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| **Training Clinic Progress Report** **New CPA Training**  |  | **Trainee Name:** |  |
|  | **LA Name:** |  |
|  | **Training Dates Attended:** |  |
|  | **Trainee Contact Info:** |  |
|  | **Trainee Supervisor** |  |

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| **Overview** | **Anthro** | **Blood**  | **Nutrition Interview** | **Risk**  | **Certify** | **Referrals** | **Care Plan** | **Foods****Overview** | **Food** **Pkg** | **Food****Benefits** | **Card****operation** | **Audit****Trail** | **Scheduling** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| 1. **Live Clinic Practice – type of clients that new trainee worked with during training clinic and how that went**
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| 1. **Additional help – Areas where the trainee may have struggled and will need additional guidance**
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|  |
| **Director follow-up:** |

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| 1. **Not completed – Areas we did not have time to cover that need to be trained at the local agency**
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|  |
| **Director follow-up:** |

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| 1. **Journey Logon Status**
 |  | 1. **Additional Resources – such as links to webinars or handouts**
 |
|  | Please schedule a time for staff to complete the additional training links below to learn about working with foster clients: * 9.30.20 webinar: Recording Link:  <https://nepublichealth.adobeconnect.com/phh4s9g9lmg0/>
* 2.26.21 webinar - Update on kinship placement-moving children: Recording Link:  <https://nepublichealth.adobeconnect.com/p5u1g1y4mpmm/>
* 2.26.21 webinar - Update on New Placement Papers - recording: <https://nepublichealth.adobeconnect.com/pyse9vlkb7rg/>
* Complete Survey: [https://www.surveymonkey.com/r/QY2YP3T](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.surveymonkey.com%2Fr%2FQY2YP3T&data=04%7C01%7CJackie.Johnson%40nebraska.gov%7C4eefecf4ace746c3b60908d8989e49ff%7C043207dfe6894bf6902001038f11f0b1%7C0%7C0%7C637427152893126554%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=oE3BlJu12%2FEfhUSXP3%2FIGksqar%2FXvJ5irxyazex%2FLMs%3D&reserved=0)
 |
|  |

**Daily Overview Summary:**

|  |  |  |
| --- | --- | --- |
|  | **Date** | **Notes** |
| M |  |  |
| T |  |  |
| W |  |  |
| Th |  |  |
| F |  |  |

**Electronic signature – each training coach:** (type name & date below)

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| **Coach Name** | **Date** | **My report is finished: yes or no** |  | **Name of coach who will provide follow up phone call or email to trainee:** |
| **Day 1:**  |  |  |  | **Name of Training Coach:** **Method to use to contact trainee:** |
| **Day 2:**  |  |  |  |
| **Day 3:**  |  |  |  |
| **Day 4:**  |  |  |  |  |

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| **Follow-up**  |
| Date | Coach Name | Any coach notes from follow-up |
|  |  |  |

**2 Trainee Feedback Surveys:**

* [Training Clinic Evaluation by Trainee](http://www.surveymonkey.com/s/TrainingClinicEvaluation) – to be completed by trainees following the training
* [Post Remote Training Clinic Preparedness Survey](https://www.surveymonkey.com/r/DRLQZJY) – to be completed by trainee after having a chance to work in WIC for a couple of weeks

**WIC Director Feedback Survey**

* [Post-Remote Training Clinic by WIC Directors](https://www.surveymonkey.com/r/DM895FK) – to be completed by WIC Director after having a chance to observe new staff work in clinic for a couple of weeks after attending Training Clinic

**Coaches Tracking & Communication Sheet**

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| OVERVIEW |  | ANTHROPOMETRICS  |  | BLOOD  |
|  | Journey System & Navigation |  | Weighing & Measuring Overview |  | Hgb Assessment |
|  | CPA vs Clerk roles |  | Measuring Infants & Children < 2 years |  | When to take Hgb |
|  | Separation of Duties |  | Measuring Children 2-5 Years |  | Why we test Hgb |
|  | VENA |  | Growth Charts WHO vs CDC |  | Entering Hgb into Journey |
|  | Length of Certification Periods |  | Measuring Women |  | Refusals |
|  | WIC Foods |  | Prenatal Weight Gain Grid |  | Reasons for no Hgb; reasons for low Hgb |
|  | Education & Care |  | Entering Information into Journey |  | Lead Assessment – when to ask |
|   | Family Panel |  |  |  | Referrals & education that may be needed |

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| NUTRITION INTERVIEW  |  | RISK  |  | CERTIFICATION  |
|  | Process - Collecting Information |  | Determining Risk |  | Common Errors that Prevent Certification |
|  | Health Medical |  | Manual Assignment of Risk |  | Marking Additional Risk |
|  | Immunizations |  |  |  | Collecting Signature |
|  | Oral Health |  |  |  | Rights & Responsibilities |
|  | Lifestyle |  |  |  |  |
|  | Nutrition Practices |  |  |  |  |
|  | Social Environment |  | Mental Health PHQ4 (add total) |  |  |

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| EDUCATION & CARE**REFERRALS - PARTICIPANT** |  | EDUCATION & CARE**CARE PLAN - PARTICIPANT** |  | WIC FOODS OVERVIEW |
|  | Required Referrals |  | Nutrition Ed Requirements |  | Foods Provided by WIC Category |
|  | Printing Referrals |  | Documenting |  | eWIC Approved Stores & Special use NE ONLY |
|  | Documenting referrals |  | Goal Setting |  | Supportive BF Friendly Environment |
|  | Follow up on Referrals and where to document |  | Exit Counseling |  | How WIC Food Packages Support BF |
|  | Common referrals – low hgb, lead, immunizations, dental |  |  |  | Contract Formula |
|  | Active vs passive referrals |  |  |  | Respond to formula Requests |
|  |  |  |  |  | PAF – Special Formulas |

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| FOODSFOOD PACKAGE (discussion) |  | FOODSFOOD BENEFITS |  | FOODSCARD OPERATIONS |
|  | Change food Packages (CPA) |  | Reading the Food Benefits Panel |  | Explain eWIC Card |
|  | Reading the Food Package Panel |  | Use of equipment to Print |  | Initial Card Set up  |
|  | Model Food Packages per Category |  | Collect Signature |  | Set or PIN change PIN |
|  | Using Handout to Explain Food Packages |  | Print Food Benefits List &Explain how to read the list |  | Policy: when & how to |
|  | Policy on Milk Provided |  | Confirm Accuracy of Food Benefit List |  | Card locking if enter incorrect |
|  | Tailoring Milk |  | eWIC Card Education for Client(flip chart explanation) | FOODSAUDIT TRAIL |
|  | Food Benefit Interval |  | Food Benefit Issuance Intervals- # months to issue- Changing interval- Next appt |  | How to read; what information can be gathered from audit trail |
|  |  |  | Re-issuing benefits: -How to change a food package & reissue benefits | SCHEDULING THE NEXT APPOINTMENT |
|  |  |  | Recalculating benefits-examples of when to use-ABC corrections & contacting State |  | Scheduling new, changing existing, and canceling appointment |
|  |  |  | WIC Foods Booklet |  |  |
|  |  |  | Change Food Package |  |  |