Health Tracking & Recordkeeping
NIHSDA
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National Center on Early Childhood Health and Wellness

Overview

- Discuss health manager’s roles in health tracking and recordkeeping
- Explore ways to foster health tracking and recordkeeping skills
- Identify available resources to support staff in the area of health tracking and recordkeeping.

I Already Know This
What comes to mind when you think of health tracking and recordkeeping?

What are the sources of health & safety data that are tracked and recorded?

- Well child visits (EPSDT)
- Oral health visits
- Follow up visits for identified issues
- Individual child health or service plans
- Nutrition related information
- Developmental screenings
- Ongoing assessments
- Child & family demographics
- Attendance
- Family partnership agreements
- Family referrals to community resources
- Program self-assessment information
- Injury reports
- Safety checks
- Pregnant mother visits
School Readiness Begins With Health

What is School Readiness?

- Children possess “the skills, knowledge and attitudes necessary for success in school and for later in life.”
- Parents and families “are engaged in the long-term, lifelong success of their child.”
- Children are ready for school, families are ready to support their children’s learning, and programs and staff are ready for children

Head Start Approach to School Readiness – Overview
http://eclkc.ohs.acf.hhs.gov/hslc/sr/approach

Physical Health Knowledge Café

- Determining child health status
- Ensuring that each child receives age-appropriate and culturally and linguistically responsive screenings
- Conduct & record periodic observations of each child’s health
- Develop procedures to track child health status
Knowledge Café
Physical Health

• What are some strategies and best practices for health tracking and recordkeeping?
• What tools do you use?
• Who do you work with?
• What are some success stories?
• What are some challenges?

Time-Sensitive Tasks

What are the tasks that need to be done
• . . . within 45 calendar days?
• . . . within 90 calendar days?
• . . . within 30 calendar days?
• . . . within 2 weeks?

Why are these tasks time sensitive?

• Determining health status
• Determining oral health status
• Ensuring that each child receives age-appropriate and culturally and linguistically responsive screenings
• Visiting each new born (Early Head Start)
Health as a Foundation for School Readiness

Children who receive timely, appropriate health & nutrition support...
- Experience fewer developmental delays and chronic illnesses
- Have higher attendance rates that lead to school success
- Receive appropriate support to engage in learning activities
- Learn skills to build a healthy lifestyle that decrease the chance of future illness

Health Services Support

- Illness prevention
- Quick and effective diagnosis and treatment of illnesses and conditions when they occur
- Focus, energy, and engagement in program activities
- Positive social interactions
- Self-confidence and resiliency
- Willingness to take on new challenges
- Persistence to master new skills
- Self-regulation and executive functioning
- Higher rates of attendance

1304.20(a)
Determining Child Health Status
Documenting Child Health Status

Date of the Physical Exam

Date Grantee Receives Information

Head Start Program Performance Standard 1304.20 (a) Determining a child's health status

- Obtain from a health care professional a determination as to whether the child is up-to-date on a schedule of age appropriate preventive and primary health care
- Includes medical, dental and mental health
- Must incorporate EPSDT
- Latest immunization recommendations
- Any additional recommendations from the local HSAC

Strategies:

- For children who are not up-to-date
  - Assist parents in making the necessary arrangements to bring the child up-to-date
- For children who are up-to-date
  - Ensure that they continue to follow the recommended schedule of well child care

1304(a)(1)(i)

- In collaboration with the parents
- No later than 90 calendar days from the child's entry into the program
- Make a determination...of...ongoing source of continuous, accessible health care
- If a child does not have a source of ongoing health care...assist the parents in accessing a source of care
- Entry is defined as the first day the child enters the classroom, or begins to participate in a home based or family child care program
- Once a child has been enrolled into the program, the program can provide services to a child
- This could include
  - Screenings or immunizations at a Health Fair,
  - An initial home visit by Head Start staff, or
  - Other pre-entry services
1304.20(a)(1)(ii)(A) & (B)

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  • includes medical, dental and mental health
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1304.20(a)(1)(ii)(C)

• Establish procedures to track the provision of health care services

Neither the Office of Head Start nor the National Center Early Childhood Health and Wellness endorse any one particular Management Information System or tool.

Questions to Consider About Data & Tracking Procedures
What data do we need to collect?

Is there other data that would be helpful to collect?

Is staff aware of the purpose for collecting data and how data will be used?

Who collects the data? Who inputs the data?
Do staff who enter data receive adequate training & oversight? Is data checked for accuracy, completeness and problems corrected?

Source: Early Head Start National Resource Center. What is Quality Data for Programs Serving Infants and Toddlers?

Illustrating How Recordkeeping & Health Tracking Tells a Story

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<th>Description</th>
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Data & Information

National Center on Early Childhood Health and Wellness
Hazard Mapping

**Hazard Mapping Instructions for Grantees**

Hazard mapping is a process that Head Start programs can use to identify locations of disaster-related and disaster-prone environments. The process is a systematic, data-driven process that assesses the potential exposure to hazards in a community. The results can be used to inform decisions about disaster preparedness and response.

**Goals of Hazard Mapping:**

- Identifying high-risk areas
- Developing a comprehensive action plan
- Identifying resources and services needed
- Monitoring changes over time

**Instructions for Grantees:**

- **Step 1:** Identify high-risk areas
- **Step 2:** Map key locations
- **Step 3:** Develop a comprehensive action plan
- **Step 4:** Monitor changes over time

**Resources:**

- Hazard Mapping Instructions for Grantees
- Hazard Mapping Data Collection and Analysis
- Hazard Mapping Data Collection and Analysis.

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**Data in Hand Start and Early Head Start:**

Creating a Culture that Embraces Data

Interactive Learning Modules

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**Plan for Success:**

- Monitoring progress
- Identifying challenges
- Developing strategies
- Evaluating outcomes

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National Center on
Early Childhood Health and Wellness
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ORAL HEALTH RESOURCES

Oral Health Forms Available Online
Resources to Support and Promote Oral Health Dental Hygienist Liaison (DHL) Program

- Serve as a communication link between NCECHW and Head Start agencies and state, territorial, and tribal child care agencies on topics related to improving oral health
- Collaborate with the state organizations (e.g., oral health programs, Head Start state collaboration offices, child care agencies)
- Promote evidence-informed information and materials to Head Start agencies and state, territory, and tribal child care agencies, and offer strategies for accessing oral health care for pregnant women and children enrolled in Head Start and for children enrolled in child care

Questions?