Completing Family Demographics and and Guardian Health Information.



| Click "Far | milies" | | | | | | |
|--|--|--|---|--|----------|--------------|---------|
| | | Setup | Families | Guardians | Children | Home Visitor | Calenda |
| Welcom Program Code | e Main Adn e: CO-80004- | nin Program Nam | ne: Training | / Scribe Acco | unt | | |
| Welcom Program Code VT Upcoming Pri Date | e Main Adn e: CO-80004- vate Contacts Time | nin Program Nam Location | ne: Training Family | / Scribe Acco | unt | Ρ | hone |
| Welcom Program Code VT Upcoming Pri Date 10/9/2024 | e Main Adn e: CO-80004- vate Contacts Time 10:00 AM | nin Program Nam Location Home | ne: Training Family Potter (1 | / Scribe Acco Harry Potter) | unt | Ρ | hone |
| Welcom Program Code VT Upcoming Prin Date 10/9/2024 10/11/2024 | e Main Adn e: CO-80004- vate Contacts Time 10:00 AM 2:00 PM | nin Program Nam Location Home Home | ne: Training Family Potter (I Jones (. | / Scribe Acco Harry Potter) Jenny Jones) | unt | Ρ | hone |

Select the Family from the dropdown menu.

| Setup Fa | amilies Guardians | Children | Home Visitor | Calendar | Reports | Support | |
|------------------|-------------------|----------|-------------------|----------|---------|---------|------------|
| | \uparrow | | sion (Division, . | Joy) | ~ | Q. 🗟 | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| License Agreemer | nt | | Training Vi | deos | | | 🖁 Main Adr |

4 Click "Demographic/Health" on the left navigation.

| Actives | - | | |
|---|--|------------------------|---|
| Archived Families | Primary Guardian: | Joy Division | |
| Data Quality Alerts | Current Status: | Active | E |
| | Current SiteFund Code: | MIECHV (10/1/2024) | |
| | Case Level: | Weekly / weight = 4.00 | |
| | Home Visitor: | Home Visitor | |
| nily Data Entry | | | |
| Family Home | | | |
| | | | |
| | | | |
| Demographic/Health | Guardians & Children | | |
| Demographic/Health Contacts | Guardians & Children | | |
| Demographic/Health Contacts Resource | Guardians & Children | | |
| Demographic/Health Contacts Resource Inection | Guardians & Children Guardians Entered | | |
| emographic/Health ontacts esource nection oals/Plans | Guardians & Children Guardians Entered Name | Phone Number | |
| Demographic/Health Contacts Resource Innection Goals/Plans Assessments | Guardians & Children Guardians Entered Name Joy Division | Phone Number | |
| Demographic/Health Contacts Resource nnection Goals/Plans Assessments Transition Plan | Guardians & Children Guardians Entered Name Joy Division | Phone Number | |

5 First, click to open the "Family Experiences: Strengths and Stressors" section.

| Visit Iracker | Setup Families Guardians Children Home Vis |
|--|---|
| ➢ Log Out ➢ Home Page ➢ New Family ➢ Send Email | ↑ ↓ Division (Divis Demographic Data Family Demographics |
| Family Non-Actives Guardian Non- Actives Archived Families | Family Experiences: Strengths and Stressors (definitions) Other Family Characteristics |
| Data Quality Alerts Data Cleanup | Family Income History Save Cancel |
| Semily Home | Guardian Demographics |

If you are a Parents as Teachers program, this section will be used to determine Visit Frequency.

6

If you need definitions for each stressors, you can click the blue "Definitions" link.

| | $\uparrow\downarrow$ Divisio | on (Divisio | n, Joy) | ~ C |
|---|------------------------------|-------------|----------|---------|
| emographic Data | | | | |
| amily Demographics | | | | |
| Family Experiences: Strengths and Stressors (definitions) | | | | Stresso |
| □ Young parents | Start Date | | End Date | |
| □ Substance use disorder | Start Date | | End Date | |
| $\hfill \Box$ Child with a disability or chronic health condition | Start Date | | End Date | |
| □ Foster care or other temporary caregiver | Start Date | | End Date | |
| \square Parent with a disability or chronic health condition | Start Date | | End Date | |

| 7 | | |
|--|-----------------------|--|
| E Log Out | Demesur | Definitions |
| New Family Send Email | Family Demo | Young Parents Youth who are pregnant or parenting under the age of 21. |
| Family Non-Actives Guardian Non- Actives | ▼ Family | Child with a disability or chronic health condition The child has a significant delay, disability, or condition that impac developmental domains and/or effects overall family well-being. |
| Archived Families Data Quality Alerts Data Cleanup | □ Substar | Parent with a disability or chronic health condition A parent has a physical or cognitive impairment (disability or chronic health condition) that substantially limits their ability to parent as determined by the parent or by the parent educator. |
| Family Data Entry Family Home Demographic file of the | Foster c Parent v | Parent with mental health issue(s) A parent has a thought, mood, or behavioral disorder (or some combination) associated with distress and/or impaired functioning |

| finitions | × | (Divisio | on, Joy) | ~ | Q = | |
|---|--------------|----------|----------|-------|---------|--|
| Ing Parents Ith who are pregnant or parenting under the age of 21. | | | | | | |
| ild with a disability or chronic health condition child has a significant delay, disability, or condition that in release the second domains and/or effects overall family well-being the second domains and second domains | mpacts | | | Stres | sors: 0 | |
| | ng. | | End Date | i | | |
| ent with a disability or chronic health condition arent has a physical or cognitive impairment (disability or | | | End Date | i | | |
| onic health condition) that substantially limits their ability ent as determined by the parent or by the parent educato | to r. | | End Date | í | | |
| | | | End Date | í | | |
| rent with mental health issue(s) arent has a thought, mood, or behavioral disorder (or som nbination) associated with distress and/or impaired function | ie oning, | | End Date | 1 | | |

9 Check off any stressors that pertain to the family.



10 The stressor start date will default to the family enrollment date but you can change the date.

Note - if stressors are added or removed during the program year, the family will be reported on based on the number of stressors at the time of enrollment or at the beginning of the program year. Visit Frequency will be calculated based on current stressors.

| ohics | | | | | | | |
|--|---|----------|--|--|--|--|--|
| eriences: Strengths and Stressors (definitions | riences: Strengths and Stressors (definitions) Stressors: 0 | | | | | | |
| nts | Start Date | End Date | | | | | |
| use disorder | Start Date | End Date | | | | | |
| disability or chronic health condition | 10/01/2024 | End Date | | | | | |
| or other temporary caregiver | Start Date | End Date | | | | | |
| a disability or chronic health condition | Start Date | End Date | | | | | |
| ⇒ or neglect | Start Date | End Date | | | | | |
| mental health issue(s) | Start Date | End Date | | | | | |
| tability | Start Date | End Date | | | | | |

11 Check all stressors that apply.



12 Click "Save".



13 You will see the number of stressors to the right of the table header.

| | $\uparrow \downarrow$ | Division (Division, Joy) | ~ | Q | ¢¢ ¢¢ |
|--|-----------------------|--------------------------|----------------|-----------|----------|
| ata | | | | | |
| cessfully updated. | | | | | × |
| | | | | | |
| s: Strengths and Stressors (definitions) | | | Str | essors: | 2 |
| cteristics | | | Other Characte | eristics: | 0 |
| | | | l | Add Iten | n |
| | | | Last Updated | l: 10/4/2 | 2024 |
| | | | | | |
| | | | | | |

Click to open "Other Family Characteristics".

| 🕋 Home Page | Demographic Data |
|----------------------------|---|
| » New Family | |
| Send Email | Your information was successfully updated. |
| Family Non-Actives | |
| » Guardian Non- Actives | Family Demographics |
| » Archived Families | ▼ Family Experiences: Strengths and Stressors (definitions) |
| » Data Quality Alerts | |
| » Data Cleanup | ▼ Other Family Characteristics |
| | Family Income History |
| Family Data Entry | |
| ➢ Family Home | |
| » Demographic/Health | Save Cancel |
| > Contacts | |
| » Resource | Guardian Demographics |
| Connection | |

Tip! The admin can update this list under Set Up . It is recommended that only characteristics that apply to your program are set to show. If you don't collect data on these characteristics, you can turn them off.

15 Select any characteristics that apply to the family.

í

| >> Archived Families | Family Experiences: Strengths and Stressors (definitions) | | | | |
|---|---|---------|--|--|--|
| » Data Quality Alerts » Data Cleanup | Other Family Characteristics | | | | |
| | □ Formerly served in the US Armed Forces. | Start D | | | |
| Family Data Entry | ESL/Limited English? | Start D | | | |
| > Family Home | Single Parent | | | | |
| >> Demographic/Health | | Start D | | | |
| >> Contacts | Adoptive Parent | Start D | | | |
| Resource Connection | \Box Children with low student achievement | Start D | | | |
| ≫ Goals/Plans | □ First Time Parents | Start D | | | |
| » Assessments | | | | | |
| >> Transition Plan | | Start D | | | |
| >> Supervision Notes | | Start D | | | |
| ➢ File Upload | _ | | | | |

16 You have the option to fill in any "other" characteristics your program my collect data on that we don't have listed.

| PAT Compliance | | Start De |
|--------------------|--|----------|
| > Reminders | | Start Da |
| > Family DQ Alerts | □ Involved with correctional system | Start Da |
| | \Box All guardians work outside the home | Start Da |
| | Other-State Approved | Start Da |
| | Foster youth who are pregnant or parenting | Start Da |
| | Other 1 (specify) | Start Da |
| | Other 2 (specify) | Start Da |
| | Other 3 (specify) | Start Da |
| | Save | |
| | P | |

| 17 Click "Save" | | |
|-----------------|---|----------|
| | □ Other-State Approved | Start Da |
| | \Box Foster youth who are pregnant or parenting | Start Da |
| | Other 1 (specify) | Start Da |
| | Other 2 (specify) | Start Da |
| | Other 3 (specify) | Start Da |
| | Save | |
| | Family Income History | |
| | Save Cancel | |
| | | |

18 Fill out the Income History for the family. Click the "Add item" button to the right.

| cessfully updated. | × |
|--|-------------------------|
| | |
| S: Strengths and Stressors (definitions) | Stressors: 2 |
| Icteristics | Other Chara Add Item |
| | Last Updated: 10/4/2024 |
| | |
| | |
| story | Add Item |
| | |

Fill in the Date and Average monthly income.

| G⇒ Log Out | Family Income His | story | |
|-----------------------------|-----------------------|---|--------------|
| 🖀 Home Page | · • | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| » New Family | Data | | |
| » Send Email | Date | 10/04/2024 | |
| » Family Non-Actives | avg.Monthly | | |
| >> Guardian Non- Actives | | Avg Cash | Avg Non-Casł |
| » Archived Families | Prefer not to report | | |
| » Data Quality Alerts | # dependent on income | 0 | |
| >> Data Cleanup | Income Sources | | |
| Family Data Entry | Cash Sources | Select all that apply | |
| » Family Home | Non-Cash Sources | Select all that apply | |
| » Demographic/Health | | | |

20 Fill in the number dependents on income.

| 🕌 Home Page | - | - | |
|----------------------------|-----------------------|-----------------------|--------------|
| » New Family | Date | | |
| » Send Email | Date | 10/04/2024 | |
| » Family Non-Actives | avg.Monthly | 3500 | |
| » Guardian Non- Actives | | Avg Cash | Avg Non-Cash |
| » Archived Families | Prefer not to report | | |
| » Data Quality Alerts | # dependent on income | d | |
| » Data Cleanup | Income Sources | Y | |
| Family Data Entry | Cash Sources | Select all that apply | |
| Family Home | Non-Cash Sources | Select all that apply | |
| » Demographic/Health | | | |
| » Contacts | | | Creat |
| » Resource | | | Creat |

21 Select Cash sources.

| | | _ | |
|---------------------|-----------------------|----------------------------|--------------|
| Data Quality Alerts | # dependent on income | 4 | |
| > Data Cleanup | Income Sources | | |
| amily Data Entry | Cash Sources | Select all that apply | Ŧ |
| | Non-Cash Sources | | |
| Family Home | Non-Cash Sources | Select All | Deselect All |
| Demographic/Health | | Child Support/alimony | |
| Contacts | | Salary/Wages | |
| Resource | | Social Security/Disability | |
| Connection | | TANE | |
| > Goals/Plans | Parent Employment | | |
| > Assessments | | Unemployment | |
| | | Unknown/Did not Report | |
| Transition Plan | Parent Education His | Other | |
| Supervision Notes | | | |
| File Upload | | | |
| | Parent Housing Statu | IS | |
| | | | |

And Non- Cash sources.

| Family Data Entry | Cash Sources | 2 items selected | |
|----------------------|----------------------|------------------------|--------------|
| » Family Home | Non-Cash Sources | Select all that apply | |
| » Demographic/Health | | | Decelert All |
| » Contacts | | Select All | Deselect All |
| » Resource | | Energy Assist | |
| Connection | | Food Stamps/SNAP | |
| » Goals/Plans | Parent Employment | Housing Assist | |
| » Assessments | | wic | |
| » Transition Plan | Parent Education His | Unknown/Did not Report | |
| » Supervision Notes | | Other | |
| » File Upload | | | |
| | Parent Housing Stat | us | |
| Data Quality Tools | | | |
| N DAT Decordo | Health Into | | |

23 Click "Create".

| 1 2 items selected • WIC • | Characteristics: 1 Add Item Updated: 10/4/2024 |
|----------------------------------|--|
| story | Cancel Add Item |
| ry | Add Item Add Item |



25 Next, move down to the Guardian Demographics fields. These fields are guardian specific, so you will want to create an entry for each guardian you have entered. At a minimum, be sure there is an entry for the primary guardian.

| » Family Home | Date | avg.Monthly | # dependent on income |
|-----------------------|--------------------|-------------|-----------------------|
| >> Demographic/Health | 10/4/2024 | 3500 | 4 |
| > Contacts | | | |
| >> Resource | | | |
| Connection | | | |
| ≫ Goals/Plans | Save Cancel | | |
| » Assessments | | | |
| > Transition Plan | Guardian Demograph | ics | |
| >> Supervision Notes | Parent Employment | t History | |
| ➢ File Upload | | | |
| | Parent Education H | istory | |
| Data Quality Tools | | | |
| > PAT Records | | | |
| > PAT Compliance | Parent Housing Sta | tus | |
| N. D | | | |

26 For "Parent Employment History, click the "Add Item" button on the right.

| | Unemployment (Cash) WIC (Non-Cash) | |
|------|---------------------------------------|-------------------------|
| | | Last Updated: 10/4/2024 |
| tory | | Add Item |
| ry | | Add Item |
| | | Add Item |
| | | <i>®</i> |

Fill in all the fields

| nily Home | Parent Employment Hist | orv |
|------------------|---------------------------|----------------|
| mographic/Health | | ~, |
| ntacts | Date | 10/04/2024 |
| ource | | 10/04/2024 |
| ection | Guardian | Division lov (|
| als/Plans | | |
| essments | Current Employment Status | Part Time 🗸 |
| nsition Plan | #hrs/wk | Q |
| pervision Notes | | |
| Upload | | Create |
| Quality Tools | Parent Education History | |
| Records | | |
| Compliance | Parent Housing Status | |
| ninders | | |

| 28 | and click "Create". | | | | | |
|-------|---------------------|---|--------|--------|--------------------|--|
| Date | 10/04/2024 | | | | Undeted: 10/4/2024 | |
| dian | Division, Joy (🗸 | | | | Opdated: 10/4/2024 | |
| tatus | Part Time | ~ | | | | |
| ˈs/wk | 30 | | | | | |
| ory | | _ | Create | Cancel | Add Item | |
| | | | | | Add Item | |
| | | | | | <u>()</u> | |

29 Next, move to the Guardian Education History, click the "Add Item" button on the right.

| story | | | Add Item |
|-----------------|-------------------|---------|----------|
| ardian | Employment Status | #hrs/wk | |
| y Division | Part Time | 30 | 1 |
| | | | Add Item |
| ry | | | Add Item |
| | | | Add Item |
| | | | k |
| | | | |
| sion Medicaid # | Medicaid # | ? | |

| 30 | Fill in the fields |
|----|--------------------|
| | |

| | Division, Joy (Participating ~ | |
|-----------------------|--------------------------------|----------|
| hest Level Attained | Some college/training ~ | Add Item |
| ning or Certification | | × ± |
| Current Status | Not a student/trainee | |
| #hrs/week | 0 | Add Item |
| Enrollment status | · · | Add Item |
| | Create Cancel | |
| Joy Division Me | edicaid # ? | |
| | | |

and click "Create"

| tion | | | | / 1 |
|--------|-----------|---------------|--------|----------|
| atus | Not a stu | ident/trainee | ~ | |
| eek | 0 | | | Add Item |
| atus | | | ~ | Add Item |
| | | | Create | |
| sion M | edicaid # | Medicaid # | ? | |
| | | | | Add Item |

32 Finally, fill in the Guardian Housing. Click the "Add Item" button on the right.

| | | | | | | _ | |
|------------|------------------------|-------|--|--------------------------|-----------|----------------------|----------|
| ardian | Highest Le Attained | evel | Technical Training or Certification | Current Status | #hrs/week | Enrollment Status | |
| , ision | Some college/tra | ining | not applicable | Not a student/trainee | 0 | _ | <u>_</u> |
| | | | | | | A | dd Item |
| | | | | | | A | dd Item |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| sion Mee | dicaid # | Medio | caid # | ? | | | |
| | | | | | | | |

Fill in the fields.

| sL | | | |
|---------|--|-------------------------|--|
| ate | 10/04/2024 | | |
| lian | Division, Joy (Participating $ 	imes $ | | |
| that be | st matches the families living | Select Status Add Item | |
| | | Create Cancel | |
| vision | college/training | student/trainee | |
| | | Add Item | |

and click "Create".

| that best matches the families living Not Homeless: Rents or sh V Add Item Vision college/training student/trainee |)ate lian | 10/04/2024 | Add Item |
|--|--------------|--------------------------------|--------------------------------------|
| vision college/training student/trainee | that be | st matches the families living | Not Homeless: Rents or sh ~ Add Item |
| Add Item | vision | college/training | student/trainee |
| | | | Add Item |

Review the Guardian Demographics tables.



| Parent Employ | ment History | | | | |
|---------------------------------|---|---|---|--|--|
| Date Guardian Employment Status | | | | | |
| 10/4/2024 | Joy Divisio | n | Part Time | | |
| Parent Educati | on History | Highest Level | Technical Trainin | | |
| Parent Educati Date | on History Guardian | Highest Level Attained | Technical Trainin or Certification | | |
| Parent Educati Date 10/4/2024 | on History Guardian Joy Division | Highest Level Attained Some college/training | Technical Trainin or Certification not applicable | | |

36 Next, we will move the "Health Information". Again, fill in for each guardian entered, but at a minimum, fill these in for the primary guardian.

| ➢ Family DQ Alerts | 10/4/2024 | Joy Division | Some college/trainin | not applicable g |
|--------------------|----------------|----------------------|-------------------------|-----------------------------|
| | Parent Housin | g Status | | |
| | Date | Guardian | Status | 5 |
| | 10/4/2024 | Joy Divisio | Not Ho | omeless: Rents or shares ow |
| | Health Info | D Joy Division Me | dicaid # 🛛 🕅 | 1edicaid # |
| | Insurance Hist | tory | | |

The Admin can turn OnN or OFF Health Info tables as they pertain to your program.

(i)

Insurance History. Click the Add Item button on the right.

| sion Medicaid # ? Add Item | | | | |
|--|-----------------|------------|---|----------------------|
| Add Item Add Item Add Item efinition) | sion Medicaid # | Medicaid # | ? | |
| Add Item efinition) Add Item | | | | Add Item Add Item |
| efinition) Add Item | | | | Add Item |
| | efinition) | | | Add Item |

Fill in the fields.

| Guardian | Division, Joy (Participating) - | | | |
|--|--|------|--------|-----|
| History Status | No insurance coverage | | | |
| Continuous Coverage? ? | No insurance coverage | | | |
| All family members insured? | Title XIX (Medicaid) | | | Add |
| | Title XXI (State insurance program) | | | |
| nter enrolled children specific insurand | TRICARE | | | |
| | Private | | | Add |
| | Unknown | eate | Cancel | |
| Tobacco Use Survey (definitio | Did not report | | | |
| | Other | | | Add |
| | No insurance - accessing Indian Health Service | | | |
| Medical & Emergency Room Vi | sits | | | Add |
| | | | | |

| Date | 10/04/2024 | | |
|---------------------------------|---------------------------------|--------------|----------|
| Guardian | Division, Joy (Participating) - | | |
| History Status | Private 🔹 | | |
| tinuous Coverage? ? | Did not ask | | |
| family members insured? | Unknown | | Add Item |
| olled children specific insuran | Yes | | |
| | No | | Add Item |
| | Unknown | reate Cancel | |
| bacco Use Survey (definition | n) | | Add Item |
| edical & Emergency Room Vi | sits | | Add Item |

| 40 | Click "Create". | | |
|----------|------------------------------------|---------------|----------|
| | | | |
| atus | Private | • | |
| ? | Did not ask | | |
| ed? | Yes | - | Add Item |
| insuran | ce type on Child-Health Info also) | | |
| | | | Add Item |
| | | Create Cancel | |
| efinitio | n) | | Add Item |
| | | | |
| toom V | isits | | Add Item |
| | | | |
| vev | | | |

41 Next is Dental Insurance. Click the "Add Item" button.

| | | | | Add Item |
|-------------|---------|---------------------|----------------------|----------|
| ıardian | Status | Continuous Coverage | Entire Family | |
| y Division | Private | Did not ask | Yes | 💉 🛅 |
| | | | | Add Item |
| | | | | Add Item |
| | | | | |
| efinition) | | | | Add Item |
| | | | | |
| toom Visits | | | | Add Item |
| | | | | |

| 42 Fill in the field | elds. | | |
|-------------------------------|---|---------------|----------|
| Joy Division Me | dicaid # Medicaid # | ? | |
| nsurance | | × | |
| Date Guardian Insurance | 10/04/2024 Division, Joy (Participating ~ Private insurance | ~ ~ | Add Item |
| | | Create Cancel | Add Item |
| acco Use Survey (definitio | n) isits | | Add Item |

43 Click "Create".

| Date | 10/04/2024 | | Add Item | |
|-----------|---|---------------|----------|--|
| rdian | Division, Joy (Participating $ \checkmark $ | | У | |
| ance | Private insurance | ~ | × 10 | |
| | | Create Cancel | Add Item | |
| definitio | n) | | Add Item | |
| Room V | isits | | Add Item | |
| | | | | |

Moving to Tobacco Survey. Click the "Add Item" button.

| Add Item Iardian Primary dental insurance coverage y Division Private insurance Image: state of the st | y Division | Private | Did not ask | Yes | 1 |
|---|-------------|---------------|------------------------|-----|----------|
| Add Item Iardian Primary dental insurance coverage y Division Private insurance efinition) Add Item Add Item Add Item toom Visits Add Item | | | | | |
| Nardian Primary dental insurance coverage y Division Private insurance efinition) Add Item Add Item Add Item coom Visits Add Item vey Add Item | | | | | Add Item |
| y Division Private insurance Add Item efinition) Add Item Add Item Add Item Add Item Add Item Add Item | ıardian | Primary der | tal insurance coverage | | |
| efinition) Add Item Add Item Add Item Add Item Vey Add Item | y Division | Private insur | ance | | 1 |
| efinition) Add Item Add Item vey Add Item | | | | | Add Item |
| Add Item Vey Add Item | efinition) | | | | Add Item |
| Room Visits Add Item vey Add Item | | | | | |
| Vey Add Item | loom Visits | | | | Add Item |
| Vey Add Item | | | | | |
| | vey | | | | Add Item |
| | | | | | |

45 Fill in the fields as they pertain to the family.

| | | y |
|---|------|----------|
| Date 10/04/2024 | | × 11 |
| rdian Division, Joy (Participating ~ | | Add Item |
| oducts or electronic nicotine delivery | ~ | |
| tobacco products or electronic nicotine Unknown | ~ | × w |
| ve you used any kind of tobacco product in vaping or something else)? | ~ | Add Item |
| resource connection was made, you can record it here. The resulting resou and managed from the family resource connection section. | urce | Add Item |

| 46 | | | | |
|----------------------------|--|--|------|----------|
| 'ey | | | ×y | |
| Date | 10/04/2024 | | | × 10 |
| uardian | Division, Joy (Participating $ \backsim $ | | | Add Item |
| products or | electronic nicotine delivery | Ν | ~ | |
| se tobacco ∋? | products or electronic nicotine | Y | ~ | <u> </u> |
| have you u ip, vaping o | sed any kind of tobacco product in r something else)? | Prefer not to report | ~ | Add Item |
| a resource d and man | e connection was made, you can reco aged from the family resource conne | rd it here. The resulting reso ction section. | urce | Add Item |
| ection made | e as a result of a concern found durin assessi | ng this OYes No ment? | | Add Item |

| 47 | | | | |
|-------------------------------------|--|--|----------|------------|
| Date | 10/04/2024 | | | × 10 |
| Guardian | Division, Joy (Participating $ \sim $ | | | Add Item |
| co products or | electronic nicotine delivery | Ν | ~ | |
| e, use tobacco ome? | products or electronic nicotine | Y | ~ | * U |
| nth, have you u s, dip, vaping o | sed any kind of tobacco product in r something else)? | Not at all | ~ | Add Item |
| y if a resource wed and man | e connection was made, you can rec aged from the family resource conn | ord it here. The resulting ection section. | resource | |
| 1 | | | | Add Item |
| nnection mad | e as a result of a concern found dur asses | ing this O Yes No Sment? | | Add Item |

You have the option to create a Referral/Resource Connection based on the tobacco survey.

| Does guardian use tobacco products or electronic nicotine delivery systems? |
|--|
| Does anyone in the house, use tobacco products or electronic nicotine delivery systems in the home? |
| How often in the last month, have you used any kind of tobacco product in the last month (cigarettes, dip, vaping or something else)? |
| As a result of this survey if a resource connection was made, you can record it connection can be reviewed and managed from the family resource connectior |
| Resource Connection |
| Was a resource connection made as a result of a concern found during thi assessment |
| |
| Brognopour Listory |

49 If you make a Tobacco Cession referral, click "Yes" and then fill in the Referral.

| e, use tobacco products or electronic nicotine ome? | Y ~ | |
|--|--|----------|
| nth, have you used any kind of tobacco product in s, dip, vaping or something else)? | Not at all v | Add Item |
| y if a resource connection was made, you can record ewed and managed from the family resource connect | d it here. The resulting resource tion section. | Add Item |
| n | | |
| nnection made as a result of a concern found during assessm | ent? | Add Item |
| | Create Cancel | Add Item |
| ory | | Add Item |

| the last month (cigarettes, di | p, vaping or something els | e)? | Ν |
|---|---|--|----------------|
| As a result of this survey if connection can be reviewed | a resource connection w I and managed from the | as made, you can recor family resource connec | rd it ctior |
| Resource Connection | | | |
| Was a resource conne | ction made as a result of | a concern found during assessn | g thi nent |
| Resource Connection Date | 10/04/2024 | This is the date first discussed. | |
| Pertains To | Select please | ~ | • |
| Connection Type | Tobacco Cessation | ~ | • |
| Connected By | Home Visitor | ~ | |
| Connected To | | | |

51 Click "Create".

| source connection was made, you can record it her Id managed from the family resource connection se | re. The resulting resource ection. | Add Item | |
|--|---------------------------------------|----------|--------------|
| on made as a result of a concern found during this assessment? | ○ Yes ® No | Add Item | |
| | Create Cancel | Add Item | |
| | | Add Item | |
| License Agreement Portions © Parents as Teachers National Center, Inc. | Training Videos | | 🛓 Main Admin |

52 Next is Guardian Medical and Emergency Room Visits. Click the Add Item button.

Note - the admin can add Guardian Medical visits to the Visit Record. You can then fill out this question on the visit record, and it will show up here in this section.

| y Division | Private ins | urance | | | 1 |
|-------------------|----------------|---------------------------|--------------|---------------------|---------|
| | | | | | |
| efinition) | | | | A | dd Item |
| ıardian | Tobacco Parent | Receiving services | Tobacco Home | Tobacco use 30 days | |
| y Division | No | | Yes | Not at all | 1 |
| | | | | A | dd Item |
| ≀oom Visit | S | | | | dd Item |
| | | | | | |
| vey | | | | A | dd Item |
| | | | | | |
| urvey | | | | A | dd Item |
| | | | | | |

53 Fill in the fields

| р <u>л</u> | .lov Division | Private | Did not ask | | | Yes | 1 |
|------------|----------------------|-----------|-------------|---|--------|--------|----------|
| Emerge | ncy Room Visit | s | | | | × | |
| Date | 10/04/2024 | | | | | | Add Item |
| Guardian | Division, Joy (Parti | cipating) | | ~ | | | × 10 |
| Туре | OB/GYN | | | Y | | | |
| Reason | | | | ~ | | | Add Item |
| omments | | | | | | | × 1 |
| | | | | | | | Add Item |
| | | | | | Create | Cancel | Add item |
| | | | | | | | |

| Emerge | ncy Room Visits | | × |
|------------------|--------------------------------------|--------|-----------|
| Date Juardian | 10/04/2024 | | Add Item |
| Туре | Division, Joy (Participating) OB/GYN | ~ | |
| Reason mments | prenatal visit | | a 30 days |
| | | | |
| _ | | Create | Cancel |
| eption Use S | Survey | | Add Item |

| 55 Click "Create". | | |
|-------------------------------|---------------|----------|
| Division, Joy (Participating) | * | / |
| OB/GYN | ~ | |
| prenatal visit | ~ | Add Item |
| | | ✓ T |
| | Create Cancel | Add Item |
| rvey | | Add Item |
| Survey | | Add Item |

56 Moving on to the Contraception Survey. Click the Add Item button.

| y Division No | | | Yes | No | ot at all | | | Ū |
|---------------|--------|----------------|-----|---------|-----------|----|--------|---|
| | | | | | | | | |
| Room Visits | | | | | | Ac | id Ite | n |
| ıardian | Туре | Reason | Re | ferred? | Comments | | | |
| y Division | OB/GYN | prenatal visit | | | | | - | Ū |
| | | | | | | Ac | ld Ite | n |
| vey | | | | | | A | ld Ite | n |
| | | | | | | | | |
| urvey | | | | | | Ac | ld Ite | n |
| | | | | | | | | |
| | | | | | | Ac | id Ite | n |
| | | | | | | | | |

Fill in the fields

| Guardian | Division, Joy (Participating) - | | Ad |
|--------------------------------|---------------------------------|---------------|---------|
| Currently using contraception? | Select option | | 30 days |
| Comments | Select option | | |
| | Yes | | |
| , | No | | Ad |
| | Prefer not to report | | nts |
| | Do not Apply | Create Cancel | |
| | | | |
| Contraception Use Survey | | | Ad |
| Alcohol Consumption Survey | | | Ad |
| | | | |

| 58 | Click "Create". | |
|-------|---------------------------------|---------------|
| lian | Division, Joy (Participating) - | Add Item |
| on? | Do not Apply 👻 | 30 days |
| ents | | × 10 |
| | li li | |
| | | Add Item |
| | | Create Cancel |
| | | |
| vey | | Add Item |
| | | |
| urvey | | Add Item |
| | | |

59 Next is the Alcohol Consumption Survey. cCick the Add Item button.

| y Division O | B/GYN | prenatal vi | sit | | | 🖉 🖉 🔟 | |
|----------------------|---------------|---------------|------------|--------------|------|----------|-----------|
| | | | | | | | |
| | | | | | | | |
| vey | | | | | | Add Item | |
| ıardian | | | Status | | | | |
| y Division | | | Do not App | bly | | 1 | |
| | | | | | | Add Item | |
| Survey | | | | | | Add Item | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | Add Item | |
| | | | | | | | |
| | | | | | | | |
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| ortions © Parents as | s Teachers Na | ational Cente | er, Inc. | | | | |

| Alconol consur | nption | X | | | |
|---|---|---------------------------------|------|---------------------------------------|----------|
| Date | 10/04/202 | | | 4 | Add Item |
| Guardian | Division. Jov (🗸 | | Home | Tobacco use 30 days | |
| Do you sometimes drink alcoholic drinks? In the past year, have yo (for men 65 or younger) women or anyone over 6 | beer, wine, or other whad five or more or four or more (for 55) drinks in a day? | Select option Select option No | | | Add Item |
| | | Yes Prefer not to report | t | Comments | × 1 |
| n Use Survey | | | | · · · · · · · · · · · · · · · · · · · | Add Item |
| Guardian | | Status | | | |
| | | | | | |

| | Date | 10/04/202 | | | | Add Item |
|----|--|---|-------------------|------|----------------|----------|
| | Guardian | Division, Joy (- | | Home | Tobacco use 30 | days |
| | Do you sometimes drink alcoholic drinks? | beer, wine, or other | No • | | Not at all | A 10 |
| E | In the past year, have yo (for men 65 or younger) | ou had five or more or four or more (for | Select option 🔻 | | | Add Item |
| | women or anyone over 6 | δ5) drinks in a day? | Select option | d? | Comments | |
| | | | No | | | A 1 |
| | | | Yes | | | |
| ti | on Use Survey | | Prefer not to rep | oort | | Add Item |
| | Guardian | | Status | | | |
| | Joy Division | | Do not Apply | | | 1 |

62 Click "Create".

| Date 0/4/2024 Medical & E | Guardian Do you sometimes drink alcoholic drinks? In the past year, have you (for men 65 or younger) | Division, Joy (▼ beer, wine, or other u had five or more or four or more (for | No • No • | Home | Tobacco use 30 da Not at all | ys Market Market Mar |
|---------------------------------|---|--|---------------|-------|---------------------------------|--|
| Date | women or anyone over 6 | 5) drinks in a day? | | rred? | Comments | |
| 0/4/2024 Contracepti | on Use Survey | | Create Cancel | | | Add Item |
| Date | Guardian | | Status | | | |
| 0/4/2024 | Joy Division | | Do not Apply | | | 1 |
| Alcohol Con | sumption Survey | | | | | Add Item |

Finally, we have the Pregnancy History. Click the Add item button.

| ıardian | | S | status | | | |
|-------------|----------------------------------|----------------------------------|---------------------|------------------------------|----------|-----------|
| y Divisior | 1 | C | o not Apply | | 1 | |
| | | | | | | |
| urvey | | | | | Add Item | |
| ıardian | Drink sometimes? | Avg. days per week | # drinks per day | 5+/4+ drinks in past year | | |
| y vision | Ν | | | Ν | × ± | |
| | | | | | Add Item | |
| | | | | | Add Item | |
| | | | | | | |
| ٠ | License Agreement | t | 🖿 Tra | ining Videos | | 🛔 Main Ac |
| ortions @ | Parents as Teach v4.0.2024093 | ers National Center, 80225920 | Inc. | | | |

Fill in the fields

| | | Date | 10/04/2024 | | | | |
|---------------|-------------------|-------------------|-------------------------|------|-------------------|-------|------------------------------|
| Medical & E | G | uardian | Division, Joy (Partic 🕶 | | | | |
| Date | Fotal pregnancies | to date | Select option | | | rred? | Comments |
| 10/4/2024 | Live births | to date | Select option | | | | |
| Contracent | | | 0 | | | | |
| Contracept | | | 1 | C | Cancel | | |
| Date | | | 2 | | Surreer |) | |
| 10/4/2024 | Joy Division | | 3 | o no | t Apply | | |
| | | | 4 | | | | |
| Alcohol Consu | mption Survey | | 5 | | | | |
| | | | 6 | | | | |
| Date | Guardian | Drink sometime | 7 | | # drinks p day | er | 5+/4+ drinks in past year |
| 10/4/2024 | Joy | N | 8 | | | | N |
| | Division | | 9 | | | | |

| Medical & E | | uardian | | | | | |
|-------------|-------------------|-----------|-------------------|---------|-------------|-------|--------------------|
| | e | Juarulari | Division, Joy (Pa | artic 🔻 | | | |
| Date | Total pregnancies | s to date | 2 | - | | rred? | Comments |
| 10/4/2024 | Live birthe | to data | | | | | |
| | Live births | siouale | Select option | Ψ. | | | |
| Contracept | | | Select option | | | | |
| Data | | | 0 | | Cancel | | |
| | Leve Division | | 1 | | unt Annlu | | |
| 10/4/2024 | JOY DIVISION | 1 | 2 | | o not Apply | | |
| | | | 3 | | | | |
| Alcohol Con | sumption Survey | | 4 | | | | |
| | | Drink | 5 | | # drinks | per | 5+/4+ drinks in pa |
| Date | Guardian | sometime | 6 | | day | | year |
| 10/4/2024 | Joy | N | 7 | | | | Ν |
| | Division | | • | | | | |

66 Click "Create".

| lical & E 9 /2024 | Gu Total pregnancies t Live births t | Date10/0hardianDivisto date2to date1 | 4/2024 | rred? | Comments | Add Item |
|-------------------------|--|--------------------------------------|-----------------------|---------------------|------------------------------|----------|
| tracept e /2024 | Joy Division | | Create | Cancel not Apply | | Add Item |
| ohol Cons | sumption Survey Guardian | Drink sometimes? | Avg. days per week | # drinks per day | 5+/4+ drinks in past year | Add Item |
| /2024 | Joy | N | | | N | ×* 1 |



This section should be reviewed and updated annually.