10-1-2020 WIC Update Webinar: Referral questions and answers

Question/comment	Answer
The address information on the mandated referrals is not correct, the information is a placeholder.	In order to have the 4 federally mandated referrals available to document in Cascades during implementation, we entered "generic" addresses for each zip code. The phone numbers are correct. We didn't have the resources at the state office during implementation to enter more referrals or to enter specific addresses, especially since we didn't have a process for clinic staff to share address changes with us.
If we choose Medicaid can we use that address?	Choose the Medicaid referral with the address that is most appropriate for your clinic location. (We hope we understand this question.) As we stated above, the street address is "generic" but the zip codes and phone numbers are correct.
The referrals area does not really work. Why are we moving forward when it is not working yet?	We wanted to share information about how to document the mandated referrals in Cascades now since state staff are monitoring clinics and it has come up as a finding. We are working on a plan to enter more, specific referrals into Cascades. We need to do it in a standardized way so that the same referral organization (like a specific clinic, homeless shelter, etc.) isn't entered multiple times with slight variations. We're not sure yet if we'll have state staff enter these or local staff.
Our referrals don't work either, nothing seems to come up when all boxes are checked and unchecked.	Be sure to uncheck the "View only System suggested" referrals. If you still don't see any of the 4 mandated referrals contact Cascades Support.
The geographical search is a barrier when we just need to get to generic box marked.	We hope in the future when we add more referral organizations to Cascades the geographical search will be more useful.
Are we just documenting that we are doing that particular referral?	Yes, this screen is where you document the particular mandated referrals you make.
The referrals don't send notices to any outside organizations that this person needs services.	Correct, Cascades doesn't send notices to outside referral organizations. There is a **Referral Notification Form** button where you can view and print the referral to give to a participant. We know this isn't as useful now with the "generic" addresses and hope in the near future it will be.
How does the program you referred to receive that referral? Like Maternal Child Health?	The other organization won't know you referred the participant, it just documents the referral in Cascades.
We were under the impression that the referral would go to that agency so that it could be followed up on.	We're not sure if the contracted trainer shared this during some of the training sessions, but unfortunately, Cascades doesn't function this way.

The mandatory referrals do not benefit the clients. Their community referrals are who we will refer to for services needed.	We know you make many more meaningful, local referrals based on your participants' needs. We are working on a plan to enter additional referrals for your agency or clinic in the near future. The mandatory referrals are federally required. See below for the policy requirements.
What are mandated referrals/What to do if a person doesn't need the referral?	
If someone already has Medicaid do we still refer them? Also, if there is no reason to refer to drug and alcohol counseling do we still mark it as referred?	We are revising the policy chapter to clarify this and will align the chapter with how Cascades functions. Current approach is as follows. We'll let you know if this changes when the revised chapter is published (after FNS reviews). • Staff must referral **all** participants to the Family Health Hotline/Help Me Grow WA network. Document this referral for all participants. • Staff must assess for Medicaid, immunizations (up to the age of 24 months), and drug and alcohol counseling and **refer as appropriate**. Only document when the referral is made.
To clarify, if we have a family who chooses not immunize. Do we need to document refusal? Or leave referral screen blank since not appropriate?	• Staff must assess for immunizations up to the age of 24 months and document the immunization status using the **Immunization Status** button on the **Health Information** screen. • Document "Not up to date" in the **Immunization Status** pop-up drop-down list if the family chooses not to immunize. • In this case staff must refer to immunizations since the infant or child isn't up to date, **but** would edit the referral to document "Not interested" as the **Refusal Reason**.
Another clarification, if no referral is appropriate based on cert (family has Medicaid, up to date on imms, etc) we leave referral screen blank? I want to be sure this will not be a finding.	This is correct, **except** for the referral to the Family Health Hotline/Help Me Grow WA network which is required for **all** participants. **Medicaid:** In this case it's likely the participant's Medicaid participation is documented on the Income Information screen with adjunctive eligibility. **Immunizations:** Staff assess and document Immunization status on the infant's or child's **Health Information** screen by pressing the **Immunization Status** button and selecting "Up to date" in the Status dropdown list.