

Streamlined Certification Process for Emergency Situations

5/2019

In the event of an emergency, when resources and/or clinic time are drastically reduced, a streamlined certification process may be used. [Section 1.17: Emergency Actions](#) describes the specific situations when this process may be used. Streamlining the certification process is temporary only for emergencies. Participants must receive full WIC services as soon as possible once the emergency is resolved. *Consult with your State WIC Consultant before implementing the process.*

Some participants have a more urgent need for assessment and information. Using a triage approach will help focus resources where they are most needed. Participants are triaged and classified as either lower priority or higher priority. Participants determined to be lower priority can be certified using an abbreviated, streamlined approach (Process #1 below). Participants determined to be higher priority should be certified using a more comprehensive approach (Process #2 below).

Triage: A CPA decides which certification process to use based on the participant's category and whether or not there is an identified medical risk condition. To determine whether a participant is higher or lower priority, briefly review the health history, nutritional status, and any previous chart documentation. **Any participant with an INCP is classified as higher priority.** Otherwise, participant categories are classified below.

Lower Priority:

- Children being *re-certified*
- New certifications of children *over* 2 years of age
- Postpartum non-breastfeeding women

...proceed with Process #1

Higher Priority:

- New pregnant women
- New breastfeeding woman within 6 months postpartum
- Infants and new children *under* 2 years of age
- Any participant requiring an INCP
- Anyone found to have a medical risk condition in the triage process

...proceed with Process #2

Process # 1 --- Streamlined certification process for participants determined to be “lower priority” only

Suggested Script for WIC staff: “We are in a disaster situation, so this will be shorter than usual. If you have any questions, please tell me. We will be certifying you again in (insert length of certification period), and at that time, you can/should expect a longer visit and more time for nutrition education.”

Hematological measurements: If child *is due* for a blood draw:

- If last Hgb value was <11.1, draw blood
- If last Hgb value was \geq 11.1, do not draw blood. Select “other-write note” for “Reason Bloodwork was not Collected” on the blood screen of the WIC Information System. Indicate “Streamlined Cert Process” in the note.
- Do hemoglobin test at next clinic visit

Anthropometric measurements: Take measurements if time allows. If measurements are not taken, select “Unknown Height/Weight” to complete this part of the streamlined certification.

Nutrition Assessment and Health History:

- Eliminate in most cases
- Breastfeeding Women: ask about breastfeeding

Risk Code Assignment:

Assign risk code 601 for *breastfeeding woman*.

Assign risk code 428 to *children 12-23 months*.

Assign risk code 401 to *all other participants* **except** those who receive a full certification. Participants who receive a full certification should be assigned the appropriate risk codes based on the assessment.

Process # 2 --- Complete certification for all participants determined to be “higher priority”

Hematological measurements: Complete blood draw, if appropriate per the hematological schedule.

Anthropometric measurements: Complete measurements

Nutrition Assessment and Health History:

Review as needed

Risk Code Assignment: Assign risk codes based on assessments.

Nutrition Education: Provide education related to risk condition.
Provide breastfeeding support as appropriate.

Mid-certifications – may be postponed during Emergency Situations.

Reference – Complete Listing of Hyperlinks

Section 1.17: Emergency Actions

(https://www.health.state.mn.us/docs/people/wic/localagency/program/mom/chsctns/ch1/sctn1_17.pdf)

Minnesota Department of Health - WIC Program 625 Robert St N, PO BOX 64975, ST PAUL MN 55164-0975; 1-800-657-3942, health.wic@state.mn.us, www.health.state.mn.us. To obtain this information in a different format, call: 1-800-657-3942

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