



Child Health and Disability Prevention Program

Spring 2018 Newsletter

CHDP Updates

New Vision Screening Guidelines

The Health Assessment Guidelines (HAGs) for Vision Screening have been updated as of January 2017.

- Children 3-5 years old should be screened with LEA symbols or HOTV letters at a distance of 10 feet.
- Children 5 years old and up may be screened with Sloan or Snellen charts at 10 feet if they comfortably know their letters. If they do not then LEA or HOTV may be used.
- Screeners may use either threshold or critical line screening techniques.
- Instrument-based screening may be used if the child cannot complete the screening with a chart.

For a complete copy of the updated guidelines please visit: <http://www.dhcs.ca.gov/services/chdp/Documents/HAG/Chapter27.pdf>

Reminder: CHDP Care Coordination and Foster Care Forms

The PM 160 form has been discontinued as of July 1, 2017 and replaced, in part, with the CHDP Care Coordination form. **These forms are for fee-for-service, non-foster care children that need follow up after a well-child exam.** Children who need follow-up are equivalent to the 4's and 5's on the old PM 160s. If your office does not wish to use these forms then the referral section from the patient's chart is also acceptable. These forms can be faxed to CHDP at 209-953-3632. Please see **Attachment A** for reference. For questions, call Surbhi Jayant, Supervising PHN, at 209-468-3082.

For foster children, the PHN-01 form replaces the PM 160 and is used to document all health care encounters. The caregiver should complete Section A and the health care provider should complete the rest. Please write the provider information legibly or use a stamp. Either the caregiver or provider may fax the form to the Health Care Program for Children in Foster Care at 209-932-2638. Please see **Attachment B** for reference. For questions, call Pam Lam, Sr. PHN at 209-468-1408.

Audiometric Training

The next training will be:

Date: Tuesday, April 17, 2018

Time: 8:30 am—1pm

Location: Multi-Purpose Room,
1601 E. Hazelton Ave, Stockton,
95205

Registration is required. **The registration deadline is April 9, 2018.** For questions, call or email Gwen Callaway at 209-468-8918 or gcallaway@sjcphs.org.

Kids Corner

SJTEETH—A Letter from Dr. Park

After a competitive statewide grant application process last year, the California Department of Health Care Services awarded our community with funding to improve oral health care services for thousands of low income children and youth in San Joaquin County.



First 5 San Joaquin is serving as the lead agency for San Joaquin Treatment & Education for Everyone on Teeth & Health (SJ TEETH), the coalition of local health, education, and nonprofit organizations that are collaborating for this grant. SJ TEETH has begun its work of delivering preventative services such as fluoride varnish during visits to schools, screening children for cavities, referring families to dentists for continuing care, educating families on proper oral health habits, and introducing virtual dental home systems.

Through this grant, medical providers will also have an opportunity to increase their knowledge and practice of oral health, while obtaining a stipend for their time in taking online courses. I highly encourage our local pediatric providers to participate. Please see **Attachment C and D** for the Smiles for Life application instructions. Together, we can all work to improve the oral health and overall health of our children!

For more information on SJ TEETH and the Smiles for Life stipend program please call (209) 953-5437, email sjkids@sjgov.org, or go to www.sjkids.org/Funding-Opportunities.

PHS Program Spotlight Series: Black Infant Health (BIH)*

The African American infant mortality rate in San Joaquin County has risen to 13.1 per 1,000 live births (more than twice that of other races) and the preterm birth rate is 15.9% (almost twice that of other races). **BIH is designed to empower women to make healthy life choices for themselves and their families by building on their strengths.** We honor the unique history and traditions of African-American people by presenting information in a culturally affirming manner. Everything is centered around the African-American woman and her needs.



BIH is a program within Maternal, Child, Adolescent Health (MCAH) that provides free education on the importance of early and continuous prenatal care; well-child checkups; breastfeeding; and timely and complete immunizations to ensure babies are born healthy and grow into healthy children. Our mission is to help more babies make it to their first birthday by ensuring their mothers have healthy pregnancies.

We offer individualized life planning and provide weekly mother support groups during and after pregnancy. They learn what to expect when pregnant, how to nurture and bond with their baby, tips in infant care and feeding, and how to manage and reduce stress. In addition, clients will be working with a Public Health Nurse and Mental Health Professional for extra support and resources.

In order to be eligible for BIH services a woman must identify as African-American. She must be 18 years or older and currently 30 weeks pregnant or less. There is no financial limitation to enrolling. We are located at 420 S. Wilson Way in Stockton. For more information, to request materials, or to refer a client please contact BIH coordinator Doreatia Hart at (209) 468-2169 or dhart@sjcphs.org. More information can also be found at <https://www.cdph.ca.gov/Programs/CFH/DMCAH/BIH/Pages/default.aspx>.

*Article contributed by Jennifer Matuska—BIH Community Outreach Liaison

News and Resources

Childcare Respite Program

The Child Abuse Prevention Council or Child Advocates/Parent Coaches (CAPC) has an emergency free child care program for kids 0-5 years old.

Care is typically provided Monday–Friday 9am—3pm. Parents should call in advance to allow for required paperwork and to ensure staff availability.

Please call 209-789-6445 to enroll, see [Attachment E](#), or visit www.nochildabuse.org for more information.



Child Advocates / Parent Coaches
OF SAN JOAQUIN COUNTY

New FDA Lead Warning

The Food and Drug Administration (FDA) has issued a warning for Balguti Kesaria Ayurvedic Medicine for high levels of lead. This product is sold online and manufactured by several different companies. Individuals can also bring or mail it from overseas.

Of the two cases involving Balguti Kesaria in California, the pills were found to have lead contents of 280 mcg/pill and 260 mcg/pill. More information can be found at: <https://www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/>



ADHD Tracker 1.0

The American Academy of Pediatrics (AAP) has a free app, ADHD Tracker 1.0, for Android and iPhone that makes completing and submitting behavioral assessments easier.



This app is not a diagnostic tool. It is intended to monitor children ages 4-18 years who have already been diagnosed and treated for Attention Deficit Hyperactivity Disorder (ADHD). The app uses the Vanderbilt Scales and tracks behavior patterns and symptoms.

Free Family Event!

Join us for the annual Children & Youth Day hosted by Family Resource and Referral Center! Be sure to stop by the [Safe Kids Zone](#) for games, prizes, and lots of safety info.

Date: Saturday, May 19, 2018

Time: 10am—3:30pm

Location: Pixie Woods, Louis Park, 3121 Monte Diablo Ave, Stockton



For more info, see [Attachment F](#) or contact Safe Kids San Joaquin at 209-468-2669.

CHDP Newsletter Team

CMS Medical Director	Maggie Park, MD
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CHDP Outreach & Support	Xia Lo
CHDP Office Assistant	Russell Espiritu

Child Health and Disability Prevention Program Care Coordination / Follow-up Form

Submit to the San Joaquin County CHDP Program within 5 business days of the examination - Fax: (209) 953-3632

Do not complete this form if child is in the foster care system. Health Care providers are required to submit a HCPCFC Foster Care Medical (Specialty)/ Dental Contact Form for all types of appointments. For foster children - providers only complete page 2.

Patient Name (Last) (First) (Initial)				Language		Date of Service Month Day Year	
Birthdate Month Day Year		Age	Sex	Gender	Patient's County of Residence	Telephone # (Home or Cell) () ()	Alternate Phone # (Work or Other) () ()
Responsible Person (Name) (Street) (Apt/Space #) (City) (Zip)						Ethnic Code <input type="checkbox"/> 1. American Indian <input type="checkbox"/> 2. Asian <input type="checkbox"/> 3. Black <input type="checkbox"/> 4. Filipino <input type="checkbox"/> 5. Mex.Amer./Hispanic <input type="checkbox"/> 6. White <input type="checkbox"/> 7. Pacific Islander <input type="checkbox"/> 8. Other	
Patient Eligibility	County	Aid	Identification Number		Next CHDP Exam Date: (Month, Date, Year)		
Health Coverage: <input type="checkbox"/> Medi-Cal FFS <input type="checkbox"/> Gateway <input type="checkbox"/> Managed Care Plan							

A. Medical Assessment and Referral Section

<input type="checkbox"/> No Medical Problems Suspected		Significant Medical History or Special Conditions: <input type="checkbox"/> No <input type="checkbox"/> Yes, Specify: _____	
Physical Exam	Problem Suspected	Referred To & Contact # Or <input type="checkbox"/> Return Visit Scheduled	Comments:
	Problem Suspected	Referred To & Contact # Or <input type="checkbox"/> Return Visit Scheduled	
	Problem Suspected	Referred To & Contact # Or <input type="checkbox"/> Return Visit Scheduled	
Nutritional Assessment	Problem Suspected	Referred To & Contact # Or <input type="checkbox"/> Return Visit Scheduled	
Developmental Screening	<input type="checkbox"/> Speech Delay <input type="checkbox"/> Social/Emotional <input type="checkbox"/> Cognitive <input type="checkbox"/> Fine Motor Delay <input type="checkbox"/> Gross Motor Delay <input type="checkbox"/> Other	Referred To & Contact # Or <input type="checkbox"/> Return Visit Scheduled	
Vision Screening	<input type="checkbox"/> Problem Suspected <input type="checkbox"/> Not screened - rescheduling <input type="checkbox"/> Other: _____	Referred To & Contact # Or <input type="checkbox"/> Return Visit Scheduled	
Hearing Screening	<input type="checkbox"/> Problem Suspected <input type="checkbox"/> Not screened - rescheduling <input type="checkbox"/> Other: _____	Referred To & Contact # Or <input type="checkbox"/> Return Visit Scheduled	

B. Dental Assessment and Referral Section

<input type="checkbox"/> Class I: No Visible Problems Mandated annual routine dental referral (beginning no later than age 1 and recommended every 6 months)	<input type="checkbox"/> Class II: Visible decay, small carious lesion or gingivitis Needs non-urgent dental care	<input type="checkbox"/> Class III: Urgent - pain, abscess, large carious lesions or extensive gingivitis Immediate treatment for urgent dental condition which can progress rapidly	<input type="checkbox"/> Class IV: Emergent - acute injury, oral infection or other pain Needs immediate dental treatment within 24 hours
Fluoride Varnish Applied: <input type="checkbox"/> Yes <input type="checkbox"/> No, parent refused <input type="checkbox"/> No, teeth have not erupted <input type="checkbox"/> Other reason for not applying: _____			
<input type="checkbox"/> Dental home referral		Referred To and Contact Number: _____	

C. Referring Provider Information

Service Location: Office Name, Address, Telephone Number	Provider Office NPI Number
	Rendering Provider Name (Print Name)
	Provider Signature
	Date

San Joaquin TEETH

Medical Professional Stipend Program 2018 Smiles for Life Online Education

APPLICATION INSTRUCTIONS

The San Joaquin Treatment & Education for Everyone on Teeth & Health (SJ TEETH) program is pleased to announce a stipend opportunity for medical providers for the completion of selected Smiles for Life modules to promote collaboration and referrals between medical and dental professionals and increase knowledge of oral health.

To qualify, medical professionals must serve children up to age 20 in San Joaquin County. A \$50.00 stipend per module is available to medical providers for the completion of up to five selected Smiles for Life modules ([Smiles for Life Oral Health Curriculum](#)) by Friday, November 16, 2018.

To Apply for the SJ TEETH Stipend Program:



- Application release date: Friday, January 26, 2018
- Complete all fields of the application and a (required) W-9 form ([Fillable W-9](#)). (Business option should match corporate tax ID. W-9 will be kept in a secure location.)
- Select which Smiles for Life modules you intend to complete.

To Submit the Application:



Submit the completed application and W-9 to First 5 San Joaquin:

By mail: First 5 San Joaquin, P.O. Box 201056, Stockton, CA 95201

By fax: (209) 932-2675

By email: sickids@sjgov.org

Applications will be accepted on a first come, first served basis subject to funding availability. Please do not begin any of the Smiles for Life modules prior to receipt of written confirmation of your enrollment in the SJ TEETH Medical Professional Stipend Program.

To Receive the Stipends:



- To access the modules, go to www.smilesforlifeoralhealth.org and click on "Online Learning." Select your requested module to begin the course.
- Complete all modules requested in your application by Friday, November 16, 2018. Modules not requested at time of application are not eligible for stipends.
- Submit certificates of completion (available online upon successful completion of each module) to First 5 San Joaquin via mail, fax or email by Friday, November 30, 2018.

Thank you for your interest in oral health education. As medical professionals, you can have a major impact on the health of individuals and communities through collaborative practices that ensure the integration of oral health and primary care.

For more information, please call (209) 953-5437, email sickids@sjgov.org, or go to www.sickids.org/Funding-Opportunities.



Treatment + Education for Everyone on Teeth + Health



Medical Professional Stipend Application Smiles for Life Online Education

Applicant Information

First name

Last name

Phone number

E-mail address

Professional role:

- Physician (MD)
 Physician (DO)
 Physician Assistant
 Advanced Practice Nurse
 Nurse
 Midwife
 Medical Assistant
 Other

Smiles for Life modules to be completed:

- Course 1: Relationship of Oral & Systemic Health
 Course 2: Child Oral Health
 Course 4: Acute Dental Problems
 Course 6: Caries Risk Assessment, Fluoride Varnish & Counseling
 Course 7: The Oral Exam

Program/Practice Information

Business name

Street address

City State Zip code

Phone number

E-mail address

Does your program serve Medi-Cal clients?
 Yes
 No

What patient population do you serve?
 Check all that apply.
 0-5 years
 6-12 years
 13-18 years
 18-21 years

My W-9 is attached.

Signature

Date

(An electronic signature is acceptable.)

EMERGENCY CHILD CARE

DAYTIME CHILD CARE

PLEASE BRING THE FOLLOWING INFORMATION:

PARENT/GUARDIAN PHOTO ID, CHILD'S MEDICAL CARD, IMMUNIZATIONS, BIRTH CERTIFICATE

For more information contact:

(209) 789-6445

Openings for Ages 0-5 years



Child Advocates / Parent Coaches
OF SAN JOAQUIN COUNTY

Family Resource & Referral Center

Children & Youth Day at Pixie Woods



BAM!



Saturday, May 19, 2018
10:00 AM - 3:30 PM

Pixie Woods at Louis Park
3121 Monte Diablo Avenue
Stockton, CA 95203



POW!



ZAP!

FREE Admission



Craft Activities



Entertainment



Information & Resources



Sponsored by:

Family Resource & Referral Center
City of Stockton, Community Services Department



For more information, call 800-526-1555

