

Guidelines for CHSC Early ACCESS Nutrition Services

The following document was created to provide information about how Child Health Specialty Clinics (CHSC) provides nutrition screening, evaluation, and ongoing services and contacts. Early ACCESS Nutrition Services are included as under IDEA Part C and provided at no cost to the family.

120.14(8) “*Nutrition services*” include: *a.* Conducting individual assessments of: (1) Nutritional history and dietary intake; (2) Anthropometric, biochemical, and clinical variables; (3) Feeding skills and feeding problems; and (4) Food habits and food preferences; *b.* Developing and monitoring appropriate plans to address the nutritional needs of an eligible child; and *c.* Making referrals to appropriate community resources to carry out nutrition goals. [34 CFR 303.12(d)(7)]

Why would a child need nutrition services from a Registered Dietitian on the IFSP?

A child’s ability to learn, grow, and develop ultimately depends on his/her nutritional status. A pediatric Registered Dietitian (RD) receives specialized training and is familiar with nutrition needs specific to infants and toddlers. This knowledge can be applied in the IFSP to ensure each child’s developmental outcomes are not affected by poor nutrition. Having a dietitian on the IFSP team provides access to nutritional expertise when questions arise about how to help an infant gain weight, how to help a toddler balance liquid and solids in their diet, and how to transition to table foods that meet a child’s nutritional needs for optimal growth and development. Individualizing nutrition interventions for a child who requires special products for a tube feeding, a child who needs modified food textures, or a child whose appetite changes with each health event are topics that may require more time and frequent contacts than a primary care provider, a specialized feeding team, or even a WIC dietitian can provide.

RD services differ from those offered by an occupational therapist (OT) as the OT’s training and expertise is focused on the mechanical aspects of eating and not the nutritional value and composition of the liquids and foods an infant and toddler receives. Dietitians are also able to evaluate a child’s growth, provide recommendations regarding special nutrition supplements and tube-feeding products whereas this falls outside the OT’s scope of practice.

How are Nutrition Services provided?

Using Early ACCESS state funding, RDs are employed by CHSC to provide statewide nutrition services to children in Early ACCESS.

- Telehealth – Child Health Specialty Clinics (CHSC) nutrition services are provided as virtual services.
- Telephone or Email –CHSC Nutrition Services can be provided to families via telephone and/or email communication. Note: nutrition assessments/evaluations cannot be completed by telephone unless extenuating circumstances are shared by the SC that require this mode of connection.
- Face-to-Face – If the family resides near the Bettendorf Regional Center where the CHSC RDs are housed, a face-to-face visit in the CHSC Regional Center can be scheduled. Nutrition services qualify as a Medicaid eligible transportation reimbursement service through each child’s Medicaid Managed Care Organization. A home visit may be scheduled if warranted by the child’s medical complexity.

- Service Frequency –CHSC RD services are based on individual child and family needs and will be scheduled accordingly.

What process is used for nutrition screening and to identify nutrition needs?

The Parent Nutrition/Feeding Questionnaire (referred to as the PEACH) is a screening tool used with parents/caregivers to identify potential nutrition needs in children ages 0-5 years. The PEACH tool was designed, tested and validated for children less than 6 years of age by Marci Kramish Campell and Kristine S. Kelsey.

This tool should be completed with all families referred to Early ACCESS and updated at the annual review for children **not** receiving nutrition services documented in the IFSP. For infants or toddlers with a score of four (4) or greater, the Service Coordinator (SC) should provide the parent/guardian with the CHSC EA Nutrition flyer and offer a nutrition evaluation to the family.

Because eating and feeding concerns for a child may require services from many professionals (e.g. RD, OT, speech/language pathologist (SLP), and health care practitioner) the Early ACCESS SC might also forward the scored PEACH tool to the child's AEA OT if one is involved. The CHSC Nutrition Coordinator will determine whether the infant or toddler needs a nutrition evaluation/assessment by a CHSC Dietitian. The OT will determine if the infant or toddler needs an occupational therapy evaluation for eating/feeding skills.

Forms and/or information needed to refer a child for CHSC Nutrition Services

- Early ACCESS Consent to Release and Exchange Information form signed by the parent/guardian to/with CHSC (required due to University of Iowa Hospitals and Clinics HIPAA requirements). CHSC can also accept a consent made out to University of Iowa Hospitals and Clinics in place of CHSC consent.
- Early ACCESS Consent to Release and Exchange Information form signed by the parent/guardian to/with child's medical provider(s) - *This release does not need to be specific to Child Health Specialty Clinics. A release between the primary care provider and the EA team is appropriate.*
- Completed PEACH tool
- IFSP Meeting date (can be written on PEACH) if scheduled
- Family Demographic/Contact information
- The above information and any other additional pieces pertinent to the child's nutrition/health status should be shared with the CHSC Nutrition Coordinator. This can be done via email, fax or by directing the Nutrition Coordinator to the IFSP.

Email to: stephany-brimeyer@uiowa.edu

Fax to: 563-344-2255

CHSC Steps to Schedule a Nutrition Evaluation

The CHSC Nutrition Coordinator will review the PEACH tool and any other information provided. CHSC will contact the family as soon as possible after receiving all the necessary forms/documents. Information will then be provided to the parent/guardian and SC regarding the nutrition evaluation including assigned dietitian, date/time of the evaluation and mode of connection. The SC will be

contacted by CHSC within 2 weeks of receiving the referral to provide an update on scheduling the nutrition evaluation.

Initial IFSP Access

CHSC will assign a dietitian to the child and notify the SC so that that dietitian may be added to E-Parts. This allows the dietitian to access any pertinent IFSP information such as consents and other team members' log notes and document the evaluation after it has occurred.

If the assigned dietitian is not listed a choice as a provider in the child's school district, the SC should then notify AEA IMS staff. That dietitian can be added as a service provider in the IMS system; this requires an overnight upload/process.

Service Coordinator IFSP Responsibilities for Adding EA Nutrition Services

The SC will provide a meeting notice or an email to the CHSC Dietitian concerning the meeting date and provide as much advance notice as possible so that the dietitian can provide input for or at the IFSP meeting via technology.

If the child has Medicaid, the SC is responsible for obtaining the parent/guardian signature on the Parent/Guardian Authorization Form for Medicaid Reimbursement for IFSP. If the parent/guardian declines to sign the form, the SC must notify the CHSC Dietitian.

Transitioning to an IEP

CHSC Nutrition Services are provided within an IFSP. If a child is transitioning to Part B Services, the CHSC Dietitian may provide information/documentation to the child's school nurse for inclusion into the IEP. If the child requires nutrition services beyond their third birthday, the CHSC dietitian will help family determine where those services can be obtained. If appropriate, the family and CHSC dietitian may elect to continue their professional relationship outside of the EA system.

SC Responsibilities

If...	And...	Then...
these forms are sent to the CHSC Dietitian early in the initial IFSP process	the PEACH score is 4 or above, or the family expresses interest in an EA Nutrition evaluation	the dietitian can complete the assessment and service determination with the family prior to the initial IFSP meeting
the PEACH is completed late in the 45-day evaluation timeline	the PEACH score is 4 or above and there is not adequate time to schedule a full assessment by the dietitian	a Prior Written Notice (PWN) form is written by the SC at the initial IFSP meeting. The nutrition evaluation/assessment will be completed by the dietitian within 30 days of the PWN date

an infant or toddler is already on an IFSP	the PEACH score is 4 or above, or the family expresses interest in an EA Nutrition evaluation	a PWN form is written by the SC for nutrition evaluation to be completed. The nutrition evaluation will be completed by the RD within 30 days of the PWN date. If the evaluation indicates the child needs ongoing nutrition services and the family is interested in pursuing those services, a periodic IFSP meeting must be held. The SC is responsible for all appropriate meeting documentation (Meeting Notice, Meeting Details, PWN, EA Consent, Medicaid Authorization).
the SC schedules an IFSP meeting	the child is or will receive ongoing nutrition services	the SC notifies the RD of the meeting date by email or meeting notice with as much advanced notice as possible so that the RD can provide input for or join the IFSP meeting virtually.

Registered Dietitian IFSP Responsibilities

If...	And...	Then...
it is determined the child does not require ongoing EA Nutrition Services (due to stable nutrition status or enrollment in nutrition services through another appropriate provider)		the dietitian will document evaluation results and contacts in the health assessment nutrition section page on the Evaluation and Assessment tab in the Web IFSP.
the family declines EA Nutrition Services		the dietitian will document evaluation results in the nutrition section of the current health status on the Evaluation and Assessment tab in the Web IFSP. Note: The dietitian must be added to the IFSP for this step to occur. If the dietitian is not added, the evaluation will be provided to the SC electronically to upload.
the child is found to be in need of nutrition services	and the family accepts CHSC nutrition services	the dietitian will document assessment results in the nutrition section of the current health

		<p>status on the Evaluation and Assessment tab in the IFSP</p> <p>an outcome will be written into the IFSP in conjunction with the family and other IFSP team members as appropriate. The dietitian may also join an existing outcome if that is desired.</p> <p>service delivery information will be completed on the Services tab.</p>
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Dietitian/Family Contacts

If...	Then...
<p>CHSC is unable to reach the parent/guardian by telephone after several attempts</p>	<p>a letter will be sent to the family and the SC will be notified by email. The letter notifies the parent/guardian that the PEACH identified a possible nutrition need, and CHSC attempted several telephone contacts with no return call. The letter will state the infant or toddler remains eligible for nutrition assessment but CHSC will be making no further attempts to contact the family. The family can request a nutrition assessment at any time through their SC.</p>
<p>the child receives ongoing nutrition services</p>	<p>the dietitian will complete ongoing contacts in the log/notes section in the IFSP Services tab and provide outcome progress prior to an IFSP meeting.</p>

Note. Dietitians will provide a written report to the child’s primary care provider concerning nutrition assessment and recommendations.