

Instructions for Completing the Maternal or Infant Plan of Care, Part 1

MIHP M002 (10/01/15)

These instructions are intended to clarify data fields that users have asked about in the past and to provide definitions for other fields to ensure that all users are interpreting them in the same way. If you have any questions about these instructions or think further written instructions are needed, please contact Deb Marciniak at marciniakd1@michigan.gov or 517 324-8314.

PAGE ONE

- **Care Coordinator:** Insert the name of the RN or SW who has been identified as the care coordinator.

NOTE: The educational topics listed on the *Plan of Care, Part 1 (POC 1)* were selected based on a comprehensive review of the maternal and infant health literature. Most of these topics reflect recommendations in *Michigan's Infant Mortality Reduction Plan*. See the plan at [Infant Mortality Reduction Plan - State of Michigan](#). The topics that are designated as "(4 x 4)" are taken from *The Michigan Health and Wellness 4 x 4 Plan*, which is intended to reduce obesity and promote wellness. See the plan at [The Michigan Health and Wellness 4 x 4 Plan - State of MI](#)

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There are five expected outcomes at the bottom of page two. When the RN or SW who administers the *Risk Identifier* signs this form, she is assuring that she has achieved each of these outcomes during the *Risk Identifier* visit:

- **Expected Outcome 1:** Check one or both boxes. If you check "text4baby," you are stating that you have assisted the beneficiary to sign up for text4baby, not just that you have talked to her or given her written information about it. Agencies are encouraged to give the education packet to the beneficiary **and** to assist her to sign up for text4baby.
- **Expected Outcome 2:** If the beneficiary is not participating in WIC, refer her during this visit. Do not wait until the next visit.
- **Expected Outcome 3:** This means beneficiary receives written information about the Healthy Michigan Plan. Information about the Healthy Michigan Plan can be found in the *MIHP Operations Guide* and at <http://www.michigan.gov/healthymiplan>.
- **Expected Outcome 4:** This means beneficiary receives written information about how to contact the MIHP agency if in need of assistance between scheduled appointments.
- **Expected Outcome 5:** This means that you offer to schedule the next appointment or tell the beneficiary when and how the next appointment will be scheduled.
- **RN and SW Signatures:** The RN or SW who administers the *Risk Identifier* signs and dates the *POC 1* on the date that the *Risk Identifier* was administered. The other professional signs and

dates the *POC 1* within 10 business days from the date of the first signature. Signature should include credentials indicating nursing registration or social work licensure.

If Agency is Missing a Discipline

- Beneath the signature line, write: *Agency is without SW (or RN) or in process of hire* or other language that indicates agency is of void of one discipline at the time the *POC 1* was completed.
- When the replacement SW or RN is hired, he or she must review and sign the *POC 1* on or near the signature line with the current date.

Why Cert Tool Indicator #27 – Plan of Care, Part 1 Gets Dinged at Certification Review

- a. **At least 80% of charts reviewed include a complete and accurate *Maternal Plan of Care, Part 1 (M002)* or *Infant Plan of Care, Part 1 (I002)* with:**
- 1) **Box checked indicating that beneficiary received the entire, current standardized *Maternal and Infant Education Packet* or received information about text4baby, or both**
 - 2) **Signatures and credentials of registered nurse and licensed social worker**
 - 3) **Signatures of registered nurse and licensed social worker dated within 10 business days of each other**
- ***POC 1* is not signed by both professionals within 10 business days.**
 - **Incorrect *POC 1* form is in the chart (maternal form is used for an infant beneficiary).**
 - **Beneficiary or professional is not identified on the *POC 1*.**
 - **No indication that education packet and/or text4baby was given at time of enrollment.**