



**Community and Public Health Environmental Initiative
Well Child Exam Protocol for Early Head Start, Head Start,
and Family Support Centers**

- 1) **Goal:** To integrate health and wellness into high quality early childcare and education programs.
- 2) **Objectives:**
 - Conduct well child exams, including complete developmental screenings, for infants and children.
 - Arrange a well child exam for children if the date on their Health Inventory Form is not within the timeframe required by Maryland's EPSDT (Healthy Kids) schedule and /or if staff or parent(s)/guardian(s) have a specific concern. Identify children during nursing student chart review and through consultation with EHS, HS, or FSC staff.
 - Provide DNP students the opportunity to conduct well child exams.
 - Make referrals as necessary for vaccinations, hemoglobin, lead testing and additional services, such as Infants and Toddlers, PT, OT and speech therapy.
 - Suggest referrals when necessary; provide explanation/education to families.
- 3) **Rationale:**
 - Well child exams play a crucial role in monitoring a child's growth and development. According to the CDC, in the United States, "about 1 in 6 children aged 3 to 17 years have one or more developmental or behavioral disabilities, such as autism, a learning disorder, or attention-deficit/hyperactivity disorder (2021)." The sooner children are identified as having a learning difference or health concern, the sooner they can get the services they need.
 - EHS, HS, FSCs provide services to low-income children and families, including many children of color. An estimated 25% of the school readiness gap can be attributed to income and race-related disparities in health, including elevated blood lead levels, which have been linked to decreased kindergarten reading readiness. Ensuring regular health care and addressing health needs in young children is a critical component of high-quality early childcare and education and can help set children on a path to academic success. Nurse Practitioner students can help address gaps in health care by performing well child exams, developmental screenings, and providing referrals to any necessary services.
- 4) **Logistics:**
 - Work with center director and staff to determine how well child exams will be scheduled. Confirm that the EHS/HS/FSC has a dedicated space to conduct exams. In addition, the

DNP faculty will bring the required equipment, such as otoscope, scale, stadiometer, sphygmomanometer, etc.

- With center director outline expectations for parental/guardian consent and HIPAA Privacy Rules for all verbal and written data.
- Establish date, time and length of appointments (generally one hour per appointment to complete exam, developmental screen and properly clean, disinfect and social distance during COVID-19.)
- Create a shared calendar of dates/times that DNP Faculty will perform exams during the semester.
- On the day before the well child exam, center staff should share the exam schedule with faculty and DNP students. Include child's name, DOB, and phone number for parent/guardian.
- Center staff should conduct reminder calls and /or text messages and offer incentives for exams if needed or available.
- On day of exams, DNP students and faculty will enter children's data into an Excel spreadsheet. This data may be used in an unidentified manner for grant reporting and research purposes. In addition, children that require follow up and referrals can be identified from this spreadsheet. This information will be shared with clinical instructors to conduct follow up.
- Exam results should be entered on the Health Inventory form (Maryland OCC Form 1215) and placed in the children's health records.
- Give the parent(s)/guardian(s) of each child a copy of the Health Inventory form and any referrals. Make a copy of these documents for the center as well.
- Meet with parent(s)/guardian(s) to review the results of the exam.
- Initiative staff, nursing students, clinical instructors, or preceptors will perform follow-up on referrals from the well child exams as needed.

5) Guidelines for Exam (see EPSDT):

- Maryland Healthy Kids
<https://health.maryland.gov/mmcp/Documents/Maryland%20Healthy%20Kids%20Preventive%20Health%20Schedule-.pdf>
- For more information regarding the Healthy Kids program, visit Maryland Department of Health, Maryland Medicaid Administration:
<https://health1.maryland.gov/mmcp/Pages/home.aspx>
- For state of MD Immunization requirements for children visit:
<https://health.maryland.gov/phpa/oideor/immun/pages/back-to-school-immunization-requirements.aspx>

6) Guidelines for Exams during COVID-19:

- When children are offsite due to the pandemic, follow the protocols below.
 - Allow only one parent/guardian to accompany a child to the appointment. No other visitors with the child should be allowed.
 - Parent/guardian and children two years and older must wear a facemask at all times while onsite.

- Screen parent/guardian and child for COVID-19 symptoms, recent travel, and exposure, and take their temperature prior to the appointment per center policy.
- If child or parent is symptomatic or febrile, reschedule the appointment.
- Schedule appointments for one hour to allow sufficient time for cleaning/disinfecting in between appointments.
- Conduct only one physical exam per hour time slot to prevent multiple families being onsite at a time (unless two children in a family).
- See Cleaning/Disinfecting Protocol. These policies and protocols should be followed when children are offsite and must come to the center for well child exams.

References:

- Currie J. Health disparities and gaps in school readiness. *Future Child*. 2005; 15(1): 117-38.<https://files.eric.ed.gov/fulltext/EJ795844.pdf>.
- Early Head Start. (2008, July). *EARLY HEAD START TIP SHEET No. 30 Screenings for Infant & Toddlers*. Early Head Start Tip Sheet No. 30 Screenings for Infant & Toddlers. <https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/ehs-tipsheet-30.pdf>.
- Head Start Program Performance Standards. (2019, January 13). *1302.42 Child health status and care*. ECLKC. <https://eclkc.ohs.acf.hhs.gov/policy/45-cfr-chap-xiii/1302-42-child-health-status-care>.
- McLaine P, Navas-Acien A, Lee R et al. Elevated blood lead levels and reading readiness at the start of kindergarten. *Pediatrics*. 2013; 131(6):1081-89.<https://pediatrics.aappublications.org/content/131/6/1081.short>
- National Center on Birth Defects and Developmental Disabilities. (2021, February 22). *Developmental Monitoring and Screening*. Centers for Disease Control and Prevention. <https://www.cdc.gov/ncbddd/childdevelopment/screening.html>.
- Williams PG, Lerner, MA. School readiness. *Pediatrics*. 2019;144(2): 1-15.<https://pediatrics.aappublications.org/content/144/2/e201917667>.