



# CASCADES 3.9 TRAINING MATERIALS Washington WIC Program



### Cascades 3.9

- We'll implement Monday, September 19<sup>th</sup>
- We'll update the Sandbox and Production at the same time
- A few notes about this PowerPoint training:
  - The training is self-guided without narration
  - The training will take about 30 minutes to review
  - We provided a separate Notes handout
  - Please review the changes that relate to your role in the clinic





## Topics

- Confirm Gender & Date of Birth
- Correct Certification Ends Date
- Infant Mid-Certification
   Assessment Questions
- 2022 Nutrition Risk Revisions











Confirm Gender and Date of Birth for new participants and those who transfer in from another state





Currently, once clinic staff certify a new participant or transfer in a participant from another state:

- State and clinic staff can't change the gender or date of birth
- Clinic staff have to create a duplicate record to correct errors
- Cascades Support has to link the duplicate records

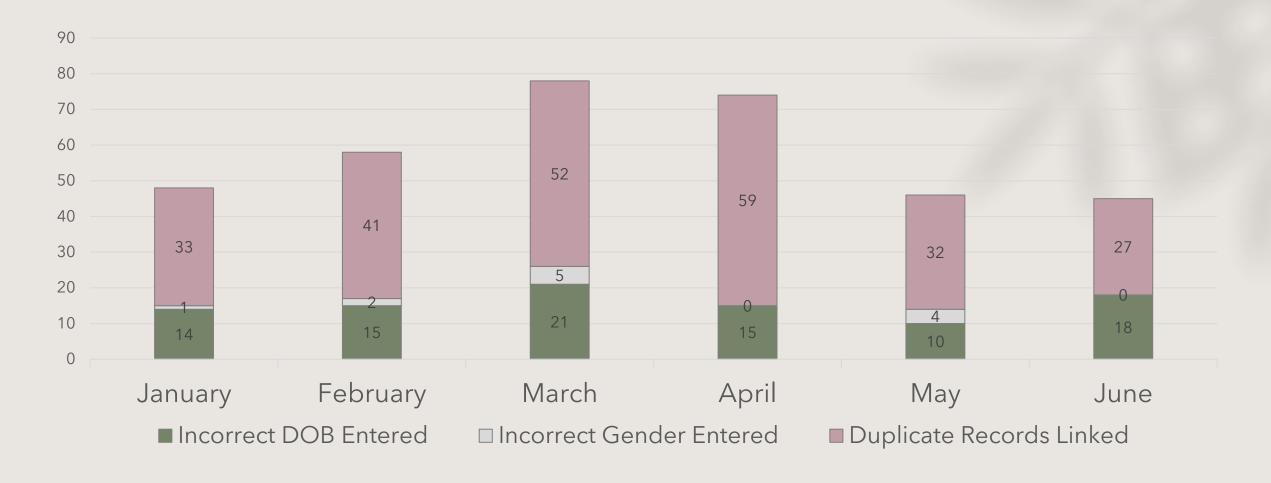


See the next slide for recent Cascades Support data about

- Wrong date of birth entered
- Wrong gender entered
- Requests to link duplicate records

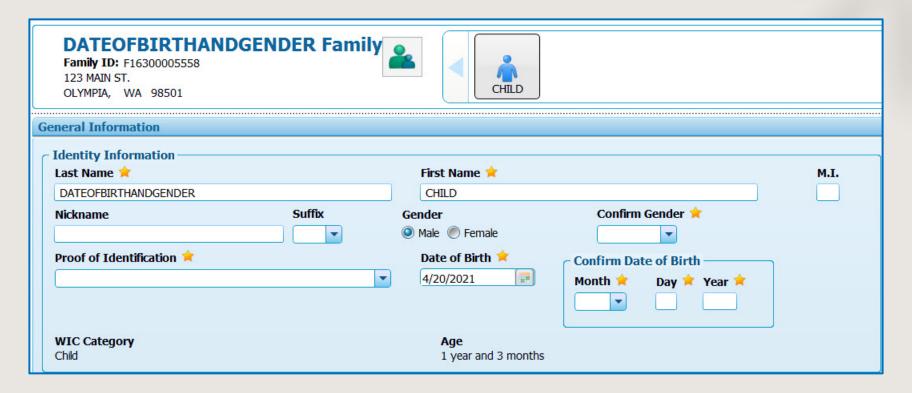


## Cascades Support Call Data January - June 2022





We added new fields to **confirm** Gender and Date of Birth for new participants and those who transfer in from another state.





Staff won't have to confirm these items when quickly <u>adding</u> a participant to the family on the **Family Demographics** screen as part of the **application process**.





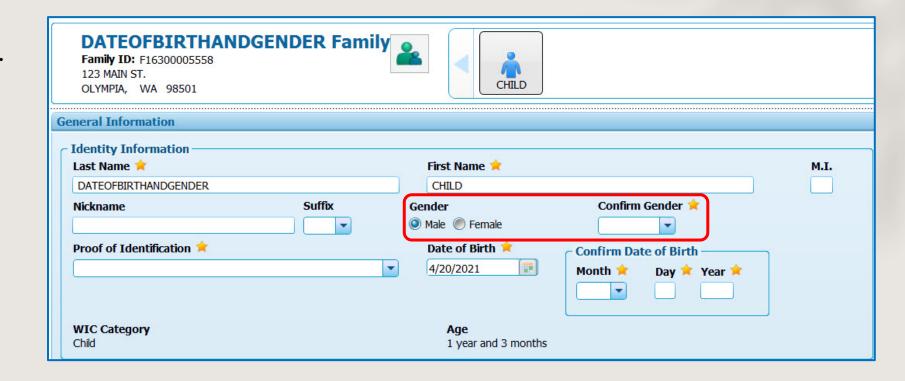
Cascades 3.9 <u>will</u> require staff to confirm Gender and Date of Birth on the **Participant Demographics** screen when entering Proof of Identification, Race & Ethnicity, and Physical presence as part of the **certification process**.





### Confirm Gender

- Cascades will require staff to confirm Gender for infants and children.
- Staff don't have to confirm Gender for adults.
  - Gender defaults to female for all adult participants





### Confirm Gender

 An error message appears when an infant's or child's "Gender" and "Confirm Gender" fields don't match

- Adjust the incorrect selection
  - Correct <u>either</u> the "Gender" or "Confirm Gender" selection
  - In this example the "Confirm Gender" field was corrected

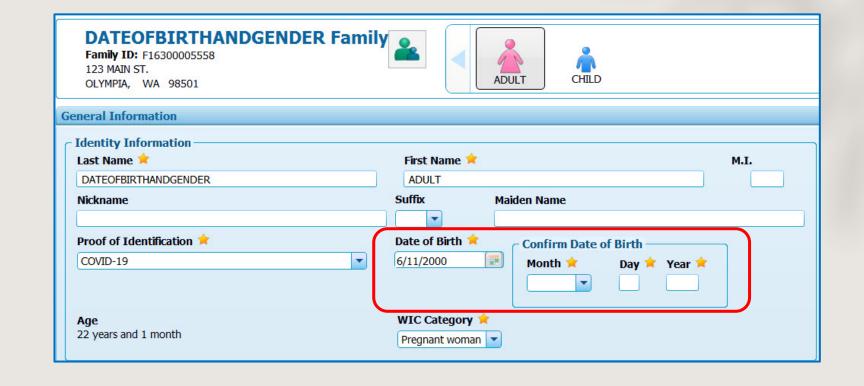






### Confirm Date of Birth

- Cascades will require staff to confirm Date of Birth for all participants (adults, infants & children) when staff:
  - Complete an initial certification in Cascades
  - Transfer In the participant from another state





### Confirm Date of Birth

- You'll see an error message when any field (Month, Day, or Year) of the participant's
   "Date of Birth" and "Confirm Date of Birth" doesn't match
- Adjust the incorrect selection
  - Correct <u>either</u> the "Date of Birth" or "Confirm Date of Birth" selection
  - In this example the Date of Birth field was corrected



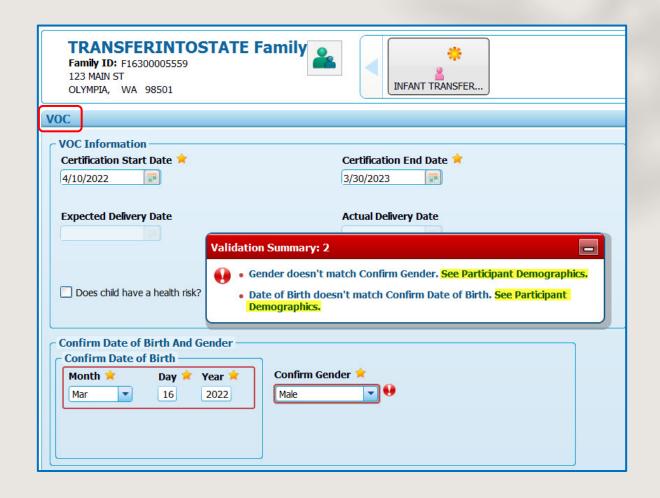




## Confirm Gender & Date of Birth - Transfer In

### When Transferring Into State

- The Gender and Date of Birth confirmations occur on the **Transfer** Into State screen
- Check the Participant Demographics screen and the Transfer Into State screen and correct the information where needed then complete the Transfer In





## Correct Cascades Certification End Date

Provide the full eligibility period for participants who deliver or are born on the 1<sup>st</sup> day of the month





Cascades doesn't give the last month of eligibility when the Breastfeeding or Non-breastfeeding Postpartum participant delivers on the 1<sup>st</sup> day of the month; or for infants born on the 1<sup>st</sup> day of the month.

This issue will be fixed for new participants certified after implementing Cascades 3.9.

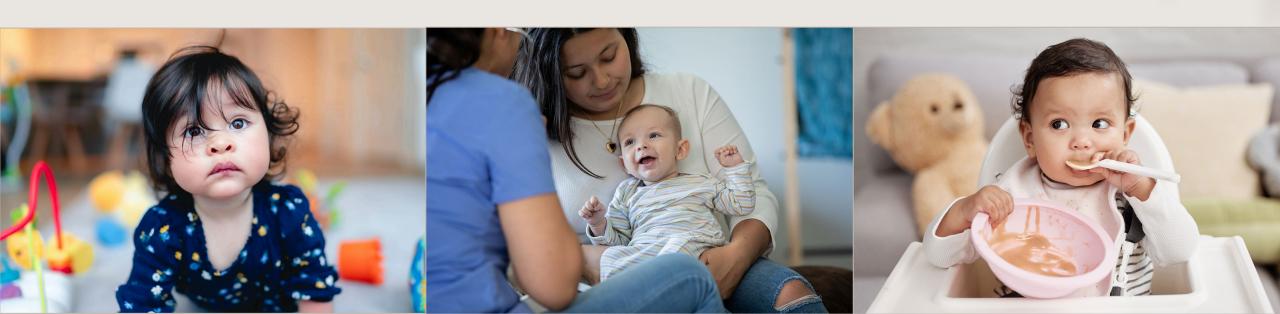
We'll extend the certification period for current participants affected by this issue so they receive their full eligibility.





## Infant Mid-Certification Assessment Questions

The 5 - 8 month Assessment Questions were added to the infant 0 - 4 month questions





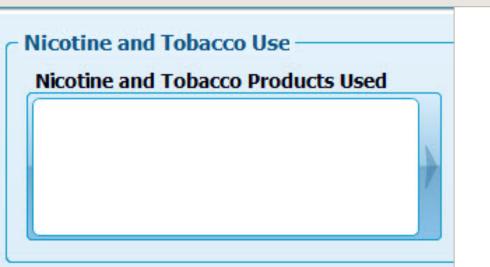
### Infant Mid-Certification Assessment Questions

- We added the 5 8 month Assessment Questions to the **Diet & Health** screen for infants 0 4 months of age.
- This allows staff to complete the health assessment in the month the infant turns 5 months of age and document answers to the Assessment Questions.



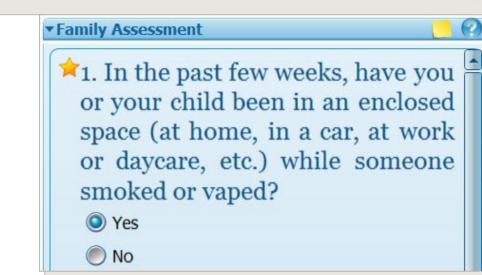
## 2022 Nutrition Risk Revisions

Risk updates to the federal nutrition risk criteria





Volume 1, Chapter 14
Nutrition Risk Criteria





## Overview of risk factor changes

Risk Factor	Risk Factor Change	Cascades Impact
≤ 20 Years at Conception (Risk 331)	Changed from ≤ 17 Years at Conception	<ul> <li>Cascades will auto calculate this risk based on participant being 20 years of age or less at conception</li> <li>High risk remains at &lt; 17 years of age at conception</li> </ul>
Nicotine and Tobacco Use (Risk 371)	<ul> <li>Changed from Maternal Smoking</li> <li>Includes cigarettes, pipes, cigars, hookahs, vaping devices, e-cigarettes, chewing tobacco, snuff, dissolvables (examples: lozenges, orbs, sticks), nicotine replacement therapies (examples: gums, patches), other</li> </ul>	Added a Nicotine and Tobacco Products Used mover box on the Health Information screen for adult participants
Environmental Tobacco Smoke Exposure (Risk 904)	<ul> <li>Changed from Secondhand Smoke</li> <li>Includes exposure to smoke from tobacco products inside enclosed areas like home, car, work, daycare, etc.</li> </ul>	Changed the question on the Family Assessment screen to: In the past few weeks, have you or your child been in an enclosed space (at home, in a car, work or daycare, etc.) while someone smoked or vaped?



## Overview of risk factor changes

Risk Factor	Risk Factor Change	Cascades Impact
Young Age and 3 or More Pregnancies (Risk 333)	Discontinued by USDA and the Food and Nutrition Service (FNS) with the 2022 Nutrition Risk Revision	We removed this risk from Cascades
Spontaneous Abortion (Hx), Fetal Death (Hx), or Neonatal Death (Hx) (Risk 321)	No federal risk factor change	We made this risk CPA-assignable due to clinic staff request
Failure to Thrive (Risk 134)	<ul> <li>The Justification, Clarification and Reference sections of the risk were updated in the policy chapter</li> <li>The Implications for WIC Nutrition Services section was added to the risk in the policy chapter</li> </ul>	<ul> <li>The risk factor updates didn't affect the risk definition</li> <li>There is no change to how or when staff select this risk in Cascades</li> <li>No changes needed to Cascades</li> </ul>

See <u>Volume 1, Chapter 14</u>
<u>Nutrition Risk Criteria</u> and the <u>Table of Revisions</u>
For a comprehensive list of the risk factor changes.



## ≤ 20 Years at Conception (Risk 331)

- Age changed from ≤ 17 years at conception
- Auto calculated based on age at conception (last menstrual period + 15 days)
- High Risk when < 17 years at conception</li>
- The risk applies to Pregnant, Breastfeeding, and Non-breastfeeding Postpartum participants



In the example, the participant was under 17 years of age and Cascades made the participant High Risk



## Health Information Screen Changes

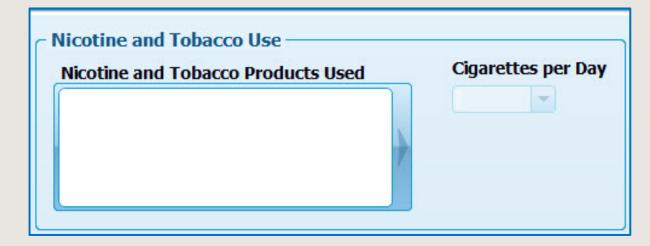
#### We updated the **Health Information** screen

- Changed **Woman** Health Information to **Participant** Health Information to be gender neutral when possible
- Replaced the Cigarettes per Day section with a Nicotine and Tobacco Products Used mover box
- **Removed** the Drinks Per Week section this didn't select a risk, staff must ask the Assessment Question and manually select the Alcohol Use risk when it applies
- Updated the display of the Family Assessment environmental tobacco smoke exposure question





## Nicotine and Tobacco Use (Risk 371)



- The federal risk factor was expanded to include more than smoking cigarettes for adult participants
- We added a mover box to the adult Health Information screen to document participant Nicotine and Tobacco Product Use

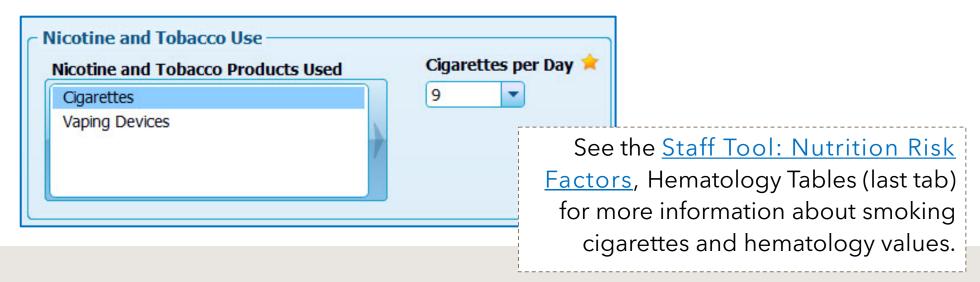
#### **Mover box selections:**

- Cigarettes
- Pipes
- Cigars
- Hookahs
- Vaping Devices
- E-cigarettes
- Chewing Tobacco
- Snuff
- Dissolvables (examples: lozenges, orbs, sticks)
- Nicotine Replacement Therapies (examples: gums, patches)
- Other



## Nicotine and Tobacco Use (Risk 371)

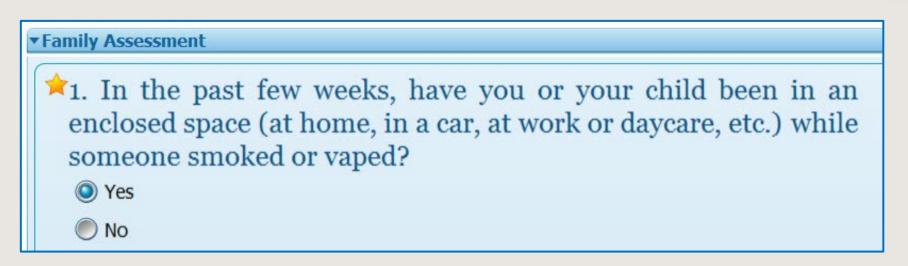
- Select all items the participant uses
  - Press the Control button to select and move multiple items at once
- Cigarettes per Day is required when "Cigarettes" is selected
  - Choose from > 1 to 97 or more
  - > 1 means the person smokes, but less than 1 cigarette per day
- Cascades uses the number of Cigarettes per Day to determine the correct values when assessing for low and very low hematocrit and hemoglobin





## Environmental Tobacco Smoke Exposure (Risk 904)

- Risk title changed from Secondhand Smoke
- Due to current research, the risk now includes **exposure to smoke from tobacco products inside enclosed spaces, like home, car, work, daycare**, etc.
- The risk applies to all participants
- We changed the question on the Family Assessment screen





## A few more risk factor changes

#### **Young Age and 3 or More Pregnancies** (Risk 333)

- Discontinued by USDA/FNS with the 2022 risk revision
- We removed the risk in Cascades 3.9

#### Failure to Thrive (Risk 134)

- Several policy sections were updated in the manual
- The updates don't affect how or when staff select the risk in Cascades



Volume 1, Chapter 14
Nutrition Risk Criteria



## A few more risk factor changes

#### **Spontaneous Abortion (Hx), Fetal Death (Hx), or Neonatal Death (Hx)** (Risk 321)

- We're making this risk CPA-assignable in Cascades 3.9 due to clinic staff request
- Staff shared that participants don't always know the information required on the
   Pregnancy History screen which makes the sensitive conversation more difficult
- We encourage completing the Pregnancy History screen and having Cascades assign the risk, but we realize that isn't always possible





## Spontaneous Abortion (Hx), Fetal Death (Hx), or Neonatal Death (Hx)

It's important staff only select the risk when the participant's pregnancy history meets the risk definition

#### **Pregnant**

Any history of fetal or neonatal death or 2 or more spontaneous abortions (miscarriages)

#### Breastfeeding

Most recent pregnancy where there was a multifetal gestation with one or more fetal or neonatal deaths but with one or more infants still living

#### Non-BF Postpartum

Spontaneous abortion, fetal or neonatal loss in most recent pregnancy

Term	Definition
Spontaneous Abortion (SAB)	The spontaneous termination at < 20 weeks of a fetus weighing < 500 grams
Fetal Death	The spontaneous termination of a gestation at ≥ 20 weeks
Neonatal Death	The death of an infant within 0 - 28 days of life



### **Inactivated Risks**

- Risk factor history is kept in each participant's file
- We renamed current and previously inactivated risks to show when they were inactivated

Risk code	Current/New risk	Inactivated risk
331	≤ 20 Years at Conception	≤ 17 Years at Conception – inactivated 2022 per FNS
333	N/A - discontinued	Young Age and 3 or More Pregnancies – inactivated 2022 per FNS
371	Nicotine and Tobacco Use	Maternal Smoking – inactivated 2022 per FNS
904	Environmental Tobacco Smoke Exposure	Secondhand Smoke – inactivated 2022 per FNS
132	N/A - discontinued	Weight Loss 1st Trimester < Pre-Pregnancy Weight – inactivated 2020 per FNS
132	N/A - discontinued	Weight Loss 2nd/3rd Trimester >= 2 lbs - inactivated 2020 per FNS
341	Nutrient Deficiency or Disease	Nutrient Deficiency Disease – inactivated 2020 per FNS
382	Fetal Alcohol Spectrum Disorders	Fetal Alcohol Syndrome – inactivated 2020 per FNS
703	N/A - discontinued	Maternal Substance Use (during pregnancy) – inactivated 2020 per FNS



## We're here to help

#### **Cascades Support**

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

- Cascades.Support@doh.wa.gov
- 1-800-841-1410, choose option 3, thenoption 2

#### **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 option 3, thenoption 1









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We can't say thank you enough for all your hard work.

We appreciate you.



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