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Nebraska WIC April 9th, 2024

Brief Description of Journey

• "The Journey application system (MIS) serves as an electronic benefit issuance system, facilitating the distribution of benefits to eligible participants. This application streamlines the administration process, making it more efficient for both agencies and those receiving WIC benefits across the state. In addition to benefit issuance, the Journey application plays a crucial role in determining eligibility for the WIC program. It includes features that assess and verify the eligibility of participants based on income, nutritional need, and other qualifying criteria. This comprehensive functionality ensures that assistance is directed to those who meet the program's requirements. "

Basic WIC Definitions

- Participation "Participating is defined as having received food benefits (at least one paper Food Instrument (FI) or issued food benefits) or had been exclusively breastfeeding and mom received food benefits within the date range or had been a breastfeeding mom whose infant(s) received food benefits."
- Enrollment "those with active certifications"
- Prevalence "the proportion of a population who have a specific characteristic in a given time period" (NIH)
- Risk A condition that may have a negative impact on the health of a participant.
- Risk Code An identifying number given to each risk.
- Referrals Made to or from WIC to give the participant/family an opportunity for improved health by contacting other programs/individuals about varying needs.

Essential Journey Reports

- Participation with Benefits
- <u>No Show</u>
- No Food Benefit Pickup
- Enrollment
- Missed Appointment
- Breastfeeding Prevalence

- <u>Referral Summary</u>
- **BFPC Contacts Summary**
- Formula and Medical Food Issuance
- Breastfeeding Equipment Due
- <u>Outreach</u>
- <u>ZIP Code</u>

Participation with Benefits

 Where is it found – Under Reports > Clinic Services Reports > Administrative Reports



Clinic Services Reports

- Administrative Reports

Unduplicated Participation by (

Participation with Benefits

• How to run the report – Select the Local Agency, the Month/Year, and whether the State Totals should be included (Yes/No)

Participatio	n with Benefit <i>s</i>				
Month	January 🗸	Year 2019	~		View Report
Local Agency	5 CENTRAL NEBRASKA COMML $ \sim $	State Totals Yes	~		
₫ - ₹1	of 13 🕨 🎽 🛞 🚱 🚔 [🔲 🔍 🔍 - 100%	6 -	Find Next	

Participation with Benefits

- Purpose as described in Journey:
 - This report is used to review WIC participation by participant category.
- Purpose as described by Local Agency directors:
 - Local agencies can use this report to track participation and enrollment each month.
 - As the local agency tries various outreach and retention efforts, this report can be used to see if there is a fluctuation of participation and enrollment from month to month.
 - If the local agency is targeting a certain participant category in outreach and retention efforts, this report can be used to see changes in participation and enrollment of that participant category each month.
 - Local agencies can use this report to review participation and enrollment with local agency staff at staff meetings to keep outreach and retention a priority at the agency, gain buy in for outreach and retention efforts, and brainstorm new strategies.

Participation with Benefits

articipatio	n with Benefits			
Month	January 🗸	Year	2020	\sim
Local Agency	5 CENTRAL NEBRASKA COMML $ \sim $	State Totals	Yes	\sim

- Running the report for January 2020 as shown above, we see the count of people who are participating by category in the time frame. The grand total participation is 32,807.
- Participation numbers will be less than the Enrollment.

Participation with Benefits Report January 2020										Print Date: 01/23/2024							
State Totals	Pregnant 2403	Fully BF 975	Part BF with FB 1321	Part BF No FB 213	Not BF 2434	Total Women 7346	Excl BF	Excl BF/ Comp 375	Not Excl BF 1767	Formula 5109	Total Infants 7772	Child 16978	Special Child 711	Total Child 17689	Grand Total 32807	Enrolled 37547	% of Enrolled with Benefits 87.38%
													1				
Local Agency/ Clinic	Pregnant	Fully BF	Part BF with FB	Part BF No FB	Not BF	Total Women	Excl BF	Excl BF/ Comp	Not Excl BF	Formula	Total Infants	Child	Special Child	Total Child	Grand Total	Enrolled	% of Enrolled with Benefits
5 - CENTRAL NEBRASKA COMMUNITY ACTION PARTNERSHIP	64	40	4	3	46	157	16	20	11	85	132	542	33	575	864	956	90.38%
15 - SPENCER	٤ 0	1	0	0	1	2	0	1	0	0	1	12	1	13	16	19	84.21%
16 - AURORA	4	3	0) 1	1	9	1	1	1	6	9	24	3	27	45	51	88.24%
20 - AINSWORTH	3	3	0	0	1	7	0	2	1	4	7	36	0	36	50	59	84.75%
26 - BROKEN BOW	13	9	0	2	12	36	2	6	2	17	27	101	7	108	171	192	89.06%

No Show

 Where is it found – Under Reports > Operation Reports > Monitoring Operations Reports
Reports





No Show

- Purpose as described in Journey:
 - This report identifies no-show rates by appointment types in a roll-up fashion from clinic to local agency to statewide.

- Purpose as described by Local Agency directors:
 - This report could be used by local agencies to see what their no show rate is and to see if there are drastic changes to their "no show" rate each month as they strive to reduce the number of no shows at their local agency.

No Show

 Running the report for January 2020, the No Show report shows how many appointments were reported as a "no show" where the participant(s) were not present.

No Show Report Print Date January 2020								
Totals	Appointment Type	Appointments	No Shows	Percent				
	Totals	16,862	2,844	16.9%				
	Add Baby	189	40	21.2%				
	Breast Pump	40	7	17.5%				
	Certification	2,175	298	13.7%				
	Clinic Breastfeeding Education	592	87	14.7%				
	Clinic High Risk Nutr Ed	24	5	20.8%				
	Clinic Midcert Mom	891	131	14.7%				
	Clinic Nutrition Education	6,599	1,027	15.6%				
	Custody Change	10	0	0.0%				
	Food Benefits	928	121	13.0%				
	Food Package Change	287	30	10.5%				
	Foster	7	3	42.9%				
	Lost/Stolen Cards	137	8	5.8%				
	Nutrition Education Class	53	30	56.6%				
	Recertification	4,384	977	22.3%				
	Transfer	89	8	9.0%				

Weight Check

Year 2020

457

72

15.8%

 \sim

No Show

Month January

No Food Benefits Pickup

 Where is it found – Under Reports > Clinic Services Reports > Food Benefit Reports



No Food Benefits Pickup

• How to run the report – Select Local Agency, then select View Report

No Food Benefits Picku	ıp
Local Agency	~

View Report

No Food Benefits Pickup

- Purpose as described in Journey:
 - Local agencies can use this report to identify participants who have missed or haven't scheduled their nutrition education visits and have not been issued food benefits. Local agencies can call those participants to schedule their appointments so they can continue to receive WIC food benefits.

No Food Benefits Pickup

No Food Benefits Pickup

Local Agency 5 CENTRAL NEBRASKA COMML V

✓ (Select All)

 Running the report for all Local Agencies, the report identifies participants that have not received food benefits for a period of time, are about to be terminated for nonparticipation, and do not have an appointment scheduled.

Local Agency/Clinic	Family ID	Auth Rep Name	Participant Name	Primary Phone	Most Recent FDTU	Categorical Eligibility End Date	Category
10 DOUGLAS COUNTY HEALTH DEPARTMENT							
101 Midtown WIC							
	1111111	Toucan Sam	Honey Monster	123-456-7890	03/01/2023	02/28/2026	Child
104 Nebraska Medicine Olson Center							
				X	03/01/2023	02/29/2024	Breastfeeding
135 West Omaha WIC							
					11/01/2021	09/30/2024	Child
333 One World - Main Clinic							
	· · · · · · · · · · · · · · · · · · ·				02/01/2023	02/28/2027	Child
				· · ·	03/01/2023	02/28/2027	Child

No Food Benefits Pickup Report

Print Date: 02/06/2024

Δ

Where is it found – Under Reports > Clinic Services Reports > Reports
Administrative Reports

Image: Second seco

Clinic Services Reports
Administrative Reports
Assessment and Education Report
Second Services Reports
Client Services Reports
Food Benefit Reports
Finance Reports
Operation Reports
System Administration Reports
Scheduler Reports
Scheduler Reports
Vendor Management Reports

Clinic Services Reports
Administrative Reports
Clinic Activity by Staff Pr
Clinic Activity Summary
Duplicate Records
Enrollment
Enrollment by Priority
Family Labels
Ineligible by Income
Ineligible
Participation with Benefit
Participation with Benefit
Signature Capture Exce
Termination by System
Terminated by System

-- Transfer Out -- Unduplicated Participatic -- Unduplicated Participatic -- Unduplicated Participatic

• How to run the report – Select the Local Agency, the Month, the Year, and whether the State Totals should be included (Yes/No)

Local Agency Month <select a="" value=""> Year State Totals Yes</select>
Year State Totals Yes 🗸

- Purpose as described in Journey:
 - This report is used to review WIC enrollment (those with active certifications) by participation category.
- Purpose as described by Local Agency directors:
 - Can use this report to determine if outreach efforts were worth it, or if we need more outreach efforts.
- Participation categories are seen as Women, Infants, and Children. There are further breakdowns of each category within the report.

rollment				
ocal Agency	5 CENTRAL NEBRASKA COMML $ \sim $	Month	January	~
'ear	2020	State Totals	Yes	~

Print Date: 01/23/2024

- Running the report for January 2020 we can see all the enrollment information. The grand total for state enrollment was 37,547 participants.
- Enrollment numbers will be greater than Participation. Total enrollment can also be viewed in the Participation with Benefits report.

					Janu	iary 2020							
State Totals	Pregnant	Breast- feeding	Not Breast- feeding	Total Women	Excl Breast- feeding	Excl BF/Comp	Not Excl Breast- feeding	Formula	Total Infants	Child	Special Child	Total Child	Grand Total
	2,668	2,953	3,040	8,661	593	389	1,929	5,644	8,555	19,489	842	20331	37,547
Local Agency/Clinic	Pregnant	Breast- feeding	Not Breast- feeding	Total Women	Excl Breast- feeding	Excl BF/Comp	Not Excl Breast- feeding	Formula	Total Infants	Child	Special Child	Total Child	Grand Total
5 CENTRAL NEBRASKA COMMUNITY ACTION PARTNERSHIP	72	50	57	179	17	20	11	95	143	599	35	634	956
15 SPENCER	0	1	1	2	0	1	0	0	1	15	1	16	19
16 AURORA	4	4	1	9	1	1	1	6	9	29	4	33	51
20 AINSWORTH	4	4	1	9	0	2	1	4	7	43	0	43	59
26 BROKEN BOW	13	12	16	41	3	6	2	24	35	109	7	116	192
30 BURWELL	3	2	2	7	0	1	1	3	5	16	6	22	34
35 GREELEY	0	0	1	1	0	0	0	1	1	12	0	12	14
40 ATKINSON	1	1	0	2	1	0	0	0	1	19	1	20	23
41 O'NEILL	25	8	21	54	3	2	2	33	40	119	4	123	217
45 ST. PAUL	4	1	1	6	0	1	1	2	4	36	3	39	49
60 CENTRAL CITY	2	2	2	6	1	0	1	2	4	43	1	44	54
85 LOUP CITY	3	5	4	12	3	2	0	8	13	43	3	46	71
90 ORD	8	5	4	17	3	2	2	8	15	59	3	62	94
95 VALENTINE	5	5	3	13	2	2	0	4	8	56	2	58	79

Enrollment Report

Missed Appointment

• Where is it found – Under Reports > Scheduler Reports



Reports

Clinic Services Reports Operation Reports System Administration Report Scheduler Reports Appointment Summary High Risk Missed Appointme Interpreter Needs Mass Rescheduling Missed Appointment - Processing Standards Non-Vendor Management Reports

Missed Appointment

 How to run the report – Select the Local Agency, the Start and End Date, Appointment Type, Participant Category, and the Column. Then, select View Report.

Missed Appointn	nent			
Local Agency	~	Start Date		View Report
End Date		Appointment Type	~	
Participant Category	~	Column	~	

Missed Appointment

- Purpose as described in Journey:
 - This report identifies participants who do not keep their appointments or who cancel without rescheduling, especially pregnant women.

- Purpose as described by Local Agency directors:
 - This report could be used by local agencies to call participants if they have missed an appointment or cancelled their appointment without scheduling a new one and see if they would like to make a new appointment.

Missed Appointment

Missed Appointn	nent			
				1
Local Agency	5 CENTRAL NEBRASKA COMML $ \smallsetminus $	Start Date	1/1/2020	
End Date	12/31/2020	Appointment Type	Certification, Recertification	\sim
Participant Category	Pregnant, Breastfeeding, Not I $ \smallsetminus $	Column	00 Food Benefits/Nutrition Ed.	\sim

 Running the report for the shown filters, we see participants who have missed certain appointment types and reasons within the time frame. Missed Appointment Report 01/01/2020 - 12/31/2020 Print Date: 01/23/2024

Agency/Clinic	Participant Category	Column	Auth Rep Name	Participant Name	Family ID	Appt Type	Appt Dt	Primary Phone	Alternate Phone	Preferred Lang	Cert End Dt
40-BLUE VALLEY COMMUNITY ACTION											
5-DAVID CITY											
	Child	00 Food Benefits/N utrition Ed.	Cap'n Crunch	Tony Tiger	111111	Recertificatio n	07/22/2020	Do Not Call	Do Not Call	English	07/31/2020
			I		Ī	Recertificatio n	07/22/2020	1			01/31/2022
			1			Recertificatio n	07/22/2020				11/30/2023
16-CRETE											
	Child	00 Food Benefits/N utrition Ed.	1			Recertificatio n	12/04/2020	1	Do Not Call	Spanish	
21-SEWARD											
	Child	00 Food Benefits/N utrition Ed.	,			Recertificatio n	05/19/2020	Do Not Call	Do Not Call		05/31/2020

Breastfeeding Prevalence

 Where is it found – Under Reports > Clinic Services Reports > Breastfeeding Reports



Reason Ceased Breastfeeding

Breastfeeding Prevalence

 How to run the report – Select Local Agency, Ending Month, Ending Year, and State Totals (Yes/No)

Breastfeedi	ing Prevalence			
Local Agency	~	Ending Month	<select a="" value=""></select>	\sim
Ending Year		State Totals	Yes	\sim

Breastfeeding Prevalence

• Purpose as described in Journey:

- This report is used to evaluate the number and proportion of infants/children who exclusively breastfed ...[at different ages]... It is used to evaluate the age to which breastfeeding continued during infancy and childhood and to track trends. There are three categories of columns, Exclusively Breastfed, Ever Breastfed, and Breastfeeding Duration. Durations are dependent upon when the last nutrition interview was recorded. A participant may be counted in more than one age category based on age reached by/on their date of visit.
- The data for the report is gathered from all the interviews that were conducted during the 12 months prior to the report end date parameter. If an infant/child was not interviewed during this period, the infant/child is not counted. In order to be calculated in the numerator or the denominator, the child must have reached the age of the column title by the time of the interview.
- Purpose as described by Local Agency directors:
 - Evaluate the number and proportion of infants/children who exclusively breastfed and partially breastfed at different points in time as well as the age to which breastfeeding continued during infancy and childhood and to track trends.

Breastfeeding Prevalence

eastfeed	ing Prevalence			
ocal Agency	5 CENTRAL NEBRASKA COMML $ \smallsetminus $	Ending Month	January	~
nding Year	2020	State Totals	Yes	~

 Running the report for the above filters, we can see the prevalence of breastfeeding (%) for younger participants up to 24 months. Breastfeeding Prevalence February 2019 - January 2020 Print Date: 01/23/2024

State Totals	Excl BF 1 Wk	Excl BF 3 mo	Excl BF 6 mo	Ever BF	1Wk	2Wk	3Wk	4Wk	5Wk	6Wk	2M	3M	6 M	9 M	12M	18M	24M
	42%	20%	12%	80%	68%	68%	66%	60%	60%	58%	54%	47%	37%	33%	33%	17%	10%
	3326	997	549	27086	5459	4739	4148	3571	3375	3088	2692	2384	1725	1078	814	440	230
Local Agency/Clinic	Excl BF 1 Wk	Excl BF 3 mo	Excl BF 6 mo	Ever BF	1Wk	2Wk	3Wk	4Wk	5Wk	6Wk	2M	3М	6M	9 M	12M	18M	24M
5 CENTRAL NEBRASKA COMMUNITY ACTION PARTNERSHIP	67%	38%	28%	83%	69%	63%	60%	56%	58%	57%	53%	49%	47%	43%	31%	17%	6%
	97	41	32	741	100	82	77	64	63	56	52	53	55	40	28	12	4
15 SPENCER	100%	100%	100%	74%	100%	100%	100%	100%	100%	100%	100%	100%	50%	0%	0%	0%	0%
	1	1	2	14	1	1	1	1	1	1	1	1	1	0	0	0	0
16 AURORA	75%	36%	38%	89%	75%	75%	88%	75%	75%	63%	63%	55%	50%	67%	67%	0%	0%
	6	4	3	42	6	6	7	6	6	5	5	6	4	2	2	0	0
20 AINSWORTH	71%	67%	30%	83%	86%	75%	71%	71%	75%	75%	67%	67%	70%	55%	33%	20%	0%
	5	6	3	50	6	6	5	5	3	3	4	6	7	6	2	1	0

Referral Summary

 Where is it found – Under Reports > Clinic Services Reports > Client Services Reports



Referral Summary

 How to run the report – Select Local Agency, Start Date, End Date, and Organization Type. Then, select View Report.

Referral Summary				View Peport
Local Agency	~	Start Date		view report
End Date		Organization Type	\sim	

Referral Summary

- Purpose as described in Journey:
 - This report supports the analysis of outreach and referral program effectiveness by reporting the number of referrals from each organization to WIC and the number of participants referred from WIC to each organization type.
- Purpose as described by Local Agency directors:
 - This report could be used by local agencies to see how well an outreach effort is working to refer new participants to the program.

Referral Summary

ocal Agency.	5 CENTRAL NEBRASKA COMML $ \smallsetminus $	Start Date	1/1/2020	
nd Date	12/31/2020	Organization Type	Immunizations, Dental, Health	\sim

 Running the report for the shown filters, we can see what types of referrals were sent "To" and "From" different organizations and types.

	Referral Summary Report 01/01/2020 - 12/31/2020						
Local Agency/Clinic	Count	From/To	Organization Type	Organization Name			
5 CENTRAL NEBRASKA COMMUNITY ACTION PARTNERSHIP							
15 SPENCER							
	1	From	Health Care Provider				
	1	То	Breastfeeding Peer Counselor				
	6	То	Dental				
	1	То	Early Development Network	EDN- O'Neill Region #8			
16 AURORA							
	1	From	Early Development Network	Sixpence St. Paul			
	1	From	Medicaid				
	1	То	Breastfeeding Peer Counselor				
	1	То	Breastfeeding Support				
	4	То	Dental				
				Reichardt Dental - Aurora			
	1	To	Food Resources	Access Nebraska - SNAP			
	3	То	Health Care Provider				
	3	То	Immunizations				
				Central District Health Dept.			

BF PC Contacts Summary

 Where is it found – Under Reports > Clinic Services Reports > Breastfeeding Reports



BF PC Contacts Summary

 How to run the report – Select Start Date, End Date, and State Totals (Yes/No). Then, select View Report.

PC Contacts Summary	View Report
art Date End Date	
ate Totals Yes 🗸	

BF PC Contacts Summary

- Purpose as described in Journey:
 - This report summarizes detailed information about the type (telephone, support, no answer, home visit, clinic visit, etc.) and frequency of contacts made by the breastfeeding peer counselor (BF PC) during a selected date range. It is used to help management staff understand the utilization of the BF PC. This is a monitoring and management tool that may show areas where additional training is needed.
- Purpose as described by Local Agency directors:
 - Way to keep make sure BFPC are reaching out to those on their caseload [scheduling and FTE].

BF PC Contacts Summary

Start Date	1/1/2020	 End Date 12/31/2020	
State Totals	Yes 🗸		

 Running the report for one year and including State Totals we see the ways that the BF PC have interacted with participants through the type and frequency of contacts to monitor and manage BF PCs.

BF PC Contacts Summary Report 01/01/2020 - 12/31/2020

Print Date: 01/23/202

State Totals	No Answer	Telephone Support	Clinic Visit	Peer Support Group	Home Visit	Hospital Visit	Mailing	Other	Prenatal	Postpartum
	4027	4894	319	44	10	11	778	8257	6028	12312

Local Agency/Clinic	BF PC Name	No Answer	Telephone Support	Clinic Visit	Peer Support Group	Hom e Visit	Hospital Visit	Mailing	Other	Prenatal	Postpartum
5 CENTRAL NEBRASKA COMMUNITY ACTION PARTNERSHIP		379	193	1	0	1	0	176	637	573	814
15 SPENCER		11	4	0	0	1	0	15	48	33	46
	Snap	11	4	0	0	1	0	15	48	33	46
16 AURORA		12	3	0	0	0	0	5	20	9	31
	Crackle	2	0	0	0	0	0	0	8	0	10
	Рор	10	3	0	0	0	0	5	12	9	21

Formula and Medical Food Issuance

• Where is it found – Under Reports > Clinic Services Reports > Food Benefit Reports



Formula and Medical Food Issuance

 How to run the report – Select Local Agency, Formula/Medical Food, Start Date, End Date, and State Totals (Yes/No).

Formula an	d Medical Food Issuar	ice		
Local Agency		\sim	Formula/Medical Food	View Report
Start Date			End Date	
State Totals	Yes 🗸			

Formula and Medical Food Issuance

- Purpose as described in Journey:
 - This report identifies participants who are on a specific formula or medical food so information about specific products can be routed to a target audience. Uses of this report include viewing participants with special formulas and producing a list of formulas for use in processing recalls.
- Purpose as described by Local Agency directors:
 - Used to look for who is on a specific formula or medical food. Best to run for specific formulas.

Formula and Medical Food Issuance

Running the report for the above filters, we can see the participants who have used specific formulas as well as participants category and reason for specific formulas or food.

End Date

Formula and Medical Food Issuance Report

Formula/Medical Food Alfamino Infant Powder 14.1 o 🗸

12/31/2020

01/01/2020 - 12/31/2020

State Totals	# Participants
Alfamino Infant Powder 14.1 oz	29
Alfamino Junior Powder 14.1 oz	19
Boost Breeze 8 oz	12

Start Date

State Totals Yes

Formula and Medical Food Issuance

Local Agency 5 CENTRAL NEBRASKA COMML V

1/1/2020

Formula and Medical Food Issuance Report 01/01/2020 - 12/31/2020

 \sim

Print Date: 01/23/2024

Formula or Medical Food	Person ID	Participant Name	Category	Risk Factors	FDTU	Rx Renewal Dt	Spec Form Reason
						_	#Participants = 114
Similac Alimentum Powder 12.1 oz	111111	Boo Berry	Child	359	05/01/2020	05/31/2020	Milk Soy Protein Intolerance
	_	Count Chocula	Infant		05/01/2020	10/30/2020	Other Qualifying Medical Condition
		Trix Rabbit	Infant		05/01/2020	11/30/2020	Other Qualifying Medical Condition
		Yummy	Infant		06/01/2020	11/30/2020	Other Qualifying Medical Condition
	Similac Alimentum Powder 12.1 oz	Formula or Medical Food Person ID Similac Alimentum Powder 12.1 oz 1111111	Formula or Medical Food Person ID Participant Name Similac Alimentum Powder 12.1 oz 111111 Boo Berry Count Chocula Trix Rabbit Yummy Yummy	Formula or Medical Food Person ID Participant Name Category Similac Alimentum Powder 12.1 oz 111111 Boo Berry Child Count Chocula Infant Infant Trix Rabbit Infant Yummy Infant	Formula or Medical Food Person ID Participant Name Category Risk Factors Similac Alimentum Powder 12.1 oz 111111 Boo Berry Child 359 Count Chocula Infant Trix Rabbit Infant 111111 Yummy Infant Infant 111111	Formula or Medical Food Person ID Participant Name Category Risk Factors FDTU Similac Alimentum Powder 12.1 oz 111111 Boo Berry Child 359 05/01/2020 Count Chocula Infant 05/01/2020 Trix Rabbit Infant 05/01/2020 Vummy Infant 05/01/2020 05/01/2020 05/01/2020	Formula or Medical FoodPerson IDParticipant NameCategoryRisk FactorsFDTURx Renewal DtSimilac Alimentum Powder 12.1 oz111111Boo BerryChild35905/01/202005/31/2020Count ChoculaInfant05/01/202010/30/202010/30/202010/30/2020Trix RabbitInfant05/01/202011/30/202011/30/2020YummyInfant06/01/202011/30/2020

Breastfeeding Equipment Due

 Where is it found – Under Reports > Clinic Services Reports > Breastfeeding Reports



Breastfeeding Equipment Due

• How to run the report – Select Local Agency, then select View Report.

Breastfeeding Equipment Due	View Report
Local Agency V	

Breastfeeding Equipment Due

• Purpose as described in Journey:

- This report is used to identify participants that currently have serialized breastfeeding equipment assigned to them. It contains contact/return date, date issued, type of equipment, serial number and reason issued. It is used by lactation staff to make follow up counseling contacts/call to promote breastfeeding, assist with pumping needs, and to retrieve pumps timely. The report shows all serialized breastfeeding equipment due within the current calendar month or equipment that is past due.
- Purpose as described by Local Agency directors:
 - Making sure clients are returning their equipment.

Breastfeeding Equipment Due

 Running the report for all LA's we see the identifying information of the family and when the equipment needs to be returned.

Local Agency/Clinic	Contact/Return Date	Date Issued	Auth Rep Name	Family ID	Primary Phone	Equip Type	Serial #	Reason Issued
5 CENTRAL NEBRASKA COMMUNITY ACTION PARTNERSHIP	,							
26 BROKEN BOW	1							
	12/31/2019	09/18/2019	Woody Woodpecker	11111	111-222-3333	Lactina Electric Pump	686440	Increase Milk Supply
			1					
41 O'NEILL								
	09/10/2022	08/10/2022				Lactina Electric Pump	686450	Engorgement
85 LOUP CITY	r							
	02/01/2019	12/04/2018]		Symphony Electric Pump	E-000273	Mom & Baby Separated
	05/01/2020	02/05/2020				Lactina Electric Pump	686440	Return to Work

Breastfeeding Equipment Due

Local Agency 5 CENTRAL NEBRASKA COMML $\, \smallsetminus \,$

Breastfeeding Equipment Due Report

Print Date: 01/23/2024

 Where is it found – Under Reports > Clinic Services Reports > Client Services Reports



 How to run the report – Select Local Agency and Clinic. Then, select View Report.

Outreach				
Local Agency	~	Clinic	~	

View Report

- Purpose as described in Journey:
 - This report is used by local agencies to share WIC information with other agencies to support their outreach to people in need. The data is reported by participant name, DOB, endorser name, address, and telephone number. It is sorted by clinic. LAs may want to dump data to Excel for mail merge. The distribution of this information should be only to programs that the state has a Memorandum of Agreement in place (listed on the Rights and Responsibilities document). The distribution is controlled by policy adherence, not the system.
- Purpose as described by Local Agency directors:
 - Use this all the time, but mostly because it has a lot of information. I will use it to find all pregnant moms on our caseload and filter them, then delete extra info we don't need. I use it to do a mass text to all pregnant moms to invite them to our baby shower. This particular report has their phone numbers AND their addresses (if we wanted to send a targeted mailer to them). But, we use it to send a text message. We don't want to invite ALL Clients to the baby showers, so this helps us filter them out. [Can be used to see which agencies are referring their clients to WIC].

		- L	

Local Agency 5 CENTRAL NEBRASKA COMML 🗸

Clinic 5 ALLIANCE, 5 DAVID CITY, 5

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• Running the report for all LA's and their clinics, we can see the contact information for families and use this for further communication with WIC participants.

CENTRAL NEBRASKA COMMUNITY ACTION PARTNERSHIP								
Clinic	Participant Name	Auth Rep Name	Primary Phone	Alternate Phone	Birth Date	Category	Address	
15 SPENCER								
	Thing 1	Dr. Seuss	987-654-3210	Do Not Call	06/07/2019	Child	123 Who St. Whoville, Somewhere	
	Thing 2	Dr. Seuss	Ī	Do Not Call	01/13/2022	Child	, , ,	
	T			Do Not Call	03/30/2020	Child		
	Ţ	Ī	-	Do Not Call	12/03/2023	Infant		
	Ţ	Ī	-	Do Not Call	09/22/1997	Breastfeeding		
	Ţ	Ī	T -	Do Not Call	02/06/2022	Child		
	Ţ	Ī	T -	Do Not Call	02/02/2023	Infant		

Outreach Report

 Where is it found – Under Reports > Clinic Services Reports > Client Services Reports



• How to run the report – Select the Local Agency, ZIP Code, then select View Report.

IP Code	View Report		
ocal Agency	✓ ZIP Code	~	

- Purpose as described in Journey:
 - This report identifies the number of participants in a ZIP Code.

- Purpose as described by Local Agency directors:
 - Used to determine the number of participants in a ZIP code. Can be used to manage clinic sites. Most useful to enter specific ZIP code areas. Totals may be of interest to community partners.

ZIP Code

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ZIP Code 06810, 18131, 22530, 38106, ∨

 Running the report for the above filters, we see what ZIP codes are covered by each clinic/LA and how many participants live in that ZIP code.

Local Agency/Clinic	ZIP Code	Family ID	Participant Name	Auth Rep Name	Primary Phone
5 CENTRAL NEBRASKA COMMUNITY ACTION PARTNERSHIP					
15 SPENCER					
	68713	11111	Strawberry Shortcake	Lemon-berry Shortcake	123-456-7890
	ZIP Total: 1				
	68755				
	ZIP Total: 2				
	68763			-	1
					1. S.
	ZIP Total: 2				

ZIP Code Report

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Before Moving On!!

• Before moving on to the application section, please know that in Journey there is a section called "Help" where further information about reports can be read.

• Select "Help" at the top of the Journey page and then select "User Help". For help on Reports select "Reports" then find the report you are needing assistance with.

How to Read and Understand Data

- Data can be presented in different ways
 - Numbers, percentages, fractions, graphs, and even in sentences!
- While being able to calculate data is important, understanding and practicing what has been learned is important too!
- Let's look at some examples using Journey reports...

Data Analysis Example #1

- Please run the Participation with Benefits report using May 2017, all local agencies, and include state totals.
 - For the month of May 2017, what were the participation numbers for Total Women, Total Infants, and Total Child in the state totals?
 - What percent of those enrolled participated in the state totals (received benefits)?

Data Analysis Example #2

- Now run the Participation with Benefits report for May 2022 including all local agencies and the state totals.
 - For May 2022, what was the percent of those enrolled that had received benefits in the state totals?
 - How did that change from May 2017? Did it increase, decrease, stay the same?

Data Analysis Example #3

- Please run the No Show Report for March 2022.
 - Look at the **<u>State Totals</u>** section.
 - What was the total number of appointments for March 2022?
 - What was the total number of No Shows for March 2022?
 - What percentage of appointments were No Shows?

Data Analysis Answers

- Example 1)
 - W 8,231
 - I 8,642
 - C 19,322
 - 85.16%
- Example 2)
 - 89.32%
 - Increase
- Example 3)
 - 18,625
 - 1,873
 - About 10%