



Child Health Specialty Clinics Early ACCESS Health Assessments



Guidelines for CHSC Health Assessments

This document provides information to assist Early ACCESS agencies in partnering with Child Health Specialty Clinics (CHSC) to provide child specific health assessment information. CHSC is available to provide health assessments for Area Education Agencies that do not have access to nursing services.

How are children identified for a Health Assessment?

Early ACCESS service coordinators should consider if a child has special health care needs or a diagnosed medical condition that will impact the child's learning. An Individualized Family Service Plan (IFSP) team can request a CHSC health assessment if the child has multiple medical diagnosis, sees medical specialists or has been frequently hospitalized. The Child and Adolescent Health Measurement Initiative (CAHMI) developed the Children with Special Health Care Needs (CSHCN) Screener to identify children with special health needs. The CSHCN Screener is validated and reliable, more information about this tool is available here:

https://www.cahmi.org/docs/default-source/default-document-library/cshcnscreeener-print-version.pdf?sfvrsn=9e98a4b3_0

Steps to Request a CHSC Health Assessment

A health assessment may be requested early in the IFSP process and reviewed annually upon request. The service coordinator should initiate the request no less than two weeks in advance of the initial or annual IFSP meeting. If the child has complex medical needs or a change in medical circumstances, a health assessment or update may be completed for a periodic IFSP.

1. Notify the family that the child qualifies for a CHSC health assessment.
2. Obtain an Early ACCESS Consent to Exchange and Release Information to CHSC/University of Iowa Hospitals and Clinics and an Early ACCESS Consent to Exchange and Release information with the medical providers or hospitals the child has received care from/at. Upload the signed consents to ACHIEVE.
3. Share the case with CHSC RN, Jennifer Jorgensen, in ACHIEVE. She is listed under the provider section, not the service coordinator section. Search by her last name, do not search by AEA.
4. E-mail Jennifer at jennifer-l-jorgensen@uiowa.edu and include the child's initials and date of the IFSP meeting so she can confirm the child is on her case list and enter the health assessment directly in the Evaluation/Assessment details in ACHIEVE.
5. If the CHSC RN does not have access to medical records electronically, she will let the service coordinator know that records need to be requested and forwarded to her electronically (fax: 319-678-7248).
6. The health assessment will be added to the evaluation/assessment details in ACHIEVE.

Review of Health Records and Documentation

The CHSC RN begins the health assessment by accessing pertinent medical records, including but not limited to any admission/discharge summaries from hospitals, history and physical reports, office visit summaries, newborn vision, hearing, and lead screenings, consultation reports from specialists, and notes from ancillary services such as physical therapists, occupational therapists, and dietitians. These records are reviewed to determine how the child's diagnoses may affect their physical, emotional, and

The Iowa Department of Education, as the lead agency, partners with the Iowa Health and Human Services Department, Child Health Specialty Clinics, and Iowa's Area Education Agencies to provide Early ACCESS services.



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intellectual development, and their personal safety and well-being. If a child needs current health information for transition to an Individualized Education Plan (IEP), it is appropriate for the school nurse to assist with obtaining this information.

The health assessment will include the following:

- Date summary was completed for the IFSP and the sources of information utilized including the Early ACCESS RN's name and credentials.
- Diagnosis: A list of the child's primary diagnoses and simple explanation, along with the ICD-10 codes only if included in the health records available.
- Medications: A list of the child's medications and what the medication is used for.
- Allergies: A list of the child's allergies (food, medication, and environmental), signs and symptoms of an allergic reaction, and instructions for what to do in the event of an allergic reaction.
- Medical and safety alerts: A list of health status alerts, threats to the child's safety and wellbeing as well as what to do in the event of an emergency should be listed in this section. These alerts should be related to the child's diagnosis and/or medications and are child specific.
- Immunizations: List specific immunization needed if recommended schedule is not up-to-date.
- Overall Current Health Status: Include a list of health services the child is receiving or upcoming appointments if known and a synopsis of the child's birth history or medical history written in family friendly, easy to understand language.

These items may be entered and tagged as separate evaluation/assessment notes:

- Vision: Obtained from the medical reports.
- Hearing: Obtained from the medical reports.
- Nutrition: Document typical eating pattern and any alternative feeding methods such as nutrition supplements or feeding tubes and information about the child's growth including weight and length history.