

Healthy Kids Check



Objectives of this Presentation



- Understand the components of the Healthy Kids Check.
Enhance knowledge regarding the normal development of the four year old
- Be able to identify when a child is not meeting expected developmental milestones
- Provide education to parents/ carers regarding development and activities to enhance their child's abilities
- Develop further knowledge on referral pathways when a child requires further assessment and investigation
- Raise awareness of PEDS as in the Personal Health Record

The Healthy Kids Check

- To improve the health and well-being of Australian children
- Early detection of lifestyle risk factors
- Detection of development delay and illness
- Introduce guidance for healthy lifestyles and early intervention strategies



“Early Childhood Experience crucially determines health and well-being”



- Prevention is to prevent the development of future problems and promote the necessary conditions for a child's healthy development
- Early intervention can counteract biological and environmental disadvantage and set children on a more positive developmental trajectory

Department of Community Services (2005) “Prevention and early intervention literature review”



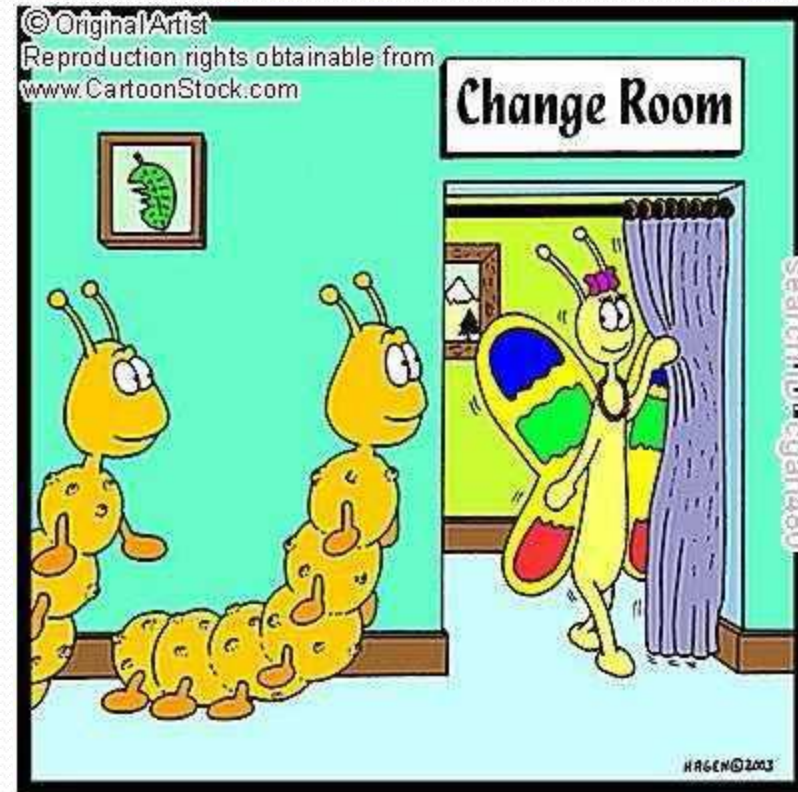
- Research suggests....

“Children who make a smooth transition and experience early success at school tend to maintain higher levels of social competence and academic achievement”

“Beginning school behind one’s peers is a substantial deficit from which children may never recover”

Change is Here!

- In May 2010 the item numbers changed for PN or Aboriginal Health Worker from 711 it becomes “**10986**”, \$55.00
- GP’s will use an Item Number that is time based, for example “**703**” **standard health** assessment lasting more than 30 mins but LESS than 45 mins. Fee \$127.80
- Can be offered to children between 3-5 years of age, ideally at four years
- Able to claim in conjunction with bulk billing requirements
- Eligibility –
 - HKC is once in a lifetime
 - Permanent resident in Australia or covered by a Reciprocal Health Care Agreement



Healthy Start for School Initiative

- Commenced 1 July 2011. For a parent receiving income support during the financial year in which their child turns four, the child will be required to undergo a relevant health check to ensure they are healthy, fit and ready for school. This is a requirement to receiving the Family Tax Benefit A Supplement for the financial year in which a child turns four.
- As a result of this initiative General Practice may receive an increase in requests from parents and carers for their child to have a health assessment.
- **The patients who will be affected by this new initiative will include those who:**
 - are receiving Family Tax Benefit Part A
 - have a child turning four; and
 - have received an income support payment from Centrelink (e.g. Parenting Payment, Newstart Allowance, etc.) or the Department of Veterans' Affairs, at any time during the financial year in which their child turns four.
- Parents or carers may choose to have the health assessment completed at a medical practice or through the maternal and child health centres.
- When completed by a practice nurse or registered Aboriginal health worker on behalf of a medical practitioner the assessment is claimed under Medicare item 10986



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- **Information collection**
 - Patient History (if not already done)
 - Family; Environmental; Social; Lifestyle risk factors
- **Assessment**
 - Health
 - Examinations and investigations needed
- **Interventions**
 - Referrals and follow-up of identified problems
- **Health Advice**
 - Information given to parent as well as “Get Set for Life”



Components of Health Check

- Mandatory

- ✓ Consent to be noted
- ✓ Measure Height, Weight,
- ✓ BMI
- ✓ Check Eyesight
- ✓ Check Hearing
- ✓ Check Oral Health
- ✓ Toilet Habits
- ✓ Note allergies

Non – Mandatory

- ✓ Discuss eating habits
- ✓ Discuss physical activity
- ✓ Question speech and Language
- ✓ Question fine and gross motor skills
- ✓ Question behaviour and mood
- ✓ Other



What you will need....

PATIENCE !!!!

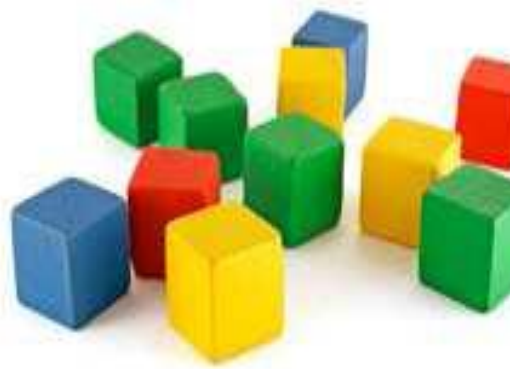
Exceptional communication
Skills-

Explain to the child what is
going to happen

A child friendly and
partnership approach with
family

“A Bag of Tricks”







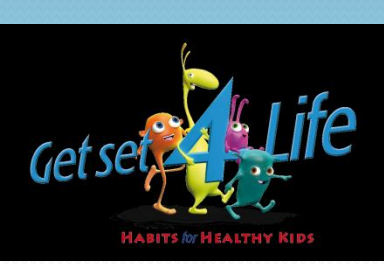
What you will need...



Development

- Characteristics
- Gross Motor and Fine Motor
- Speech and Language
- Social and emotional
- Toileting





Childhood Development

- Early intervention is essential if outcomes are to be optimal for the child
- Development varies from child to child
- Child development is a process affected by various factors
- It can occur in peaks and troughs and can plateau at different stages
- 17% of children have a developmental delay but many are not diagnosed prior to starting school.

Being Four Means.....

- I have my own personality
- I have a great imagination
- I am learning to share
- I like to play with friends
- I like to ask lots of questions
- I am trying to be more cooperative
- I love dressing up and explore my world through play
- I can follow simple directions



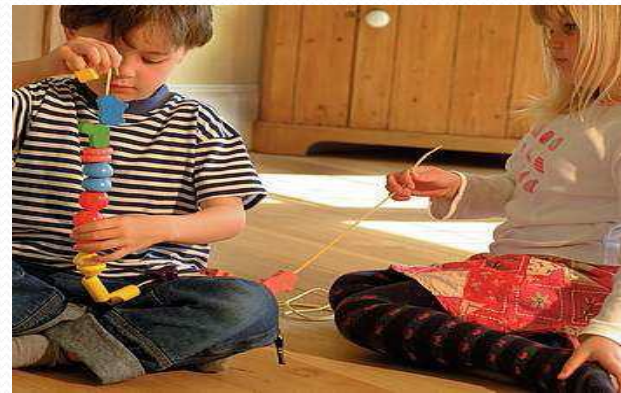
Gross Motor Development

- Can confidently walk and run, runs on tiptoes
- Push and pull objects
- Can negotiate stairs one foot to a step
- Skilful climbers on play equipment and other household objects
- Able to ride a tricycle, may be riding bike with or without training wheels
- Can stand on one foot for 3-5 seconds; able to hop
- Able to bend and pick objects from floor bending from waist
- Able to sit on floor cross-legged
- Becoming more confident and skilled at ball games such as throwing; catching; kicking and bouncing



Fine Motor Development

- Able to build tower of blocks of ten or more
- Can build three steps with six blocks
- Begins to hold pencil in adult grip
- Can copy a cross, can draw a square, letters V, H, T and O
- Drawings of people have head, legs, body, arms and fingers
- Able to thread beads on string
- Able to pick up small objects with thumb and fore finger
- Can do simple puzzles of about 15 pieces
- Learning to cut with scissors
- Feeding self with utensils





Speech and Language

- Vocabulary consists of up to 1200 words
- Sentences are complex
- Speech is becoming grammatically correct and able to be understood by most people
- Sounds that are difficult to pronounce “s, r, z, th, v, f”
- Able to give full name and address
- Can give a detailed account of events that have occurred recently
- Can recite stories and songs
- Often can count up to 10-20
- Begins to ask questions “Why; When; What; How”

Social and Emotional Development



- Becoming more independent and strong willed
- Can have verbal altercations with other children if needs are not met “I’m not your friend, That’s mine!”
- Imaginative play with dressing up “Look at me I’m superman”
- Needs and wants the companionship of peers, alternately cooperative and aggressive
- Can display concern for siblings and or peers
- Enjoys interactions with peers
- Role playing adult roles “Let’s play Mums and Dads”
- Can have fears “there’s a monster under my bed”
- Begin to understand how behaviour attracts attention “Showing off”
- Developing a sense of humour, will laugh at funny things

When to be concerned

- If parent or carer is concerned
- If child is unable to do most of the activities mentioned
- Child unable to jump with both feet
- If child is behind in comparison to their peers
- If child is not understood by most people when speaking
- If child shows no interest in their surroundings or other children
- If child can not hear a whisper or constantly says “What”
- If child has significant behaviour issues- aggression or withdrawal
- If child is ritualistic and displays repetitive behaviours
- If child’s development has regressed

Toileting

- Toilet training works well when the child has shown signs of readiness and there is no pressure from parents/carers
- Children must be able to attend to clothing in order for independent toileting to be successful
- Some children may not be dry at night until early years of primary school
- If child has been constipated there can be a decrease in sensation and a loss of control resulting in soiling

Concerns

- – Soiling continuously
- – Long term constipation
- – Blood in stools
- – Wetting again after being dry during the day (this does not include intermittent accidents)
- – Not able to be toilet trained and not usually dry during the day

Aboriginal and Torres Strait Islander Child Health Check 715

- The Aboriginal and Torres Strait Islander Child Health check means the Assessment of the child's health, physical and psychological, social function and determine what interventions and education need to be provided to the child and their carer to improve the outcomes for the child and their family
- Aboriginal and Torres Strait Islander children have higher rates of-
 - Death, illness and hospitalisations (respiratory infections are the leading cause)
 - Otitis media
 - Exposure to life stress events
 - Skin infections; gastro-intestinal infections; acute rheumatic fever and rheumatic heart disease



Components of the check 4-9 years-

Recommended Annually (from birth)

- – “Usual” Doctor or Health Service
- – Explanation of the check is to be given to the carer
- – Consent to be noted
- – Comprehensive History, updated at each check

Mandatory

- -Height and weight (BMI)
- -Ear examination
- -Oral Health
- -Trachoma check
- -Skin Examination
- -Respiratory Examination (if indicated)
- -Cardiac Auscultation (if indicated)
- -Developmental assessment
- -Parent-Child Interaction
- -Any other examinations considered necessary by the practitioner



Resources

- Qld Health – Child health and Safety Information

<http://www.health.qld.gov.au/child-youth/>

- Raising Children network

<http://raisingchildren.net.au/>

- Centre for Community Child Health (PEDS assessment Tool)

http://www.rch.org.au/ccch/resources.cfm?doc_id=10963

- Red Flag Early Intervention Guide

http://www.health.qld.gov.au/rch/professionals/brochures/red_flag.pdf

- Children's Hospital Westmead - Factsheets

<http://www.chw.edu.au/parents/factsheets/#eyes>