

CCHC Matrix

Working Definition of the Role of the Child Care Health Consultant: A health professional that has an interest in and experience with children, has knowledge of resources and regulations, and is comfortable linking health resources with facilities that provide primarily education and social services. (APHA, AAP, NRC 2002).

The skills of the CCHC shall include: teaching child care providers about health and safety issues; teaching parents about health and safety issues, assessing needs for training, meeting on site with providers about health and safety, providing telephone consultation, providing referrals to community services, developing or updating policies and procedures, reviewing child health records, helping to manage the care of children with special health care needs, consulting with a child’s health professional about medication, and interpreting standards or regulations and providing technical advance, separate and apart from the role of a regulation inspector (APHA, AAP, NRC 2002).

Program Type	Description and Qualifications of CCHC	Intended Outcomes	Target population	Cost	Contact	R = replicable statewide? C = system cost to implement statewide ONG= ongoing relationship formed between consultant and CC provider?	Notes – Current Status Evaluation Data Available?
Local Public Health Agency: CCHC and training	<p>Environmental Health Educator/CCHC provides on-site and telephone consultation. Goals individualized to center and assessment based.</p> <p>Comprehensive training activities offered**.</p> <p>CCHC provides technical assistance and follow-up during infectious disease investigations affecting child care centers.</p>	<ul style="list-style-type: none"> Reduced illnesses and injuries for children and staff. Facility-specific health and safety outcomes based on recommendations and goals. 	Child care centers within the agency service area. High risk establishments are more frequently targeted. CCHC receives referrals from state and county licensing.	Partially funded through LB692. Incentives and supplies provided via Regional Grant Project	LLCHD	R - Urban = high R - Rural = low C = medium ONG = high	<p>CCHC integrated within a Children’s Environmental Health (CEH) program. Other CEH program activities include inspections, plan reviews, and child care referral services. Currently LLCHD has an Environmental Health Educator II serving as a CCHC 30 hours per week.</p> <p>Lincoln Municipal Codes 8.12 and 8.14 (revised 2006) require: health and safety training; Level III Food handlers permit for person in charge of food preparation or center director; fees for child care centers and the Lincoln Family Child Care Home. Child care center staff are not required to participate in the LLCHD health & safety trainings, however it is an option**. The Family Child Care Home operator is required to attend the LLCHD training before certificate is issued per code 8.12.</p> <p>Health consultation data and participant training feedback are available.</p>
Local Public Health Agency: Nurse-CCHC performing Community Health activities	RN employed by local community agency, goes to child care setting; may include phone support	<ul style="list-style-type: none"> Defined by funding source. Examples: health and safety, prevention procedures, infectious disease control, safety seats, injury prevention, pan flu prep 	Defined by agency service area and/or grant	Douglas Co. Health Dept.: county funds Central NE Comm. Svcs.:Grant-funded	Douglas Co. HD CNCS	R = high C = high ONG = high	<p>Not seen as sustainable after grant period. Where county funding is used, continuation subject to local county priorities.</p> <p>Some effort and activity data available.</p>

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Phone consultation	<ul style="list-style-type: none"> • CC provider initiates phone contact with hospital-based consultation line to access resident MD (UNMC) • CC provider initiates phone contact with Statewide child line for phone consultation and material resources (ECTC) 	Defined by CC provider; problem-oriented.	Hospital line and ECTC available to all regardless of location.	No direct cost to provider	UNMC Child Health Information Line Early Childhood Training Center	R = high C = low ONG = low	UNMC line exists but has not been used (or marketed) in some time.
Web-based consultation	Proposed: Create new CC provider webpage on Answers4Families: List serve Ask an expert Moderated by RN	<ul style="list-style-type: none"> • Defined by providers who initiate questions • Defined by moderator who initiates messages and resources for users. 	Self-identified providers with internet access	\$10,000 per year plus DHHS contribution of moderator; no direct cost to provider.	Answers4Families.org DHHS School and Child Health Program	R = high C = low ONG = low	Service presently exists for schools and school nurses.
Remediation/ Discipline Model	Qualifications set by DHHS. CC provider seeks services of CCHC, who goes to and works directly with CC provider. Required for resolution of licensing infraction.	Correction or infraction and/or reinstatement or maintenance of licensure	CC providers subject to disciplinary action by DHHS	Fee-for-service as negotiated by parties.	DHHS Child Care Licensing	R = low C = high ONG = low	Not presently in place. Summary data may be available from disciplinary actions regarding proportion of total actions that address health and safety issues.
Training - Incentive Models (two types)	CC provider seeks to improve ratings received from an inter-rater reliable external observer (QRS- ERS. Qualifications not determined.	• Outcomes defined by QRS-ERS model.	Marketing/compensation benefit to cc provider	Fee for services – incentive?	Voluntary Pilot sites; future avail to all	R = high C = low ONG = medium	Presently QRS is at “pilot” stage.
	Legally exempt CC provider receives financial incentive for participation in First Aid, CPR, or other training. Provider is qualified trainer, nurse or non-nurse.	• First Aid and CPR training where no requirement exists at present.	Exempt child care providers; subsidy	Fee for training – subsidized?	DHHS	R = medium C = medium ONG = low	84 CC providers have taken advantage of subsidy/incentive for First Aid/CPR training

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Local Public Health Agency: Nurse-CCHC performing Medicaid outreach	RN employed by local public health with Medicaid provider contract, goes to child care setting. May include phone support.	<ul style="list-style-type: none"> • Related to EPSDT goals (identify and enroll eligible children; establish medical home; immunizations.) • Secondary benefits derived by all children 	CC providers in greater NE served by Medicaid fee for service model, where local public health exists for Medicaid provider contract.	State Medicaid reimburses for services; no direct cost to CC provider	DHHS	R = low C = high ONG = medium	Active in rural Nebraska; sustainability depends on Medicaid scope and objectives set by DHHS. Some effort and activity data available.
Educational Service Providers (schools and Head Start)	Early Childhood Education programs operated by schools derive services and support from district. Services delivered by teachers with early childhood degrees; school nurses; auxiliary health personnel at school	<ul style="list-style-type: none"> • Age-appropriate screening • Infection control practices • Meet standards of district, state early childhood, and federal programs 	Defined by school district; state funded early childhood programs	Costs borne by district; available only to CC affiliated with schools	Dept. of Education	R = low C = medium ONG = high	Health infrastructure in school district varies by district.
	Head Start Programs operated in school or community settings. HS Health Coordinator serves in CCHC role to programs.	Compliance with federal program guidelines for health and safety	Enrolled population and families	Cost born by federal program	Head Start Association		Head Start Program Information Report (PIR) data available
ECTC and Regional Training Coalitions/Professional Partnerships	Trained Early Childhood Educators – health one aspect of broad spectrum of services and supports for child care providers. Extensive media collection for child care providers; searchable website http://ectc.nde.ne.gov . ECTC also supports the Healthy Children Nebraska website, http://ectc.nde.ne.gov/hcn/index.htm	<ul style="list-style-type: none"> • Develop training curricula • Arrange for delivery of curriculum • Quality improvement in early care and education. 	Early Childhood care and education providers in respective regional service areas.	State via NDE	Early Childhood Training Center	R = high C = high ONG = low	Not fully funded for full-time coordinator in all regions. Existing infrastructure appropriate for building broader scope of service delivery. Training evaluation data available.

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