesses for, and assigns, these risks when they apply.
- Staff use critical thinking when sharing information about the weight gain graph and nutrition education.



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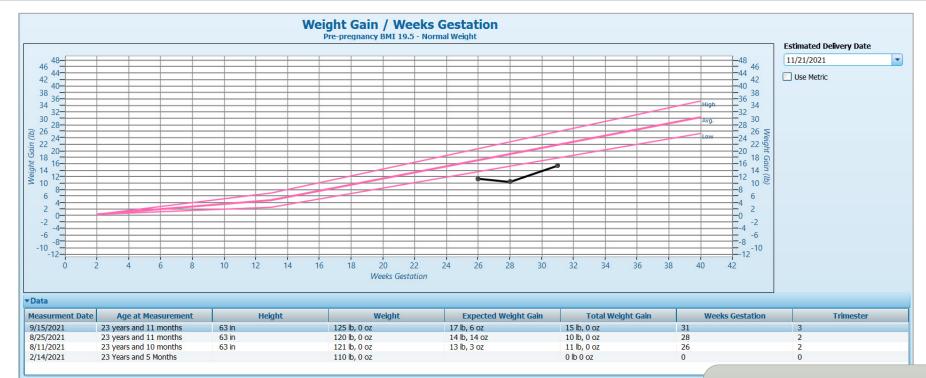
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LOW & HIGH WEIGHT GAIN EXAMPLE



Low Weight Gain

The participant's weight plots below the bottom line of the graph

High Weight Gain

The rate of weight gain in the 2nd & 3rd trimesters meets the risk criteria definition

See the Notes hand-out for more information about the calculations used for the risk assessment

MULTIFETAL LOW & HIGH WEIGHT GAIN

Cascades doesn't assess Low or High Weight Gain for Multifetal pregnancies



- Cascades won't assign Low or High Weight Gain risks when staff document more than "1" for the Number of Fetuses this Pregnancy (located on the Health Information screen).
- Staff assess and **manually** select appropriate weight gain risks on the Assigned Risk Factors screen.
 - Multiples prenatal grids are on the WIC website
- We plan to add multifetal prenatal weight gain grids and the risk calculation in a future release.

Transfer Into State

Children who turned 5 years old Infants certified between 7 – 12 months of age

TRANSFER INTO STATE



Transfer Into State during the month a child turns 5

- Children are eligible through the month they turn 5 years of age.
- Cascades will now allow staff to create the participant file and transfer the child in after the 5th birthday, but <u>before</u> the end of the month when the eligibility expires.
- Staff can't complete a certification on or after the 5th birthday.

TRANSFER INTO STATE EXAMPLE

Participant Demographics screen	
TRANSFERINTOSTATE Family Family ID: F00100000265 123 MAIN STREET OLYMPIA WA 98501	 The family transferred to Washington WIC on 8/19/2021.
OLYMPIA, WA 98501	 The child turned 5 years old 8/12/2021.
Identity Information Last Name * First Name * M.I. TRANSFERINTOSTATE Okiname Suffix Gender Male Proof of Identification * Date of Birth 8/12/2016 WIC Category Child Age 5 years	 The transfer card shows the certification started 8/6/2020 and ends 8/31/2021. Staff created the child's file after the 5th birthday and transferred in with the full eligibility period through the end of the month.
Transfer Into State Screen Kerter State %/62020 Expected Delivery Date Does child have a health risk?	Family Revealed a constraint of the second s

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TRANSFER INTO STATE

Transfer Into State when certified between 7 and 12 months of age

- Infants certified between 7 and 12 months of age receive a
 6-month eligibility period.
- Cascades now allows staff to transfer the infant in and provide 6 months of eligibility and not end eligibility at the end of the month they turn 1 year of age.
 - Previously Cascades wouldn't allow the certification end date past the end of the month the infant turned one.
- Staff can transfer the infant in at any time during the eligibility period (before or after the 1st birthday).



TRANSFER INTO STATE EXAMPLE

Participant Demographics screen	• The infant was born 9/29/2020 and was certified
TRANSFERINTOSTATE Family Family ID: F00100000265 123 MAIN STREET OLYMPIA, WA 98501	 on 5/23/2021 at 8 months of age. The transfer card shows the certification
General Information	started 5/23/2021 and ends 11/30/2021 (after
Identity Information Instance First Name * M.I. Instance Instance Instance M.I. Int Instance Suffix Gender Proof of Identification * Date of Birth P/29/2020 Female WIC Category Age 10 months I0 months	 the 1st birthday). Staff transferred the participant in with the full 6-month eligibility period (to the end of the month). Cascades didn't end eligibility at the end of the 12th month.
TRANSFERINTOSTATE Family ID: F00100000265 123 MAIN STREET OLYMPIA, WA 98501	
Transfer Into State Screen	Certification End Date * Correct food Actual Delivery Date
Does child have a health risk?	High risk?

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Presumed Participant with Missing Proof(s)

Proofs are required before completing the assessment and issuing additional benefits

PRESUMED ELIGIBLE (PE) WITH MISSING PROOF

Presumed Eligible (PE) participants terminated for missing proofs then reinstated

- After reinstating a terminated PE participant for missing proofs, **staff must enter the proofs** and complete the assessment in order to issue additional benefits.
- Cascades previously released the Temporary Certification End Date for PE participants reinstated after being terminated for missing proofs, but staff didn't enter the proof.
- This version of Cascades fixes the issue.

During the COVID-19 waiver period staff can use the **COVID-19 proof selection** for participants who can't provide proofs due to remote services.

A FEW MORE LITTLE THINGS

- Family IDs (not names) display in the Journal of Transactions when transferring individuals between families
- Family Services Analysis screen error is fixed
- Staff can view scanned documents
- Detailed Participant Information popup shows completely
- Spell Check icon displays completely









JOURNAL OF TRANSACTIONS

The Journal of Transactions now displays **Family ID's** instead of names **when transferring individuals** between families in Cascades

Select Participant	,,	Int Date End Date 8/2021 8/18/2021	Search		
Transaction H	istory				Total Items: 4
Occurrence Date	Activity Description	Participant Name	Staff Name Modified	Staff	Name Created
8/17/2021	Food Prescribed	TRANSFER EXAMPLE	Osorio Maria	Osorio Maria	
8/17/2021	WIC Food Instrument Issuance	TRANSFER EXAMPLE	Setup System	Osorio Maria	
8/17/2021	WIC Food Instrument Issuance	TRANSFER EXAMPLE	Setup System	Osorio Maria	
8/17/2021	Transfer Individual From One Family To Another Family	TRANSFER EXAMPLE	Osorio Maria	Osorio Maria	
Fransfer Date 8/17/2021		Participant Name TRANSFER EXAMPLE	Activity Description Transfer Individual From One Family	/ To Another Family	From Family To Family LF11283212 F0320000078
		To Location (Agency Name/Clinic Name)	VOC-In	To survey and the running	VOC-Issued Comment Da
taff Name Modifie	ed				

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Journal of Transactions (JOT) screen

- Provides confidentiality for foster and birth families.
- Helps state and local staff find the original family more easily when needed - especially when the family has a common name.

FAMILY SERVICES ANALYSIS

	Cascades WIC Application CASCADES QA2 Management Inform
Family Sen	rch Food Maintenance
	Search Criteria Exact Start Date End Date Range 6/1/2021 Search Cocal Agency Statistics
	L04 - Chelan Douglas Health District L05 - CHI Franciscan Medical Group L06 - C L07 - C L07 - C L09 - C L10 - C L11 - C L12 - C L13 - C L01 - C L13 - C L01 - C L14 - C L01 - E L15 - F L16 - C L01 - C L17 - C L01 - C L17 - C L01 - C L17 - C L01 - C L01 - C L11 - C L11 - C L11 - C L11 - C L01 - C
	L1 Appointments Functional Statistics L03

- Open the Family Services menu at the top of the screen and select Family Services Analysis.
- After entering a date range, the screen now opens without an error message.
- Staff see only the agencies and clinics for which they have permission.

Local Agency Statistics

- Click on an agency to see general statistics for appointments.
- Choose Appointments to learn more about the specific appointments during the date range entered.
- Choose Functional Statistics to see how often staff
 use different screens in Cascades and how much
 time is spent one each one.

A FEW FIXES

Scanned documents

In Cascades 3.6 staff couldn't view scanned documents, this issue is now fixed in 3.7.

Scanned Document Li	st					0	
	Washington WIC N nild Scan Exan Parent Scan E	nple		Date of Birth 7		_	
 103 Under 134 Failure 141 Low b 142 Preter 353 Food 	mosis: Check a qualify weight/at risk of underwe to thrive inth weight ≤ 5 lbs. 8 oz. (m or early delivery ≤ 38 w allergy (Severe diet impac medical diagnosis or con	ight <2 years old) veeks gestation ct): must expla	342 Gas 351 Met 355 Lact (<2 years of in under No.	d) tes	rrors in metabolism	ne	
2. Prescribe for A. Formula Similac A Similac S Similac S Six month PediaSu	ioy Isomil E Sensitive me limit	ecial formulas a Gimilac Spit- Gimilac Total	Up Comfort	WIC approval) Enfamil Nutramig Gerber Extensive Similac Alimentum	HA	Children I to 5	
B. Prescrit					Endoaro (EE noaro	vears	
Document List					-	Total Items: 1	0
Title	Date Time Scanned	Scanned By		Comment			
MDF for Alimentum	8/23/2021 2:32:19 PM	mxpolsak				Export to F	PDF
						Can	cel

Participant Detail Popup

The Detailed Participant Information pop-up now shows completely and isn't cut off.



Spell Check Icon

3.7 fixes the issue where the Spell Check Icon on Sticky Notes was cutoff when there was a scroll bar.

amily Comments	
× mxpolsak New	8/18/2021 3:01 PM
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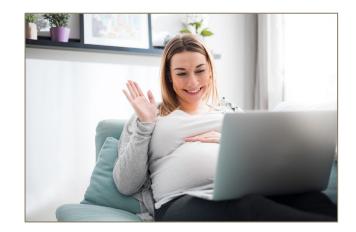
Getting the new version

Log in to Cascades on or after Monday, October 18th to start using Cascades 3.7.

It may take a little longer to load Cascades the first time you log in.









Cascades Support

Call or email Cascades Support with any issues or questions about the software.

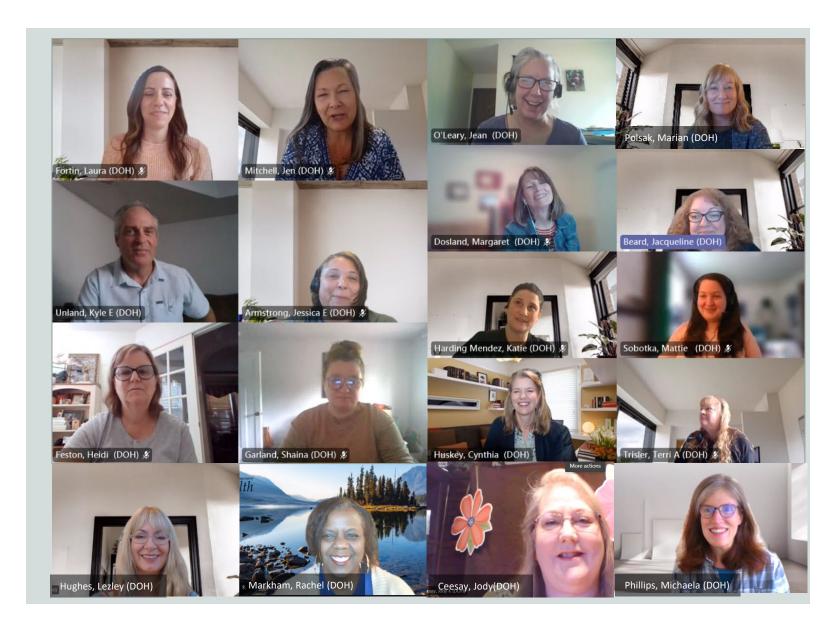
- <u>Cascades.Support@doh.wa.gov</u>
- 1-800-841-1410, choose option 3, then option 2

Cascades Team

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Bob Pocklington, Supervisor Luisa Schloss, Team Lead Maria Osorio Lili Scott Scott Cho Joseph Hammond



Policy Support

Call or email Policy Support with any issues or questions about policy or procedure.

- wicpolicysupport@doh.wa.gov
- 1-800-841-1410, choose option3, then option 1

Policy Support Team

State WIC Clinic Operations staff, includes:

- Breastfeeding and Foods Team
- Local Program Consultants
- Training Team



THANK YOU

What you do every day makes a difference to make so many futures that much brighter

Washington WIC



To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.

DOH 961-1249 September 2021