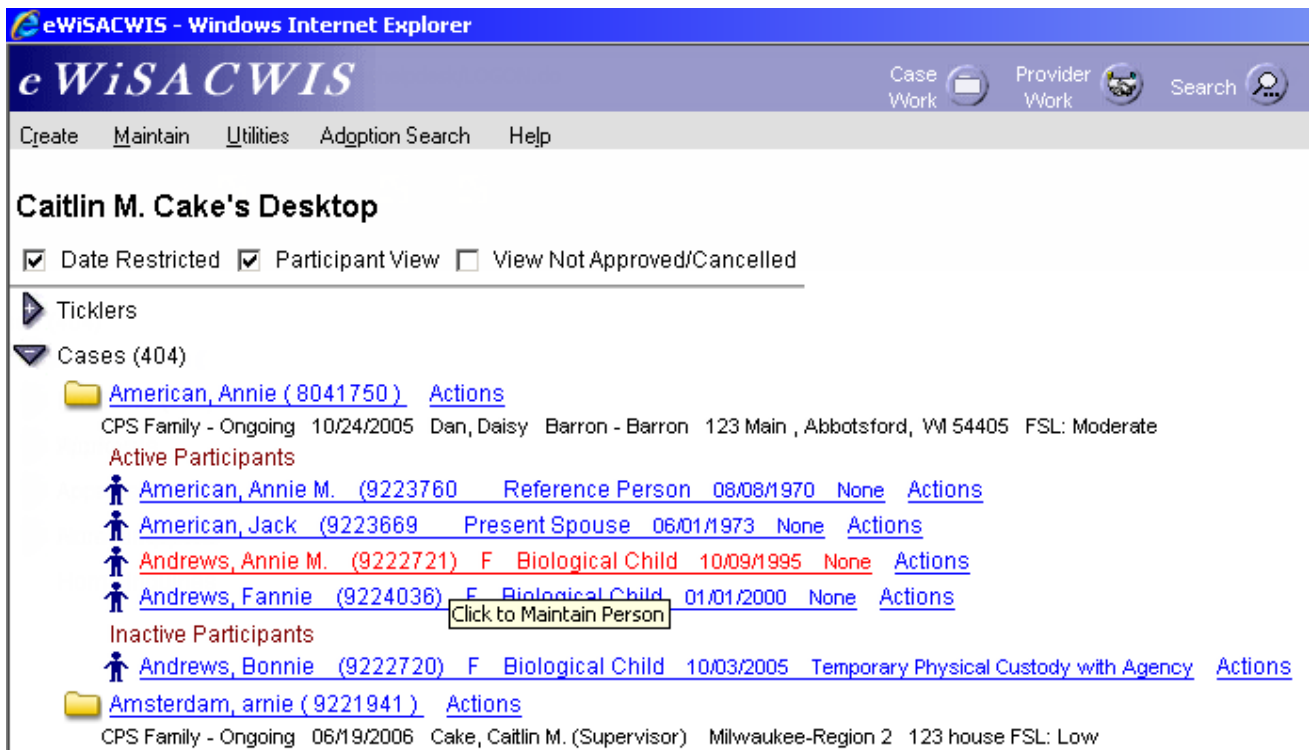


Person Management

1. From the desktop, there are two ways to access the Person Management page:
 - a. The first is to select the Participant View checkbox:



Then expand your case and select the participant to open the Person Management page:



b. The second is to click on the case name to open the Maintain Case page:



Then click on the name of the participant in the Active Participants group box (or Inactive Participants group box by expanding the Inactive Participants expando) to open the Person Management page:



- Among other demographic information, the Basic tab of Person Management displays the First and Last Names. These fields are editable and should be used when a name needs to be updated. Most of a person's demographic information is entered on this tab. The red fields are Adoption and Foster Care Analysis and Reporting System (AFCARS) elements. It is important to complete as much of this information as is appropriate and possible.

The Kids Data Comparison hyperlink will appear in the lower left corner of the Basic group box only when eWiSACWIS has received verified demographic or address information from KIDS. Clicking this hyperlink opens the KIDS Data Comparison page where the demographic and address information from KIDS can be accepted. See the KIDS Data Comparison Quick Reference Guide for additional information.

Person Management 'Andrews, Annie M.' ID:9222721 -- Webpage Dialog

eWiSACWIS TM Print Spell Check REC Help ?

Basic | Parent Info | Additional | Address | Education | Characteristics | Medical/Mental Health

Name
 ID: 9222721 Prefix: [] First Name: Annie MI: M Last Name: Andrews Suffix: []

Basic
 Gender: Female US Citizen Status: U.S. Citizen County Person ID: []
 Birth Date: 10/09/1995 Citizenship Verification: Birth Certificate SSN: 111-11-1111
 Commitment#: - Birth Place: [] Death Date: 00/00/0000
 Wisconsin Resident: Yes Identity: [] HSRS ID: []
 Religion: [] Marital Status: [] MCI ID: []
 Primary Language: English Interpreter Required

Race/Ethnicity/Tribal Identification
 Race: White Ethnicity: Caucasian Hispanic/Latino: No
 Race: [] Indian Tribe: [] Indian Tribe 2: []
 Race: [] Clan: [] Clan 2: []
 Race: [] Status: [] Status 2: []
 Race: [] Tribal Membership #: [] Tribal Membership # 2: []

Adoption Information
 Child was previously Adopted: No Type of Adoption: Details []
 Age Adopted: [] Pre-Adoptive Relationship to Child: [] Child Receives WI Adoption Assistance
 Options: [] **Go** **Save** **Close**
 Action
 Assets and Income

- The Parent Info tab allows for documentation of the child's mother and father and information about them: Marriage information Social/Mental/Physical Conditions. Information entered into the Adoption Referral group box will pre-fill into the Adoption Referral itself. The Search hyperlinks are used to search out the correct person for the corresponding sections.

Person Management 'Andrews, Annie M.' ID:9222721 -- Webpage Dialog

eWiSACWIS TM Print Spell Check REC Help ?

Basic Parent Info Additional Address Education Characteristics Medical/Mental Health

Person Information

Child's Mother: Annie M American [Search](#) [Edit](#) [Remove](#)

Spouse:

Type: Birth

Current Marital Status: Married

Mother Married at Child's Birth: Yes

Mother TPR

Current Relationship of Parents to Each Other:

Child's Guardian (1): [Search](#) Child's Guardian (2): [Search](#) Relinquishment Case

Child's Father: Jack American [Search](#) [Edit](#) [Remove](#)

Spouse:

Type: Adjudicated PA Number:

Current Marital Status: Married

Father Married at Child's Birth: Yes

Father TPR

Adoption Referral

Birth Mother

Social/Mental/Physical Conditions:

Birth Father

Social/Mental/Physical Conditions:

Options:

- The Additional tab is used to identify AKA Names (other names the participant may or have used such as maiden names, nicknames, previous married names, and aliases). The Search function (used elsewhere in the system) can be used to search based on the AKA Names if the information has been entered on this tab. Background Checks which have been completed are displayed on this tab (see the Background Check Quick Reference Guide). This tab also documents whether the child is a Teen Parent and Kinship information. Finally, relationships between all participants in a case are displayed on this tab.

Person Management 'Andrews, Annie M.' ID:9222721 -- Webpage Dialog

eWISACWIS TM Print Spell Check Help

Basic Parent Info **Additional** Address Education Characteristics Medical/Mental Health

AKA Names

Entry Date	Type	First Name	Last Name	MI	Delete
04/27/2010	Also Known As	Ann	Andrews		Delete

Insert

Background Checks

Background Checks

Type	Date	Effective To	Updated By
No records found.			

Insert

Child Information

Child is a Teen Parent CARES PIN:

Teen Parent's Child Resides with Him/Her Monthly Amount of any Child Unearned Income:

Teen Parent's Child Receives a Kinship Payment Child Receives a Disability Payment

Relationship

Case ID	First Name	Last Name	MI	Relationship	Entry Date
9221587	Bonnie	Andrews		Biological Child	10/24/2005

Options: **Go** **Save** **Close**

- 5. The Address tab is used to document current and historical addresses that the participant is/was associated with. When creating an Out of Home Placement, the system will automatically update the child’s current Primary Residence address (on the Address tab of Person Management) with the provider’s address and the address will not be editable.

When the View All Addresses checkbox is unchecked, all addresses associated with the Person record where the “Entry Date” is equal to the “End Date” will be hidden from view and not displayed. When the checkbox is checked, all addresses associated with the Person record will be displayed on the page.

The Insert button on the bottom of the page will allow a new address to be inserted.



6. There are a number of Types of addresses a person can have: Primary Residence, Mailing, Secondary Residence, Responsible Person, Last Known, Parent Home Address, Parent Not Residing in Household, and Work. Select the appropriate Type. The Entry Date defaults to today's date but can be updated.

The screenshot shows a web browser window titled "Address Management 'Andrews, Annie M.' ID: 9222721 -- Webpage Dialog". The page header features the "eWiSACWIS" logo and navigation icons for Print, Spell Check, and Help. The main content area is divided into three sections: Name, Address, and Phone. The Name section shows "Name: Andrews, Annie M." and "ID: 9222721". The Address section includes a dropdown for "Type", "Entry Date: 10/15/2010", and "End Date: 00/00/0000". It also has input fields for "C/O", "Street", "Apt", "County of Residence", "WI City", "City", "State: WI", "ZIP", and "Country: United States". The Phone section has input fields for "Phone", "Ext", "Cell", "Alt Phone", "Alt Ext", "Fax", "E-Mail", and "Secondary E-Mail". At the bottom right of the form are "Save" and "Close" buttons. The browser's status bar at the bottom indicates "Internet".

Name
Name: Andrews, Annie M. ID: 9222721

Address
Type: [dropdown] Entry Date: 10/15/2010 End Date: 00/00/0000
C/O: [input]
Street: [input] [input] [input] Apt: [input]
County of Residence: [dropdown]
WI City: [dropdown]
City: [input] State: WI ZIP: [input] Country: United States [dropdown]

Phone
Phone: [input] Ext: [input] Cell: [input] Alt Phone: [input] Alt Ext: [input] Fax: [input]
E-Mail: [input] Secondary E-Mail: [input]

Save Close

Internet

- The Education tab is a record of a child's education history. See the Education Records Quick Reference Guide for additional information.

Person Management 'Andrews, Annie M. (9222721)' -- Webpage Dialog

eWiSACWIS TM Print Spell Check Help

Basic Parent Info Additional Address **Education** Characteristics Medical/Mental Health

Basic Education Information

Child is less than age five and does not attend early education or day care.
 School district has been notified of child's placement (if age two or older).

The child is in an early intervention program.

Child is in day treatment.
 Child was attending school but is currently listed as missing from the out-of-home placement.

Child is of school age but is not attending school. Provide explanation.

Child is Currently Enrolled in School
 Highest Grade Level Completed:

Diploma/Certificate: Diploma/Certificate Date:

Anticipated High School Graduation Date:
 Date High School Graduation Reported:

Individualized Education Plan

Child has an individualized education plan
 Copy of IEP in Record
 Extended School Year
 Last Updated By: Caitlin M. Cake

Date of Current IEP:
 Date Current IEP Expires:
 Date Last Updated: 09/26/2011

School District Jurisdiction History

School District of	Start	Reason for Change	Contact Person	Phone
Options: <input type="text"/> <input type="button" value="Go"/>				

8. The Characteristics tab, which consists of both AFCARS and NCANDS elements, is used to document a person’s Disability/Special Needs Information, Chronic/Medically Complex Conditions, Health Status Outcome Measures, and Substance Use/Behavior Problems. Primary Caretaker(s) Information can also be documented here. Before a case can be closed, the system requires a value be selected from the “Person has a Clinically Diagnosed Disability” drop-down. If Yes is selected, at least one disability must be identified. Any Standard Program Services, entered via Maintain > Standard Program Services, will also appear on this page (see “Standard Program Services” Quick Reference Guide for additional information).

Person Management 'Andrews, Annie M. (9222721)' -- Webpage Dialog

eWiSACWIS TM Print Spell Check Help

Basic Parent Info Additional Address Education **Characteristics** Medical/Mental Health

Disability/Special Needs Information

Person has a Clinically Diagnosed Disability: [Details](#)

Learning Disability [Details](#)
 Other Medically Diagnosed Conditions [Details](#)
 Emotionally Disturbed [Details](#)

Mental Retardation [Details](#)
 Asthma [Details](#)
 Diabetes [Details](#)
 Anxiety
 Depression

Physically Disabled [Details](#)
 Seizure Disorder [Details](#)
 ADHD
 Other

Visually/Hearing Impaired [Details](#)
 Congenital Malformation [Details](#)
 Severe ED
 Reactive Attachment Disorder

Chronic/Medically Complex Conditions

Select those values which have been diagnosed by a physician, psychologist or other qualified mental health professional. [Details](#)

Developmental Delay
 Medically Complex Child
 Medically Fragile Infant
 Prematurity
 Technology Dependent
 Weight Concern

Health Status Outcome Measures

Date Screened	Health Status Score	Health Needs Score	Details
<input type="text" value="07/08/2011"/>	<input type="text" value="2"/>	<input type="text" value="A"/>	Delete

Substance Use/Behavior Problem

Alcohol Freq.:
 Marijuana Freq.:
 Behavior Problem [Details](#)

Options:

When placing your pointer over “Details,” additional information is displayed that helps to define the associated value(s).

The screenshot shows the 'Person Management' interface for 'Andrews, Annie M. (9222721)'. The 'Characteristics' tab is active, displaying various sections for data entry. A tooltip is visible over the 'Details' link for 'Learning Disability'.

Person Management 'Andrews, Annie M. (9222721)' -- Webpage Dialog

eWISACWIS TM Print Spell Check Help

Basic Parent Info Additional Address Education **Characteristics** Medical/Mental Health

Disability/Special Needs Information

Person has a Clinically Diagnosed Disability: No

Learning Disability [Details](#) Other Medically Diagnosed Conditions [Details](#)

Mentally Retarded [Details](#)

Physically Disabled

Visually/Hearing Impaired

Emotionally Disturbed [Details](#)

Anxiety Depression

ADD Other

ADHD Severe ED

Reactive Attachment Disorder

Chronic/Medically Co-occurring

Select those values which apply:

Developmental Delay

Qualified mental health professional. [Details](#)

Prematurity Technology Dependent Weight Concern

Health Status Outcome

Date Screened: 07/08/2011

2 A

[Delete](#)

Insert

Substance Use/Behavior Problem

Alcohol Freq.: [dropdown] Marijuana Freq.: [dropdown] Behavior Problem [Details](#)

Options: [dropdown] **Go** **Save** **Close**

Learning Disability:

A disorder in one or more of the child's basic psychological processes involved in understanding or using language, spoken or written, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell or to use mathematical calculations. The term includes conditions such as perceptual disability, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia.

9. In addition to other pertinent medical information, the Medical/Mental Health tab is used to document Health Concerns, Immunizations, Growth, Health Insurance and Emergency contact information. A new Health Concern can be entered by selecting the Insert button within the Health Concern Information group box. The next page will look at the inserted Health Concern page.

Person Management 'Andrews, Annie M.' ID:9222721 -- Webpage Dialog

eWiSACWIS TM Print Spell Check Help

Basic Parent Info Additional Address Education Characteristics **Medical/Mental Health**

Health Concern Information

Health Concern	Medical/Provider Name	Type of Service	Provider Type	Start Date	End Date	
Details of the health concern should be documented here...	Thomas, River	Child Protective Exam/CPC Child Protective Exam	Physician	09/23/2008	09/23/2008	Edit
Health Concern details will display here	Smith, John	Preventative Dental	Dentist	09/22/2008	09/22/2008	Edit

Insert

Basic Information

Primary Health Care Provider:
 Physician: [Thomas, River](#) Dentist: [Smith, John](#) Mental Health:

▶ Immunization Information Immunizations Up To Date Date: 05/10/2010 Immunizations Record On File

▶ Growth Chart Measurements

▶ Health Insurance Company/HMO

Last AODA Evaluation: 00/00/0000 Last M/H Evaluation: 00/00/0000 Medical Assistance #: _____

Emergency Contact Information

Name:	Relationship to Child:	Home Phone	Cell Phone	Work Phone	Ext	
Name of Emergency Contact	Guardian	(608)123-1234				Delete

Options: _____ **Go** **Save** **Close**

10. The Health Concern page is used to document a Health Concern, Provider Type, Provider Address and whether that provider is a Primary Provider. If Primary is selected, the Provider's name and his/her demographic information will pre-fill into the Permanency Plan. Type of Service, Begin and End Dates of Service, as well as the Procedure performed and any Diagnoses which may have been made can also be documented here.

Health Concern Information

Name: Andrews, Annie, M. Person ID: 9222721

Health Concern: Details of the health concern should be documented here...

Medical Provider/Clinic: Thomas, River [Search](#) Medical Provider/Clinic Type: Physician Primary?

Type of Service: Child Protective Exam/CPC Child Protective Exam Medical Follow Up Recommended? Dental Follow Up Recommended?

Service Begin Date: 09/23/2008 Service End Date: 09/23/2008

Procedure: Child Protective Exam

Diagnosis: Diagnosis if one

Medications

[List of Medications](#)

Medication: Medication	<input type="checkbox"/> Psychotropic	Delete Row 1 of 1
Dosage /Frequency: Dosage/Frequency	Prescription Start Date: 00/00/0000	
Length of Time Prescribed: Length of Time Prescribed	Prescription End Date: 00/00/0000	
Reason Prescribed or Discontinued: Reason Prescribed or Discontinued		
Notes/Comments:		

[Insert](#) [Save](#) [Close](#)

Note: If the Type of Service is Mental/Behavioral Health Screen (Medical Provider/Clinic Type = MH Professional), indicate if a mental health assessment was recommended with the associated checkbox.

Note: If the Type of Service is Comprehensive Mental Health Assessment (Medical Provider/Clinic Type = MH Professional), indicate if treatment was recommended with the associated checkbox.

Note: If the Type of Service is Child Protective Exam/CPC Child Protective Exam (Medical Provider/Clinic Type = Physician), indicate if a medical or dental follow was recommended with the associated checkboxes.

Note: If the Type of Service is Well Child Exam/Visit (Medical Provider/Clinic Type = Physician), indicate the Health Check Period. Placing your mouse over the words “Health Check Period” will display a definition of Wisconsin's Early Periodic Screening, Diagnosis and Treatment Program (EPSDT).

HealthCheck:

HealthCheck (Wisconsin's Early Periodic Screening, Diagnosis, and Treatment Program – EPSDT) provides comprehensive, preventive, well child health check-ups for children from birth to age 21 years. The program includes a schedule for periodic screening (known as the periodicity schedule) of medical, mental health, dental, vision, and hearing services that must be provided at specific intervals throughout childhood and adolescence. Per HFS 56, children in foster care must receive medical examinations in accordance with the schedule of the Wisconsin HealthCheck program. A HealthCheck exam is focused on health supervision and well child care, including developmental surveillance, anticipatory guidance, immunizations, screening procedures and unclothed physical examination. It is not intended for a child who is sick. The CPC foster care health screen does not qualify as a HealthCheck exam.

If medications are prescribed, those details may be recorded below the Health Concern itself. Use the Insert button to list multiple medications. Use the List of Medications hyperlink to find the exact spelling of a particular medication if you do not know it.

11. Once completed, 6 main components of the Health Concern page details will pre-fill back to the Medical/Mental Health tab, Health Concern Information group box. The Edit link can be selected to open the Health Concern page for modification(s). Multiple Health Concerns can be sorted by clicking on the column headers in the Health Concern Information group box. All of the information on this tab, as well as the information documented within the Health Concern page, can be viewed in the Medical Mental Health Summary document which can be launched from the Options drop-down.

Health Concern -- Webpage Dialog

eWiSACWIS Print Spell Check Help

Health Concern Information

Name: Andrews, Annie, M. Person ID: 9222721

Health Concern: Details of the health concern should be documented here...

Medical Provider/Clinic: Thomas, River [Search](#) Medical Provider/Clinic Type: Physician Primary?

Type of Service: Child Protective Exam/CPC Child Protective Exam Medical Follow Up Recommended? Dental Follow Up Recommended?

Service Begin Date: 09/23/2008 Service End Date: 09/23/2008

Procedure: Child Protective Exam

Diagnosis: Diagnosis if one

Medications

[List of Medications](#)

Medication: Medication Psychotropic [Delete](#) Row 1 of 1

Dosage /Frequency: Dosage/Frequency Prescription Start Date: 00/00/0000

Length of Time Prescribed: Length of Time Prescribed Prescription End Date: 00/00/0000

Reason Prescribed or Discontinued: Reason Prescribed or Discontinued

Notes/Comments:

[Insert](#) [Save](#) [Close](#)

12. After expanding the Immunization Information expando, the Insert button can be used to insert a new blank row within which the immunization and the date it was administered can be recorded. To view the most current immunization schedules, click on the Immunization Schedule hyperlink. To view the Wisconsin Immunization Program, click the Wisconsin Immunization Registry hyperlink.

Person Management 'Andrews, Annie M.' ID:9222721 -- Webpage Dialog

eWiSACWIS TM Print Spell Check Help

Basic Parent Info Additional Address Education Characteristics **Medical/Mental Health**

Health Concern Information

Health Concern ▲	Medical/Provider Name	Type of Service	Provider Type	Start Date	End Date	
Details of the health concern should be documented here...	Thomas_River	Child Protective Exam/CPC Child Protective Exam	Physician	09/23/2008	09/23/2008	Edit
Health Concern details will display here	Smith_John	Preventative Dental	Dentist	09/22/2008	09/22/2008	Edit

Insert

Basic Information

Primary Health Care Provider:
 Physician: [Thomas_River](#) Dentist: [Smith_John](#) Mental Health:

Immunization Information Immunizations Up To Date Date: 05/10/2010 Immunizations Record On File

Immunization Information

[Immunization Schedule](#) [Wisconsin Immunization Registry](#)

Immunization	Date(s) Administered	
Measles, mumps, and rubella (MMR)	01/01/2009	Delete

Insert

Growth Chart Measurements

Options: [Go](#) [Save](#) [Close](#)

- After expanding the Growth Chart Measurements expando, the Insert button can be used to insert a new blank row within which the Percentile(s) of measurement(s), Age of Child, and Date of Measurements can be recorded.

Person Management 'Andrews, Annie M.' ID:9222721 -- Webpage Dialog

eWiSACWIS TM Print Spell Check Help

Basic Parent Info Additional Address Education Characteristics **Medical/Mental Health**

Health Concern	Medical Provider Name	Type of Service	Provider Type	Start Date	End Date	
Details of the health concern should be documented here...	Thomas_River	Child Protective Exam/CPC Child Protective Exam	Physician	09/23/2008	09/23/2008	Edit
Health Concern details will display here	Smith_John	Preventative Dental	Dentist	09/22/2008	09/22/2008	Edit

Insert

Basic Information

Primary Health Care Provider:
 Physician: [Thomas_River](#) Dentist: [Smith_John](#) Mental Health:

Immunization Information Immunizations Up To Date Date: 05/10/2010 Immunizations Record On File

Growth Chart Measurements

Growth Chart Measurements

Percentile of Child's Height	Percentile of Child's Weight	Percentile of Head Circumference	Age of Child	Date of Measurements	
98	98	95	12yr	01/01/2008	Delete

Insert

Health Insurance Company/HMO

Options:

14. After expanding the Health Insurance Company/HMO expando, the Insert button can be used to insert a new blank row within which the Insurance Company/HMO, Phone #, Policy #, Group # and Subscriber information can be recorded.

Person Management 'Andrews, Annie M.' ID:9222721 -- Webpage Dialog

eWiSACWIS TM Print Spell Check Help

Basic Parent Info Additional Address Education Characteristics **Medical/Mental Health**

Primary Health Care Provider:
 Physician: [Thomas, River](#) Dentist: [Smith, John](#) Mental Health:

Immunization Information Immunizations Up To Date Date: 05/10/2010 Immunizations Record On File
 Growth Chart Measurements

Health Insurance Company/HMO

Health Insurance Company/HMO

Insurance Company/HMO	Phone	Policy #	Group #	Subscriber	
Name of Insurance Company	(555)555-1212	LMM654321	LMM654321	Name of Subscriber	Delete

Insert

Last AODA Evaluation: 00/00/0000 Last M/H Evaluation: 00/00/0000 Medical Assistance #:

Emergency Contact Information

Name:	Relationship to Child:	Home Phone	Cell Phone	Work Phone	Ext	
Name of Emergency Contact	Guardian	(608)123-1234	<input type="text"/>	<input type="text"/>	<input type="text"/>	Delete

Insert

Options:

15. The Last AODA and/or Mental Health (MH) Evaluation and their associated dates, along with Emergency Contact Information, complete the information which can be recorded within the Medical/Mental Health tab. Select the Save button to save information across all tabs within Person Management.

Person Management 'Andrews, Annie M.' ID:9222721 -- Webpage Dialog

eWiSACWIS TM Print Spell Check Help

Basic Parent Info Additional Address Education Characteristics **Medical/Mental Health**

Primary Health Care Provider:
 Physician: [Thomas River](#) Dentist: [Smith, John](#) Mental Health:

▶ Immunization Information Immunizations Up To Date Date: 05/10/2010 Immunizations Record On File

▶ Growth Chart Measurements

▼ Health Insurance Company/HMO

Health Insurance Company/HMO

Insurance Company/HMO	Phone	Policy #	Group #	Subscriber
Name of Insurance Company	(555)555-1212	LMM654321	LMM654321	Name of Subscriber Delete

Insert

Last AODA Evaluation: 00/00/0000 Last M/H Evaluation: 00/00/0000 Medical Assistance #:

Emergency Contact Information

Name:	Relationship to Child:	Home Phone	Cell Phone	Work Phone	Ext
Name of Emergency Contact	Guardian	(608)123-1234	<input type="text"/>	<input type="text"/>	<input type="text"/>

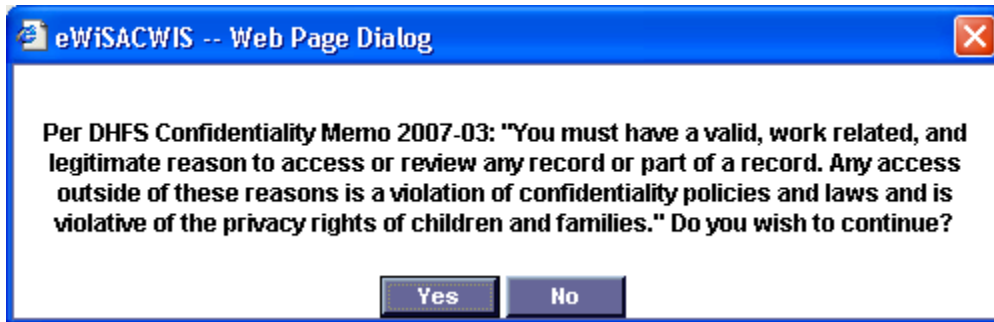
Insert

Options: **Go** **Save** **Close**

16. This message will appear for those people who do not have security to view the Characteristics and Medical / Mental Health information on cases they are not assigned to through Search. They will not be able to view the information.



17. This message will appear for those people who have security to view the Characteristics and Medical/Mental Health information on cases they are not assigned to through Search. They will be able to view the information.



18. Each of the tabs contains an Options drop-down with the Assets and Income option. See the Assets and Income Quick Reference Guide.