Client Overview

Column	What should I be fixing?
D0	Each client should have either a permanent or temporary address or both.
D1	Because there is a permanent address a postal code is required.
D2	Because there is a temporary Winnipeg address a postal code is required.
D3	The mother or parent 1 should never have a FFS number. (This number should be in the child's file.) Admin staff is responsible for correcting this.
D4	Every live infant with a permanent address in Winnipeg should have FFS number. Admin staff is responsible for correcting this.
D5	Permanent and temporary Winnipeg residents should always have at least one active PHN if they are open. This applies to individuals whose file is open and who have visits tracked in them.
D6	For most records there should never be more than 1 active PHN. For some open records, there should never be more than 2 active PHNs, where two part time PHNs share a client.
D7	This family is not active with FF services so should not have an active FF Home Visitor
D8	For any closed file, the PHIN and name of permanent residents of Manitoba should not be missing. (Exception: PHINs can be missing from newborns for up to 8 weeks.) Admin staff is responsible for correcting this.
D9	For any closed file, there should be no active providers.
D10	Any closed file should not have a screen or parent survey and summary that is still draft.
D11	The client has a staged permanent or temporary postal code that needs to be corrected. Staged postal codes are: ROROR1, ROROR2, ROROR3, ROROR4, ROROR5, ROROR6, ROROR7, ROROR8, ROROR9, ROR1R0, ROR1R1, and ROR1R2.

Prenatal/Birth Episode

- Birth episodes are identified by date and time of birth to make them easier to find.
- There may be more than one birth episode in any perinatal episode. Birth episode errors may be in any or all multiple birth episodes. Birth episodes are entered only after June 9, 2014. These errors do not apply to prior births.
- If some of this information is missing from the Post Partum referral form, PHNs are requested to ask the client if it is appropriate and the client knows. In some cases the fields will stay empty.

Column	What should I be fixing?
P1	If there is prenatal referral, there should be an estimated delivery date in the prenatal episode.
B1	The following should be entered in the Birth Episode: Date of Birth. Admin will fix this error.
B2	The following should be entered in the Birth Episode: Status Admin will fix this error.
В3	The following should be entered in the Birth Episode: Gender Admin will fix this error.
B4	The following should be entered in the Birth Episode: Gestational Age Admin will fix this error.
B5	The following should be entered in the Birth Episode: Birth Weight Admin will fix this error.
B6	The following should be entered in the Birth Episode: Breastfeeding at Discharge. This does not apply in situations where there is a stillbirth or neonatal death. This may or may not apply in situations where the infant is apprehended or where the child has an extended hospital stay. Admin will fix this error.
B7	The following should be entered in the Birth Episode: Delivery Mode Admin will fix this error.

The following should be entered in the Birth Episode: Gravida Admin will fix this error.
The following should be entered in the Birth Episode: Para Admin will fix this error.
The following should be entered in the Birth Episode: Infant Discharged with Mother Admin
will fix this error.
The following should be entered in the Birth Episode: Breastfeeding at First PH Contact. This is
only an error if this information is missing in births on or after July1, 2015. This does not apply
in situations where there is a stillbirth or neonatal death. This may or may not apply in
situations where the infant is apprehended.
The infant does not have a relationship to link them to a parent. Confirm that this is correct.
There is a Screening Form duplicate. There are two screening forms that have the same FFS
screening form ID for a birth episode or the Screening Form is not in the birth mother's file.
This is not considered an error and does not apply if: (1) if there was more than one birth
episode (e.g., for twins there should be two screening forms), (2) the infant is not in the birth
episode data set such as may happen for some late entry families who moved to Manitoba
after birth, and (3) still birth (error the screening form out in this situation). If a co-parent is
considered the main parent then the screening form is in their file.
There is a duplicate survey for a FF screening identification number or there is a survey without
a screening number. This may be an error because of how the FFS ID number was entered.

Case Activity

Column	What should I be fixing?
A0	For every referral, there should be a case open in the Case Activity within 48 hours after the
	referral was generated unless there is already a pre-existing open status.
A1	Review whether any clients, other than prenatal clients, who have had no activity for the last
	three months should be closed/inactive. Families on the FF program should receive a PHN
	contact at least quarterly. Disregard this suggestion if you are still actively searching for a client
	or they are open for communicable disease-related follow up.

Referral

Column	What should I be fixing?
R1	Postpartum and infant referrals that come from the hospital and birth center should have a
	Date and Time of Discharge.
R2	Date and Time Referral Received At Central Intake is required for the following referral types:
	Breast Feeding, Discharge Information Sheet, Home Phototherapy, HSHR Post-Partum, Infant,
	Midwifery-Post-Partum, Midwifery-Prenatal, PC Discharge Information Sheet, PC Home
	Phototherapy, PC Infant, PC Post-Partum, PC Prenatal, Post-Partum, Prenatal.
R3	Date and Time Referred to Community Area and Referral Received by must be filled out.
R4	Referral Type is required for all referrals.
R5	Referral Source is required for all referrals.
R6	Referring Discipline is required for all referrals.
R7	Date and Time Referred to PHN should not be missing for permanent and temporary Winnipeg
	residents.

Visit

Column	What should I be fixing?
V1	Provider Name is required.
V2	If a visit is made by a FF Home Visitor, then the service level is required.
V3	Visit Length should be > 0
V4	Visits are always tracked in the file where the FF screen is.
	Visits must be associated with a screening form (it could be in draft or complete). If there is no screening form in the location where the visits are tracked it is probably an error. Visits entered into the wrong client file need to be transcribed into the client file containing the FF screening form. If visits are not in the client file with the screening form they are not counted for the purposes of Healthy Child Manitoba reporting.

Forms

Families First Screening (For Complete Screens)

- FFS form ID numbers identify the form needing correction.
- You can delete a screening form if it is in draft and cannot be completed in the event of a stillbirth or neonatal death. Any form that is marked complete can be reopened and made draft. There may be reasons for some omissions, but we want to ensure that our recording is as complete as possible.
- It is possible that all collected and available (e.g., from the postpartum referral) data has been entered. However, this is a reminder that what we normally would see the missing data in all FF Screening forms.

Column	What should I be fixing?
Sc0	Any closed file should not have a screen that is not saved and marked complete.
Sc1	'Is this a or adoptive parent' must be filled in when the screen is marked complete.
Sc2	For the Assessment Details section, a. Assessment Date, b. Assessed By, d. Families First Screening (FFS) Form ID Number are mandatory. Does not apply if there is a reason for no screen.
Sc3	For Parent 1 section, a. Screened Prenatally, b. Age, f. Residence Postal Code, and g. Education are required. Does not apply if there is a reason for no screen.
Sc4	For Child section, a. Birth Date, c. Sex are required
Sc5	For 'Development Risk Factors' section the following are expected to be there; 2. Low birth weight, 3. High birth weight, 4. Prematurity-an infant born at less than 37 weeks gestation, 6. Alcohol use by mother during pregnancy, 7. Drug use by mother during pregnancy, 11. Multiple Births, 12. Maternal smoking during pregnancy, 12a. If yes to maternal smoking during pregnancy # of cigarettes per day. Does not apply if there is a reason for no screen.
Sc6	For Family Risk Factors section, 15. Mother's age at birth of first child is less than 18 years, 18. Single parent family, and 32. Prolonged postpartum maternal separation, are mandatory. Does not apply if there is a reason for no screen.
Sc7	If Clinical Positive, the total score must be less than 3.
Sc8	If the answer was 'Yes' to (B.6) 'Alcohol use by mother during pregnancy', then section D should be filled out. (42-46) Does not apply if there is a reason for no screen.
Sc9	There is duplication of the Family First Screening ID

Parent Survey Summary Worksheet

- FFS form ID numbers identify the form needing correction.
- You can delete a Parent Survey and Summary form if it is in draft and cannot be completed because it is associated with a stillbirth or neonatal death. Any form that is marked complete can be reopened and made draft.

Column	What should I be fixing?
Su0	Any closed file should not have a parent survey and summary that is not saved and marked
	complete.
Su1	For Assessment Details section, a. Assessment Date, b. Assessed By, c. Screen Completion Date,
	d. Families First Screening (FFS) Form ID Number, e. [Families First Screening Score OR f. Screen
	Clinical Positive OR g. Reason for no Screen,] and h. Name of Parent 1 are mandatory.
Su2	If Survey Clinical Positive is yes, the total survey score should be less than 25.
Su3	If Date enrolled is filled then the postal code at Date of Enrollment must be entered. (The use
	of the 'Date enrolled' field was changed on April 1, 2015 to include any Date of disposition.)
Su4	Disposition is mandatory.
Su5	If e. Disposition is 'Enrolled' then k. 'Date of Discharge' is required for any survey marked as
	completed.
Su6	If k. Date of Discharge is there, then I. Reason for Discharge, n. Family's Service Level at
	Discharge and o. Postal Code at Date of Discharge are required.
Su7	If the 'Other reasons for Reason for Discharge' is selected, the Other Reason Notes should be
	filled in.
Su8	As of April 1, 2015 if any type of disposition is checked in the Parent Survey and Summary,
	there should be a date noted in the 'Date of enrollment' field. Despite the title, this field is
	used to identify the date of any disposition.
Su9	This error refers to the survey completion date and indicates that the Assessment date is later
	than the Enrollment date (out of sync).

Breastfeeding Clinic Appointment Visit Summary

• If this information is not available at the time of data entry, please connect with the PHN who submitted the form to provide it.

Column	What should I be fixing?
BC1	For Clinic Information section, a. Clinic Date, b. PHN Name, and c. Community Area of Clinic
	are required. Admin staff is responsible for correcting this.
BC2	For Visit Details section, a. Support Person Attended, b. First Visit, and c. Infant age in Days if
	less than a month OR d. Infant age in Months if greater than a month are mandatory. Admin
	staff are responsible for correcting this.
BC3	Referred by is mandatory. Admin staff is responsible for correcting this.
BC4	At least one Issues Encountered must be selected. If Other is selected, Details of Other
	should be filled in. Admin staff is responsible for correcting this.
BC5	At least one Interventions Recommended must be selected. If Other is selected, Details of
	other must be filled. Admin staff is responsible for correcting this.
BC6	Length of Visit in minutes is required. Admin staff is responsible for correcting this.