

PA AAP ECELS Webinar

Preventive Health Screenings:
Using Information from the Child Health Report - CD 51
April 20, 2016

Julie Kardos, MD, FAAP – Children’s Hospital of Philadelphia
Naline Lai, MD, FAAP – Children’s Hospital of Philadelphia

1

Download Handouts from the ECELS website

www.ecels-healthychildcarepa.org

Select Professional Development / Training tab, then Webinars



6

Learning Objectives

As a result of participation in this activity, learners will be able to:

- Explain the appropriate ages and purposes for preventive health screenings
- Describe what early care and education professionals can do to collaborate with parents and physicians
- Identify resources related to developmental screening, nutrition and physical activity and oral health

3

Time for a Polling Question



4

Julie Kardos, MD, FAAP
Naline Lai, MD, FAAP

The Children’s Hospital of Philadelphia Care Network - Newtown, PA




lain@email.chop.edu
kardos@email.chop.edu

Follow our blog
www.twopedsinapod.org

5

Bridge



7

Time for a Polling Question

Does your program
use the
Child Health Report –
CD 51?

Is the Child Health Report – CD 51 Just Another Piece of Paper for the Child's File?

- Form can be the CD 51 or another form that contains all required information
- Review the form – Don't just file it
- Important information for all: health providers and early care and education professionals

Recommended Health Screenings

American Academy of Pediatrics | Bright Futures

Screening	Age											
	0-1	1-2	2-3	3-4	4-5	5-6	6-7	7-8	8-9	9-10	10-11	11-12
Behavioral assessment												
Depression												
Lead												
Oral health												
Shed skin												
Stool												
Urine												
Weight												
Eye												
Ear												
Heart												
Immunizations												
Iron												
Other (Specify)												
Physical												
Psychological												
Sexual												
Social												
Tuberculosis												
Vision												
Weight												

Preventive Health Screenings for Discussion:

BMI (Body Mass Index)
Vision
Hearing
Hematocrit or hemoglobin
Lead screening
Oral health
Developmental screening
Autism
Tuberculosis exposure screening

How do early care and education professionals contribute to the overall picture of the child?

For each screening test, we will explain:

- **What** the screening test is
- **When** in a child's life does the physician perform the screening
- **Why** is the screen important
- **What** early care and education professionals can do to collaborate with parents and physicians

BMI Screening



13

BMI

- **What** the screening test is:
 - BMI = Body Mass Index
 - A way of determining over/underweight which takes into account height and weight
 - Changes with age
- **When** do we screen:
 - Age 2 years, 2.5 years, 3 years and every year thereafter

14

BMI

- **Why** is the screen important:
 - Elevated BMI can lead to:
 - ✓ Type 2 diabetes
 - ✓ High blood pressure
 - ✓ Fatty liver
 - ✓ High cholesterol levels
 - ✓ Social teasing
 - ✓ Inability to participate in activities

15

BMI

- **What** Early Care and Education Professionals can do:
 - Note body type or build - Doctor might not have noted BMI on problem list or elsewhere on the health report.
 - Keep routine in early care and education program: set time for meals and snacks
 - DO NOT use food as a reward. Use praise, stickers, privileges.

16

BMI

- **What** Early Care and Education Professionals can do: (continued)
 - Detach emotions from food. Deemphasize food as the center of a party. Concentrate on playing games.
 - Engage children in moderate to vigorous indoor and outdoor activity throughout every day.
 - Ask parents to keep sturdy shoes (not sparkly princess sandals) at early care and education program for outdoor play.

17

Time for a Polling Question

Have you ever had a concern about a child's vision or hearing that you shared with the family?

18

Vision Screen



19

Vision Screen

- **What** the screen is:
 - Detects if child has normal vision in both eyes
- **When** do we screen:
 - Formal vision screening starts at 3 years in the pediatric office
 - Prior to that, we look for:
 - Abnormal light reflex, drifting eyes, squinting, holding objects to the side instead of in front of eyes, "lazy eye," and head tilt
 - Also look for general developmental delays

20

Vision Screen

- **Why** is this screen important:
 - Detect unequal vision and prevent blindness in one eye (amblyopia)
 - Correct poor vision
 - Prevent developmental delays

21

Vision Screen

- **What** early care and education professionals can do:
 - Watch for "lazy eye" or any wandering eye
 - By 4 months of age, eyes should work together, in unison, and should not cross, wander, or appear to look in different directions.
 - Developmental delay compared to same aged peers
 - Head tilt

22

Vision Screen

- **What** early care and education professionals can do: (continued)

Watch for:

- Squinting
- Holding objects to the side of their faces rather than in front of their faces to see better
- Note: headaches in preschoolers is generally NOT a sign of poor vision

23

Hearing Screen



24

Hearing Screen

- **What** the screen is:
 - In infants: device measures brain's response to sounds
 - In older children: audiometry requires the child's cooperation - behavioral testing

25

Hearing Screen

- **When** do we screen:
 - Birth, one year of age if the child was born prematurely or had complications as a newborn
 - At every pediatric office well check using parents' report
 - Audiometry at ages 4, 5, and 6 years

26

Hearing Screen

- **Why** is the screen important:
 - Detect hearing loss
 - Prevent language delay
 - Prevent behavior and attention problems



27

Hearing Screen

- **What** early care and education professionals can do:

Recognize language delay!

- **Babies:** repeat one syllable age 6 months, babble by 9 months, 1 word by one year
- **Two year olds:** 2 word sentences, speech understood approximately 50% of the time by someone who does not know the child well

28

Hearing Screen

- **What** early care and education professionals can do: (continued)

Recognize language delay!

- **Three year olds:** 3 word sentences, speech understood approximately 75% of the time by someone who does not see the child every day
- **Four year olds:** 4+ word sentences, speech well understood by anyone (does not include mild articulation error such as "w" for "r" sounds, for example)

29

Hearing Screen

Other signs of hearing loss besides language delay:

- Does not follow directions well
- Appears hyperactive and loud
- Appears withdrawn
- Cannot understand whispering



30

Hemoglobin or Hematocrit



31

Hemoglobin or Hematocrit

- **What** the screen is:
 - Check a child's hemoglobin or hematocrit level in the blood as a marker of iron level. Looking for iron deficiency anemia.
- **When** do we screen:
 - Blood test at one year of age.
 - Risk assessment at 4, 15, 30 months, then yearly after that

32

Hemoglobin or Hematocrit

- **When** do we screen: (continued)
 - Risk factors for anemia: starting whole milk before one year of age, failure to start iron fortified foods before one year of age
- Drinking too much milk (not formula)
 - More than 24 ounces per day

33

Hemoglobin or Hematocrit

- **Why** is the screen important:
 - Mild iron deficiency anemia may have no symptoms but has been linked to later learning problems.
 - Severe iron deficiency can lead to children looking pale and tiring easily.
 - Very severe iron deficiency can lead to heart failure.

34

Hemoglobin or Hematocrit

- **What** early care and education professionals can do:
 - Limit milk intake to 24 ounces per day
 - Provide iron-rich foods if available
 - Do not serve milk at iron-rich food meals. Iron is not well absorbed when eaten with calcium (milk).

35

Lead Screen



photo by Kaz Pixabay.com

36

Lead Screen

- **What** the screening test is:
 - Detect elevated blood lead level
- **When** do we screen:
 - 6 months to 6 years of age

37

Lead Screen

- **Why** is the screen important:
 - Elevated lead levels lead to learning problems.
 - Very high lead levels can cause damage to internal organs in addition to the brain. The body has a hard time excreting lead.

38

Lead Screen

- **What** early care and education professionals can do:
 - Alert parents if your facility was built prior to 1978 and has chipping paint or was recently renovated.
 - Make sure your facility has safe drinking water

39

Lead Screen

- **What** early care and education professionals can do: (continued)
 - Prevent children from playing in the dirt immediately surrounding the building
 - Check for lead mixed into dust/dirt
 - Wash hands after playing outside and before eating

40

Oral Health



41

Oral Health

- **What** the screening test is:
 - Prevents dental caries
- **When** do we screen:
 - 6 and 9 months of age
 - 12, 18, 24 and 30 months of age
 - 3 and 6 years of age
(fluoride varnishes may also be given at 6 months - 5 years of age)

– Source: Stepping Stones to Caring for our Children: National Health and Safety Performance Guidelines, Third Edition, AAP

42

Oral Health

- **When** do we screen: (continued)
 - Pediatricians discuss gum care and tooth care even prior to tooth eruption and tell parents to start brushing teeth twice daily as soon as teeth erupt. Use a tiny rice-grain smear of fluoride toothpaste for child under 3 yrs. Use pea-sized amount for child older than 3 yrs.
- **Why** is the screen important:
 - Prevent caries (cavities)

Source: Stepping Stones to Caring for our Children: National Health and Safety Performance Guidelines, Third Edition, AAP

43

Oral Health

- **What** early care and education professionals can do
 - Brush teeth after meals or at least once each day during the time the child is in early care and education
 - Offer rinsing water after meals if tooth brushing is not feasible.



44

Oral Health

- **What** early care and education professionals can do
 - Do not permit children to walk around with sippy cups or bottles
 - Instead of sippy cups, use smaller cups and fill halfway or less to prevent spills
 - Offer drinking water throughout the day
 - Limit juice intake to 4 – 6 oz. **per day** (ages 1 – 6 years)

45

Developmental Screen



46

Developmental Screen

- **What** the screen is:
 - Formal test of gross motor, fine motor, language and social skills (for example, Survey of Wellbeing of Young Children - SWYC, Child Health and Development Interactive System - CHADIS)
- **When** do we screen:
 - From birth and every well visit after birth
 - Validated screening questionnaire starts at 9 months

47

Developmental Screen

- **Why** is the screen important:
 - Determine who needs intervention
 - Who is “slow” and who has other senses that need to be checked.
 - Delayed language skills can mean poor hearing or mental retardation.

48

Developmental Screen

- **What** early care and education professionals can do:
 - Notice the warning signs / “red flags”
 - Bring these children to parents’ attention. If you have regular conferences with parents, this is a good time to alert parents. They expect you to tell them how their child is developing.

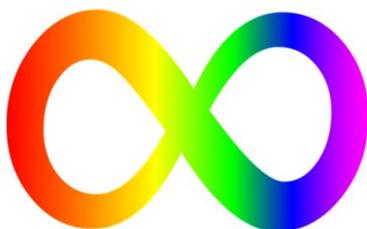
49

Time for a Polling Question

Does your program do developmental screening?

50

Autism screen



51

Autism Screen

- **What** the screening test is:
 - Validated questionnaire (Modified Checklist for Autism in Toddlers: M-CHAT for example)
- **When** do we screen:
 - Formal screen at 18 months and 2 years.
- **Why** is the screen important:
 - Earlier detection can lead to earlier intervention with facilitated communication
 - May help improve later functioning.

52

Autism Screen

- **What** early care and education professionals can do:
 - Note the warning signs / “red flags”
 - Remember some children are just “quirky”
 - Most autistic children have speech delay.
 - Many autistic children fail to demonstrate imaginative play/abstract play when other children do: between 15-18 months.
 - Many lack empathy and social skills.
 - Share with parents at parent conferences.

53

Tuberculosis (TB) Screen



1941 Library of Congress

54

Tuberculosis (TB) Screen

- **What** the screening test is:
 - TB is primarily a lung disease that causes cough.
 - Can also cause other problems such as brain and bone disease, prolonged fevers, weight loss.
- **When** do we screen:
 - At one month of age, six months of age, one year of age and yearly thereafter

55

Tuberculosis (TB) screen

- **Why** is the screen important:
 - To detect exposure to TB before actual symptoms occur
 - Disease can easily be treated at this stage to prevent later complications and to prevent spread of infection.

56

Tuberculosis (TB) screen

- **What** early care and education professionals can do:
- Let parents know if early care and education professionals:
 - Have a history of a positive TB test
 - Traveled to a high risk country or was exposed to a high risk person in the US or someone else with known TB

57

Emphasize the Partnership: It's All About the Children



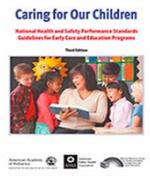
58

Is the Child Health Report – CD 51 Just Another Piece of Paper for the Child's File?

- Form can be the CD 51 or another form that contains all required information
- Review the form – Don't just file it
- Important information for all: health providers and early care and education professionals

59

Caring for Our Children, 3rd Ed (CFOC3)

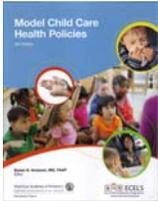


Standard 3.1.2.1:

Routine Health
Supervision and Growth
Monitoring

www.nrckids.org
or purchase:
www.aap.org

64



Section 10: Health Plan

- Child and Staff Health Services
 - Child Health Assessment
 - Adult Health Assessment
 - Tracking and Updating Immunizations and Checkup Records
- Oral Health

www.ecels-healthychildcarepa.org/publications/manuals/pamphlets/policies or purchase from www.aap.org

61



- Encouragement of large muscle play
- Daily routines, equipment and settings
- Required clothing and footwear, supervision, participation of early care and education professionals
- Types and plans for active play
- Appendix O: Daily and Monthly Playground Inspection and Maintenance Form
- Appendix P: Form to schedule staff supervision for active play

www.ecels-healthychildcarepa.org/publications/manuals/pamphlets/policies or purchase from www.aap.org

62

Developmental Screen – Resources

Learn the Signs – Act Early

<http://www.cdc.gov/ncbddd/actearly/>



63

Developmental Screen – Resources

Watch Me!

<http://www.cdc.gov/ncbddd/watchmetraining/>



64

Physical Activity and Nutrition Resources

ECELS Self-Learning Module:
Fitness and Nutrition: Moving and Munching,
Supporting Wellness in Early Learning Programs

www.ecels-healthychildcarepa.org

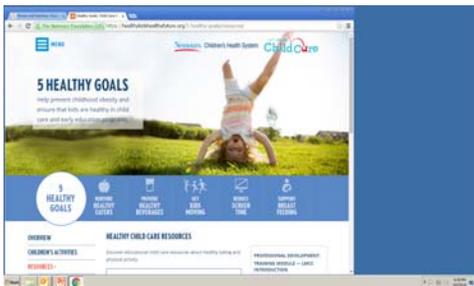
- Professional Development/Training Tab
- Self-Learning Modules, Search by title
- 3 PD Credit Hours
- Assess current practice
- Create action plan for improvement



65

Physical Activity and Nutrition Resources

<https://healthykidshealthyfuture.org/5-healthy-goals/resources/>



66

Physical Activity and Nutrition Resources

<http://www.panen.org/keystone-kids-go>



67

Lead – Soil Sample Resources

<https://www.epa.gov/lead/national-lead-laboratory-accreditation-program-nllap>

National Lead Laboratory Accreditation Program (NLLAP)

- Identifies laboratories that accurately analyze paint chip, dust, or soil samples for lead
- 5 laboratories in Pennsylvania

68

Oral Health Resources

ECELS Self-Learning Modules:

- Oral Health (2 Hours PD Credit)
- Oral Health Basics (1 Hour PD Credit)

www.ecels-healthychildcarepa.org

- Professional Development/ Training Tab
- Self-Learning Modules, Search by title
- Learn about oral health promotion strategies from very simple to daily tooth brushing



69

Oral Health Resources

<http://www.ecels-healthychildcarepa.org/tools/posters/item/431-oral-health-poster>



70

Health Capsules

www.ecels-healthychildcarepa.org
Select Publications >Health Capsules

Health Capsules

- Brief, low – literacy articles

Topics include:

- Oral Health
- Drinking Water Available All Day
- Fluoride Recommendations for Oral Health

71

Time for a Polling Question

Does your program use child care management software to document health information?

72

WellCareTracker Resources www.wellcaretracker.org

- Secure, online tool to check completeness of routine preventive health services.
- Tool checks health records according to American Academy of Pediatrics' recommendations
- Staff enter dates of services and report is generated



73

Letter Requesting Information from Health Care Professionals www.wellcaretracker.org



74

Questions and Comments



75

Wrap Up



Download the form at www.ecels-healthychildcarepa.org.
Select Professional Development > Webinars, then the title of this webinar. Fax or scan and email your completed evaluation form to ECELS at 484-446-3255.

- For University of Pittsburgh CME/CEU, PA Key ECELS must receive your evaluation **by May 4, 2016**.
- For PA Key & Act 48 credit for this webinar either live or in the recorded format, when ECELS receives your evaluation, the staff will send you instructions about next steps.
- Contact ECELS by phone or email with any unanswered questions or comments: 800/243-2357 or 484/446-3003 or ecels@paap.org

76