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I. INTRODUCTION

The following information is provided to the districts for incorporation into the District Emergency Plan. In contrast to commodity 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.

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WIC staff can not perform non-WIC duties prior to an emergency being declared or after the emergency declaration is no longer in effect.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, Public Health Emergency Response Plan (PHERP), Georgia Public Health Internal Operating Procedures Volume I, and the Georgia WIC Program Operating Plan. These plans should be followed in the event of an emergency or emergencies that disrupts 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 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 situation 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, Public Health Emergency Response Plan (PHERP). **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, radio, and 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 Director 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 health consequences associated with the emergency. The Office of the Director, 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 other.

Phase Three begins with allocation of additional resources (i.e. 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 Chief of the Office of Nutrition and WIC. 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? How many participants are affected? Can participants reach food instrument issuance sites?
3. How many grocery stores are closed due to the Emergency? Is retail purchase still feasible?
4. Are electric, water, communication, and/or transportation services disrupted?
5. How long will services be disrupted?
6. How best can the Georgia WIC Program assist with aiding the health district?
7. Has the area been declared a Federal emergency?

IV. CONCEPT OF OPERATION

A. General

The Office of Nutrition and WIC Director and / or designee shall keep an Emergency Plan folder. The Emergency Plan folder provides the current home addresses and telephone numbers for the Georgia WIC Program staff, the Regional Food and Nutrition Services Offices, District/County Public Health Unit Emergency Planning Coordinators, State Health Office Emergency Planning Coordinators, District Nutrition Services Directors, statewide and local chapters of the American Red Cross, U.S. Department of Agriculture Food Distribution Program, and other non-profit and private programs. Home addresses and telephone numbers are confidential and will be used only in an emergency.

B. Organization**Director of the Office of Nutrition and WIC 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 Office of Nutrition and WIC 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 Chief of the Office of Nutrition and WIC. The Chief of the Office of Nutrition and WIC 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. **Director** of the Office of Nutrition and WIC calls all Unit Directors, WIC Legal Officer(s), Executive Secretary, and Breastfeeding Coordinator.
2. Each Unit Director and Executive Secretary calls each of their subordinate staff.

WIC Unit managers and consultants will be responsible for coordinating staff and analyzing the emergency as follows:

The Systems Information Unit Manager (in conjunction with local District Nutrition Services Directors) will be responsible for ensuring that infant formula contracts contain a clause addressing alternative measures for acquisition and distribution of infant formula in the case of an emergency, coordinating mass shipment of supplies, storage, and coordinating the issuance of food vouchers to participants, including remote printing, equipment issues and emergency procurement of vouchers.

The Financial Unit Manager will be responsible for tracking and reconciling emergency related costs.

The Compliance Analysis Unit Manager will be responsible for documenting the use of the vouchers, ensuring that inventories are used appropriately, and ensuring that manual vouchers are available.

The Vendor Management Unit Manager will be responsible for informing local agency (ies) of authorized WIC vendors open for business.

The Nutrition Services Unit Manager will be responsible for assisting in

certification and food package issuance, nutrition education, and food safety preparation information.

The Breastfeeding Coordinator will be responsible for assisting with breastfeeding education support information.

Staff will be assigned to serve locations according to availability and needs.

State and Local Agencies

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 Office of Nutrition and WIC to meet a specific county's needs during an emergency.

The State and local agencies may be asked to assign staff to 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 should be maintained per pay period and kept on file.
2. The Staff Availability Form (**see Attachment EP-1**) must show which employees are available for emergency operations and when they were notified.
3. 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 help document hours worked (**see Attachment EP-4**).
4. The Communication Log (**see Attachment EP-3**) should show the communication made with respect to and during the documented emergency.

Contractors

Each entity that has a contract with the Georgia WIC Program must have a Plan of Operation for Emergencies, including H1N1, and submit the plan by April 30 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 within 24 hours of an emergency situation occurring:

- Interim State WIC Director, Seema Csukas at 404-657-2872; BB 678-733-3164; and
- Emergency Plan Coordinator, Candace Jones, at 404-657-8754; BB 678-429-4867

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 or an assurance that those services will resume as soon as practicable.
4. Assurance that notification will be provided to the Georgia WIC Program 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. Southside Medical Center: plan submitted and on file
3. CSC: plan submitted and on file
4. Federation of Southern Cooperatives: plan submitted and on file

C. Notification

Lines of communication during an emergency begin with local WIC offices contacting the main local agency office. Local agencies would contact their District Nutrition Services Director, who will contact the District Emergency Coordinator. The Georgia WIC Program Emergency Plan will be implemented following notification from the local District Nutrition Services Director, who has cleared these plans with his or her District Emergency Coordinator. The Georgia WIC Program will contact the State Health Office Emergency Coordinator and

appropriate WIC retail vendors.

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 Program Financial Unit, within seventy-two (72) hours after the emergency area returns to normal.

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 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. Staff must maintain and update the number of infants on special formula at all times. Securing formula for WIC infants affected by the emergency is the top priority of any 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 (along with disposable nipples and bottles). As soon as 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 State and local agency will share information to establish and maintain a list of retail grocery stores that remain in operation following the emergency. The State and local agency will notify participants of available 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 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. Special Formula/Hospital Based Formula: The Georgia WIC Program and local agency (ies) will estimate the quantity of special formula and hospital based formula needed to sustain services until normal operations are restored. The Georgia WIC Program will then take measures to ensure that affected local agencies have supplies in the types and quantities needed. This may include the Georgia WIC Program contracts with manufacturers, wholesalers, suppliers, retailers, and other local agencies. Procurement, shipment, and local storage of infant formula will be the responsibility of the Georgia WIC Program.
4. Food Vouchers: Local agencies should maintain at all times 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.

5. 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, or
 - 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 extend the length of certification of 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.
5. Districts/Clinics should consider requesting an extension of the processing standards for up to 15 days, for pregnant and breastfeeding women and infants.
6. Districts/Clinics should also consider implementing 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 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 should address:

1. Food safety
2. Meal planning
3. Food preparation
4. Nutrition needs of the individual
5. Safe water supply
6. General sanitation
7. Relocation shelters for emergency purposes

VI. RESOURCE REQUIREMENTS

The requirements for providing services to the Georgia WIC Program participants during an emergency includes providing: staff, certification equipment, computers, voucher issuance printers, supplies, infant formula, manual vouchers, TADs (pre-numbered and blank), a data set and /or Masterfile list of participants available electronically or hard copy, and transportation. See the information below:

A. Staff Requirements

1. Analyze the needs caused by the emergency as well as to monitor and control the response.
2. Coordinate the Georgia WIC Program staff and nutrition volunteers from around the state.
3. Schedule shifts for volunteers and help to obtain lodging at the emergency site.
4. Schedule and coordinate staff at the local office and the Georgia WIC Program.
5. Coordinate with local agency financial staff, as well as to monitor and track all emergency recovery 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 alternate location, if needed.
2. Plan to provide an electronic or hard copy of all procedures, forms, and documents that an alternate location may need in order to provide services either electronically or manually.

C. Infant Formula

1. 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 trucks).

D. Food Vouchers and 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. Print and ship pre-printed food vouchers to the emergency area.
4. Obtain a supply of both blank and pre-numbered TADs specific to the county or clinic.

E. Operational Retail Vendors

1. Local agencies should share information concerning which retail vendors are open or closed with the State office to ensure that up to date retail vendor information is available for participants.
2. The State office should share information concerning which retail vendors are open or closed with Local agencies to ensure that up to date retail vendor information is available for participants.

F. Clinic Data Set and/or Masterfile List

1. If possible, create an electronic data set of all WIC participants for the District /County/clinics that includes 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 an electronic data set is not possible, then ensure that the District and each County/clinic has a list of all WIC participants that includes certification status either in electronic or hard copy format. If necessary, pull the Masterfile list. However, understand that the Masterfile list is not an up to date report.
3. If possible, request your front end computer system contactor to generate these electronic data sets, lists, or hard copies for your District/Counties/clinics.

G. Transportation

1. Arrange transportation for volunteer staff.

2. Arrange transportation for local distribution of infant formula.

VII. TYPES OF EMERGENCIES

There are many types of emergencies that may occur in the State of Georgia. **Attachment EP-5** lists the type and probability of their occurrences.

VIII. MANUAL CERTIFICATION WITH VPOD OR MANUAL VOUCHER ISSUANCE

- A. CPA manually completes the appropriate Certification Form (Pregnant, Postpartum, Breastfeeding, Infants and Children). Complete Demographic information, Proof fields and Income Information (see Income Guidelines).
 1. If an applicant does not qualify for WIC, have the applicant sign the Certification Form, and complete the Notice of Termination/Ineligibility/Waiting List form. Copy and date the Proof and place them in the file.
 2. If a participant does qualify for the program, complete the same information above and begin to complete a Turnaround Document (TAD). Use a pre-numbered TAD for new participants and a blank TAD 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.
- B. CPA manually completes the nutrition assessment, food package assignment, and nutrition education and record this information on the Certification Form, Nutrition Questionnaire, Nutrition Education Flow Sheet, Growth Chart, and any other documentation forms necessary.
 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) and food package code (FPC)).
 - b. Confirm correct food package code (FPC) to issue.
 - c. Look up voucher codes and messages for food package.
 2. Women and Children
 - a. Look up voucher codes and messages for food package.
 - b. Watch for special situations – turning 1 year old, turning 2

- years old, postpartum breastfeeding type, 6 months postpartum, and breastfeeding infants.
3. Participants with qualifying conditions on special formulas
 - a. Review that Medical Documentation is complete.
 - 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 VPOD or 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.

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

- A. Verify that a client is in a valid certification period and last date vouchers were issued using the data set or Masterfile list of participants.
- B. CPA performs assessment and/or provides nutrition education if needed and documents in 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) and food package code (FPC)).
 - b. Confirm correct food package code (FPC) to issue.
 - c. Look up voucher codes and messages for food package.
 2. Women and Children
 - a. Look up voucher codes and messages for food package.
 - b. Watch for special situations – turning 1 year old, turning 2 years old, postpartum breastfeeding type, 6 months postpartum, and breastfeeding infants.

3. Participants with qualifying conditions on special formulas
 - a. Review that Medical Documentation is complete.
 - 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 VPOD or 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.

X. VPOD OR 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 correct package is issued.
 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) and food package code (FPC)).
 - b. Confirm correct food package code (FPC) to issue.
 - c. Look up voucher codes and messages for food package.
 2. Women and Children
 - a. Look up voucher codes and messages for food package.
 - b. Watch for special situations – Turning 1 year old, turning 2 years old, postpartum breastfeeding type, 6 months postpartum, and breastfeeding infants.
 3. Participants with qualifying conditions on special formulas

- a. Review that Medical Documentation is complete.
 - b. Look up voucher codes and messages for both halves of food package when applicable.
- D. Issue VPOD or 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.

XI. 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 designated as an area affected by a Declared Emergency:
 2. Determine which vouchers the participant has lost and need replacement.
 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 ID number
 - Name of participant
 - Clinic, County and District number
 - Name of staff member requesting the information
 - b. 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 of lost vouchers that have been cashed or not cashed from the CSC Help Desk, 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 and document on all voucher receipts, **“Replacement Vouchers-Declared Emergency.”**
6. Make and distribute up to four copies of the Lost/Stolen/Destroyed Voided Voucher Report:
 - 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 to the Compliance Unit.
 - e. Send one copy to the clinic that originally issued the vouchers if the participant picked up replacement vouchers at a different clinic.
7. Void all copies of previously issued vouchers that have been replaced vouchers that have NOT BEEN CASHED) in the computer system.

XII. 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 Systems Information Unit Manager and copying the **Director** of the Office of Nutrition and WIC.
3. ADP contractor printed vouchers will be delivered to identified sites by overnight delivery.

B. Receipt of ADP Contractor Printed Vouchers

1. ADP contractor printed vouchers will be delivered to each clinic (or box #1, if there is more than one (1) box) along with a Voucher Cycle Packing List and Voucher Registers.
2. Clinics will compare beginning and ending voucher numbers to those on the Clinic Voucher Cycle Packing List.
3. Any discrepancies must be reported immediately by telephone to the ADP contractor and to a Systems Information Unit staff member 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 one (1) year 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 to the ADP contractor and the Georgia WIC Program immediately. Missing shipments must also be reported to the ADP contractor and the Office of Nutrition and WIC.
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 register entries contain a participant's signature. Entries 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 registers, followed by the clerk's initials and date.
3. All voided vouchers must be stamped "Void" and mailed to the ADP contractor. (These vouchers should not be batched)
Mail all voided vouchers to:

CSC Covansys
1000 Cobb Place Blvd
Building 100, Suite 190
Kennesaw, Georgia 30144

Attn: John Reynolds
4. Voucher registers **should not** be mailed to the ADP contractor and must be retained by the clinic for three years plus the current Federal fiscal year.
5. Close-out must be completed by the fifth working day of the following month.

E. Batching and Processing Manual TADs

1. If a clinic can not enter TAD information into the front end computer system within fifteen (15) days of service, mail paper copies of TADs to the ADP contractor after receiving written approval from the Georgia WIC Program.
2. Count completed paper TADs and separate copies.

3. Complete Batch Control Form (**see Attachment EP-6**) for TAD copies, do not batch TADs with Manual Vouchers.
 4. Mail top copy of TADs with Batch Control Form to:

Covansys/CSC
P O Box 2507
Greenwood, IN 46142
 5. Create a Batch Control module with copies of the TADs and a copy of the Batch Control Form by date for future reference and verification.
 6. When TADs are received in the clinic from the ADP contractor, clerk must verify information against clinic copy of TAD. Correct any errors and resubmit information electronically.
- F. **Batching and Processing Manual Vouchers**
1. Count completed paper Manual Vouchers (both issued and voided) and separate copies.
 2. Complete Batch Control form for Manual Voucher copies, do not batch Manual Vouchers with TADs.
 3. Mail second copy of Manual Vouchers with Batch Control form to:

Covansys/CSC
P O Box 2507
Greenwood, IN 46142
 4. Create a Batch Control module with copies of the Manual Vouchers and a copy of the Batch Control form by date for future reference and verification.

XIII. TIPS FOR OPERATING A MANUAL SYSTEM

- A. Verify the Manual Voucher beginning number daily to ensure that you start with the correct batch. (Remember that there are now ten sets of vouchers)
- B. Set up cycle vouchers and Manual Vouchers on a long table with labels and large signs (e.g. ,W01-Issue five 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.

Communications Log

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

EMERGENCY DAILY WORK ACTIVITY LOG

DATE: ___/___/___

NAME: _____ SSN: _____

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: MUST ATTACH TO DISASTER EMPLOYEE LOG.

RETAIN COMPLETED LOG FOR USE IN DOCUMENTING FUTURE FEDERAL CLAIMS

EMERGENCY PROJECTIONS AND PLANNING ASSUMPTIONS

Basic Disaster Plan Hazard Probability			
Georgia is subject to many hazards, which could result in an emergency or disaster. The most current statewide composite hazards analyses follow:			
	Probability of Occurrence		
	High	Moderate	Low
Nuclear Attack			X
Tornado	X		
Flood	X		
Haz Mat Transportation	X		
Winter Storm	X		
Drought	X		
Power Failure			X
Urban Fire		X	
Wild Fire		X	
Transportation Incident (air, rail, sea)			X
Dam Failure			X
Hurricane/Tropical Storms			X
Haz Mat Fixed Facility		X	
Civil Disturbance		X	
Radiological Incident Fixed Facility		X	
Radiological Incident Transportation			X
Earthquake			X
Landslide			X
Subsidence (sink holes)			X
Other Hazards			X
*Repatriation			
*Heat Emergency			
*Airplane crash in a congested area			
*Train derailment in a congested area			
*Terrorist/bomb threat			

*These hazards have not been considered by GEMA.

Source: GEMA GEOP, 1995

GEORGIA WIC PROGRAM		BATCH CONTROL FORM	
		DATE	NUMBER
		/ /	/ /
DISTRICT/UNIT	CLINIC		
INSTRUCTIONS	<p>1. USE THIS FORM AS A COVER SHEET TO FORWARD ALL TADS (CERTIFICATIONS, UPDATES, TRANSFERS AND TERMINATIONS) AND ISSUED/VOIDED MANUAL VOUCHERS.</p> <p>2. DO NOT BATCH TADS WITH MANUAL VOUCHERS</p> <p>3. SUBMIT THIS FORM WITH THE <u>TADS AND ISSUED MANUAL VOUCHERS</u> TO:</p> <p style="padding-left: 40px;">CSC COVANSYS P.O. BOX 2507 GREENWOOD, IN 46142</p> <p>SUBMIT THIS FORM WITH THE <u>VOIDED MANUAL VOUCHERS</u> TO:</p> <p style="padding-left: 40px;">CSC COVANSYS 1000 COBB PLACE BLVD BUILDING 100, SUITE 190 KENNESAW, GEORGIA 30144 ATTN: JOHN REYNOLDS</p> <p>4. RETAIN A COPY OF THIS FORM IN THE CLINIC WITH COPIES OF THE TADS, ISSUED MANUAL VOUCHERS OR VOIDED MANUAL VOUCHERS, CREATING A BATCH CONTROL MODULE.</p>		
CSC COVANSYS INPUT SECTION	TYPE OF DOCUMENT	NUMBER IN BATCH	
	TURNAROUND		
	ISSUED MANUAL VOUCHERS		
	VOIDED MANUAL VOUCHERS		
COMMENTS:			
DATE SENT BY DISTRICT/UNIT		PREPARER'S SIGNATURE	
DATE RECEIVED AT CSC COVANSYS		SIGNATURE	
DATE ENTERED AT CSC COVANSYS		SIGNATURE	