

Early Childhood Health Assessment Records: Important for Ensuring Children’s Health in Child Care Settings

Early Childhood Health Assessment Records, also referred to as “yellow forms,” give child care providers vital information on the health of young children in their care. The forms are important because they are the primary, and sometimes only means of conveying health information to child care providers. The State Department of Public Health requires all licensed child care programs to maintain completed Early Childhood Health Assessment Records for every child in their care.

Parents and pediatricians complete the form, which solicits information about immunizations, height and weight, vision and hearing screening, dental health, behavior, development, chronic conditions and health insurance and utilization of health services. When completed properly, information such as allergies, medications, behavioral concerns, and outcomes from completed screenings helps child care providers attend to health needs and monitor children’s development without the need for duplicate screening and assessment. When aggregated, information from the yellow forms can provide community and state level information on the health of young children.

The Early Childhood Health Data Institute

The Early Childhood Health Data Institute is a two-year project designed to help child care programs and communities use early childhood health data from the yellow forms. The Data Institute is coordinated by the Child Health and Development Institute of Connecticut (CHDI) and jointly funded by the Children’s Fund of Connecticut, the William Caspar Graustein Memorial Fund and the Grossman Family Foundation. During the first year, eight Connecticut communities participated. They each entered information into an electronic data system developed for the project that helps child care programs track health information, such as immunizations and children who need well-child visits.

Data gathered from 2,630 yellow forms that contained no child identifiers were entered and analyzed.

The results proved helpful for community planning but also pointed to a need to improve the completion rates of the yellow forms, particularly among pediatricians. Pediatric primary care practices complete immunization information; however, some practices use outdated forms and critical medical evaluation and physical exam information was notably missing or incomplete. Only eight percent of forms analyzed contained all four critical child health indicators: medical home, body mass index (BMI), developmental screening and mental health concerns. The yellow form is disseminated in English only, making it difficult for non-English speaking parents to fill out.

As a result of these findings, CHDI and six of the original eight communities are working together in the second year of the project to design and test strategies to improve the completion rate of the form, including:

- identifying barriers child health providers face in completing their portion of the form
- disseminating an existing Spanish version of the form developed at the Yale Pediatric Clinic to parents
- having child care providers help parents complete the form

For example, Opportunity Knocks for Middletown's Young Children Collaborative is promoting the use of standardized tools for developmental screenings in child care settings and among pediatricians at well-child visits with information about proper entry of screening tool and results on the yellow form. The Stamford Early Childhood Collaborative plans to query directors at child care programs about their current practices to obtain accurate and complete yellow forms, as well as their interest in workshops to educate health professionals and parents about preparing for well-child visits and completing yellow forms ahead of time. The Eastern Highlands Health District is using these findings to build a network of child care and health partners who are committed to addressing substantive health problems and improving the health of children.

With funding support from the Connecticut's Early Childhood Comprehensive Systems grant, CHDI is developing a presentation for pediatricians and their staff about the importance of collaboration with child care sites, using the forms as a communication tool and using nurse health consultants from child care programs to assist in implementing care plans for children who attend child care and tracking developmental progress. The presentation is delivered through CHDI's signature training model, Educating Practices in the Community (EPIC), which brings together a variety of child health topics under one training model. The goal of EPIC trainings is to foster a practice change supported by community resources and public policy.

What Good Data Will Mean for Early Childhood

Early Childhood Health Assessment Records, when fully and accurately completed, will provide a wealth of health information to child care programs, Connecticut communities and state policymakers. This information ensures that child care providers are aware of their students' health needs. Complete information not only benefits individual children and their caregivers but also becomes a resource for communities and the State to target and efficiently address pressing early childhood health and development issues. CHDI recommends that once processes are in place to improve the quality of the data on the yellow forms, with learning from the Data Institutes shared with other communities, the information be entered into the Early Childhood Data System under development by the Office of Early Childhood.

To read more about the Early Childhood Health Data Institute and CHDI's work with communities to integrate health into early childhood planning, read: Issue Brief Number 20: [Accessing Community Level Early Childhood Health Data in CT \(3/4/13\)](#). For more information, please contact Lisa Honigfeld at honigfeld@uchc.edu.

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