Important Contact Information

HEALTHY START

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SCREENING

Screens are completed electronically, along with the birth certificate.

Tammy at Vital Statistics
Charlotte County Health Department
1100 Loveland Blvd.
Port Charlotte, FL  33980
Office: (941) 624-7299
Fax: (941) 624-7211

If you have any questions on how to complete the electronic Screening form please contact:

Pam Bicking, Community Liaison
at (941) 764-9700
Inside the Guide...
Charlotte County Healthy Start Coalition, Inc. has compiled the Postnatal Care Provider’s Guide to the Healthy Start Screening Process to broaden understanding of Florida’s Healthy Start Initiative and facilitate universal Healthy Start risk screening of all newborn infants in Charlotte County.

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Please contact the Healthy Start Provider Liaison at (941) 764-9700 for any questions regarding the Postnatal Care Provider’s Guide or for any Healthy Start matters.
Healthy Start is a comprehensive program created to promote optimal health and developmental outcomes for all pregnant women and babies in Florida.

The Charlotte County Healthy Start Coalition is a private, not-for-profit organization designated by the State of Florida. Its responsibilities include coordinating community partnerships dedicated to assuring a high quality, comprehensive health care system and supportive services for women and their infants, in addition to providing community involvement through education, planning services, and allocation of resources.

The goal of Healthy Start is to reduce infant mortality, reduce the number of low birth weight babies and improve health and developmental outcomes.

Healthy Start key components include:
- Universal prenatal and infant risk screening to identify pregnant women and infants at risk for adverse birth, health and developmental outcomes
- Healthy Start care coordination and services that support families in reducing the factors and situations that place pregnant women and infants in jeopardy for poor outcomes
- Community-based prenatal and infant health care coalitions that ensure the coordination of activities and services within a community that supports and enhances the community’s ability to promote optimal health and developmental outcomes for all pregnant women and babies born in Florida

Healthy Start services, provided by nurses, social workers, counselors and trained support workers, include:
- Care coordination, home visiting services, and outreach to help assure access to health care and provide support to families in reducing identified risk factors
- Additional services may include breastfeeding education and support, childbirth education and support, parenting education and support, smoking cessation, nutritional counseling, psychosocial counseling, and other risk appropriate care
How Healthy Start Works

STEP 1:  **HOSPITAL**
- A baby is born.
- Shortly after delivery, the provider/nurse fills out the risk form with the new parents (see the Screening Guidelines section in this manual).
- The provider/nurse scores the risk screen using the instructions on the back of the screen and Screening Guidelines section in this manual.
- Those infants receiving a score of 4 or more are automatically eligible for Healthy Start services.
- An infant may be referred by the provider to Healthy Start based on factors other than score (see the Screening Guidelines section in this guide for a list of possible factors).
- The hospital must send all completed risk screens to the Healthy Start Vital Statistics office with the infant's Birth Certificate.

STEP 2:  **CARE COORDINATION**
- A copy of the screen is sent by the County Health Department to Healthy Start Care Coordinators at the Charlotte Behavioral Health Care.
- A Care Coordinator will contact the family within 5 business days.

The Healthy Start goal of improving pregnancy, infant health and developmental outcomes is facilitated through care coordination services that provide the knowledge, encouragement, linkages, and support necessary to maximize families' health, well-being and self-sufficiency.

Healthy Start care coordination provides the following throughout the delivery of services:
- Establish rapport and develop relationships with families
- Identify/evaluate/assess, in collaboration with families, their strengths, resources, needs and priorities
- Facilitate planning/problem solving with participants and families
- Address identified risks and needs
- Provide information, education and encouragement needed to take steps necessary to change at-risk situations
- Promote self-sufficiency and healthy outcomes
- Make maximum use of community resources through information and referral
- Monitor the plan of care to assure that the multiple concerns of families are addressed
- Collaborate with other providers to assure continuity and coordination of care
- Advocate on behalf of the participant, including communicating to providers and the community
Healthy Start care coordination service delivery is based on the concept of risk appropriate care.

1. Risk factors that may indicate pregnant women or infants are at increased risk for poor pregnancy, health, or developmental outcomes are identified through universal risk screening or other health referrals.

2. Care coordinators then evaluate the risk status of participants and determine whether services are required to help reduce the risk.

3. Although some risk factors identified on the risk screen cannot be changed with interventions (e.g. single marital status of mother or race), these factors serve as markers for underlying situations that can be addressed (see matrix below).

Eligibility for Healthy Start postnatal care coordination begins when an infant scores at-risk on the Healthy Start postnatal risk screen, or an infant is referred into the program for reasons other than score.

The following risk factor matrix provides examples of situations that may be associated with the risk factors identified through Healthy Start infant risk screening.

<table>
<thead>
<tr>
<th>Risk Factor Postnatal Screen</th>
<th>Possible Underlying Situations and Related Risks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal age less than 18 or unknown</td>
<td>• May not have experience parenting&lt;br&gt;• Has not finished high school education&lt;br&gt;• Financial support issues&lt;br&gt;• Paternity issues&lt;br&gt;• Inadequate nutrition</td>
</tr>
<tr>
<td>Maternal race is unknown or other than white</td>
<td>• Racial disparity related to the increased risk for SIDS, asthma and low birth weight for mothers whose race is other than white.</td>
</tr>
<tr>
<td>Mother is over 18 with less than high school education or unknown</td>
<td>• Limits job opportunities&lt;br&gt;• Higher possibility of unemployment&lt;br&gt;• High stress from difficult working conditions</td>
</tr>
<tr>
<td>Unmarried mother</td>
<td>• Lack social, emotional or financial support&lt;br&gt;• Low birth weight baby&lt;br&gt;• Paternity and child support issues</td>
</tr>
<tr>
<td>Mother with no prenatal care or began in ninth month or unknown when prenatal care began</td>
<td>• Lack of mother’s commitment to infant&lt;br&gt;• Lack of access to or avoidance of system (domestic violence victim, substance abuser)&lt;br&gt;• Sign of problem in health care delivery system</td>
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### Understanding Risk Factors

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<table>
<thead>
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<th>Risk Factor Postnatal Screen</th>
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</tr>
</thead>
</table>
| Infant birth weight <4 lbs. 7oz. (2000 grams) | - Major correlate of infant mortality and childhood morbidity  
- Result in higher risk for child abuse/neglect |
| Maternal tobacco use more than 9 cigarettes per day or unknown | - Asthma and other respiratory illnesses  
- Increases risk for sudden infant death syndrome |
| Maternal alcohol use or maternal alcohol use is unknown | - Low birth weight  
- Fetal Alcohol Syndrome (FAS)  
- Higher risk for child abuse/neglect |
| Newborn with abnormal conditions: FAS, Hyaline membrane disease/respiratory distress syndrome (RDS), or assisted ventilation for 30 minutes or more | - Higher risk for child abuse/neglect  
- Psychosocial issues for the family  
- Specialized medical and developmental needs  
- Increased infant mortality |
| Infant with one of more congenital anomalies | - Higher risk for child abuse/neglect  
- Psychosocial issues for the family  
- Specialized medical and developmental needs  
- Increased infant mortality |
Women and children age birth to 3 years identified as at-risk for undesirable outcomes by screening or referral are contacted by a Healthy Start Care Coordinator. A determination is then made as to whether the participant needs further intervention or simply needs information about community resources and the name of a Healthy Start contact in the event circumstances change.

Some participants will merely need “tracking” for future follow-up, some will need a thorough assessment to determine the full extent of interventions needed to offset their risk, and others will need additional Healthy Start services.

Healthy Start specialized services include the following:

**BREASTFEEDING EDUCATION**
Breastfeeding is primary to achieving optimal infant and child health, growth and development. Human milk feeding ensures the best possible developmental and psychosocial outcomes for the infant. Breastfeeding also benefits women, reducing the risk of pre-menopausal breast cancer, ovarian cancer, osteoporosis and obesity. Breastfeeding education services include:

- Encouragement of the initiation of breastfeeding
- Anticipatory guidance and support in order to prevent breastfeeding problems and addressing barriers to breastfeeding
- Services provided to postpartum women to increase the duration and exclusivity of breastfeeding and to enable them to overcome any perceived or actual breastfeeding problems
- Encouragement of informed decision-making related to choice of feeding method
- Access to infant feeding plans
- Provide referrals to local breastfeeding support groups and other breastfeeding educational sources
- Provide education about the risks related to substance abuse when breastfeeding

**CHILDBIRTH EDUCATION**
The childbirth education class is based on specific learning objectives and addresses characteristics of the target population, such as providing materials for culturally diverse participants. The classes are adapted to meet individual or group needs, and are provided in individual or group sessions. The following topics are included in the curriculum:

- Healthy Start prenatal and infant screening
- Physical and emotional changes related to pregnancy
- Basic nutrition and breastfeeding
- Anatomy and physiology of pregnancy and birth
- Self-empowerment and stress management
- Prenatal care
- Danger signs of pregnancy and signs of preterm labor
- Preparation for labor and birth
- Parent/child attachment
- Normal newborn growth and development
- Newborn care, safety and immunizations
- Postpartum changes and sibling preparation

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IN HOME PARENTING EDUCATION
Parenting support and education provides comprehensive information and education related to the care of the newborn, infant, and child. This service includes information on normal growth and development, anticipatory guidance, changes in family dynamics, attachment behaviors, nutrition, resource management, safety, child injury prevention, immunizations, and child abuse prevention. Parenting education topics include:

- Bonding and attachment behavior
- SIDS risk reduction
- Comforting and stimulating infants
- Recognizing a child’s distress cues
- Child growth and development, including brain research findings, play, and learning
- Appropriate expectations for age and developmental stages
- Speech and language development
- Child health including basic nutrition and safety information
- Building on family strengths and relationships
- The effects on children of witnessing violence in the home
- Non-violent discipline techniques (i.e., alternatives to spanking)
- Day-to-day problem solving techniques
- Skills for accessing resources in the community
- Techniques for developing a support network
- Family dynamics and changing roles such as sibling rivalry
- Managing stress and anger
- Positive communication to promote positive behavior
- Home environmental risk factors including
- Environmental smoke and safety hazards

PSYCHOSOCIAL COUNSELING
Psychosocial counseling is provided to Healthy Start participants to address emotional, situational and developmental stressors. It is provided in a confidential setting to individuals, couples, groups or families. The goal is to reduce identified risk factors to achieve positive pregnancy outcomes and optimal infant/child health and development.

NUTRITION COUNSELING
The goal of Healthy Start nutrition counseling is to assist participants in their ability to make informed health decisions affecting their nutrition status. Nutrition counseling is tailored to the unique needs, interests, experiences, educational level, environmental limitations, cultural patterns, capabilities and lifestyle of the participant. Nutrition counseling includes:

- Diagnostic assessment of participant’s nutrition status
- Development of a nutrition care plan
- Monitoring and evaluation by the nutritionist of progress toward the nutrition goals

TOBACCO EDUCATION REFERRAL
Referral for tobacco education and cessation counseling is provided in order to reduce the incidence of prenatal smoking and to reduce the harmful effects to the mother and infant when the baby is exposed to environmental tobacco smoke.

Informational brochures and flyers on tobacco education and cessation are also provided to assist participants to quit smoking and avoid relapse.
Healthy Start encourages health care providers to participate in outreach activities that can identify pregnant women eligible for Healthy Start.

Charlotte County Health Department
The Charlotte County Health Department provides applications for Medicaid presumptive eligibility.

For more information call the Health Department at (941) 624-7200

WIC – Special Supplemental Program for Women, Infants and Children
As a health care provider, improving maternal and child health is a common goal you share with the WIC program. By referring your potentially eligible patients to the local WIC office, you will be providing a valuable service to your patients. Patients who participate in WIC will receive free, professional nutrition services as well as supplemental foods. WIC is available to low-to-moderate income pregnant, breastfeeding and postpartum women, in addition to infants and children up to age five.

The eligibility criteria includes:
- Residency in Florida or recipient of health care in Florida
- Be at nutritional risk – such as abnormal anthropometric or hematological measurements, nutritional-related medical conditions and inadequate dietary intake
- Income eligibility - the family's income must not exceed 185% of the US Poverty Guidelines
- To refer a patient to WIC, complete a Florida WIC Program Medical Referral Form

For more information on WIC, please contact the Nutrition Program Director at (941) 624-7210

Florida KidCare – Health Insurance for Uninsured Children
Through Florida KidCare, children may be eligible for health insurance even if both parents are working.
- Through Florida KidCare, the State of Florida offers health insurance for uninsured children from birth through age 18
- Some of the services Florida KidCare covers include doctor visits, check-ups, shots, surgery, prescriptions, emergencies, vision hearing and mental health

For more information on Florida KidCare, call (941) 624-7200
By supporting the state-legislated Healthy Start Initiative, you and your healthcare staff can directly benefit. Making sure that the family of every infant born in your facility fills out a Healthy Start risk screen and is encouraged to participate in the program, ensures that those who really need the help will not be missed. As postnatal care providers, the more infants you help into the Healthy Start program, the more benefits you will see.

Through Healthy Start, postnatal care providers have the opportunity to be involved in reducing infant mortality. You can help Healthy Start achieve its goals of improving pregnancy, health and developmental outcomes for ALL of Florida’s babies.

Benefits of Healthy Start:

- Risks identified through completion of the Healthy Start risk screen may have otherwise gone unnoticed. Early identification of risks and appropriate referrals to E.I.P., C.M.S. and other agencies may help the family attend to their infant’s special needs.
- Healthy Start Care Coordinators can be used as valuable contacts to community resources for the infant’s family. They have many resources for breastfeeding education, child care information, nutritional counseling, parent education and much more.
- Care Coordination services provide your families the knowledge, encouragement, and support to reinforce the postnatal care necessary to maximize the infant’s health, well-being and the family’s self-sufficiency.
- Through home visits and increased trust in their Healthy Start Care Coordinator, the family will gain a support system that may have not previously existed, and as a result care more about taking the right steps in their infant’s care.
- Through constant dialogue with the family, Care Coordinators help keep the infant’s family informed of the importance of proper postnatal care, therefore reducing the number of hospital and ER visits.
- Also, through the Care Coordinators’ efforts to fully inform the infant’s family of the proper postnatal care, less critical situations will occur that demand the time of the infant’s pediatrician.
Responsibilities of Providers

Each Provider should understand the:

1. Healthy Start Initiative
   - Attend training with Healthy Start Provider Liaison
   - Maintain communication with Provider Liaison for any questions you may have

2. Screen Requirement
   - The families of ALL newborn infants are to be offered a screen before the infant leaves the hospital in order to identify infants who are more likely to experience the adverse outcomes

Each Provider should know how to:

3. Obtain screening forms
   - Provide two (2) week advance notice to the County Health Department, Vital Statistics at 941-624-7200, for delivery of the screen forms.

4. Conduct screening
   - Refer to the Screening Guidelines section in this manual for a step-by-step process
   - Contact the Healthy Start Provider Liaison for an in-service if re-orientation is needed

5. Score the screening form
   - Refer to the Healthy Start Provider’s Guide and the back of each screen

6. Refer a patient to Healthy Start regardless of risk screen score if the patient needs the services
   - Indicate on the risk screening form that the woman or infant is invited to participate “based on factors other than score” - please list reasons on form
   - If a patient needs and desires Healthy Start care coordination regardless of screening score, they may request a referral to the care coordination provider, or contact the Healthy Start Coalition or care coordinator directly

Each Provider should know the:

7. Requirements related to getting completed screens to the Office of Vital Statistics
   - The postnatal risk screening form is sent with the Birth Certificate to the Vital Statistics office
   - Please do not staple forms

8. Information related to how the Health Department’s quality improvement process maintains quality of screens
   - If incomplete or scored inaccurately, someone from the County Health Department, Vital Statistics Office or Healthy Start office will contact the provider for corrections
Introducing the Screen to Patients

Normally, the entire Healthy Start risk screen can be done in less than ten minutes. Please encourage ALL families of newborn infants to complete the screen and help their baby off to a great start.

Please remember Healthy Start is NOT based on income and Florida laws require every pregnant woman and infant be offered this screening.

Sample answers to questions patients may have about Healthy Start:

1. *What is Healthy Start?*
   
   Healthy Start is a state legislated program that provides care coordination while you are pregnant and after your baby is born to help you access support services available in Charlotte County. This program is designed to help ALL infants to have a healthy start in life by trying to identify any factors that may require special attention or services.

2. *I heard Healthy Start is only for poor people, will I qualify?*
   
   Healthy Start is NOT based on income – it is solely based on risk factors present during your pregnancy and when your baby is born. Every pregnant woman and infant in Florida is eligible to receive FREE Healthy Start services.

3. *What are some of the services Healthy Start provides?*
   
   Healthy Start provides information about financial assistance, child care, housing, health care and transportation. They also offer information on classes for parenting and breastfeeding education, help to stop smoking, nutritional counseling, and confidential counseling, many of which are free or low cost.

4. *Why do I have to fill this out?*
   
   Healthy Start screening is part of both your prenatal and infant assessment. The purpose of the questionnaire is to discover whether there is something about your infant’s health, or your current living situation and everyday activities that could cause problems for your baby.

5. *I don’t need any help, do I still need to fill this out?*
   
   Florida has laws that require every pregnant woman and infant be offered this screening. Even if you feel you don’t need help, consenting to the questionnaire will be helpful in gathering the data that can improve health care for all of Florida’s moms and babies.

6. *I don’t know if I want to give you this information.*
   
   It only takes minutes. The answers are confidential and helpful in organizing the best possible care for you and your baby. It is very important to all of us to have healthy moms and healthy babies.

7. *I just don’t want to do it, thank you.*
   
   Please think about your decision, this is important to us and your baby.
1. Introduce Healthy Start and the risk screen to the family of the newborn infant (see previous section on Introducing the Screen to Patients for sample answers to patient questions on Healthy Start and the risk screen).

2. Complete the mother and infant information at the top of the screen.

3. Invite the family to initial YES to the screening consent question, participation question and consent to release information.
   - If they initial NO to any of these questions, Healthy Start does not have access to the information to help this baby and its family. The infant may not receive Healthy Start services without consent to these 3 questions.
   - It is very important to record the family’s home phone number and address on the risk screen if they initial YES to accept the invitation to participate in Healthy Start.
   - If the family would like to consent to some of the terms of the consent to release information question but not all, advise them to cross out and initial the portions of that question they do not want revealed.

4. Make sure the parent/guardian of the infant signs the bottom of section 1.

5. Complete section 2 of the risk screen from the newborn infant’s Birth Certificate and determine the infant’s risk score.
   - Each item number corresponds to the numbers on the infant’s Birth Certificate.
   - The circled number next to each item is the number of points the infant scores for each true statement.
   - Write the points scored next to each statement and add up the total points the infant scored.

6. Invite the infant’s family to participate in Healthy Start if:
   - The infant’s risk score is 4 or more
   - The patient is at risk for an adverse outcome based on factors other than score (see list of risks below) – check the appropriate box in section 2 above the interviewer’s signature to indicate referral status

7. Please review the screen for completion and confirm that the form has been signed by the infant’s parent/guardian.

8. The interviewer or provider must sign and date the screen at the bottom of section 2.

9. **Distribute copies of the screen:**
   - White & yellow – with Birth Certificate
   - Pink – keep in the infant’s medical record
   - Green – give to the parents

   ** Be certain to check the appropriate boxes at the top of the birth certificate after completing the Healthy Start screen.

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**Possible Factors requiring Priority Care coordination other than a score of 4 or more**

**Knowledge or suspicion of:**

- Domestic violence
- Sexual abuse
- Other threatened violence, including child abuse
- Substance abuse
- Untreated mental illness, including severe depression and suicidal tendencies
- Known history of abuse and neglect in family
- Mother received no prenatal care
- HIV positive
- Hepatitis B positive
- Lack of basic needs such as housing and food
- Lack of health care including prenatal care
- Inappropriate growth and development
- Other, using professional judgment
About the Healthy Start Screen

Healthy Start legislation requires that ALL pregnant women and infants be offered screening for risk factors that may affect their pregnancy, health or development. The prenatal and postnatal Healthy Start risk screens assess risk factors for adverse health outcomes so that identified individuals may then be referred more expeditiously to the appropriate services for their needs.

- The screening instrument includes a series of risk factors based on medical, environmental, and psychosocial concerns.
- The prenatal risk screen is designed to identify pregnant women who are potentially at risk to experience preterm delivery or deliver a low birth weight baby.
- The postnatal risk screen is designed to identify babies potentially at risk for adverse health and developmental outcomes or death in their first year of life.
- Florida’s Healthy Start services are available for all pregnant women and infants who are screened to be at risk for adverse health outcomes or those who are referred due to other risk factors.

DEFINITION OF SERVICE
Healthy Start risk screening is the collection of information on the designated prenatal and postnatal screening forms. The forms are scored to assess risk and to identify those women and infants most at risk for adverse health outcomes. Screening differs from assessment in that screening only identifies those most likely to be at increased risk; an assessment is necessary to determine service needs.

BACKGROUND
The Healthy Start screening instruments were developed by a workgroup that included physicians, nurses, social workers, researchers, program specialists and other professionals knowledgeable in the field of maternal and child health.

- The purpose of the screening instruments is to identify pregnant women and infants who are more likely to experience adverse outcomes.
- For pregnant women, the adverse outcome is pre-term labor and/or low birth weight.
- For infants, the adverse outcome is death between 28 and 364 days after birth.

Studies indicate that Infants who score 4 or more on the Healthy Start screen are six times more likely to experience postneonatal infant mortality than those who score less than four.

RISK RATIOS
Each risk factor scored on the Healthy Start screening tool is associated with higher risk for poor health outcomes. This strength of the association is expressed as a “risk ratio.” For example, if a pregnant woman is less than 18, she is 1.38 times more likely to experience preterm labor or to deliver a low birth weight infant than is a woman who is over 18.

POPULATION SERVED
Florida statute requires that the Healthy Start risk screening be offered to all pregnant women at their first prenatal visit by their prenatal health care provider. In addition, Florida statute requires that the Healthy Start infant (postnatal) risk screening is offered to parents or guardians of all infants born in Florida before leaving the delivering facility.

PARAMETERS
Pregnant women and infants are screened only once for Healthy Start. Prenatal risk screening and referral for positive score should occur at the first prenatal visit or the earliest time thereafter. Referrals for reasons other than score are sometimes necessary but must be made judiciously. Potential program participants may, however, enter the program at any time subsequent to their negative screening and/or by self-referral or a referral from a community resource.
The next pages include an Infant Screening Information Sheet for the parent or guardian, a blank postnatal screen (front & back), samples of completed Healthy Start screens, and a Risk Factor / Referral matrix.