

<b>Area:</b>	Health Services
<b>Subject:</b>	HS09 - Determining Child Health Status
<b>Reference:</b>	1304.20 (a-b)(3), Title 22 Regulation 101220/Senate Bill 277/McKinney Vento Act
<b>Policy:</b>	Grantee, Partner, and Delegate Health and/or Disabilities Staff will obtain medical, dental and mental health records needed to determine each enrolled child's health status. The Program will collaborate with the parent/guardian/child's health care provider to obtain each child's up to date physical (within 30 days of child enrollment) and dental exam (within 90 days of child enrollment for programs operating more than 90 days and within 30 days for programs operating less than 90 days.) All health screenings/exams should follow each child's individual Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) schedule.

**Procedure:**

1. Child immunization records will be obtained by the Family Service Worker or other designated staff at time of enrollment. Designated Health Staff shall review and make referrals as needed and document immunizations on the California School Immunization Record (CSIR) card.
  - a. Note(s):
    - No child will be enrolled in a facility (FCCH or Center) without up to date immunizations unless there is a medical condition in which immunizations are contraindicated per Community Care Licensing/SB 277, or the child is in Foster Care and/or Homeless per the McKinney Vento Act. (Staff will work with families/social workers of homeless/foster care children to update their immunizations within the first 30 days of enrollment.)
    - Children who are enrolled in a Home Base model, will not be excluded from Home Base services if child immunizations are not up to date. Staff will work with the family to assist them with immunization services. The family will be advised that until their child is up to date on immunizations, the child will be unable to attend socials or be enrolled in Center/FCCH facilities. The family will also be advised that their child cannot be enrolled in kindergarten without up to date immunizations.
2. Designated Health Staff will obtain completed Health History/Nutrition Assessment by parent/guardian and review within 30 days of child enrollment. This shall include determination of child having an ongoing source of accessible health and dental care. Designated Health Staff and Family Service Workers will assist family in referrals as needed.
3. Designated Health Staff will obtain a physical report from the child's health care provider and determine whether the child is up-to-date on a schedule of age-appropriate preventive and primary health care which includes medical, dental and mental health. Such a schedule incorporates the requirements for a schedule of well child care utilized by the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program of

the state Medicaid agency (Child Health and Disabilities Prevention – CHDP), and the latest immunization recommendations issued by the Centers for Disease Control and Prevention, as well as any additional recommendations from the local Health Services Advisory Committee and county Public Health Department that are based on prevalent community health problems:

- a. For children who are not up-to-date on an age-appropriate physical screenings, Designated Health Staff will assist parents in making appointments.
  - b. For children who are up-to-date on EPSDT, Designated Health Staff shall review Electronic Tracking Reports monthly to ensure they continue to follow recommended schedule of well child care.
4. Educators and/or Designated Health Staff will inform parent/guardian of child's need for further diagnostic testing, examination, and treatment by an appropriate licensed or certified health professional for each child identified with an observable, known or suspected health or developmental concern, and make referrals as needed.
5. Designated Health Staff shall develop and implement a follow-up plan for any identified health condition requiring care at the facility by initiating, completing and implementing an Individual Health Care Plan (IHCP). For families requiring additional staff support and/or enrolling child has a suspected disability, a Child Success Team Meeting (CST) will be held to include all involved parties to discuss collaboration of services regarding the health care need. (See CST Procedure DS05)
6. If staff's collaborative attempts with parent/guardian have not resulted in receiving documented completion of required health screenings/exams/immunizations/medical or dental care, a Notice of Need/ Exclusion form shall be completed by Health Staff and given to parent/guardian. (Note: Only items identified with an asterisk on the Notice of Need/Exclusion form is "excludable.") Designated Health Staff will give the Educator a copy of the child's Notice of Need/Exclusion form in order to ensure compliance with the exclusion date.
7. Educator/Home Visitor will complete Developmental and Social Emotional Screening documentation and obtain appropriate guidance from mental health or child development professionals for those children identified with follow up needs within 45 days of child enrollment for programs operating over 90 days and within 30 days of enrollment for programs operating less than 90 days (See Referral Procedure DS03, DS04 for further guidance).
8. The program will utilize multiple sources of information on all aspects of each child's development and behavior, including input from family members, Educators, and other relevant staff who are familiar with the child's typical behavior through case conferencing, parent/guardian feedback, and/or home visits.

Note: Please follow timelines as listed:

## Health Services “Start-up” Timelines EHS/RHS/MHS\*

<b>Prior to Enrollment/ As Needed</b>	<b>30 Day Calendar*</b>	<b>45 Day Calendar</b>	<b>90 Day Calendar</b>	<b>Items Needed per EPSDT guidelines</b>
Immunizations	Healthy History/TB Clearance	Hearing Screening: Children aged 3-5 years old	Annual Dental Exams (RHS)	Hemoglobin or Hematocrit
Medication Administration Training/Forms	Nutrition Assessment	Vision Screening: Children aged 3-5 years old	Well Baby Check for children enrolled in Home Base	Blood Lead Test Numerical Results
Individual Health Care/Asthma Plan/Special Meals Accommodation or Preference	Physical for all children enrolled in a FCCH or Center based program	Growth Assessment (BMI) for children over 2 years old		Annual Preventative Dental Treatment (e.g.: cleaning and/or fluoride varnish) for children aged 3-5 years old
Inventory of First Aid Kits prior to start date of program and every two months as needed				
Pregnant woman postpartum services (2 weeks after birth of child)				

**\* Programs operating 90 days or less must have health services complete within 30 calendar days**

<b>Supervised by:</b>	Director of Health Services, Health Services Supervisor, Delegate Health and Disabilities Coordinators
<b>Performed by:</b>	Designated Health Staff, Educators, Family Service Staff
<b>Forms needed:</b>	Electronic Tracking Reports, Child/Family Services Application, Family Partnership Agreement, Social Services Referral, Health Forms CF/H1 through 25, CSIR cards, Health Inserts, child medical records, Mental Health Observation Reports, Case Conference Documentation, Family Case Notes, CST Meeting form
<b>Frequency:</b>	At registration within 30 calendar days, ongoing as needed throughout program year.