

BMCH
Family Case Management
&
High Risk Infant Follow-Up



ASSESSMENT

NEWBORN SCREENING: GET THE FACTS



There are more than

4 MILLION

babies born in the United States each year



Did you know...

Newborn screening is one of the **MOST SUCCESSFUL** public health initiatives in the nation

Children should be **SCREENED SHORTLY AFTER 24 HOURS** of being born



Newborn screening helps keep your baby healthy through a **HEEL STICK, HEARING TEST & PULSE OXIMETRY**



More than **1 IN 300 NEWBORNS** have a condition detectable through newborn screening

Across the country at least

26

HEALTH CONDITIONS are required in newborn screening

Most babies with serious but treatable conditions caught by newborn screening **GROW UP HEALTHY** with expected development

Source: **BabysFirstTest.org**

This project is funded by the Maternal and Child Health Bureau, Health Resources and Services Administration (HRSA), Grant No. U59MC16509



<https://dph.illinois.gov/topics-services/life-stages-populations/newborn-screening.html>

701- Service Barriers Assessment

Providers
Transportation
Childcare
Difficulty Communicating
Fear
Ability to Pay

712-Infant Risk Assessment

Comment may be required
Gestational age/weight at birth
EPDST/Health concerns/NICU
Feeding concerns
Violence/legal Concerns
Home Environment
Getting enough to eat/WIC

Infant 0-2 Months

Milestones:

- Calms down when spoken to or picked up
- Seems happy when you walk with her/him
- Makes sounds other than crying
- Reacts to loud sounds
- Moves both arms and legs
- Holds head up when on tummy

[Important Milestones: Your Baby By Two Months | CDC](#)

*Anticipatory Guidance (Cornerstone)

- 708A or B



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Infant 4 months



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Milestones:

- Makes sound (cooing)
- Turns head toward sound of your voice
- If hungry, will open mouth to breast or bottle
- Holds head steady with out support when holding them
- Brings hand to mouth
- Holds toy when put in hand

Important Milestones: Your Baby By Four Months | CDC

*Anticipatory Guidance (Cornerstone)

- 708C

Infant 6 months

Milestones:

- Knows familiar people
- Looks at self in mirror
- Blows “raspberries”
- Makes squealing noise
- Reaches for a toy
- Puts things in mouth
- Rolls from tummy to back

[Important Milestones: Your Baby By Six Months | CDC](#)

*Anticipatory Guidance (Cornerstone)

- 708D



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Infant 9 months

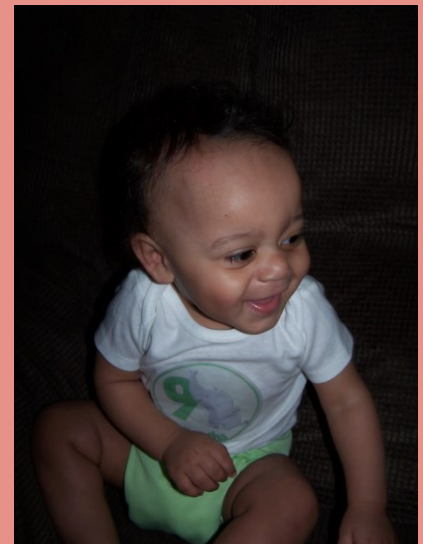
Milestones:

- Is shy or fearful around strangers
- Reacts when you leave
- Plays peek-a-boo
- Makes sounds “mamamama” and “bababababa”
- Bangs two things together
- Sits without support
- Uses fingers to rakes food toward self

[Important Milestones: Your Baby By Nine Months | CDC](#)

*Anticipatory Guidance (Cornerstone)

- 708E



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Infant 12 months



Milestone:

- Plays games pat-a-cake
- Waves “bye-bye”
- Says “mama and dada”
- Puts something in a container
- Pulls up to stand
- Drinks from a cup without a lid as you hold it
- Picks up things between thumb and pointer finger

[Important Milestones: Your Baby By One Year | CDC](#)

* Anticipatory Guidance (Cornerstone)

- 708F



SERVICES/REFFERAL

EPSDT

(Early Periodic Screening, Diagnosis, and Treatment)

Early: Performing exams ASAP to prevent possible diseases or disabilities by

Periodic Screening: at regular intervals, using standardized exams at crucial points in child's life for Medical, Vision, Hearing, Dental

Diagnosis: thereby finding the reason for a sign, symptom, or abnormal screening and then provide the

Treatment: "to control, correct, or lessen health problems".

[A Guide for States: Coverage in the Medicaid Benefit for Children and Adolescents](#)

Establish Medical Home

- **PCP (Primary Care Physician) has all health Information**
- **Better continuity of care**
- **Child becomes familiar and develops trust**

Periodicity Schedule as recommended by Bright Futures/the AAP

Birth-1 year:

Newborn(within 24Hrs of birth)

3-5 days of life or 48-72hrs after d/c

1 months

2 months

4 months

6 months

9 months

12 months

1-3 years: **15 months**

18 months

24 months/30 months

3-6 years: **Annually**

6-21 years: Every other Year unless
medically necessary

*** If DCFS case needs to see Dr. annually**

Ages and Stages

ASQ: accurate, reliable developmental and social-emotional screening.

Ages & Stages Questionnaires® (ASQ®) provides reliable, accurate developmental and social-emotional screening for children between birth and age 6. Drawing on parents' expert knowledge, ASQ has been specifically designed to pinpoint developmental progress and catch delays in young children—paving the way for meaningful next steps in learning, intervention, or monitoring.

[About ASQ - Ages and Stages](#)

Early Intervention

What Are Early Intervention (EI) Services?

Early intervention services are designed to meet your child's needs in these areas of development:



- Physical (how your baby moves and explores)
- Cognitive (how your baby learns)
- Communication (how your baby lets you know what he needs)
- Social and emotional (how your baby engages with you and shows feelings)
- Adaptive (how your baby uses new skills)

EI services may include:

- Assistive technology
- Audiology/aural rehabilitation
- Developmental therapy/special instruction
- Family training and support
- Health consultation
- Medical services (only for diagnostic or evaluation purposes)
- Nursing
- Nutrition
- Occupational therapy
- Physical therapy
- Psychological/counseling services
- Service coordination
- Sign language or cued language
- Social work
- Speech language pathology
- Transportation
- Vision
- Translation/interpretation to other languages

The delivery of these services should meet your child's and family's preferences, learning styles, and cultural beliefs.

[IDHS: Early Intervention Information \(state.il.us\)](http://state.il.us)



EDUCATION



Baby's Benefits of Breastfeeding:

- ④ Necessary, early **bonding** between mom and baby
Skin to Skin contact with mother within 30 minutes of Birth
- ④ **Absolute, best possible nutrition**
- ④ **Protection** with mom's antibodies/immune factors against variety of diseases and infections
- ④ **Possible protection** from family allergies
- ④ **Less likely to have** acute leukemia, lymphoma, and Sudden Infant Death Syndrome (SIDS) or Sudden Unexpected Infant Death (SUID)

Human Milk Storage Guidelines

STORAGE LOCATIONS AND TEMPERATURES

TYPE OF BREAST MILK	Countertop 77°F (25°C) or colder <i>(room temperature)</i>	Refrigerator 40 °F (4°C)	Freezer 0°F (-18°C) or colder
Freshly Expressed or Pumped	Up to 4 Hours	Up to 4 Days	Within 6 months is best Up to 12 months is acceptable
Thawed, Previously Frozen	1–2 Hours	Up to 1 Day <i>(24 hours)</i>	NEVER refreeze human milk after it has been thawed
Leftover from a Feeding <i>(baby did not finish the bottle)</i>	Use within 2 hours after the baby is finished feeding		

These guidelines are for healthy full-term babies and may vary for premature or sick babies. Check with your health care provider.

Find more breastfeeding resources at: WICBreastfeeding.fns.usda.gov
www.cdc.gov/breastfeeding/



CC01-1055 ©

Centers for Disease Control and Prevention. (2020). Proper Storage and Preparation of Breast Milk .
Centers for Disease Control and Prevention.
https://www.cdc.gov/breastfeeding/recommendations/handling_breastmilk.htm

BONDING WITH BABY



- Skin-to-Skin contact and breastfeeding
- Baby Blues
- Post Partum Depression
- Lack of support
- Touch, talk, care

• <https://dph.illinois.gov/topics-services/life-stages-populations/newborn-screening.html>

Crying is Baby's Communication:

- * I'm hungry
- * I'm thirsty
- * I have a wet/dirty diaper
- * I need a bathing
- * I'm too hot/too cold
- * I'm hurting/uncomfortable
- * I'm tired/over stimulated



PURPLE Crying

Occurs:

Peak: more at 2 months, less 3-5 months

Unexpected: can come and go

Resists soothing: will cry no matter what is tried

Pain-like face: even if not in pain

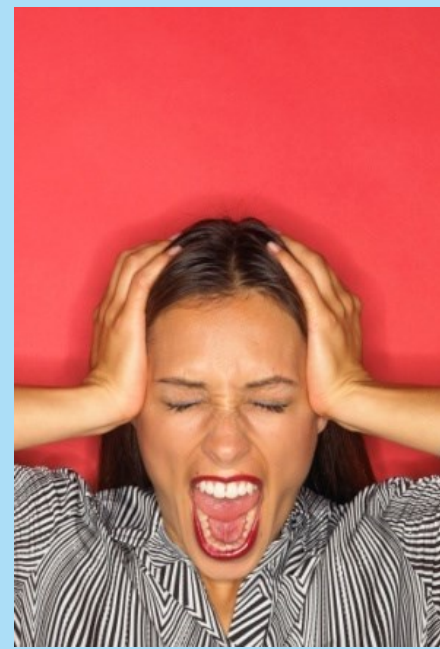
Long lasting: can be up to 5 hours/day

Evening: seems to be more in PM



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Stress Management



- Check baby for all issues from two previous slides
- If no noticeable problems, try to lay baby down
- If caregiver gets to upset, take a time-out
- Crying is leading cause for Shaken Baby Syndrome

Shaken Baby Syndrome /Abusive Head Trauma

- Excessive crying is leading cause
- Non-parent Caregiver
- Lack of Support/Stress Management

Signs :

***Lethargic, less mobile, lack of muscle control, failure to thrive, muscle asymmetry**



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IMED

2023 Recommended Immunizations for Children from Birth Through 6 Years Old

VACCINE	Birth	1 MONTH	2 MONTHS	4 MONTHS	6 MONTHS	12 MONTHS	15 MONTHS	18 MONTHS	19-23 MONTHS	2-3 YEARS	4-6 YEARS
HepB Hepatitis B	HepB	HepB			HepB						
RV* Rotavirus			RV	RV	RV*						
DTaP Diphtheria, Pertussis, & Tetanus			DTaP	DTaP	DTaP			DTaP			DTaP
Hib* Haemophilus influenzae type b			Hib	Hib	Hib*		Hib				
PCV13, PCV15 Pneumococcal disease			PCV	PCV	PCV		PCV				
IPV Polio			IPV	IPV			IPV				IPV
COVID-19** Coronavirus disease 2019									COVID-19**		
Flu* Influenza									Flu (One or Two Doses Yearly)*		
MMR Measles, Mumps, & Rubella							MMR				MMR
Varicella Chickenpox							Varicella				Varicella
HepA* Hepatitis A						HepA*		HepA*			

FOOTNOTES

RV* **Hib***
Administering a third dose at age 6 months depends on the brand of Hib or rotavirus vaccine used for previous dose.

COVID-19** Number of doses recommended depends on your child's age and type of COVID-19 vaccine used.

Flu* Two doses given at least 4 weeks apart are recommended for children age 6 months through 8 years of age who are getting an influenza (flu) vaccine for the first time and for some other children in this age group.

HepA* Two doses of Hep A vaccine are needed for lasting protection. The 2 doses should be given between age 12 and 23 months. Both doses should be separated by at least 6 months. Children 2 years and older who have not received 2 doses of Hep A should complete the series.

ADDITIONAL INFORMATION

1. If your child misses a shot recommended for their age, talk to your child's doctor as soon as possible to see when the missed shot can be given.

2. If your child has any medical conditions that put them at risk for infection (e.g., sickle cell, HIV infection, cochlear implants) or is traveling outside the United States, talk to your child's doctor about additional vaccines that they may need.

Talk with your child's doctor if you have questions about any shot recommended for your child.

Fact:

The Leading cause of Death in Children=Injury

Safety Issues to Address:

- Crib/Sleeping/SIDS/SUID
- Car Seat Safety
- Tobacco Exposure
- Shaken Baby Syndrome/Abusive Head Trauma
- Storage of Cleaners/Chemicals/Poison Center of Illinois
- Gun Safety
- Lead Exposure/Screening
- Recognizing Abuse



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Additional SUID Recommendations

Put to bed on back with pacifier

Breastfeed

No Bed-sharing/soft surfaces

No bottles or sippy cups

Car Seat Safety



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- All infants/toddlers face backward till 2 yrs. old
- Follow car seat manufacturer wt. guidelines
- Check for Recalls if used
- If in an accident, will need a new car seat
- *Other countries face backwards till age 4
- Less death, brain & spinal cord trauma



Tobacco Exposure



- Increased risk for SUID
- More ear and respiratory infections
- Secondhand and Thirdhand Smoke
- Smoking in house vs. smoking outside
- Either causes cellular lung changes

Storage Safety



- ✓ Medications
- ✓ Dishwashing, laundry soaps/pods
- ✓ Household cleaners
- ✓ Items in purses
- ✓ Items in garage



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***Keep in elevated safety-locked cabinet**

Lead Exposure



- ❑ Old paint (houses before 1978)
- ❑ Dump sites of old paint and leaded gasoline=
soil with high concentrations
- ❑ Mini-Blinds manuf. Outside of U.S.
- ❑ Old Artificial Christmas Trees
- ❑ Avoid eating out of Pottery



Gun Safety



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1

**Keep Weapon
Unloaded**

2

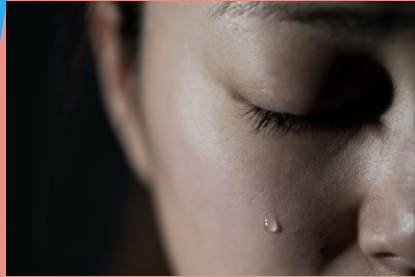
**Separate
Weapon and
Ammunition**

3

**Store each in
Locked
Cabinets**



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Abuse



- Know your agency's policy and procedure!
- You are a Mandated Reporter for Abuse and Neglect
- Know typical signs of all kinds of abuse
- **1-800-252-2873** for immediate danger or online dcfsonlinereporting.dcf illinois.gov
- <https://www.springfieldul.org/chtc/training>



CORNERSTONE SERVICE ENTRIES

Cornerstone Assessments (AS01)

- **701**-Other Service Barriers Assessment
- **712**-Infant Risk Assessment
- **706**-Home Assessment
- **708**-Anticipatory Guidance

Cornerstone Service Entries (SV01)

- **806**-Well Child Visit
- **SSED**- Safe Sleep Education
- **IMED**- Immunization Education
- **824**- Developmental Screening

- **CM04- Case Notes**

Care Plan:

- **CM02-Participant Goals (Long term)**
- **CM03-Planned Services (Short term)**

Referrals (RF01)

Based on Clients Needs:

- **814-** 0-3 Early Intervention
- **816-** Mental Health Counseling
- **819-**WIC

HRIF

- Minimize disability in higher risk infants by early identification of possible conditions requiring further evaluation, diagnosis, and treatment
- Promote optimal growth and development of infants
- Teach family care of the high-risk infant
- Decrease stress and potential for abuse in the family setting with high-risk infant
- **All APORS referred clients must receive their first contact from the agency within seven (7) business days of referral**

What qualifies you for HRIF???

- Adverse Pregnancy Outcome Reporting System (APORS)
- Diagnosed with a serious medical condition after newborn discharge
- Substance Abuse
- Mental Health Disorder
- Child Abuse
- DCFS Youth in Care

Face to Face Visits (HRIF)

- A minimum of 6 face-to-face visits
- Must occur within fourteen (14) business days of newborn hospital discharge (birth through the end of 1 month)
- Physical assessment must be completed by RN and documented in cornerstone at each visit

Home Visiting Requirements

- At least once during infancy from birth through the end of 4 months
- For complex APORS conditions, three to four home visits may be needed.
- Non-complex APORS condition and the family is mobile, additional home visits will be based upon the professional judgement of the nurse case manager

Cornerstone HRIF

- **PA11**- Weight (**APORS** box is always checked **Y**)
- **PA15**- Must always be enrolled in FCM before HRIF
- **708**- Anticipatory guidance (**A-I**)
- **708**-Pediatric primary care assessment Q27-52

Within 45 calendar days:

700 (Questions 43-51 general assessment)

701 (Other barriers assessment)

Cornerstone HRIF cont.

- Birth through the end of the 4th month
 - **706 and SSED**
- **IMED** x 6
- Developmental Screenings (824) x 4
- **CM02/CM03**
- **RF01** (Must be referred to WIC within 45 calendar days)

LUNCH



Resources

<https://dph.illinois.gov/topics-services/life-stages-populations/newborn-screening.html>

[CDC's Developmental Milestones | CDC](#)

https://www.medicaid.gov/sites/default/files/2019-12/epsdt_coverage_guide.pdf

[Bright Futures \(aap.org\)](#)

<https://www.dhs.state.il.us>

[Breastfeeding Is a Priority in the WIC Program | Food and Nutrition Service \(usda.gov\)](#)

<https://dph.illinois.gov/topics-services/life-stages-populations/newborn-screening.html>

[Vaccine Schedules for Parents | CDC](#)

[IDHS: Illinois Safe Sleep Support - 4900, 4902, 4903 E/S \(state.il.us\)](#)

[IDHS: Illinois Safe Sleep Support - Point of Service Card - 4901 S \(state.il.us\)](#)

[IDHS: Illinois Safe Sleep Support Point of Service Card - IDHS 4901 \(state.il.us\)](#)

dcfsonlinereporting.dcfstate.il.us

[Home | ACOG](#)



QUESTIONS

Cornerstone Hands on for Postpartum & Infant

- Cornerstone application with computer
- Success Stories- Let's Share

Thank you!

