

Prenatal and Post-Partum – ChildPlus Instructions

General Information

You will document prenatal services under Home Visit Event and connect this to Pregnancy tab. These instructions include the following:

- Prenatal Wellness Assessment
- Pregnant Woman Dental Exam
- Two Week Newborn Visit
- Post-Partum Screening Referral
- Well Baby Checks (1 week, 2 week and 1 month)
- Infant Data for Enrollment
- Data entry requirements for Pregnancy tab

Prenatal Wellness Assessment

This event is required within the first 30 days of first date of service (FDS). Fill out the Prenatal Wellness Assessment form, attach under Health tab and enter the following data:

Event Date: Enter date assessment completed

Status: Select Complete or Follow Up Needed

Agency Worker: Select your name if does not auto-fill

Event Notes: If Follow Up Needed, document the follow up needs in Event Notes.

Actions: Add Action to document your follow up

Closed Date: Enter the closed date when all follow up is completed.

Note: When you offer nutrition referral and parent declines, document in Home Visit Notes. If parent accepts, follow the process for Nutrition Referral.

Prenatal Wellness Assessment

Event Date ^{PIR} 9/9/22 Date assessment completed.

Status Follow Up Needed Select Completed or Follow Up Needed.

Agency Worker Sandeno, Karen Select your name if does not auto-fill.

Closed Date If status is Follow Up Needed, close the event when all follow up is completed.

Event Notes If status is Follow Up Needed, document the follow up needs in Event Notes.

Mom has just entered her 2nd trimester. She currently does not have primary Prenatal Provider. She does have insurance but stated she has not been able to attend a prenatal visit. She is not enrolled in WIC or SNAP. Mom stated that this is her first child and she is pretty nervous about preparing herself and her support system. She is excited to work together in order to learn more.

Actions Add Actions for any follow up. Optional: schedule actions for to-do list reminders. Add Action

Action	Action Date	Description	Status
Communi...		insurance follow up	Sandeno, Karen

Save Cancel

Pregnant Woman Dental Exam

Create this event within 90 days of FDS when parent reports receiving a dental examination during pregnancy. If the dental examination occurred prior to pregnancy, do not create the event.

Event date: Date of dental exam (if during pregnancy)

Status: Select Completed

Agency Worker: Select your name if does not auto-fill

Provider: Select the dental provider. If not on the list, refer to ChildPlus Guidelines – Community Resources instructions to add the provider.

Event Notes: Add this note – Self-reported information from parent

Pregnant Woman Dental Exam



Event Date ^{PIR} Enter date of exam (if during pregnancy)

Status Select Completed

Agency Worker Select your name if does not auto-fill

Provider Select dental provider. If not on the list, refer to ChildPlus Guidelines -- Community Resources to add the provider.

Event Notes Enter this note: Self-reported information from parent

Two Week Newborn Visit

Create this event when the two week newborn visit is completed. Fill out the Two Week Newborn Visit form, attach under Health tab and data enter as follows:

- Event Date: Enter date visit completed
- Status: Select Complete or Follow Up Needed
- Agency Worker: Select your name if does not auto-fill
- Event Notes: If Follow Up Needed, document the needs in Event Notes.
- Actions: Add Action for any follow up
- Closed Date: Enter the date when all follow up is completed.

Two Week Newborn Visit

Event Date ^{PIR} 9/9/22

Status Follow Up Needed

Agency Worker Sandeno, Karen

Closed Date

Event Notes
Need to follow up to support attending next Well-Child Exam.

Actions

Action	Action Date	Description	Status	Agency Worker
Follow Up		Remind mom 1m WCE		Sandeno, Karen

Save Cancel

The screenshot shows a form titled "Two Week Newborn Visit" with several fields and an actions table. Callouts provide instructions for each field: "Event Date" (9/9/22) with callout "Enter date visit completed."; "Status" (Follow Up Needed) with callout "Select Completed or Follow Up Needed."; "Agency Worker" (Sandeno, Karen) with callout "Select your name if does not auto-fill."; "Closed Date" with callout "If status is Follow Up Needed, close the event when all follow up is completed."; "Event Notes" (Need to follow up to support attending next Well-Child Exam.) with callout "If status is Follow Up Needed, document the follow up needs in Event Notes."; "Actions" table with callout "Add Actions for any follow up. Optional: schedule actions for to-do list reminders." The table has columns for Action, Action Date, Description, Status, and Agency Worker, with one row for "Follow Up" with description "Remind mom 1m WCE" and agency worker "Sandeno, Karen". At the bottom right are "Save" and "Cancel" buttons.

Post-Partum Screening Referral

This event is the referral “form” to refer a family for a post-partum depression screening. Staff will create the event and send email notification to request a referral (see procedure).

Event Date: Enter date of initial referral

Status: Select In Process

Agency Worker: Select your name if does not auto-fill

Provider Type: Select Public Health Nurse (This is Jan Wendt)

Closed Date: Enter the closed date at the end of the referral process when all follow up is completed (and update Status to Completed)

Event Notes: Document the reason for the referral with as much detail as possible. This includes concerns from family, observations from staff and concerns from doctors.

Actions: Add Actions for any notes regarding the referral process, including follow up, scheduling, etc.

Attachment: Public Health Nurse will attach the screening report and notify the staff person that report is available for review and follow up.

Post-Partum Screening Referral

The screenshot shows a web form for a 'Post-Partum Screening Referral'. The form includes the following fields and callouts:

- Event Date PIR:** A date picker set to 9/9/22. Callout: "Enter date of initial referral."
- Status:** A dropdown menu set to "In Process". Callout: "Select In Process."
- Agency Worker:** A dropdown menu set to "Sandeno, Karen". Callout: "Select your name if does not auto-fill."
- Provider Type:** A dropdown menu set to "Public Health Nurse". Callout: "Select Public Health Nurse. (This is Jan Wendt)"
- Closed Date:** An empty date picker. Callout: "Enter Closed Date at the end of referral process when all follow up is completed (and update Status to Completed)."
- Event Notes:** A text area containing the text: "Parent has a history of depression and some symptoms of PPD, which include some sadness, worry and tiredness. She would like a screening to be done just to makes sure she is taking care of herself properly. She would also like more information on PPD, symptoms, effects and remedies/solutions and ways she or her family can help reduce the effects and problems associated with PPD. During her pregnancy, mom had complications with hypertension, dehydration and a high salt content in her blood." Callout: "In Event Notes, document the reason for the referral with as much detail as possible."
- Actions:** A table with one row: "Communi...", "9/09/22", "Emailed CPID to PHN", "Action Completed", "Sandeno, Karen". Callout: "Add Actions for any notes regarding the referral process, including follow up, scheduling, etc."

Buttons for "Add Action", "Save", and "Cancel" are visible at the bottom of the form.

Well Baby Checks (1 week, 2 week and 1 month)

These are not set up as child requirements but it is best practice to obtain these records when possible. When obtained, create the event and attach the exam form under the prenatal record because child is not yet enrolled.

Event Date: Date of the exam

Status: Select Concerns, Concerns – Services in Place or No Concerns

Agency Worker: Select your name if does not autofill

Event Notes: Document anything of concern from exam and any follow up occurring if noted

Actions: Add Action for any follow up completed by staff

Closed Date: Enter a closed date when all follow up actions are completed

The screenshot shows a web form for entering Well Baby Check data. The fields and their callouts are:

- Event Date** (with a calendar icon): Callout: "Enter exam date."
- Status** (dropdown menu): Callout: "Select appropriate status based on exam document." The dropdown options are "Concerns", "Concerns - Services in Place", and "No Concerns".
- Agency Worker** (text input): Callout: "Select your name if does not auto-fill."
- Closed Date** (with a calendar icon): Callout: "If staff added follow up actions, enter the closed date when follow up done by staff is completed, otherwise leave blank."
- Event Notes** (text area): Callout: "Document anything of concern from exam and any follow up occurring if noted".
- Actions** (table): Callout: "Add Action for any follow up completed by staff". A green "Add Action" button is located to the right of the table.

At the bottom of the form, there are three buttons: "Save and Add Another", "Save", and "Cancel Add".

Action	Action Date	Description	Status	Agency Worker
This event has no actions associated with it. Click "Add Action" to add one.				

Infant Data for Enrollment

During Week 6 of post-partum services, complete Infant Data for Enrollment tab and notification procedure.

Follow ERSEA procedure to enroll infant as result of prenatal.

Application Enrollment Family Services Health Immunizations Disability Mental Health **Pregnancy** Transportation Education Fees Attendance PIR

Pregnancy Attachments (0) **Infant Data for Enrollment**

Infant Data Print All Records **Add Infant Demographics**

Drag a column header here to group by that column

Last Date of Se...	Childs First Name	Childs Last Name	Date of...	Gender	Race	Hispanic	Ameri
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Infant Data

[Print](#) [Save](#) [Cancel Add](#)

Mothers Last Date of Service

Child's First Name

Child's Last Name

Date of Birth

Gender

Race

Hispanic

If multi racial, specify (check all that apply)

American Indian or Alaska Native Asian Black or African American Native Hawaiian/Other Pacific Islander White

Primary Language

If language is not on the list, add here:

Language

Second Language

Pregnancy Tab

- Expected Delivery Date: Make sure the expected delivery date is entered. Add or update as needed. If twins/multiples there needs to be a pregnancy record for each infant.
 - Actual Delivery Date: Enter actual delivery date.
 - High Risk Pregnancy: Answer Yes or No. Do not leave blank.
 - Last Dental Exam: Skip. Date not required.
 - First Received Prenatal Care: Enter date from information provided on Prenatal Wellness Assessment.
 - Last Prenatal Care Visit: Enter date from information provided on Prenatal Wellness Assessment.
 - Postpartum Scheduled Date: Skip. Date not required.
 - Postpartum Actual Date: Enter date of appointment/meeting with Public Health Nurse (Jan Wendt) or with someone else.
 - Prenatal Care Provider: Select from drop down menu. If the provider is not on the list, click Add New Community Provider to this list (in blue at the bottom of the drop down box). Select after adding it to the list.
 - Provider Type: Skip
 - Complications Section: Skip
 - Pregnancy Notes: Document here anything related to the pregnancy that does not “belong” to an event or in Home Visit Notes.
- Answer Yes to PIR questions as services occur during the prenatal enrollment. At the end of the prenatal enrollment, make sure all PIR questions are answered.

Application Enrollment Family Services Health Immunizations Disability Mental Health **Pregnancy** Transportation Edu

Pregnancy Attachments (0) Infant Data for Enrollment

Pregnancies

Expected Delivery Date	Actual Delivery Date
1/15/2023	

Add Pregnancy Delete Pregnancy

Expected PIR delivery date	Actual PIR delivery date	High Risk PIR Pregnancy	Last dental exam	First received prenatal care	Last prenatal care visit	Postpartum scheduled date	Postpartum actual date
1/15/23			Skip			Skip	

Prenatal care provider Provider Type

Prenatal care provider: [Dropdown]

Provider Type: Skip

- Prenatal health care PIR
- Postpartum health care PIR
- Professional oral health assessment, examination, and/or treatment PIR
- Mental health interventions and follow up PIR
- Education on fetal development PIR
- Education on the benefits of breastfeeding PIR
- Education on the importance of nutrition PIR
- Education on infant care and safe sleep practices PIR
- Education on the risks of alcohol, drugs, and/or smoking PIR
- Facilitating access to substance abuse treatment (i.e. alcohol, drugs, and/or smoking) PIR
- Receiving services at time of birth PIR
- Infant enrolled in program after birth PIR

Answer Yes to PIR questions as services are provided during prenatal enrollment.

At the end of the prenatal enrollment, make sure all PIR questions under Pregnancy tab are answered.

Complications

Current Previous

Anemia	<input type="checkbox"/>	<input type="checkbox"/>	Current Bed Rest or Hospitalization		
Bleeding	<input type="checkbox"/>	<input type="checkbox"/>	Due To	How Long	
C-Section	<input type="checkbox"/>	<input type="checkbox"/>			
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	Previous Bed Rest or Hospitalization		
Fatigue	<input type="checkbox"/>	<input type="checkbox"/>		How Long	
Headache	<input type="checkbox"/>	<input type="checkbox"/>			
Hypertension	<input type="checkbox"/>	<input type="checkbox"/>			
Miscarriage	<input type="checkbox"/>	<input type="checkbox"/>			
Neonatal Death	<input type="checkbox"/>	<input type="checkbox"/>			
Pain	<input type="checkbox"/>	<input type="checkbox"/>			
Pre-Term Labor	<input type="checkbox"/>	<input type="checkbox"/>			
Pregnancy Induced Diabetes	<input type="checkbox"/>	<input type="checkbox"/>			
Pregnancy Induced Hypertension	<input type="checkbox"/>	<input type="checkbox"/>			
Sickle Cell	<input type="checkbox"/>	<input type="checkbox"/>			
Swelling	<input type="checkbox"/>	<input type="checkbox"/>			

Skip Complications Section

Pregnancy Notes



Document here anything related to pregnancy that does not "belong" to an existing event or in Home Visit Notes.