

TABLE OF CONTENTS

| | | |
|-------|--|-------|
| I. | INTRODUCTION..... | EP-1 |
| A. | Purpose..... | EP-1 |
| B. | Scope..... | EP-1 |
| II. | POLICIES..... | EP-2 |
| III. | ASSESSING IMPACT OF THE EMERGENCY..... | EP-3 |
| IV. | CONCEPT OF OPERATION..... | EP-3 |
| A. | General..... | EP-3 |
| B. | Organization..... | EP-3 |
| C. | Notification..... | EP-6 |
| V. | RESPONSIBILITIES..... | EP-6 |
| A. | Facilities..... | EP-6 |
| B. | Issuance..... | EP-7 |
| C. | Certification and Voucher Issuance..... | EP-8 |
| D. | Nutrition Education Contacts..... | EP-9 |
| VI. | RESOURCE REQUIREMENTS..... | EP-10 |
| A. | Staff Requirements..... | EP-10 |
| B. | Certification Equipment, Computers, Voucher Issuance Printers, and Supplies..... | EP-10 |
| C. | Infant Formula..... | EP-10 |
| D. | Food Vouchers and Turnaround Documents (TADs)..... | EP-11 |
| E. | Operational Retail Vendors..... | EP-11 |
| F. | Clinic Data Set and/or Masterfile List..... | EP-11 |
| G. | Transportation..... | EP-11 |
| VII. | MANUAL CERTIFICATION WITH MANUAL VOUCHER ISSUANCE..... | EP-12 |
| VIII. | NUTRITION EDUCATION, FOOD PACKAGE CHANGE OR OTHER MANUAL CHANGES WITH MANUAL VOUCHER ISSUANCE..... | EP-13 |
| IX. | MANUAL VOUCHER ISSUANCE ONLY..... | EP-14 |
| X. | REPLACING LOST VOUCHERS..... | EP-15 |
| XI. | VOUCHER ORDERING, RECEIPT, AND CLOSE-OUT OF ADP CONTRACTOR PRINTED VOUCHERS..... | EP-16 |
| XII. | TIPS FOR OPERATING A MANUAL SYSTEM..... | EP-19 |
| | Attachments..... | EP-20 |
| | EP-1: Declared Emergency - Staff Availability..... | EP-21 |
| | EP-2: Declared Emergency-Personnel Time Tracking Form..... | EP-22 |
| | EP-3: Declared Emergency - Communications Log..... | EP-23 |
| | EP-4: Declared Emergency-Daily Work Activity Log..... | EP-24 |
| | EP-5:EmergencyBatchControlForm..... | EP-25 |

EP-6: Surplus/Destruction Form.....EP-26

I. INTRODUCTION

The following information is provided to the districts for incorporation into the District Emergency Plan. In contrast to distribution of food stamps, the Georgia WIC Program is a limited grant supplemental food program that serves a specific population with special nutritional needs. The Georgia WIC Program is not designed or funded to meet the basic nutritional needs of emergency victims who would not otherwise be eligible for the program. Unlike the distribution of commodities or the emergency issuance of food stamps, there is no legislatively mandated role for the Georgia WIC Program in emergency relief, nor is there legislative authority for using the Georgia WIC Program food funds for purposes other than providing allowable food benefits to categorically eligible participants.

Deleted: commodity

No additional WIC funds are designated by law for WIC emergency relief, and WIC must operate in an emergency situation within its current program context and funding. For these reasons, WIC is not to be considered a first responder or first line provider of infant formula or the nutritional needs of emergency victims.

The Georgia WIC Program may briefly suspend WIC operations during some instances and rely entirely on other emergency relief feeding operations (e.g. American Red Cross, Salvation Army, churches, etc.) until it is feasible to operate a direct distribution system or until retail distribution returns to normal conditions.

The Georgia WIC Program staff should participate in Emergency Planning activities and exercises, including floods, tornadoes, hurricanes, etc., prior to a declared emergency if it benefits WIC and it is included in the State/District Emergency Plan(s). However, WIC staff cannot perform non-WIC duties prior to an emergency being declared or after the emergency declaration is no longer in effect.

A. Purpose

The Purpose of this Emergency Plan is to:

1. Restore WIC services to current participants as soon as possible.
2. Expand services to the eligible population in emergency affected areas.
3. Respond in a manner consistent with the Georgia Department of Public Health.

B. Scope

These guidelines incorporate the Georgia Department of Public Health Emergency Operations Plan. This plan should be followed in the event of an emergency, or emergencies, that disrupt(s) service delivery at local agency (ies). The actions of local agency WIC staff should be guided by the procedures developed within their respective county public health departments. Private agencies that contract to provide WIC services should follow the emergency plans consistent with those policies that have been developed by their parent agencies. The Georgia WIC Program guidelines will reflect the purpose, authority, and responsibilities developed by the Georgia Department of Public Health.

The Georgia WIC Program and local agency(ies) must also make an initial and on-going assessment as to the feasibility of distributing ready-to-feed infant formula. The decision to use ready-to-feed infant formula will be made on a day-by-day assessment of the circumstances and type of emergency.

II. POLICIES

Concept of Operations: Operations will be conducted in three phases that may overlap as outlined in the [Georgia Department of Public Health Operations Plan](#). Phase One is Detection and Investigation. Phase Two is Assessment of Magnitude. Phase Three is Response to the Emergency. In all three phases, the order of preference for voice communications is landline or cellular communications. Voice communications may be supplemented by complementary and redundant e-mail, internet, or fax. When none of these are available, satellite communications or amateur radio systems may provide redundancy. Each agency is to provide an accurate and complete accounting of costs associated with the incident.

Phase One begins when a suspected or possible emergency having withstood clinical review is reported to the Commissioner of the Department of Public Health or detected by the public health system in Georgia. The Department of Public Health will contact and/or assist the Health District(s) in determining the nature of the emergency. Phase One is complete when the appropriate state or federal agency either confirms or refutes the emergency. For a natural emergency, Phase One will be complete when a determination is made of the health consequences associated with the emergency. The Commissioner of the Department of Public Health will provide direction for the use of any public health assets involved in any investigation. District Health Directors are responsible for ensuring that the efforts of district and provider resources are managed effectively in the detection and investigation of the possible health emergency.

Phase Two begins with confirmation of the incident. It may begin before identification of the source or agent of the outbreak or incident. County, District, and State Public Health, with support from health provider organizations and others, will determine the potential scope of the emergency. The assessment will include determining the availability of facilities, staff, and equipment. County Health Departments will determine local response status, needs, and priorities. District and State Public Health Officials will do likewise for their respective levels. This phase will require close coordination between County, District, and State Public Health, health care providers, mental health care providers, and others.

Phase Three begins with allocation of additional resources (e.g., personnel, supplemental foods, and other resources). Phase Three will be completed when the emergency is contained and the community begins to return to normal functions as determined by local, District and State officials.

The District Nutrition Services Director, or designee, serves as the local lead and is responsible for coordinating local WIC responses to an emergency.

Specific decisions concerning the Georgia WIC Program actions during an emergency depends upon the duration and magnitude of the emergency, and upon specific directions from the Georgia WIC Program Director. The focus of the Georgia WIC Program activity is to support local agency service delivery. These guidelines primarily reflect the Georgia WIC Program responsibilities in the event of disruption of services in

one local agency. In the event of an emergency at the State agency, the Georgia WIC Program personnel will follow the rules developed by the State Health Director. In the event of an emergency, or emergency involving both local and State agencies, the initial focus of the Georgia WIC Program will be to estimate the impact and determine the measures needed to support the restoration of services by the local agency. The State and local agencies will develop provisional operational policies following an emergency that respond to the specific needs created by the emergency.

III. ASSESSING IMPACT OF THE EMERGENCY

The extent of damage caused by the emergency, or emergencies, must be assessed by the local agency. To determine if delivery of services is feasible, the following questions should be answered:

1. What type of assistance does the local agency need?
2. Are the issuance sites operational?
3. How many participants are affected?
4. Can participants reach food instrument issuance sites?
5. How many grocery stores are closed due to the emergency?
6. Is retail purchase still feasible?
7. Are electric, water, communication, and/or transportation services disrupted?
8. How long will services be disrupted?
9. How best can the Georgia WIC Program assist with aiding the health district?
10. Has the area been declared a Federal emergency?

IV. CONCEPT OF OPERATION

A. General

The Georgia WIC Program Director, and/or designee, shall keep an Emergency Plan binder. The Emergency Plan binder provides all of the pertinent contact information for the Georgia WIC Program Director and the Georgia WIC Deputy Directors, to address the emergency, including information for the collaboration with other agencies and organizations.

B. Organization

Georgia WIC Program Director Responsibilities:

1. Contact the Division of Public Health Emergency Coordinator.

2. Contact the Regional Food and Nutrition Services Office.
3. If needed, contact the formula manufacturers to secure ready to feed (RTF) formula with nipples and bottles
 - a. Follow through on receipt and delivery of formula.
 - b. Visit area to make on-site assessment of support staff, etc.

State Level Responsibilities

Various Georgia WIC Program staff members have responsibilities in the Georgia WIC Program Emergency Plan. The overall responsibilities for implementation and reporting on WIC's response to the emergency lies with the Georgia WIC Program Director in conjunction with the Deputy Director of Integrity and Strategy. They will use a telephone tree to notify staff of the emergency and provide instructions for responding to the emergency. The telephone tree is as follows:

1. Georgia WIC Program Director and Deputy Director of Integrity and Strategy contact the WIC Deputy Directors, WIC Associate General Counsel (s) and the Executive Secretary.
2. Each Deputy Director calls his/her staff.

WIC Deputy Directors will be responsible for coordinating staff and analyzing the emergency as follows:

- The Deputy Director of Program Administration will be responsible for coordinating mass shipment and storage of supplies including formula, and coordinating the issuance of food vouchers to participants, including remote printing, equipment issues and emergency procurement of vouchers. These duties will be coordinated with the Deputy Director of Program Operations and Nutrition Services, as well as the District Nutrition Services Directors,
- The Deputy Director of Program Administration will be responsible for tracking and reconciling emergency related costs.
- The Deputy Director of Program Administration will be responsible for documenting the use of the vouchers, ensuring that inventories are used appropriately, and ensuring that manual vouchers are available.
- The Deputy Director of Vendor Management will be responsible for informing local agencies impacted by the emergency of authorized WIC vendors open for business.
- The Deputy Director of Program Operations & Nutrition Services will be responsible for assisting with certification and food package issuance, nutrition education, and food safety preparation information.
- The Nutrition Operations Manager (in conjunction with the Breastfeeding Coordinator) will be responsible for assisting with breastfeeding education support information. Staff will be assigned to serve locations according to availability and need.

State and Local Agency Responsibilities

The State and local agencies will coordinate efforts to determine the appropriate assignments of staff to assist the local agency in need. Staff may be assigned from within the county, from another county, from another district or from the State WIC Office to meet a specific county's needs during an emergency.

The State and local agencies may be asked to assign staff to a designated emergency assistance location(s) (not always a health department facility) in order to provide WIC services more expediently.

When an emergency causes State or local agency offices to be closed, staff should contact one of their supervisors as soon as possible to report their situation and availability for duty. If none of the local agency's immediate supervisors can be reached, local agency staff can call the Georgia WIC Program at 1-800-228-9173 to report their status and phone number where they can be reached. Attachment EP-1 is a form designed to collect data for this purpose.

Staff Documentation Requirements:

1. Any office that has staff working on emergency activities must maintain a Staff Availability Form (see Attachment EP-1), Employee Personnel Time Tracking Form (see Attachment EP-2), and a current Communication Log (see Attachment EP-3). One log per office, per pay period, should be utilized and kept on file for five years plus the current Federal fiscal year.
 - A. The Staff Availability Form (see Attachment EP-1) must show which employees are available for emergency operations and when they were notified
 - B. Each employee should maintain and retain an Emergency Personnel Time Tracking Form (see Attachment EP-2) to document hours worked during an emergency. If the Federal Emergency Management Agency (FEMA) or other funding sources become available, the Emergency Daily Work Activity Logs will be used to document hours worked (see Attachment EP-4). These forms must be kept on file for five years plus the current Federal fiscal year
 - C. The Communication Log (see Attachment EP-3) should show the communication made with respect to, and during, the documented emergency. This log is to be retained at the District Office for five years plus the current Federal fiscal year

Contractors

Each entity that has a contract with the Georgia WIC Program must have a Plan of Operation for Emergencies and submit the plan by April 30th of each year. The plan must contain at least the following:

1. Assurance that notification will be provided to the Georgia WIC Program by contacting the following staff immediately to advise that the emergency occurred:
 - Georgia WIC Program Director, Debra L. Keyes at 404-657-3140; or BB 404-274-7622; and
 - Emergency Plan Coordinators, Shameyrae Miller at 404-657-2917 and Elizabeth Pape at 404-657-2914

The notice must include the reason for the emergency, and confirmation that the plan will be implemented.

2. A contact list with at least two persons listed with name, work phone number, cell or home phone number and work e-mail address included.
3. Assurance that notification will be provided to the Georgia WIC Program of any services that will be delayed due to the emergency situation and the anticipated date service will be returned.
4. Assurance that notification will be provided to the Georgia WIC Program Director and/or Coordinator that the emergency has ended, and that the Emergency plan is no longer in effect.

The status of emergency plans with contractors is listed below:

1. Fulton-DeKalb Hospital Authority (Grady): plan submitted and on file
2. Computer Science Corporation (CSC): plan submitted and on file

C. Notification

The lines of communication during an emergency begin with:

- 1) The local WIC offices contacting their main local agency office
- 2) The local agencies contacting their District Nutrition Services Director
- 3) The District Nutrition Services Director contacting their District Emergency Coordinator
- 4) The District Nutrition Services Director will contact the Georgia WIC Program Director (Georgia WIC Program Emergency Plan will be implemented)
- 5) The Georgia WIC Program Director, or designee, will contact the State Health Office Emergency Coordinator
- 6) Deputy Director of Vendor Management, or designee, will contact the appropriate vendors using an email distribution list for same day notification

V. RESPONSIBILITIES

A. Facilities

During an emergency, it is imperative that the safety of staff and participants be considered. Therefore, it may be necessary to move to another location. In the event of a move, an immediate survey should be taken of all State buildings and offices in the affected area(s) to identify damage or the nature of the incident.

Necessary emergency action should be taken to protect the Georgia WIC Program property where State buildings or offices have been damaged. This may include, but is not limited to, moving contents and equipment files, acquiring security services, securing buildings, or any other necessary activities.

The records and invoices of any damage to facilities, equipment, supplies, repair or replacement should identify the site location address and identification numbers of the item(s) to assist in filing insurance claims. This information must be reported to the Georgia WIC Deputy Director of Program Administration, within seventy-two (72) hours after the emergency area returns to normal, using the [Surplus/Destruction Form](#) (see Attachment EP-6).

The Georgia WIC Program staff must respond to an emergency situation, in cooperation with the State Office of Emergency Preparedness, to assist the local agency to identify buildings, equipment, medical services, general supplies, and any other resources required to continue service delivery. Portable weighing and measuring equipment may be critical in an emergency situation. This will include assisting in finding potential locations for direct distribution of infant formula and food that are most accessible to participants. Whenever possible, the Georgia WIC Program will coordinate communications and services with other state program offices, such as Maternal and Child Health, TANF, SNAP, and Emergency Assistance Centers.

B. Issuance

During periods of an emergency, every effort will be made to continue issuance of food vouchers to participants. When adverse circumstances persist, such as the lack of available facilities, records, or food instrument supplies, the Georgia WIC Program's Deputy Director of [Program](#) Administration will coordinate efforts with the local agency to ensure that a minimum supply of food or food vouchers are available for participants if such action is necessary. At all times, staff must maintain and update the number of infants on special formula. Securing formula for WIC infants affected by the emergency is the top priority of the Georgia WIC Program emergency relief plan. Ready-to-feed formula may be necessary if the area's water supply is contaminated and/or electrical power is disrupted. State government and local agencies will collaborate daily, or as needed, to determine the most appropriate food distribution method. In the event that ready-to-feed infant formula is required, efforts will be made to order appropriate amounts and to include disposable nipples and bottles. When the emergency area returns to normal, or if another agency accepts responsibility for formula (e.g., American Red Cross), distribution of ready-to-feed formula will be discontinued. Adult and child participants will be directed to emergency food centers in the event that direct distribution is necessary.

1. Retail Vendors (Grocery Stores): The Georgia WIC Program Manager of Vendor Relations & Administration, in conjunction with the local agency, will share information and establish and maintain a list of retail grocery stores

that remain in operation during the emergency. They will coordinate notification to participants of operating stores in their vicinity, hours of operation and a detailed listing of available WIC approved foods.

2. Direct Distribution: If retail purchase is not viable, then direct distribution measures will be considered. The local agency, state staff, and emergency coordinator will determine that retail purchase is not viable when a significant number of clients are unable to purchase WIC approved foods. This could be due to the closure of many retail stores, the inability of many clients to get to a retail store, or disruption of the supply of food to stores.

State and local agencies will coordinate efforts to contact the Red Cross and other relief agencies to arrange for methods of food distribution to current participants and to newly eligible participants. The Georgia WIC Program Deputy Director of Program Administration will arrange for the supply and distribution of food items and/or food vouchers to the local agency in need. For those local agencies in close proximity to the Georgia WIC Program, the State Agency may become directly involved with the distribution. If the District office is closer in proximity, efforts will be made by the Georgia WIC Program to coordinate distribution to the local agency through the District office. When District offices are affected by the emergency, the Georgia WIC Program may elect to take other appropriate measures to supply the local agency with infant formula, other food, e.g., alternate food packages or food vouchers. Ready-to-feed formula will be used if the water supply is contaminated or limited.

All contracts for formula procurement by the Georgia WIC Program will contain a clause addressing alternative measures for acquisition and distribution of infant formula in the case of an emergency.

3. Food Vouchers: At all times, local agencies should maintain a minimum back up supply of preprinted and blank manual food vouchers. These manual food vouchers should be secured in such a way that they will be safe and accessible during emergencies. Based on the local agency needs, the Georgia WIC Program will help to sustain the local agency's inventory of food vouchers. Local agency staff must complete an inventory of vouchers, at the end of each day, to account for usage.
4. Food Package: The WIC Competent Professional Authority (CPA) determines the type of food package to be issued consistent with the Food Package Section of the Georgia WIC Program Procedures Manual (see alternative food package section.) Local agencies have the option of converting participants to a special food package (e.g., homeless package) under any of the following circumstances:
 - a. Lack of refrigeration
 - b. Lack of food preparation facilities (e.g., living in a shelter, motel, etc.).

C. Certification and Voucher Issuance

- 1) Depending upon the duration and severity of the emergency, appropriate measures will be taken by the Georgia WIC Program to minimize the disruption of certification services at the local agency.
- 2) When facilities' medical services, equipment, general supplies and staff are available, the Georgia WIC Program will assist local agencies in maintaining services. When specific facilities, medical services, or staff is needed, the Georgia WIC Program will enact measures to meet those needs through other local agencies or the Georgia WIC Program resources.
- 3) Special provisions for expedited certifications may be authorized with approval from the Georgia WIC Program.
- 4) The Georgia WIC Program gives local agencies the right to **certify** applicants when no proof of residency or identity exists (such as when an applicant or an applicant's parent is a victim of theft, loss, emergency, or emergencies, a homeless individual, or a migrant farm worker). In these cases, the State or local agency must require the applicant to confirm in writing his/her residency or identity, **using the No Proof Form (Attachment CT-28)**.
- 5) Districts/Clinics should consider requesting an extension of the processing standards for up to 15 days, for pregnant women, breastfeeding women, and infants.
- 6) Districts/Clinics should contact the Deputy Director of Program Operations & Nutrition Services for approval to implement the thirty (30) day extension period for clients due for a recertification that have appointment scheduling difficulties. One month's worth of vouchers must be issued and a new recertification appointment must be provided to the participant.
- 7) Districts/Clinics should contact the Deputy Director of Program Operations & Nutrition Services for approval to consider mailing one (1) month of vouchers to participants. (Refer to the Food Delivery Section of the Procedures Manual, VII. Mailing/Delivery of WIC Vouchers procedures).

D. Nutrition Education Contacts

Nutrition education may be provided in group or individual settings during certification and voucher issuance while in emergency situations.

Nutrition education during an emergency may need to address some, or all, of the following topics:

1. Food safety
2. Food preparation
3. Safe water supply
4. General sanitation

VI. RESOURCE REQUIREMENTS

The requirements for providing services to the Georgia WIC Program participants during an emergency include: staff certification equipment, laptop or desktop computers, MIFI wireless card, voucher issuance printers, supplies infant formula, manual vouchers, blank TADs, a data set and /or Masterfile list of participants (available electronically or hard copy), and transportation. The specific District requirements are as follows:

A. Staff Requirements

1. Analyze the needs caused by the emergency and continue to monitor and analyze further needs.
2. Coordinate the Georgia WIC Program staff and volunteers from around the state.
3. Schedule shifts for volunteers and help to obtain lodging as close as possible to the emergency site.
4. Schedule and coordinate staff from the affected local agency and other WIC staff.
5. Coordinate with local agency financial staff to monitor and track all emergency related costs.

B. Certification Equipment, Computers, Voucher Issuance Printers, and Supplies

1. Plan to procure, borrow or reassign certification equipment, computers, voucher issuance printers and corresponding supplies for an alternate location, if needed. For movement of any equipment the **Surplus/Destruction Form #AM01001C** (Attachment EP-6) must be completed and **emailed** to the **Inventory Coordinator**.
2. At any alternate location, plan to provide an electronic or hard copy of all procedures, forms, and documents that may be needed in order to provide services either electronically or manually.

C. Infant Formula

1. The Deputy Director of **Program** Administration will obtain storage facilities near the affected emergency area for storing an extra supply of infant formula. Obtain manpower to move formula from trucks to storage to shelter.
2. Plan to procure, ship, store and distribute infant formula and food to emergency areas.
3. Contact distribution personnel (e.g. helicopters, airplanes, over land all-terrain vehicles).

- D. Food Vouchers and Turnaround Documents (TADs)
 - 1. Obtain a supply of blank voucher paper stock for the Georgia WIC Program remote printing.
 - 2. Obtain a supply of blank and manual food vouchers for issuance.
 - 3. Contact the Deputy Director of Program Administration to have our vendor print and ship pre-printed food vouchers to the emergency area.
 - 4. Obtain a supply of both blank TADs and preprinted food vouchers specific to the county or clinic.
 - 5. Enter all manual vouchers and TAD information in the computer as soon as there is access to the system, or when the emergency is over. Notify the Georgia WIC Deputy Director of Program Administration when this has been completed.

- E. Operational Retail Vendors
 - 1. To ensure that the most current retail vendor information is available for WIC participants, the Georgia WIC Vendor Relations Manager and the local agency, for the duration of the emergency, will share the list of open and closed retail vendors.

- F. Clinic Data Set and/or Masterfile List
 - 1. On a monthly basis, the District should print, and retain, a copy of all WIC participants for their District/County/clinics. The list should include the certification status, last date of voucher issuance, and voucher numbers for each participant to be used to continue certifications and voucher issuance.
 - 2. If, due to the emergency, retrieval of an electronic data listing is not possible, then ensure that the District and each affected clinic has a list of all WIC participants that includes certification status. If necessary, the Nutrition Services Director can contact the ADP contractor for the Masterfile list. After the ADP contractor is contacted, an email should be sent to the Program Technology Manager advising that you have requested the Masterfile list from the ADP contractor.
 - 3. If possible, request your front end computer system contractor to generate these electronic data sets, lists, or hard copies for your District/ Counties/clinics.

- G. Transportation
The Deputy Director of Program Administration, in conjunction with the Deputy Director of Operations and Nutrition Services, are responsible to:

1. Arrange transportation for volunteer staff.
2. Arrange transportation for local distribution of infant formula.

VII. MANUAL CERTIFICATION WITH MANUAL VOUCHER ISSUANCE

- A.** Complete Demographic information, Proof fields and Income Information (see Income Guidelines) on the appropriate Certification Form (Pregnant, Postpartum, Breastfeeding, Infants and Children).
1. If an applicant does qualify for the WIC program, complete the above information and a Turnaround Document (TAD). Use a blank TAD for both new participants and for participants being added to a family using an existing family number. Use the Edits Manual Data Dictionary to reference required fields for each transaction type.
 2. If an applicant does not qualify for WIC, have the applicant sign the Certification Form, complete the Notice of Termination/Ineligibility/Waiting List form. Copy and date the proofs and place them in the file.
- B.** CPA manually completes the nutrition assessment, food package assignment and nutrition education, and records this information on the Certification Form, Nutrition Questionnaire, Nutrition Education Flow Sheet, Growth Chart, and any other documentation forms necessary. Each clinic should retain a hard copy of the food package tables from the manual to use as reference when manual vouchers are being issued and/or there is no internet access.
1. Infant
 - a. Calculate infant's age at first day to use for each food package to be issued (coordinate CPA Food Package Code (FPC) with system food package code (FPC)).
 - b. Confirm correct food package code (FPC) to issue.
 - c. Look up voucher codes and messages for food package.
 - d. Watch for special situations – Turning 1 year old and breastfeeding status.
 2. Women and Children
 - a. Look up voucher codes and messages for food package.
 - b. Watch for special situations – Turning 2 years old, postpartum breastfeeding, 6 months postpartum, and breastfeeding infants.
 3. Participants with qualifying conditions on special formulas

- a. Review that Medical Documentation is complete and that the requested formula is appropriate for the diagnosis shown.
 - b. Look up voucher codes and messages for both halves of food package when applicable.
- C. Complete the Turnaround Document (TAD). Enter all fields that must be completed for WIC type. Always complete Date Form Completed and Transaction Code. D. Issue Manual Vouchers (Refer to Food Delivery Section).
- E. Issue WIC ID card and WIC Approved Food List.
- F. Explain Vouchers, Dual Participation, WIC Approved Foods List and location of grocery stores.

VIII. NUTRITION EDUCATION, FOOD PACKAGE CHANGE OR OTHER MANUAL CHANGES WITH MANUAL VOUCHER ISSUANCE

- A. Using the data set, or Masterfile list of participants, verify that a client is in a valid certification period and the last date vouchers were issued.
- B. CPA performs assessment and/or provides nutrition education, if needed, and documents the services provided in the participant's record.
- C. Assign new food package code (FPC), if needed.
 - 1. Infant
 - a. Calculate infant's age at first day to use for each food package to be issued (coordinate CPA Food Package Code (FPC) with system food package code (FPC)).
 - b. Confirm correct food package code (FPC) to issue.
 - c. Look up voucher codes and messages for food package.
 - d. Watch for special situations – Turning 1 year old and breastfeeding status.
 - 2. Women and Children
 - a. Look up voucher codes and messages for food package.
 - b. Watch for special situations – turning 2 years old, postpartum breastfeeding type, 6 months postpartum, and breastfeeding status.
 - 3. Participants with qualifying conditions on special formulas

- a. Review that Medical Documentation is complete and that the requested formula is appropriate for the diagnosis shown.
 - b. Look up voucher codes and messages for both halves of food package when applicable.
- D. Complete the Turnaround Document (TAD). Enter all fields that must be completed for WIC type. Always complete Date Form Completed and Transaction Code.
- E. Issue Manual Vouchers (Refer to Food Delivery Section).
- F. Update WIC ID card and provide WIC Approved Food List, if needed.
- G. Explain Vouchers, Dual Participation, WIC Approved Foods List and location of grocery stores, if needed.

IX. MANUAL VOUCHER ISSUANCE ONLY

- A. Ask participant/parent/guardian for WIC ID Card and verify identity of the person picking up the vouchers.
- B. Verify that client is in a valid certification period and last date vouchers were issued using the clinic data set or Master file list of participants.
- C. Review food package to ensure the correct package is issued. Each clinic should retain a hard copy of the current food package tables from the manual to use for reference when manual vouchers are being issued and/or there is no internet access.
 - 1. Infant
 - a. Calculate infant's age at first day to use for each food package to be issued (coordinate CPA Food Package Code (FPC) with system food package code (FPC)).
 - b. Confirm correct food package code (FPC) to issue.
 - c. Look up voucher codes and messages for food package.
 - d. Watch for special situations—Turning 1 year and breastfeeding status.
 - 2. Women and Children
 - a. Look up voucher codes and messages for food package.
 - b. Watch for special situations – turning 2 years old, postpartum breastfeeding type, 6 months postpartum, and breastfeeding status.
 - 3. Participants with qualifying conditions on special formulas

- a. Review that Medical Documentation is complete and that the requested formula is appropriate for the diagnosis shown.
 - b. Look up voucher codes and messages for both halves of food package when applicable.
- D. Issue Manual Vouchers (Refer to Food Delivery Section, FD-9).
- E. Update WIC ID card and provide WIC Approved Food List, if needed.
- F. Explain Vouchers, Dual Participation, WIC Approved Foods List and location of grocery stores, if needed.

X. REPLACING LOST VOUCHERS

- A. Policy allows the reissuance of lost vouchers for those participants who live in a declared emergency area.
- B. Process for replacing lost vouchers:
 - 1. Determine if the participant resides in an area that has been designate as an area affected by a Declared Emergency
 - 2. Determine which vouchers the participant has lost and need replacement. Check GWIS if internet access is available.
 - 3. Call the CSC Help Desk to determine which lost vouchers have been cashed and processed by the bank.
 - a. Listed below is the information that staff will need to provide to CSC:
 - Voucher numbers
 - Participant's WIC ID number
 - Name of participant
 - Clinic, County and District number
 - Name of staff member requesting the information
 - b. CSC Help Desk Phone number is 1-800-796-1850.
 - c. Hours of operation are from 7:30 am to 5:00 pm, Eastern Standard Time (EST).
 - 4. After receiving the verification information from the CSC Help Desk that the lost vouchers have/have not been cashed, document the voucher information for lost vouchers that have NOT BEEN CASHED on the Lost/Stolen/Destroyed Voided Voucher Report (per family/participant). Use as many pages as necessary to document information.

5. Replacement vouchers will only be issued for vouchers that have NOT BEEN CASHED by the participant. Document on all voucher receipts, "Replacement Vouchers-Declared Emergency."

From the original of the Lost/Stolen/Destroyed Voided Voucher Report, make and distribute four copies as follows:

- a. Place original in the participant's file.
 - b. Place one copy in the Lost/Stolen/Destroyed Voided Voucher file.
 - c. Send one copy to your district office for their Lost/Stolen/Destroyed file.
 - d. Send one copy to the State WIC Office of the Inspector General Unit.
 - e. Send one copy to the clinic that originally issued the vouchers if the participant picked up replacement vouchers at a different clinic.
6. Void all copies of previously issued vouchers that have been replaced. Void only the vouchers that have NOT been cashed.

XI. VOUCHER ORDERING, RECEIPT, AND CLOSE-OUT OF ADP CONTRACTOR PRINTED VOUCHERS

A. Ordering ADP Contractor Printed Vouchers

1. In emergency situations when clinics are unable to print vouchers for a period of time, the ADP contractor has the capability of producing vouchers. In cases of emergencies, vouchers can be ordered from the ADP contractor through the Georgia WIC Program.
2. ADP contractor printed vouchers must be ordered through the Georgia WIC Program by contacting the Program Technology Manager and copy the Georgia WIC Deputy Director of Program Administration.
3. ADP contractor printed vouchers will be delivered to the identified sites by overnight delivery.

B. Receipt of ADP Contractor Printed Vouchers

1. ADP contractor printed vouchers will be delivered to each clinic along with a Voucher Cycle Packing List and Voucher Registers.
2. Clinics will compare beginning and ending voucher numbers to the ones on the Clinic Voucher Cycle Packing List.
3. Any discrepancies must be reported immediately, by telephone, to the ADP contractor and to the Program Technology Manager of the Georgia WIC Program.

4. The Packing List must be signed and dated to verify receipt. A copy of the signed/dated Packing List must be mailed to the District office within five days of receipt of the vouchers. The original must be retained by the clinic for five (5) years plus the current Federal fiscal year.
5. The District receives a copy of each detailed Clinic-Packing List for control, and a summary copy showing total vouchers received within the District.
6. All Packing Lists received by the District must be reconciled with the clinic's copy and the District's copy must be signed and dated. Any discrepancies must be reported immediately to the ADP contractor and the Program Technology Manager. Missing shipments must also be reported to the ADP contractor and the Georgia WIC Program Director.
7. All vouchers must be stored in a locked cabinet, desk, or closet when not being issued. Voucher Registers and Computer Printed vouchers must be stored and locked in separate locations.
8. ADP contractor printed vouchers are received by the clinic in alphabetical order of the last name of the lead family member within each Sort Code. The lead family member is the one with WIC type P, N, or B or with the lowest Participant ID Number (usually #1).

C. Issuing of ADP Contractor Printed Vouchers

1. Ask participant/parent/guardian for WIC ID Card and verify identity of the person picking up the vouchers.
2. Verify that client is in a valid certification period and status of last vouchers issued using the Masterfile List of participants.
3. Pull participant vouchers and recheck that vouchers are the correct ones for the participant.
4. Locate the participant's name and voucher numbers on the voucher register.
5. Prorate if applicable:
 - a. Fruit and Vegetable Voucher must be issued (Do not include in the proration) – This voucher code begins with a "P".
 - b. Write or stamp "VOID" on the prorated voucher(s) not issued.
 - c. Circle the corresponding voucher number(s) on the voucher register and write "VOID" near the circled voucher number(s) for the vouchers that were NOT issued.
 - d. Make a correction on the Voucher Register to reflect the number of vouchers issued for the month based on proration.

6. Have the participant/parent/guardian sign the Voucher Register for each month of vouchers issued.
 7. Staff issuing the vouchers will initial and date the Voucher Register next to the participant/parent/guardian's signature.
 8. Document the ID proof code on the left side of the Voucher Register.
 9. Update ID Card and provide WIC Approved Food List, if needed.
 10. Explain Vouchers, Dual Participation, WIC Approved Foods List and location of grocery stores, if needed.
- D. End of Month Close-Out for ADP Contractor Printed Vouchers and Voucher Registers
1. When completing end of month closeout, the clerk must assure that all Voucher registers contain a participant's signature. Registers that are missing the participant's signature must be marked "Failed to Sign", followed by the clerk's initials and date.
 2. All vouchers not issued to participants must be voided during the end of the month close out and documented as "Void" on the voucher register (followed by the clerk's initials and date). The vouchers not issued to participants must also be shown as "Void" in the computer and submitted to CSC for reconciliation.
 3. Close-out must be completed by the fifth working day of the following month.
- E. Processing Manual TADs
1. If clinic staff cannot enter TAD information into the front end computer system within fifteen (15) days of service, contact the Georgia WIC Program Technology Manager to obtain approval to mail paper copies of TADs to the ADP contractor.
 2. Count completed paper TADs and separate the copies (top copy to CSC and other copy for retention at the clinic).
 3. Complete the Emergency Batch Control Form (see Attachment EP-5) for TAD copies.
 4. Mail a copy of the Emergency Batch Control Form and TADs to:

CSC, ATTN: BETH VAUGHN
10975 GRANDVIEW
BUILDING 27, SUITE 500
BOX 11
OVERLAND PARK, KS 66210

5. Create a Batch Control Module with copies of the TADs and the Emergency Batch Control Form, sorted by date, for future reference and verification.
6. When TADs are received in the clinic from the ADP contractor, the clerk must verify information against clinic copy of TAD. Correct any errors and resubmit the information electronically.

F. Processing Manual Vouchers

1. Count completed paper Manual Vouchers (both issued and voided) and separate the copies.
2. Complete the Emergency Batch Control Form for Manual Voucher copies.
3. Make a copy of the vouchers that will be sent to CSC and retain these copies at the clinic for 5 years plus current Federal fiscal year.
4. Mail second copy of the Manual Vouchers with the Emergency Batch Control Form to:

CSC, ATTN: BETH VAUGHN
10975 GRANDVIEW
BUILDING 27, SUITE 500
BOX 11
OVERLAND PARK, KS 66210
5. Create an Emergency Batch Control module with copies of the Manual Vouchers and a copy of the Emergency Batch Control form, sorted by date, for future reference and verification.

XII. TIPS FOR OPERATING A MANUAL SYSTEM

- A. Verify the Manual Vouchers beginning numbers daily, to ensure that you start with the correct batch. (Remember that there are ten (10) sets of vouchers)
- B. Set up cycle vouchers and Manual Vouchers on a long table with labels and large signs (e.g., W08-Issue six vouchers per set) in a secure location that is out of reach of clients but easy for staff to use.
- C. Maintain voids and unissued vouchers in numerical order at all times.
- D. Separate voucher copies by using an organizer system to keep in numerical order.

Attachments

(This page is left intentionally blank)

EP-1: Declared Emergency - Staff Availability

| Date | Time Call Received | District/Unit Clinic | Staff Name | Staff Telephone | Return to Work Date | Return to Work Time | Closure of Issue |
|------|--------------------|----------------------|------------|-----------------|---------------------|---------------------|------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Retain: at the District Office for 5 YEARS PLUS CURRENT FEDERAL FISCAL YEAR.

Declared Emergency - Personnel Time Tracking Form

Affected district/County(ies):

[illegible]

Date: _____ **Supervisor Signature:** _____

Retain: for 5 YEARS PLUS CURRENT FEDERAL FISCAL YEAR as documentation for any future federal disaster relief claims.

EP-3: Declared Emergency - Communications Log

| Date | Time | Name of Communicator | Message | Person Receiving Communication | Action Taken | Lead Person | Closure of Issue |
|------|------|----------------------|---------|--------------------------------|--------------|-------------|------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Retain: at the District Office for 5 YEARS PLUS CURRENT FEDERAL FISCAL YEAR.

EP-4: Declared Emergency-Daily Work Activity Log

PAGE ____ OF ____

DECLARED EMERGENCY - DAILY WORK ACTIVITY LOG

DATE: ____ / ____ / ____

NAME: _____ Employee # : _____

DISTRICT: _____ OFFICE: _____

NEW ACTIVITY TIME: ____ : ____ ^{AM}
PM to ____ : ____ ^{AM}
PM BLDG: ____ OTHER: ____

ACTIVITY LOCATION:

Activity Description:

NEW ACTIVITY TIME: ____ : ____ ^{AM}
PM to ____ : ____ ^{AM}
PM BLDG: ____ OTHER: ____

ACTIVITY LOCATION:

Activity Description:

NEW ACTIVITY TIME: ____ : ____ ^{AM}
PM to ____ : ____ ^{AM}
PM BLDG: ____ OTHER: ____

ACTIVITY LOCATION:

Activity Description:

SIGNATURE: _____ DATE: _____

Note: Attach this form to the Emergency Personnel Time Tracking Form (Attachment EP-2)

Retain: for **5 YEARS PLUS CURRENT FEDERAL FISCAL YEAR** as documentation for future federal disaster relief claims.

| | | | |
|--|--------|---|-----------------|
| GEORGIA WIC PROGRAM | | EMERGENCY BATCH CONTROL FORM | |
| | | DATE | NUMBER |
| | | / / | / / |
| DISTRICT/UNIT | CLINIC | | |
| INSTRUCTIONS: THIS FORM IS TO BE COMPLETED ONLY WHEN TAD INFORMATION CANNOT BE ENTERED IN THE SYSTEM FOR 15 DAYS OR MORE. | | 1. USE THIS FORM AS A COVER SHEET TO FORWARD ALL TADS (CERTIFICATIONS, UPDATES, TRANSFERS AND TERMINATIONS) AND ISSUED MANUAL/VOIDED VOUCHERS. 2. SUBMIT THIS FORM WITH THE ISSUED MANUAL VOUCHERS, VOIDED MANUAL VOUCHERS AND TADS TO: 3. | |
| | | CSC – ATTN: BETH VAUGHN 10975 GRANDVIEW BUILDING 27, SUITE 500 BOX 11 OVERLAND PARK, KS 66210 | |
| | | TYPE OF DOCUMENT | NUMBER IN BATCH |
| | | TURNAROUND | |
| | | ISSUED VOUCHERS | MANUAL |
| VOIDED VOUCHERS | MANUAL | | |
| COMMENTS: | | | |
| DATE SENT BY DISTRICT/UNIT | | PREPARER'S SIGNATURE | |
| DATE RECEIVED AT CSC COVANSYS | | SIGNATURE | |
| DATE ENTERED AT CSC COVANSYS | | SIGNATURE | |

Retain: A COPY OF THIS FORM WITH COPIES OF THE TADS, ISSUED MANUAL OR VOIDED VOUCHERS, AND BATCH CONTROL MODULE.

Retain: all copies at the District Office **FOR 5 YEARS PLUS CURRENT FEDERAL FISCAL YEAR.**

EP-5:EmergencyBatchControlForm



Surplus / Destruction Form # AM01001C

| Releasing Agency Information | | |
|------------------------------|--------|-------|
| From Agency: | | |
| Property Location: | | |
| Address 1: | | |
| Address 2: | | City: |
| County: | State: | Zip: |
| Location Contact: | | |
| Phone: | | |
| Email: | | |

Requested Date:

Action Requested:

Choose an item.

Surplus Number:

| Receiving Agency Information | | |
|------------------------------|--------|-------|
| From Agency: | | |
| Property Location: | | |
| Address 1: | | |
| Address 2: | | City: |
| County: | State: | Zip: |
| Location Contact: | | |
| Phone: | | |
| Email: | | |

| Line # | QTY | Item Description | Make/Model | Serial/VIN/Asset ID | Condition |
|--------|-----|------------------|------------|---------------------|-----------------|
| | | | | | Choose an item. |
| | | | | | Choose an item. |
| | | | | | Choose an item. |
| | | | | | Choose an item. |
| | | | | | Choose an item. |
| | | | | | Choose an item. |
| | | | | | Choose an item. |
| | | | | | Choose an item. |
| | | | | | Choose an item. |
| | | | | | Choose an item. |

Received By: _____

Date: _____

Released By: _____

Date: _____

Form # AM-01001C Surplus/Destruction Form – Revised 06/12/2014

EP-6: Surplus/Destruction Form