



Health Requirements and School Entry

*WV Universal Pre-K Leadership Institute Session
October 26, 2021*



Welcome and Introductions

Vanessa Wolfe, HealthCheck Program Director, WVDHHR

Teresa Marks, Director, Division of Infant, Child and Adolescent Health, State Title V CYSHCN Director, WVDHHR

Carol Ward, Federal Programs and Support, Student Support and Well-being, WVDE

Lee Ann Brammer, Federal Programs and Support, Special Education, WVDE

WV Universal Pre-K Steering Team Members

Janet Bock-Hager, Early and Elementary Services, WVDE

Brittany Doss, Head Start State Collaboration Office

Lisa Fisher, Early and Elementary Services, WVDE

Tricia Haynes, Health and Human Resources Specialist Sr., Division of Early Care and Education, WVDHHR



Health Promotion and Disease Prevention

West Virginia Board of Education Policy 2423- Health Promotion and Disease Prevention and School Entry
&

West Virginia Board of Education Policy 2525- West Virginia's Universal Access to a Quality Early
Education System

- Requirements:

- Immunizations (upon entry)
- Well child examinations (within 45 days of enrollment/entry)
- Oral Health examinations (within 45 days of enrollment/entry)

Immunizations

Policy 2423:

6.1. Students must be in compliance with the required immunization schedule as set forth by the Bureau Commissioner.

6.2. All children entering Pre-K, kindergarten or any West Virginia public school for the first time must have immunizations and show proof upon enrollment as defined by W. Va. Code §16-3-4 and W. Va. 64CSR95. All Pre-K students shall also meet requirements found in 126CSR28, WVBE Policy 2525, West Virginia's Universal Access to a Quality Early Education System.

This requirement also applies to students who receive "drop-in services."

School Entry- Pre-K

https://oepe.wv.gov/immunizations/Documents/school/Pre-K_requirements.pdf

<https://oepe.wv.gov/immunizations/Pages/Healthcare-Provider-Area.aspx>



Immunizations

Provisional Enrollment:

Students may be provisionally enrolled in Pre-K with at least one dose of each required vaccine and allowed up to eight months, if necessary for minimum intervals, to obtain up-to-date status. The WVDHHR, Bureau for Public Health recommends that vaccine doses administered 4 days or fewer before the minimum interval or age be considered valid.

Immunizations- WVSIIIS

West Virginia Statewide Immunization Information System (WVSIIIS) is a statewide electronic data system for reporting and tracking administrations of vaccines for use by health care practitioners.

- This system was created to consolidate individuals' immunization records, forecast recommended vaccinations, generate reminder notices due to overdue immunizations, identify improper vaccine administrations, conduct inventory management and systematic accountability, and provide general immunization practice management functions.
- Health care providers are required to report all administrations of vaccines as defined in W. Va. Code §16-3-4 and Bureau Rules, 64CSR7 and 64CSR95.
- WVSIIIS reduces vaccine-preventable diseases, over-vaccination, and provides up-to-date patient immunization histories and vaccine forecasting for patients not up-to-date.
- In addition to medical practitioners, access and services provided to schools, childcare providers, and other stakeholders with public health immunization obligations.



HealthCheck or Other Health Screening Form

Policy 2423:

5.2. HealthCheck: New enterers in West Virginia public school at first entry of either prekindergarten (Pre-K) or Kindergarten and all students progressing to grades 2, 7 and 12 should have on file within 45 days of enrollment/entry or prior to the first day of school attendance a record of a HealthCheck screening, or other comprehensive health screening comparable to the HealthCheck protocol.

WV HealthCheck Resources- <https://dhhr.wv.gov/healthcheck/Pages/default.aspx>

West Virginia Department of Health and Human Resources Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) HealthCheck Program Preventive Health Screen-
<https://dhhr.wv.gov/HealthCheck/providerinfo/Pages/default.aspx>



Screen Date _____

West Virginia Department of Health and Human Resources
Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) HealthCheck Program Preventive Health Screen

4 Year Form

Name _____ DOB _____ Age _____ Sex: ☐ M ☐ F

Weight _____ Height _____ BMI _____ Pulse _____ BP _____ Resp _____ Temp _____ Pulse Ox (optional) _____

Allergies ☐ NKDA _____

Current meds ☐ None _____

☐ Foster Child ☐ Child with special health care needs ☐ IEP/section 504 in place _____

Accompanied by ☐ Parent ☐ Grandparent ☐ Foster parent ☐ Foster organization _____ ☐ Other _____

Oral Health

Date of last dental visit _____

Current oral health problems _____

Water source ☐ Public ☐ Well ☐ Tested

Fluoride supplementation ☐ Yes ☐ No

Fluoride varnish applied (apply every 3 to 6 months)

☐ Yes ☐ No _____

Vision Acuity Screen:

R _____ L _____ ☐ UTO (retest in 6 months)

Wears glasses? ☐ Yes ☐ No

Hearing Screen

20 dB @ ☐ UTO (retest in 6 months)

R ear _____ 500HZ R ear _____ 1000HZ _____ 2000HZ _____ 4000HZ

L ear _____ 500HZ L ear _____ 1000HZ _____ 2000HZ _____ 4000HZ

Wears hearing aids? ☐ Yes ☐ No

Developmental**Developmental Surveillance** (✓ Check those that apply)

☐ Child can enter bathroom and have a bowel movement by himself/herself ☐ Child can brush his/her teeth ☐ Child can dress and undress without much help ☐ Child can engage in well-developed imaginative play ☐ Child can answer simple questions ☐ Child can speak in words that are 100% understandable to strangers ☐ Child can draw pictures that you recognize ☐ Child can follow simple rules when playing games ☐ Child can tell you a story from a book ☐ Child can skip on 1 foot ☐ Child can climb stairs, alternating feet, without support ☐ Child can draw a person with at least 3 body parts ☐ Child can draw a simple cross ☐ Child can unbutton and button medium sized buttons ☐ Child can grasp pencil with thumb and fingers instead of fist ☐ Concerns about child's behavior, speech, learning, social or motor skills _____

Immunizations: Attach current immunization record

☐ UTD ☐ Given, see immunization record ☐ Entered into WVSRIS

Referrals: ☐ Developmental

☐ Mental/behavioral health/trauma- Help4WV.com/1-844-435-7438

☐ Dental ☐ Vision ☐ Hearing

☐ Other _____

☐ Children with Special Health Care Needs (CSHCN)

1-800-642-9704

☐ Women, Infants and Children (WIC) **1-804-558-0030**

Please Print Name of Facility or Clinician _____

Signature of Clinician/Title _____

 The information above this line is intended to be released to meet school entry requirements

Medical History

☐ Initial Screen ☐ Periodic Screen

Recent injuries, surgeries, illnesses, visits to other providers and/or counselors and/or hospitalizations: _____

☐ Family health history reviewed

Concerns and/or questions: _____

Social/Psychosocial History

What is your family living situation: _____

Family relationships ☐ Good ☐ Okay ☐ Poor

Do you have concerns about meeting basic family needs daily and/or monthly (food, housing, heat, etc.)? ☐ Yes ☐ No _____

Are you and/or your partner working outside home? ☐ Yes ☐ No

Child care/after school care: _____

How much stress are you and your family under **now**?

☐ None ☐ Slight ☐ Moderate ☐ Severe

What kind of stress? (✓ Check those that apply)

☐ Relationships (partner, family and/or friends) ☐ School/work

☐ Child care ☐ Drugs ☐ Alcohol ☐ Violence/abuse (physical,

emotional and/or sexual) ☐ Family member incarcerated ☐ Lack of

support/help ☐ Financial/money ☐ Emotional loss ☐ Health

insurance ☐ Other _____

Is your child in school? ☐ Yes ☐ No _____

Favorite thing about school: _____

Any problems? _____

Activities outside school: _____

Peer relationships/friends ☐ Good ☐ Okay ☐ Poor

Risk Indicators (✓ Check those that apply)

Child exposed to ☐ Cigarettes ☐ E-Cigarettes ☐ Alcohol

☐ Drugs (prescription or otherwise)

☐ Access to firearm(s)/weapon(s) ☐ Has a firearm(s)/weapon(s)

Are the firearm(s)/weapon(s) secured? ☐ Yes ☐ No ☐ NA

☐ Witnessed violence/abuse ☐ Threatened with violence/abuse

☐ Scary experience that your child cannot forget _____

Do you utilize a car/booster seat for your child? ☐ Yes ☐ No

☐ Excessive television/video game/internet/cell phone use

General Health

☐ Growth plotted on growth chart

☐ BMI calculated and plotted on BMI chart

Continue on page 2





Website:

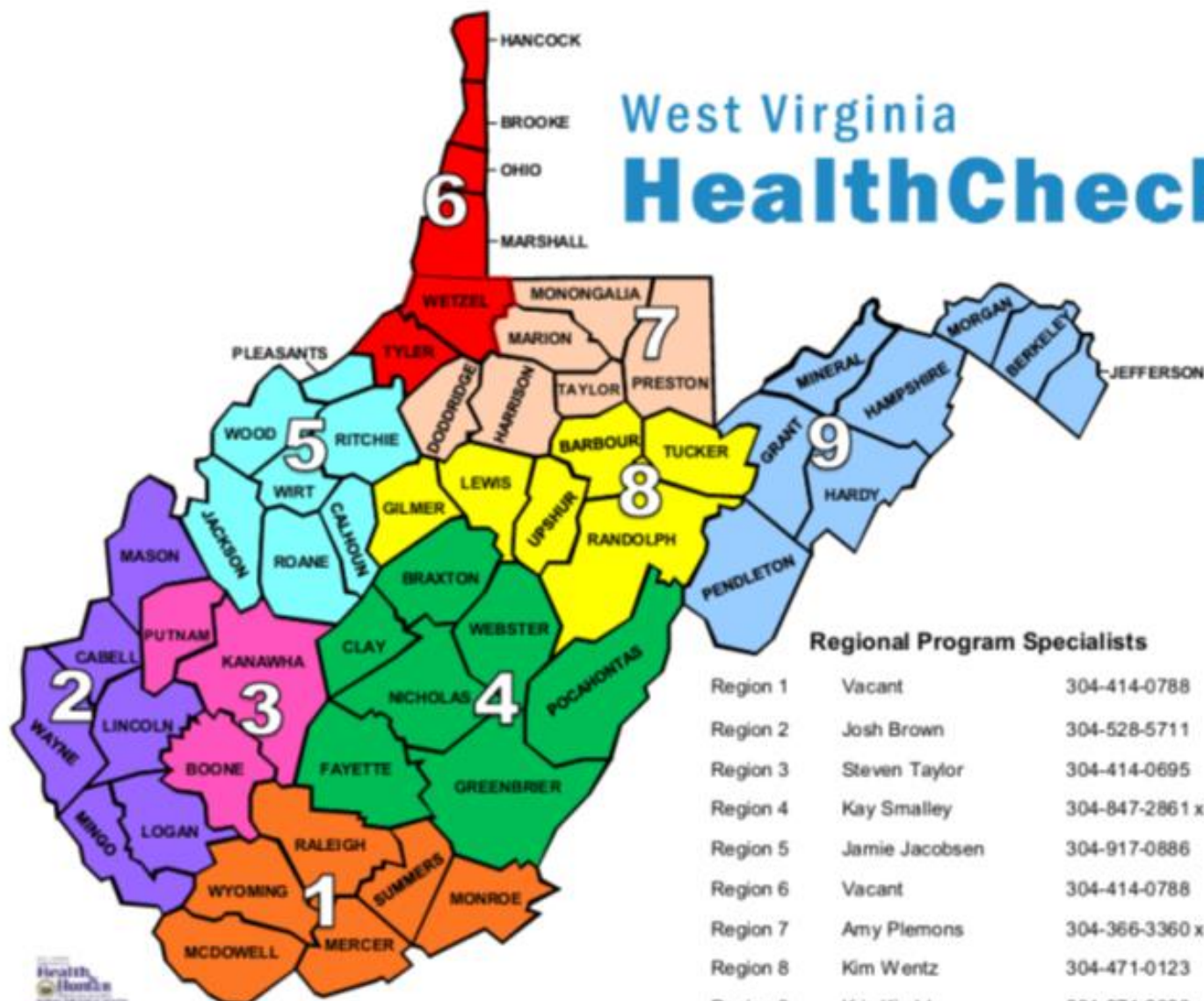
<https://dhhr.wv.gov/HealthCheck/WhatIs/Pages/default.aspx>

Speech and language screening information is embedded in the "Developmental" section of the "Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) HealthCheck Program Preventive Health Screen" form.

Regional Program Specialists:

https://dhhr.wv.gov/HealthCheck/Pages/Program_Specialists.aspx

West Virginia HealthCheck



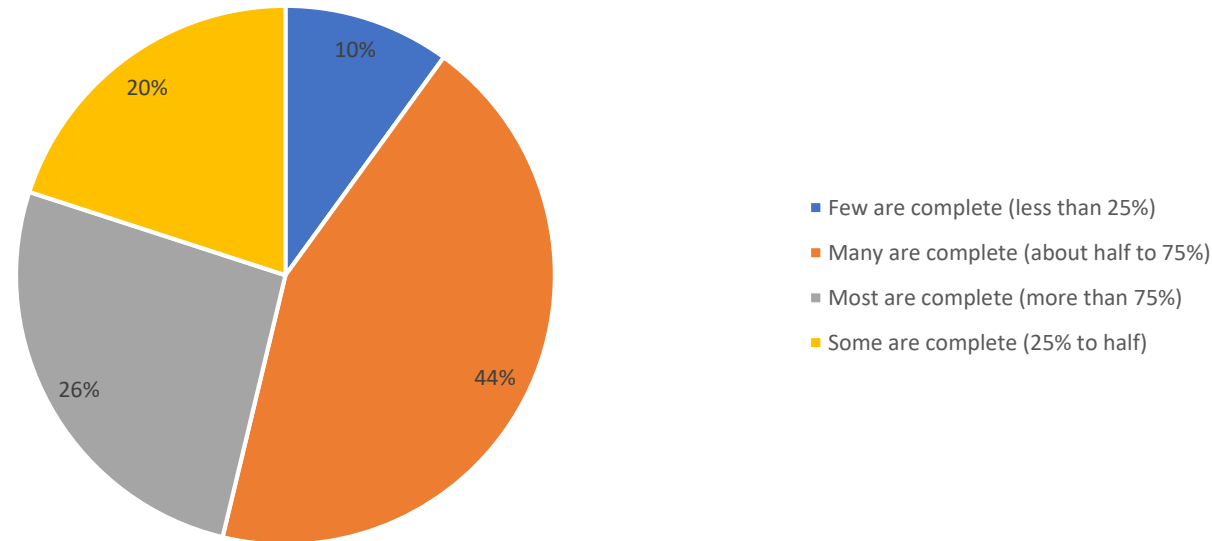
Regional Program Specialists

Region 1	Vacant	304-414-0788
Region 2	Josh Brown	304-528-5711
Region 3	Steven Taylor	304-414-0695
Region 4	Kay Smalley	304-847-2861 x-205
Region 5	Jamie Jacobsen	304-917-0886
Region 6	Vacant	304-414-0788
Region 7	Amy Plemons	304-366-3360 x-113
Region 8	Kim Wentz	304-471-0123
Region 9	Kris Kimble	681-271-2038



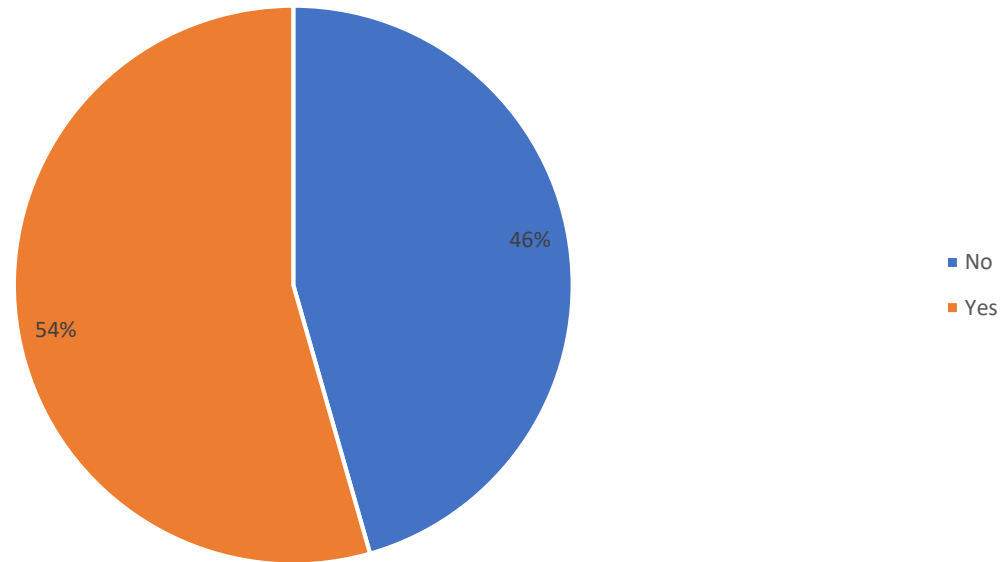
WV School Entry and HealthCheck Screening Survey Results

Do you often receive **completed** HealthCheck Health History and Preventive Health Screening Forms or other comparable health screenings from physicians?



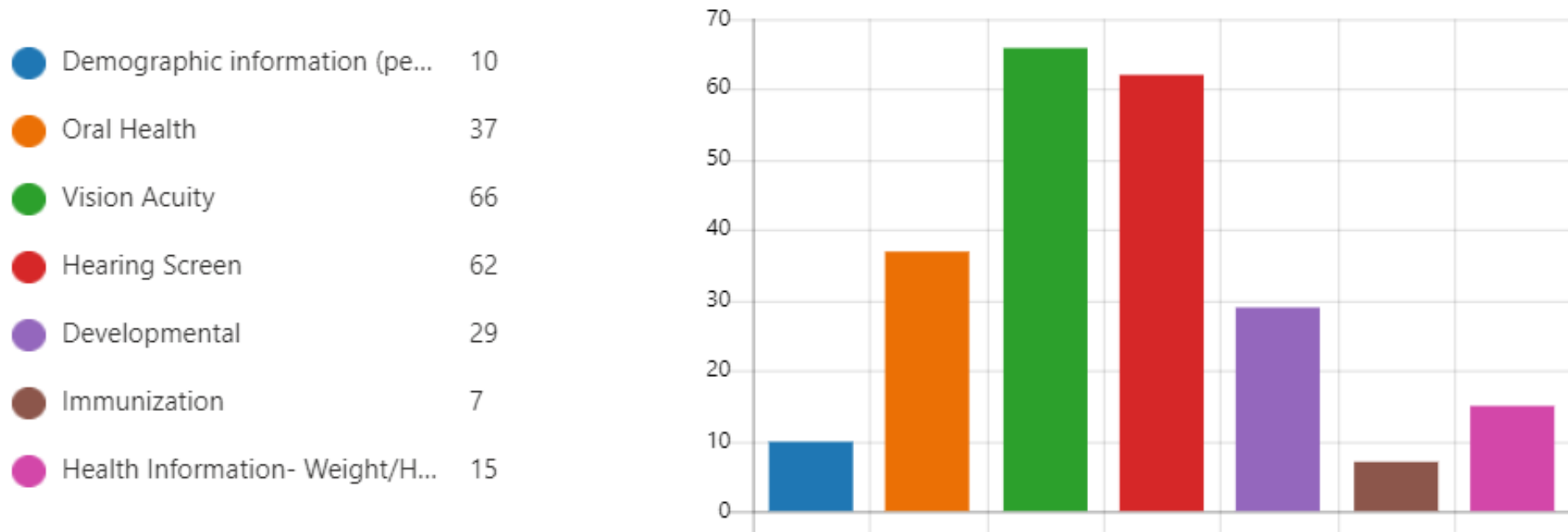
WV School Entry and HealthCheck Screening Survey Results

Are incomplete health screening forms typically from the same physician's office?



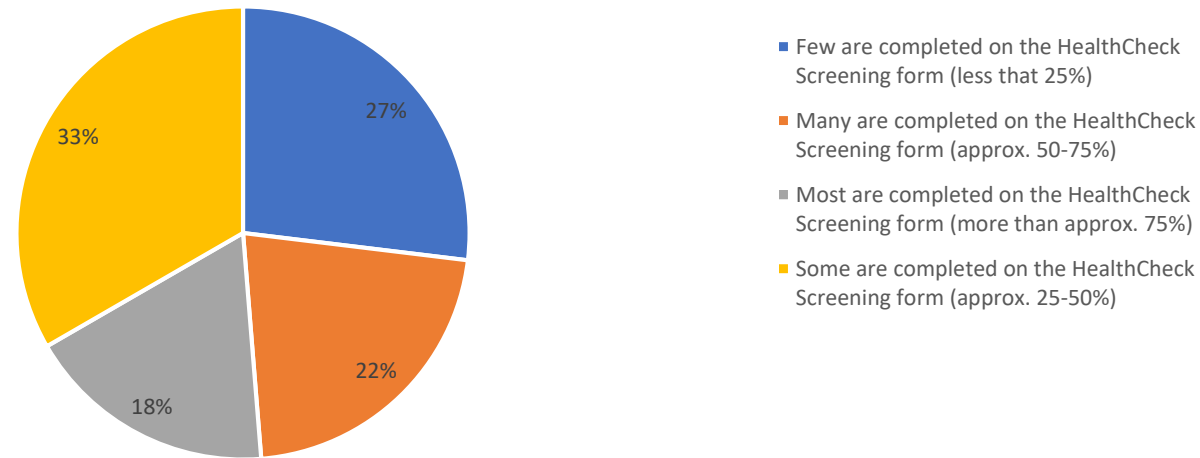
WV School Entry and HealthCheck Screening Survey Results

What sections of the HealthCheck Health History and Preventive Health Screening Form or comparable health screening are most often incomplete?



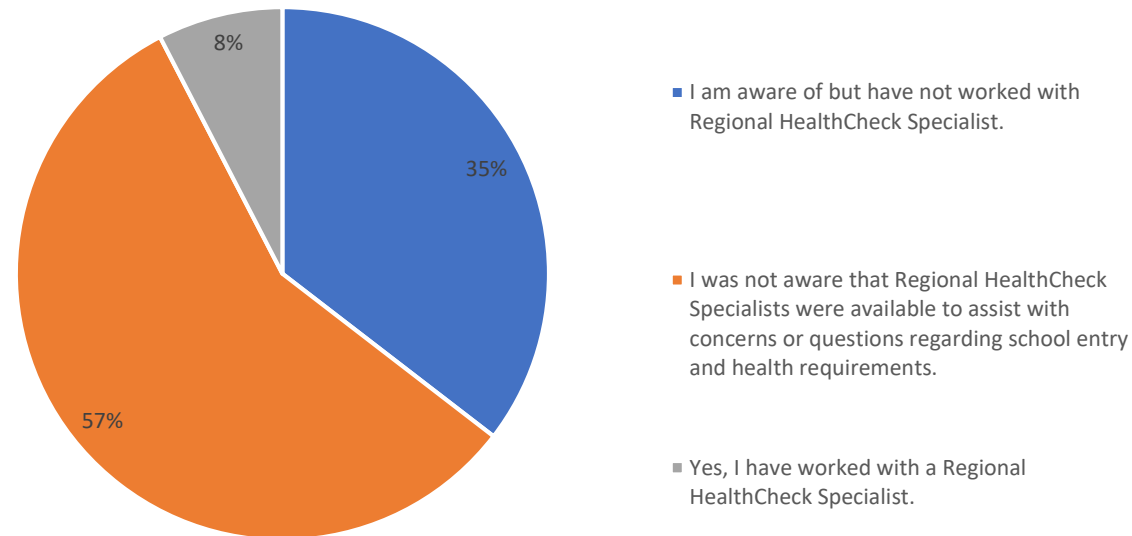
WV School Entry and HealthCheck Screening Survey Results

Are health screening records typically completed on the state-provided HealthCheck Health History and Preventive Health Screening Form?



WV School Entry and HealthCheck Screening Survey Results

Indicate how you have worked with Regional HealthCheck Specialists from the WV Department of Health and Human Resources to address concerns or questions regarding school entry and health requirements?



Oral Health

Policy 2423:

5.3. Oral Health: New enterers in West Virginia public school at first entry of either Pre-K or Kindergarten and all students progressing to grades 2, 7 and 12 should have on file within 45 days of enrollment/entry or prior to the first day of school attendance a record of an oral health examination.

Oral Health Exam by dentist for new enterers in WV public school Pre-K and Kindergarten and students progressing to grades 2, 7 and 12

Parent/guardian submit documentation of completed oral health exam to school personnel within 45 days of the start of the school year

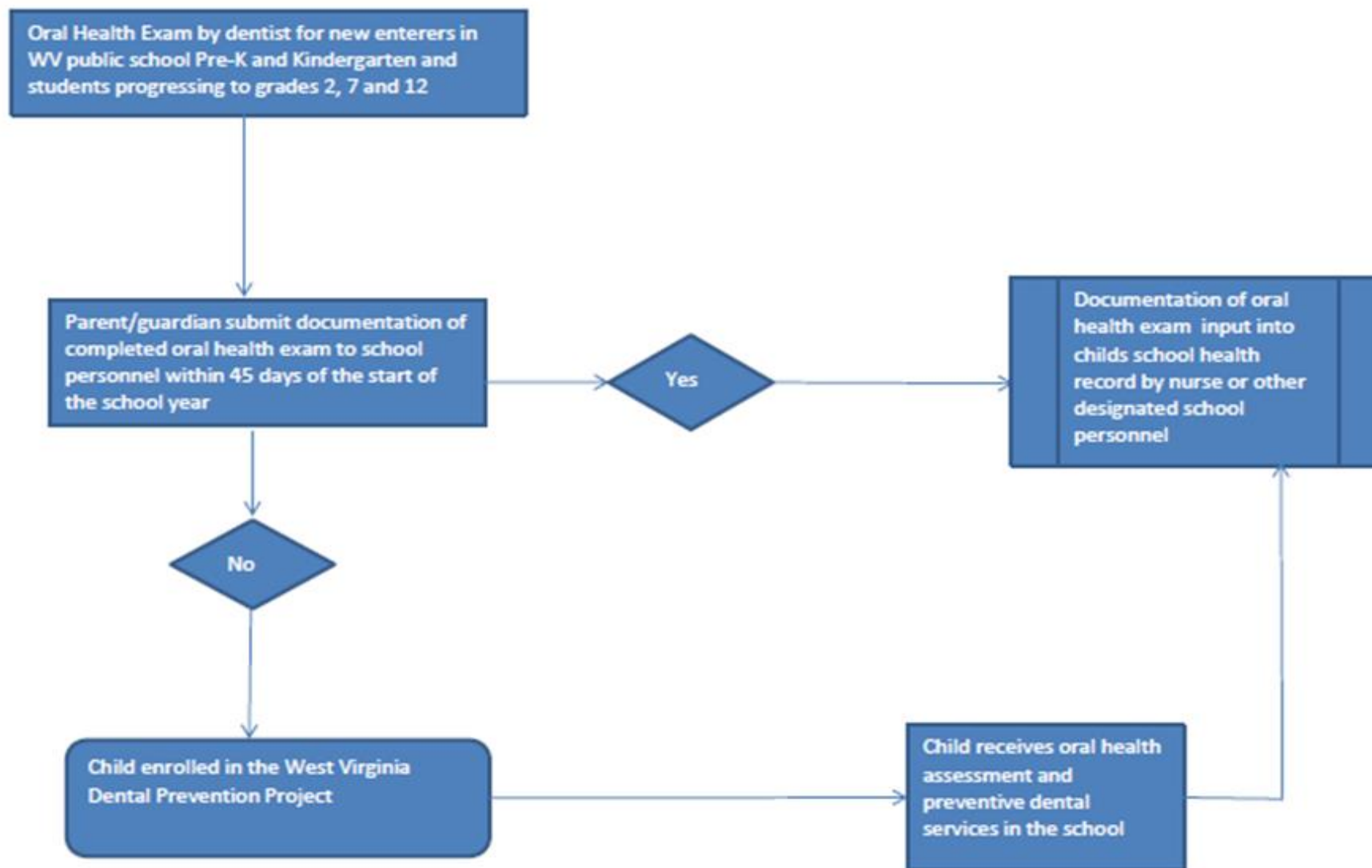
Yes

Documentation of oral health exam input into child's school health record by nurse or other designated school personnel

No

Child enrolled in the West Virginia Dental Prevention Project

Child receives oral health assessment and preventive dental services in the school



WV Oral Health Program

The Oral Health Program (OHP) is administered by the West Virginia Department of Health and Human Resources, located within the Bureau for Public Health, Office of Maternal, Child and Family Health (OMCFH) under the Division of Infant, Child and Adolescent Health.

The mission of the program is to promote and improve the oral health of all West Virginians.

<https://dhhr.wv.gov/oralhealth/about/Pages/default.aspx>

Health Requirements and Follow-Up

Questions to Consider:

How do you ensure follow-up occurs?

Is your data tracked in WVEIS and/or other platforms?

Who is responsible?

Does your core team ensure a process? How is the process monitored and supported?

How does your program promote a medical and dental home to support coordination of care for young children?



Final Questions and Thoughts

Resources

WVDHHR Office Epidemiology & Prevention Services: Immunization Requirements:

<https://oeps.wv.gov/immunizations/Pages/default.aspx#school>

WVBE Policies 2423 & 2525:

<http://wvde.state.wv.us/policies/>

WV HealthCheck:

<https://dhhr.wv.gov/healthcheck/Pages/default.aspx>

WV HealthCheck Provider Information and HealthCheck Health History and Preventive Health Screening Forms:

<https://dhhr.wv.gov/HealthCheck/providerinfo/Pages/default.aspx>

WV Oral Health Program:

<https://dhhr.wv.gov/oralhealth/Pages/default.aspx>



Contact Information

Vanessa Wolfe- vanessa.c.wolfe@wv.gov

Teresa Marks- teresa.d.marks@wv.gov

Carol Ward- carol.l.ward@k12.wv.us

Lee Ann Brammer- lbrammer@k12.wv.us

Julie Jackson, RDH, NCTTP – Oral Health Program Director - julie.a.jackson@wv.gov

Ravi Parker, RDH - Oral Disease Prevention Coordinator, OHP - ravi.d.parker@wv.gov

WV Universal Pre-K Steering Team Members- WVPreKsteeringteam.wvde@k12.wv.us

Janet Bock-Hager- jbockhager@k12.wv.us

Brittany Doss- brittany.n.doss@wv.gov

Lisa Fisher- lmray@k12.wv.us

Tricia Haynes- Patricia.L.Haynes@wv.gov

