

# Happy New Fiscal Year!!!



## Central Coordination

The SFY15 Contacts for Central Coordination were due back to ODH on Monday July 14<sup>th</sup>. If you have not returned your contract, your Program Consultant will be contacting you.

ODH will notify you when the Contract and Disclosure Form have been received and become effective.

- Once each contract is returned and executed the Q1 payment will be made. This first payment will be a full payment for a project and budget period starting 7/1/2014.

In the next couple of months ODH will be facilitating skill building webinars for Central Coordination Contract Managers, Supervisors, and front line staff. Each webinar will be topic focused but will also allow participants to ask questions on any topic. We will be using a web-based format so that you will be able to see Early Track as we walk through examples.

By September 1, 2014, ODH will be sharing with you what Central Coordination will look like for SFY 2016 (which starts July 1, 2015). There is a great CC Workgroup working and discussing both Expectations/Roles as well as Allocation of Funds. We can tell you now that a map of regions will NOT be imposed by ODH for Central Coordination, but that combining/collaborating/coming together to do CC will be encouraged.

<https://www.facebook.com/OhioHelpMeGrow>



## Monthly Help Me Grow Update Call July 17, 2014

### Rules Update

Revised rules have been filed with the Joint Committee on Agency Rules Review and are likely to be approved in mid-July. After that, the ODH will final-file the revised rules. Once approved, ODH will start sharing the content, guidance documents, and side-by-side comparisons of current and new rule. To get us started, two Rule Overviews have been scheduled via webinar, which will cover the COMPLETE set of rules which will be in place starting January 15, 2015. Instructions on connecting will go out statewide closer to the dates:

- September 19, 12:30 pm – 2:00 pm
- September 26: 8:30 am – 10:00 am

### Early Intervention

July 7, 2014: The US Department of Education, Office of Special Education Programs, has determined that Ohio MEETS REQUIREMENTS for compliance with the federal *Individuals with Disabilities Education Act, Part C*. This is the second year in a row where Ohio has ranked at the highest State Determination possible, based data provided through our Annual Performance Report. Read the notification letter and browse the statistics on our website here: <http://www.helpmegrow.ohio.gov/Early%20Intervention/Early%20Intervention.aspx>

This state determination illustrates your hard work in collecting and recording accurate data, providing records needed for verification, and engaging us in continuous quality improvement through workgroups, advisory groups, technical assistance and training. Most of all, it validates how you work every day to serve children and their families for the short time we get them in Early Intervention. Thank you for all you do, Wendy

June 26, 2014: In your ODH Help Me Grow Early Intervention Service Coordination grant, you are allowed to budget funds for in-person interpretation services. Written or telephonic interpretation services will not be allowed, as the ODH has a contract, which you may access, for written or telephone translation and/interpretation. Any Special Condition placed on your SFY 2015 grant related to this previously-communicated disallowable cost has been removed.

To summarize: You may keep in-person/face-to-face interpretation in your budgets for the Help Me Grow Early Intervention Service Coordination grant. You may not use grant funds to pay for written or telephone language interpretation because ODH already provides a vendor you may utilize for that need.

ODH would like to welcome Tonya Richardson, RN to our EI team. She will be focused on Hospital-Based Regional Child Find grants and EISOP for the Bureau for Children with Developmental and Special Health Needs. Tonya started on Monday July 14! Welcome Tonya!

Early Intervention System of Payment

<https://www.facebook.com/OhioHelpMeGrow>



# Monthly Help Me Grow Update Call July 17, 2014

(EISOP) Renewal Period

We will soon be starting the renewal process for children who will continue to need EISOP after June 30, 2014. The current letters of approval end 6/30/14. The process will be a little different this year. For children who will be three in July or August 2014, they will be automatically renewed. Service coordinators do not need to send in any documentation.

A change this year is that if a child has no changes in frequency, intensity or duration of EISOP services, the service coordinator simply has to indicate that on the form they will be receiving and the child will be renewed. Service coordinators do not have to send in any documentation. Hopefully this will make the process smoother and less cumbersome. The attached form is a sample of the form that will be sent to service coordinators. There are sections to indicate if a child is no longer in HMG, has a change in services, has a different service coordinator or if the family has a new address. Service coordinators do not have to take any action until they receive their letter.

## EI Monitoring

**SFY14 Timely Receipt of Services Baseline:** The SFY14 baseline analysis for TRS is coming to a close. Congratulations and findings memos are scheduled to be sent Friday July 18<sup>th</sup>.

**SFY14 45 Day Baseline:** The SFY14 45 Day baseline analysis process is scheduled to begin later this month. Each county will receive a memo to inform them whether they will be included in the analysis prior to the start of the process.

**2014 Family Questionnaire:** Every year, Help Me Grow Early Intervention sends out a Family Questionnaire to gather information from families regarding their experiences in the program as well as to fulfill federal reporting requirements. For the 2014 Family Questionnaire, we will be going back to sending the questionnaires directly to the families from ODH. Once the list of recipients is finalized, ODH will send each county a list in hopes that you will encourage all of your families to complete and return the questionnaires. Postcards announcing the questionnaire will be sent out in late August. The questionnaires will be sent mid-September and families will have approximately two months to respond.

**SFY15 LEA:** The August 1 LEA report is coming up. This report must be run between **July 22, 2014** and **August 1, 2014** and must be sent to the LEAs no later than **August 1, 2014**. Please **DO NOT SUBMIT COPIES TO ODH** unless you have been specifically directed to do so as a result of the February 1 LEA baseline analysis.

Be reminded of the following requirements:

- If the parent does not want contact information shared with the LEA, “no” must be selected in Early Track.
- It is expected that child information will be updated in a timely manner so that the LEA reports are accurate. If changes need to be made prior to running the report, allow time for Early Track to update the system.
- In the case of children in foster care, the LEA should reflect the biological parent’s LEA.

<https://www.facebook.com/OhioHelpMeGrow>



## Monthly Help Me Grow Update Call July 17, 2014

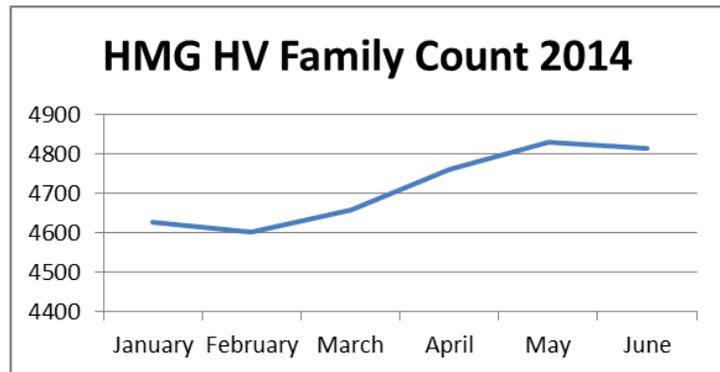
- Only the pages of the report that are relevant to a particular LEA should be sent to that LEA, not the entire report.

It is strongly recommended that you maintain copies of the LEA reports and documentation showing that they were sent to the LEAs. If you have any questions, contact Melissa Courts at [melissa.courts@odh.ohio.gov](mailto:melissa.courts@odh.ohio.gov).

### Home Visiting

#### Family Counts

- January 2014 4,626
- February 2014 4,601
- March 2014 4,657
- April 2014 4,762
- May 2014 4,830
- June 2014 4,814



#### **Supervisor Day – September 4, 2014**

We are working on plans for a one day meeting for all Help Me Grow Home Visiting Supervisors. The agenda is being worked out, but will include:

- Administrative supervision strategies for HMG HV
- How to access and use data
- Individualized TA opportunities with administration, program consultants, and Early Track
- Networking opportunities

**Location:** Franklin County Children's Services  
855 W. Mound St.  
Columbus, OH 43223

SUPERVISORS...Please take a few minutes to complete an online survey. Your responses will help determine the structure and topics of the September 4th 2014 Home Visiting Supervisor training. There are 6 questions and the survey should take less than 10 minutes to complete.

[https://www.surveymonkey.com/s/HMG\\_Supervisors](https://www.surveymonkey.com/s/HMG_Supervisors)

Deadline for completion of this survey is **August 1, 2014**.

## Monthly Help Me Grow Update Call July 17, 2014

### Regional Meetings

The Help Me Grow Home Visiting Team is working on securing locations for a set of regional meetings starting the end of September, 2014. These meetings will give us an opportunity to check in on program implementation, crosswalk new rules, and discuss next steps for successful program growth.



September 17	Ross County	Ross County Health District
September 24	Butler County	
October 1	Franklin County	State Library
October 2	Montgomery County	
October 9	Guernsey County	Guernsey County BODD
October 15	Summit County	
October 16	Cuyahoga County	
October 21	Putnam County	Putnam County ESC
October 23	Holmes County	Holmes County Training Center

**Attendance is required for: Contract Manager, Supervisor (at least one), and Home Visitor (at least one).**

### SFY15 Contracts

All SFY15 contracts with approved Help Me Grow Home Visiting Providers have been received and executed by the Director. Your Program Consultant will be sending you copies of your contracts in the next couple of weeks.

### Public Awareness Update

- Help Me Grow has started development on the 2015 HMG Calendars. They will be available in September. We will be working on a distribution plan soon.
- Beginning in September, HMG leadership and our public awareness vendor will begin facilitating focus groups in four regions around the state. Present plans call for groups to take place in and around Franklin, Hamilton, Athens, and Summit Counties. HV & EI consultant staff is assisting in recruitment of locations, as well as parent, provider, and community participants. More to follow soon. Questions, please contact your Program Consultant.

ODH would like to welcome Kimberly Brown to our HMG team. Kim will be our new Public Information Specialist, assisting EI and HV in strategic communications and stakeholder relations. Kim started on Monday July 14!

Welcome!!



# Monthly Help Me Grow Update Call

## July 17, 2014

### Early Track

The Early Track re-architecture development is continuing, with a target finish date of August 1, 2014. We are not anticipating any releases for new development until August 2014.

### Professional Development/Training

- Genetics courses will be available on OH-Train within the next week
- A few location changes have been made since the release of the Training Bulletin; OH-Train will have the most up-to-date information
- As new courses are added, announcements will be made on the next HMG Update Call as well as on the HMG website
- Please refer to the Training Bulletin and O.A.C. rule 3701-8-03 for any credential/training requirement questions...and as always...ask your supervisor!!

### Resources

**Are you a home visiting program that provides home visiting to expectant families or families of children birth to five years? Or maybe the leader of a home visiting network? Or even a home visiting researcher?**

HARC is a new and exciting practice-based research collaborative devoted to conducting research studies with people like you! It is part of the Home Visiting Research Network (HVRN), which is funded by HRSA's Maternal and Child Bureau.

As a member of HARC you can:

- a) Learn about opportunities to participate in research of interest to you;
- b) Network with colleagues from diverse home visiting programs; and
- c) Gain quick access to important study findings.

There are two cutting-edge research studies for which recruitment will soon begin. Each study will require interested participants to take a short online survey. Participants will be compensated for their time and will be the first to learn about results. The online surveys will cover questions about:

- Home visiting program collaboration with the pediatric and adult medical homes
- Home visitor perception of family engagement and training/supervision aimed at increased engagement

#### **Want to Join HARC?**

Nearly 200 home visiting programs, 42 networks and 90 researchers across the country are already HARC members. To join them, please visit our website at <http://hvrn.org/enrolling-in-harc.html> and select the appropriate enrollment survey. The survey will only take 10 minutes and will allow us to stay in touch with you about upcoming research opportunities.

If you have any questions at all regarding your eligibility or in which category you belong, please call or email Kay O'Neill at 410.502.0545 or [koneill@jhu.edu](mailto:koneill@jhu.edu)

<https://www.facebook.com/OhioHelpMeGrow>



**AAP NEWS**

## **Parents who read to their children nurture more than literary skills**

<http://aapnews.aappublications.org/content/early/2014/06/24/aapnews.20140624-2>

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### **Statewide Rural Health Conference**

The [2014 Statewide Rural Health Conference and Flex Annual Meeting](#), which is tentatively scheduled for **Nov. 20 - 21, 2014** in central Ohio.

The conference will be sponsored by the Ohio Department of Health State Office of Rural Health (SORH). The audience for the conference includes staff from Critical Access Hospitals and other hospitals in rural areas, certified Rural Health Clinics, and local health departments in rural areas, as well as many other rural health professionals, researchers, health professions students and educators, and others with an interest in rural health. The conference theme will be "Forging Partnerships for Healthier Communities."

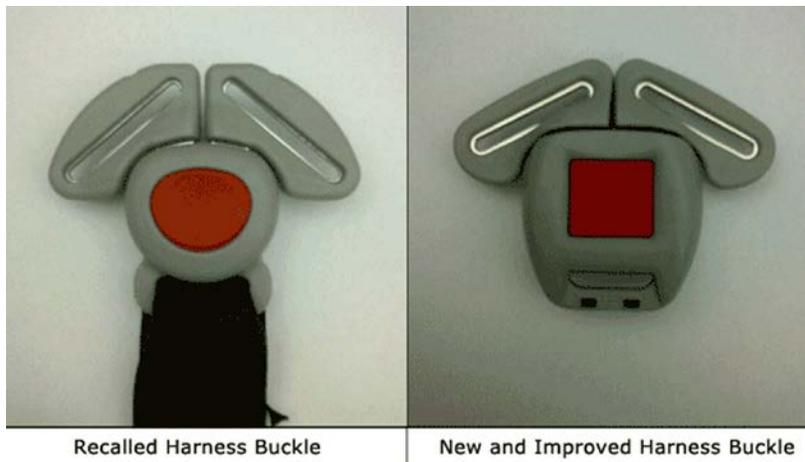
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## **CAR SEAT RECALL**

Maker recalls 1.9 million car seats for faulty buckle

Under pressure from U.S. safety regulators, Graco Children's Products Inc. is recalling 1.9 million infant car seats in what is now the largest seat recall in American history.

[http://www.dispatch.com/content/stories/national\\_world/2014/07/02/maker-recalls-1-9-million-car-seats-for-faulty-buckle.html](http://www.dispatch.com/content/stories/national_world/2014/07/02/maker-recalls-1-9-million-car-seats-for-faulty-buckle.html)



<https://www.facebook.com/OhioHelpMeGrow>

## Monthly Help Me Grow Update Call July 17, 2014

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### Alcohol and pregnancy – It's just not worth the risk

The AAP is promoting the [public health message](#) that fetal alcohol spectrum disorders are completely preventable if women do not drink alcohol while pregnant. An estimated 40,000 babies are born each year with FASDs which can affect their physical, mental, behavioral and cognitive development for a lifetime.

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## Breastfeeding Resources

Christina Benjamin, Special Liaison to the Office of Head Start through the Department of Health and Human Services, Administration for Children and Families forwarded notice of a new resource from the Office on Women's Health titled, "Supporting Nursing Moms at Work: Employer Solutions." This is an online tool that can assist businesses in supporting breastfeeding women at work. The Affordable Care Act requires employers of hourly workers to provide accommodations to support nursing moms which includes a private space and adequate time to express breast milk while at work.

"Supporting Nursing Moms at Work" provides photos and short video clips of how employers in a variety of industries can create private spaces and time for nursing women. Employers and nursing moms also share how these changes in the workplace have made a positive impact in supporting women to continue breastfeeding after returning to work. For more information about the "Supporting Nursing Moms at Work: Employer Solutions", please visit <http://www.womenshealth.gov/breastfeeding/employer-solutions/index.php>.

The Role of Doulas to Support & Sustain the NJ Baby-Friendly Hospital Initiative, Monday, July 28, 2014, 1:00 - 2:30 p.m.

Click Here to Register Today: <https://njha.webex.com/njha/onstage/g.php?t=a&d=661532129>

Following the U.S. Surgeon General's Call to Action for Breastfeeding, NJHA is offering a free Webinar that will discuss collaborating with doulas to help sustain NJ Baby-Friendly Hospital initiatives.

Research continues to demonstrate the role of doulas to in improving perinatal outcomes. The Webinar will focus on the evidence and research linking birth doulas to successful breastfeeding initiation and retention rates in various populations. Information also will be available on tools for your hospital to foster a positive working relationship with doulas in your community as well as learning doula standards of care. This free webinar is open to a multi-disciplinary audience, anyone who support expectant and new families. This short introduction will cover resources and research on the impact of breastfeeding as a protective factor; birth doulas and the Affordable Care Act. As 3 states have authorized a Medicaid waiver for birth doulas that started July 2014, to improve outcomes, learn about doulas' role in not only birth but breastfeeding equity.

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Monthly Help Me Grow Update Call  
July 17, 2014

**>>> Your Voice Matters! Ohio Behavioral Health Needs Assessment Survey**

The Ohio Department of Mental Health and Addiction Services (OhioMHAS) is asking for your help in improving the behavioral health system in Ohio. By taking 10 minutes to share your thoughts and ideas about addressing the needs of Ohioans with mental health and/or substance abuse challenges, you will be contributing to our understanding of community needs across Ohio. Information gathered through this [survey](#) may be used to inform funding decisions in FY 15, as the recent [mid-biennium review bill](#) targets over \$20 million toward addressing gaps in care. This information will also be helpful in planning for the FY 16-17 biennium. All surveys must be completed by Weds., July 30, 2014.

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*America's 50 Healthiest Counties for Kids*, from U.S. News & World Report, represents a national, county-level assessment of how health and environmental factors affect the well-being of children younger than 18. It highlights counties that feature, among other child-friendly data, fewer infant deaths, fewer low birth weight babies, fewer deaths from injuries, fewer teen births and fewer children in poverty. - From <http://www.healthinschools.org/News-Room/Weekly-Insider/June-25-2014.aspx>

The Ohio summary is here -

[http://www.countyhealthrankings.org/sites/default/files/state/downloads/CHR2014\\_OH\\_v2.pdf](http://www.countyhealthrankings.org/sites/default/files/state/downloads/CHR2014_OH_v2.pdf).

Newly published study find that 4- and 5-year-olds are smarter than college students when it comes to figuring out how toys and gadgets work.

<http://www.npr.org/blogs/health/2014/06/30/325230618/preschoolers-outsmart-college-students-in-figuring-out-gadgets>

American Academy of Pediatrics article on Early Literacy supports what HMG With Books is encouraging! Get the article here:

<http://pediatrics.aappublications.org/content/early/2014/06/19/peds.2014-1384.full.pdf>

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## OHIO WIC PROGRAM INCOME GUIDELINES\*

Gross income (before taxes) cannot exceed the following amounts:

Family Size	Annual	Monthly	Weekly
1	\$21,590	\$1,800	\$416
2	29,101	2,426	560
3	36,612	3,051	705
4	44,123	3,677	849
5	51,634	4,303	993
6	59,145	4,929	1,138
7	66,656	5,555	1,282
8	74,167	6,181	1,427

*If you have more than 8 people in your family, please contact your local WIC clinic for guidelines.*

*Note: A pregnant woman counts as more than one family member. A person who currently receives Medicaid, Food Stamps, or Ohio Works First (OWF) automatically meets the income eligibility criteria for WIC.*

*\*Guidelines effective July 1, 2014. If you are unsure of income eligibility, contact your local WIC office.*

*USDA is an equal opportunity provider and employer.*

Clinic Information:



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## PROGRAMA DE WIC DE OHIO REGLAS DE INGRESO\*

El ingreso bruto (ingreso antes de los impuestos o taxes) no puede exceder las siguientes cantidades:

Cantidad de Miembros en la Familia	Anual	Mensual	Semanal
1	\$21,590	\$1,800	\$416
2	29,101	2,426	560
3	36,612	3,051	705
4	44,123	3,677	849
5	51,634	4,303	993
6	59,145	4,929	1,138
7	66,656	5,555	1,282
8	74,167	6,181	1,427

*Si su familia consiste de más de 8 miembros, llame a su clínica de WIC para más información acerca de las reglas de ingreso.*

*Nota: Una mujer embarazada cuenta como más de un miembro en la familia. Las personas que reciben ayuda de Medicaid, Food Stamps, o Ohio Works First (OWF) automáticamente llenan los requisitos de ingreso de WIC.*

*\*Estas reglas de ingreso son efectivas 01 de julio 2014. Si usted no está seguro de su elegibilidad, llame a su clínica de WIC.*

*El USDA es un proveedor y empleador que ofrece igualdad de oportunidades.*

Información de la Clínica:



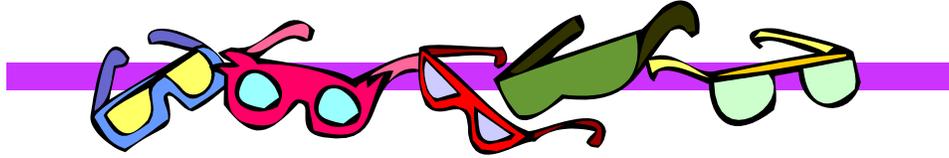
## **Guidance Document 2013-1: Determination of need for early intervention services for children with diagnosed permanent hearing loss**

Without early identification (by 3 months of age) and appropriate intervention services (by 6 months of age), children deaf & hard-of hearing may experience delays in the development of auditory, language, cognitive, and social skills. Since language becomes more complex as the child grows, it is unrealistic to expect a child to no longer need services because they appear to be age appropriate during a snapshot of development on a child assessment tool. The ultimate goal is to keep young children with hearing loss on track throughout these intensive language learning years.

Research has demonstrated that early enrollment and longer stays in early intervention programs provide increased opportunities for families to gain greater understanding of their child's needs and potential which results in greater success for the child in multiple areas of development, on par with their hearing peers (NCHAM).

We must ensure infants and toddlers with diagnosed permanent hearing loss have access to early intervention services. A few reminders about children being made eligible for Early Intervention:

- A child who is deaf or hard-of-hearing is eligible for Early Intervention, because these conditions are on the state's list of diagnosed physical or mental conditions which have a high probability of resulting in a developmental delay (see Appendix 07 – A in Ohio Administrative Code 3701-8-07).
- A child with a hearing impairment should be assessed by a professional with expertise in his or her area of "delay." In Ohio, parent advisors and audiologists employed by the Regional Infant Hearing Program have the training to assess communication functioning and may or may not have certification depending upon their educational backgrounds. . These individuals may be used to complete child assessment in Ohio (see paragraph (E)(2)(b) in Ohio Administrative Code 3701-8-07).
- An assessment tool should not be used as the sole criterion for deciding whether a child is in need of EI services or not (see form HEA 8032).
- When assessing a child with a hearing impairment, the Language Development Scale or other tools approved by ODH specifically able to assess expressive and receptive language skills as well as auditory functioning should be used.
- A child assessment does not need to meet any certain threshold (i.e., score) for a child to be made eligible; the determination of need for services is determined by the TEAM assessing the child.
- Please make sure you have appropriate people, with skills and knowledge in hearing loss, on any team which assesses an infant or toddler with a diagnosed hearing impairment. Regional Infant Hearing Program Parent Advisors and Project Directors can provide professional opinion along with audiologists, speech language pathologists and teachers of the deaf.



## Take a Good Look at This Training Opportunity!

A Help Me Grow and Early Intervention Training  
Sponsored by ODH/HMG

**Providers, parents, service coordinators, advocates, students  
and early childhood professionals welcome!**

Topic: **Good Lookers!** Helping Infants and Toddlers with  
Visual Impairments to Use Their Remaining Vision

Description: Through this one-day interactive workshop,  
participants will learn about various types of visual  
impairments common in young children, including  
cortical visual impairment, and strategies for helping  
little ones to use their vision optimally.

Date and Time: Friday, September 19, 2014 10:00am – 4:00pm

Location: Pickaway County Board of DD, 1005 S. Pickaway Street,  
Circleville, OH 43113

Presenter: Kay Clarke, Ph.D. – EIS/TVI/COMS

Cost: None

Credit: 5 DD and 4 Social Work Hours Approved

Space is limited. Register now at: <https://oh.train.org>  
Course ID# 1034397

Questions? Please contact Karen Auble at: [karen.auble@odh.ohio.gov](mailto:karen.auble@odh.ohio.gov)  
(614) 728-9183

**Also see Ohio TRAIN for additional 2014-15 visual impairment workshops  
throughout Ohio:**

***Communication...On the Go (Communication & Movement) (11/10/14; 4/29/15)***

***Playful Parenting (Family Resources and Play Skills) (10/22/14; 6/12/15)***

***Hands-On Literacy (Emergent Literacy) (9/4/14; 12/2/14)***

***Home Sweet Home (Home Adaptations) (11/17/14; 5/28/15)***

***Hold Everything! (Stay-Put Play Spaces) (10/6/14; 5/15/15)***

***Good Lookers (Functional Vision) (4/15/15)***



## Look What's "Booked" in Your Area!

A Help Me Grow and Early Intervention Training Opportunity  
Sponsored by ODH/HMG

**Providers, parents, service coordinators, advocates, students  
and early childhood professionals welcome!**

- Title:** "Hands-On Literacy!: Emergent Literacy for Infants and Toddlers who are Blind or Visually Impaired"
- Description:** Come discover creative strategies for making emergent literacy come alive for infants and toddlers who are visually impaired or blind and their families through this one-day interactive session!
- Date & Time:** Thursday, September 4, 2014 10:00am – 4:00pm
- Location:** Cleveland Sight Center, 1909 E. 101<sup>st</sup> Street, Cleveland, OH 44106
- Presenter:** Kay Clarke, Ph.D. – EIS/TVI/COMS
- Cost:** None
- Credit:** 5 DD and 4 Social Work Hours Approved.
- Space is limited. Register now at: <https://oh.train.org> .  
Course ID# 1034398

Questions? Please contact Karen Auble at: [karen.auble@odh.ohio.gov](mailto:karen.auble@odh.ohio.gov)  
(614) 728-9183

**Also see Ohio TRAIN for additional 2014-15 visual impairment workshops throughout Ohio:**

**Communication...On the Go (Communication & Movement)** (11/10/14; 4/29/15)  
**Playful Parenting (Family Resources and Play Skills)** (10/22/14; 6/12/15)  
**Good Lookers (Functional Vision Skills)** (9/19/14; 4/15/15)  
**Home Sweet Home (Home Adaptations)** (11/17/14; 5/28/15)  
**Hold Everything! (Stay-Put Play Spaces)** (10/6/14; 5/15/15)  
**Hands-On Literacy** (12/2/14)

**Guidance Document #2: Reporting SKI \*HI Language Development Scale (LDS) Scores of infants and toddlers enrolled in the Regional Infant Hearing Program (RIHP) to Service Coordinators (SCs) who enter these scores into Early Track:**

The ODH-Infant Hearing Program (ODH-IHP) has created a fillable PDF form to make the reporting of LDS scores from Regional Infant Hearing Program personnel to HMG Early Intervention Service Coordinators clear and accurate. The form immediately follows these directions and is posted here on the HMG website: <http://www.ohiohelpmegrow.org/Professional/formstemplates.aspx>

**For RIHP personnel** to use the attached & provided form:

1. Enter your Region Number and the date you are reporting the information to HELP ME GROW at the top of the Form.
2. Enter your name and phone number of the person completing the form so the SC can contact you if there are questions.
3. Enter the demographic information for the child.
4. Enter the Information on the LDS Assessment, the administrator, and add a brief note, if necessary. For Discipline, RIHPs should enter ***Hearing impairment intervention***.
5. Keep a copy for your records.
6. Send the form to the SC for the child's county of residence.

**For Help Me Grow Service Coordinators** to use the attached & provided form:

1. Enter the SKI\*HI LDS scores in the Assessments section of Early Track within 10 days of receipt.
2. Select SKI\*HI LDS from the dropdown menu.
3. Use the information entered on the SKI\*HI LDS form sent by the RIHP to complete the assessment detail.
4. Document, on the bottom of the form, the Child's ID number, the date the information was entered into ET, and the name of the person who entered the information.
5. Keep a copy for your records.

**ODH-BCDSHN-IHP April 2013**

# Measles FAQ

**What is Measles?**

Measles is an infectious, viral respiratory disease caused by the measles virus.

**How can I catch measles?**

Measles is highly contagious and is spread easily. The measles virus resides in the mucus in the nose and throat of infected people. When they sneeze or cough, droplets spray into the air and the droplets remain active and contagious on infected surfaces for up to 2 hours. Infected people are usually contagious from about 4 days before their rash starts to 4 days afterwards. Thus, an infected person can spread the disease before knowing he or she is infected.

**What are the symptoms of measles?**

Measles symptoms begin with fever, runny nose, cough, loss of appetite, and red, watery eyes for about four days, followed by a rash. The rash usually lasts 5-6 days and begins at the hairline, moves to the face and upper neck, and proceeds down the body.

The disease can also cause severe illness and complications, such as diarrhea, ear infections, pneumonia, encephalitis (brain infection), seizures, and death. These complications are more common among children under 5 years of age and adults over 20 years of age.

**How long does it take to show signs of measles after being exposed?**

It takes an average of 10-12 days from exposure to the first symptom, which is usually fever. The measles rash does not usually appear until approximately 14 days after exposure, 2-3 days after the fever begins.

**How is measles diagnosed?**

Measles is diagnosed by a combination of the patient's symptoms and by laboratory tests.

**Is there a treatment for measles?**

There is no specific treatment for measles. People with measles need bed rest, fluids, and control of fever. Patients with complications may need treatment specific to their problem.

**Can someone get measles more than once?**

No.

## SKI\*HI Language Development Scale

**FROM:** Regional Infant Hearing Program (RIHP) Region \_\_\_\_\_  
**DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
**TO:** HMG Service Coordinator  
**RE:** Request to enter SKI\*HI Language Development Scale (LDS) scores into ET.

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### Instructions for RIHP: (Complete and Fax or Send via email to HMG SC)

**Request From:** \_\_\_\_\_ **Phone #** (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_  
(Name)

**Name of Child:** Last Name \_\_\_\_\_ First Name \_\_\_\_\_

**DOB:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **County of Residence:** \_\_\_\_\_

<b>Assessment Name:</b>	<b>SKI*HI LDS</b>
<b>Assessment Date:</b>	_____
<b>Child's age (in months) at time of Assessment:</b>	_____
<b>Administered by #1</b>	_____
<b>Expressive Language Score:</b>	_____
<b>Receptive Language Score:</b>	_____

Note: (Optional)

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### Instructions for HMG:

Complete information below, send one copy to RIHP and retain a copy for your records

**ET ID #:** \_\_\_\_\_ **Date entered into ET:** \_\_\_\_/\_\_\_\_/\_\_\_\_\_

**Entered by:** \_\_\_\_\_ (Name and Title)