

Kindergarten Parents!

Kids need shots to start kindergarten and need a complete health check-up for school.

Get your child ready to learn and do his or her best!

Make an appointment for a check-up and have the doctor fill out the attached form.

Take the form back to school.

Money problems? You may qualify for a <u>free</u> exam. Talk to your doctor or call 225-5122. Your child is all set!

Questions? Need help finding a doctor? Shasta County Public Health, Child Health & Disability Prevention Program (CHDP) can help!

Call CHDP at 225-5122 Or 1-800-300-5122

SHASTA COUNTY DOCTORS & CLINICS - 2024

Shasta County Public Health—CHDP Program 225-5122 or 1-800-300-5122 That Provide CHDP Health Assessments

These providers may have room for Medi-Cal patients. Some offices may have age limits on children. Please call the office for specific information.

ANDERSON

Anderson Medical 530-365-2545 2830 East St. Associates

Shasta Community Health Center

530-378-0486 2965 East St.

BURNEY

Burney Health Center 37491 Enterprise Dr. 530-335-5457

Pit River Health Services 36977 Park Ave.

530-319-7066

1401 Gold St.

335-3651 or (800) 843-7447

Mercy Family Health Center

2480 Sonoma St.

530-225-7800

COTTONWOOD

20833 Long Branch Dr. Lassen Medical Group

530-347-3418

FALL RIVER MILLS

REDDING

Center of Hope - Hill Country

1201 Industrial Street

530-241-4100

Fall River Valley Health Clinic Hospital Annex-Hwy 299E 530-336-6535

ROUND MOUNTAIN

Wellness 29632 Hwy 299E Hill Country Health &

530-337-6243

530-224-2700 or 530-768-2436

Enterprise Family Health 3270 Churn Creek Road

530)229-5000

Churn Creek Health Center

3184 Churn Creek Rd.

SHASTA LAKE CITY

Shasta Community Health 4215 Front St. Center Hill Country Health & Wellness

SHINGLETOWN

530-246-5896

Shingletown Medical Center 31292 Alpine Meadows 530-474-3390

Redding Rancheria Tribal

Health

1441 Liberty St.

530-224-2700

(Native Americans and their

onseholds)



PARENTS!

PLAN AHEAD!

Give Your Child Healthy Start



First Grade need a Children starting Kindergarten or **Immunizations** Health Exam And

Shasta County Public Health Child Health & Disability Prevention - CHDP (530) 225-5122



It's the Law!

California <u>requires</u> that every child entering first grade have a health exam.

Immunizations should be done by the time children enter Kindergarten.



If you do not want your chila to have a health exam, you must sign a waiver form at the school

Healthy Children Learn Better!

Children may look well but have hidden health problems. If a health problem is found early, it can often be treated more easily.

Give your child a healthy and happy start in school. Schedule the health exam now!

Free Health Check-Ups

- eligible for a free exam. Uninsured children from low to moderate income families may also be eligible. Many working families do qualify.
- Call the Child Health & Disability Prevention (CHDP) program to find out if you qualify.

Where to go?

Many private doctors do CHDP check-ups. If you qualify for a free CHDP check-up, you can make an appointment with your doctor, if he is a CHDP provider, or one of the doctors or clinics listed on the back. Call early for an appointment... Don't wait until the last minute!

Need Help?

- Finding a Doctor
- Making an appointment

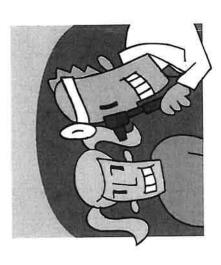
Call CHDP

(530) 225-5122

What does the Dr. do?

The health check-up includes:

- A head-to-toe physical exam
- Dental screening
- Growth & Nutrition assessment
- Hearing & Vision screening
- Urine & blood tests
- TB skin test
- Immunizations, as needed



Make sure to take the Report of Health Examination for School Entry form to the doctor to be filled out, then return it to school.

Junction Elementary School District

Clay Ross, Superintendent

Junction School

9087 Deschutes Rd.Palo Cedro, CA 96073Phone: (530) 547-3276

Fax: (530) 547-4080 www.junctionesd.net



Christopher Nelson, Principal Board Members:

Hope Bjerke Heather Richards Ken Parisot Clint Snyder Kelly Lindblom

January, 2024

Dear Parent or Guardian:

Re: New immunization requirements for 2016

Under a new law known as SB 277, beginning January 1, 2016 exemptions based on personal beliefs, including religious beliefs, will no longer be an option for the vaccines that are currently required for entry into child care or school in California. Most families will not be affected by the new law because their children have received all required vaccinations. Personal beliefs exemptions on file for a child already attending child care or school will remain valid until the child reaches the next immunization checkpoint at kindergarten (including transitional kindergarten) or 7th grade.

For more information about SB 277, please see the Frequently Asked Questions available at: http://www.shotsforschool.org/laws/sb277faq/.

For more information about school immunization requirements and resources, please visit the California Department of Public Health's website at www.shotsforschool.org, or contact your local health department or county office of education.

Thank you for helping us to keep our children and community healthy.

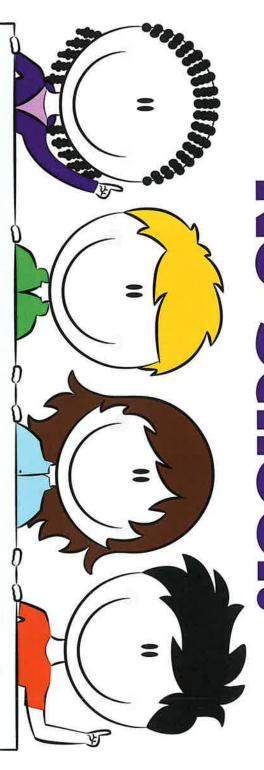
Velson

Sincerely,

Chris Nelson

Principal

20 5015 Records



unless an immunization record mmunizations are up-to-date.* Children will not be enrolled is presented and

*If your child is unimmunized due to medical reasons, please notify us.

for schools, and educational materials for parents. requirements, an interactive school look-up tool, implementation materials Go to ShotsForSchool.org to access information about immunization SHOTSFORSCHOOL

Parents/Guardians - Are Your Kids Ready for School?

REQUIRED IMMUNIZATIONS FOR SCHOOL ENTRY



Please bring your child's immunization records with you at the time of registration. You may view and print a digital copy of your child's California vaccine record at: <u>MyVaccineRecord.CDPH.CA.gov</u>

Students Entering Transitional Kindergarten of Kindergarten Need.
☐ Diphtheria, Tetanus, and Pertussis (DTaP, DTP, Tdap or Td) — 5 doses 4 doses OK if one was given on or after 4th birthday; 3 doses OK if one was given on or after 7th birthday.
☐ Polio (IPV or OPV) — 4 doses 3 doses OK if one was given on or after 4th birthday.
☐ Hepatitis B — 3 doses
☐ Measles, Mumps, and Rubella (MMR) — 2 doses Both doses must be given on or after 1st birthday.
□ Varicella (Chickenpox) — 2 doses
New and Transfer Students Entering TK/K-12th Grade Need:
☐ All immunizations listed above For 7th-12th graders: at least 1 dose of pertussis-containing vaccine is required on or after 7th birthday. Hepatitis B vaccine is required for any grade, except for entry into 7th grade.
Students Starting 7th Grade Need:
 □ Tetanus, Diphtheria, Pertussis (Tdap) —1 dose □ Varicella (Chickenpox) — 2 doses
What other immunizations should I ask my health care provider about?

When you visit your health care provider for back-to-school immunizations, make sure to also ask about other vaccines that help keep your child healthy, including **hepatitis A, COVID-19**, **and the annual flu vaccine**. Preteens and teens should also get the **human papillomavirus (HPV) vaccine** to protect against certain cancers and **meningococcal vaccines**.

Learn more about <u>vaccines your child needs according to their age</u> (bit.ly/CDCVaccinesByAge) and where you can get your child immunized (bit.ly/Where2BVaxed).

Pre-Kindergarten



(any private or public child care center, day nursery, nursery school, family day care home, or development center)

Doses required by age when admitted and at each age checkpoint after entry¹:

Age When Admitted	Total Numl	per of Doses Req	uired of Each Im	munization	2,3
2 through 3 months	1 Polio	1 DTaP	1 Hep B	1 Hib	
4 through 5 months	2 Polio	2 DTaP	2 Hep B	2 Hib	
6 through 14 months	2 Polio	3 DTaP	2 Hep B	2 Hib	
15 through 17 months	3 Polio	3 DTaP	2 Hep B		1 Varicella
		On or after the	1st birthday:	1 Hib⁴	1 MMR
18 months through 5 years	3 Polio	4 DTaP	3 Hep B	190	1 Varicella
		On or after the	1st birthday:	1 Hib⁴	1 MMR

- 1. A pupil's parent or guardian must provide documentation of a pupil's proof of immunization to the governing authority no more than 30 days after a pupil becomes subject to any additional requirement(s) based on age, as indicated in the table above (Table A).
- Combination vaccines (e.g., MMRV) meet the requirements for individual component vaccines. Doses of DTP count towards the DTaP requirement.
- 3. Any vaccine administered four or fewer days prior to the minimum required age is valid.

4. One Hib dose must be given on or after the first birthday regardless of previous doses. Required only for children who have not reached the age of five years.

DTaP = <u>diphtheria toxoid</u>, <u>tetanus toxoid</u>, and acellular <u>pertussis</u> vaccine

Hib = Haemophilus influenzae, type B vaccine

Hep B = hepatitis B vaccine

MMR = measles, mumps, and rubella vaccine

 $Varicella = chickenpox_vaccine$

Instructions:

California pre-kindergarten (child care or preschool) facilities are required to check immunizations for all new admissions and at each age checkpoint.

Unconditionally Admit a pupil age 18 months or older whose parent or guardian has provided documentation of any of the following for each immunization required for the pupil's age as defined in the table above:

- Receipt of immunization.
- A permanent medical exemption.*

Conditional Admission Schedule for Pre-Kindergarten

Before admission a child must obtain the first dose of each required vaccine and any subsequent doses that are due because the period of time allowed before exclusion has elapsed.

Dose	Earliest Dose May Be Given	Exclude If Not Given By
Polio #2	4 weeks after 1st dose	8 weeks after 1st dose
Polio #3	4 weeks after 2nd dose	12 months after 2nd dose
DTaP #2, #3	4 weeks after previous dose	8 weeks after previous dose
DTaP #4	6 months after 3rd dose	12 months after 3rd dose
Hib #2	4 weeks after 1st dose	8 weeks after 1st dose
Hep B #2	4 weeks after 1st dose	8 weeks after 1st dose
Hep B #3	8 weeks after 2nd dose and at least 4 months after 1st dose	12 months after 2nd dose

Conditionally Admit any pupil who lacks documentation for unconditional admission if the pupil:

- has commenced receiving doses of all the vaccines required for the pupil's age (table on page 1)
 and is not currently due for any doses at the time of admission (as determined by intervals listed in
 the Conditional Admission Schedule, column entitled "EXCLUDE IF NOT GIVEN BY"), or
- is younger than 18 months and has received all the immunizations required for the pupil's
 age (table on page 1) but will require additional vaccine doses at an older age (i.e., at next age
 checkpoint), or
- has a temporary medical exemption from some or all required immunizations.*

Continued attendance after conditional admission is contingent upon documentation of receipt of the remaining required immunizations. The pre-kindergarten facility shall notify the pupil's parent or guardian of the date by which the pupil must complete all remaining doses.

^{*}In accordance with 17 CCR sections 6050-6051 and Health and Safety Code sections 120370-120372.



REPORT OF HEALTH EXAMINATION FOR SCHOOL ENTRY

The To protect the health of children, California law requires a health examination on school entry. Please have this report filled out by a health examiner and return it to the school. school will keep and maintain it as confidential information.

PART I TO BE FILLED OUT BY A PARENT OR GUARDIAN	ARENT OR GUA	RDIAN							
CHILD'S NAME—Last	First			Σ	Middle		BIRTH DATE—	BIRTH DATE—Month/Day/Year	
ADDRESSNumber, Street		City		IZ	ZIP code	зсноог.			
PART II TO BE FILLED OUT BY HEALTH EXAMINER	ALTH EXAMINE	~							
HEALTH EXAMINATION			IMMUNIZATION RECORD	0					
NOTE: All tests and evaluations except the blood lead test must be done after the child is 4 years and 3 months of age.	blood lead test months of age.		Note to Examiner: Please give the family a completed or updated yellow California Immunization Record. Note to School: Please record immunization dates on the blue California School Immunization Record (PM 286).	e give the far ecord immun	nily a completed or up ization dates on the b	odated yellow Californis lue California School Ir	lmmunization nmunization Re	Record. cord (PM 286).	
REQUIRED TESTS/EVALUATIONS	DATE (mm/dd/yy)	8				DATE	DATE EACH DOSE WAS GIVEN	VAS GIVEN	
Health History	, ,	П	>	VACCINE		First Second	d Third	Fourth	Fifth
Physical Examination	1 1		POLIO (OPV or IPV)						
Dental Assessment	/- /		DtaP/DTP/DT/Td (diphtheria, tetanus, and [acellular]	neria, tetanus,	and [acellular]				
Nutritional Assessment	, ,	- II	pertussis) OR (tetanus and diphtheria only)	nd diphtheria	only)				
Developmental Assessment			MMR (measles, mumps, and rubella)	and rubella)				0	
Vision Screening	1, 1,		HIB MENINGITIS (Haemophilus Influenzae B)	nophilus Influe	enzae B)				
Audiometric (hearing) Screening	,		(Required for child care/preschool only)	preschool on					
TB Risk Assessment and Test, if indicated	1 1	- II	HEPATITIS B						
Blood Test (for anemia)	1. 1.	-11	VARICELLA (Chickenpox)	(XC					
Urine Test	, ,	1							
Blood Lead Test	, ,	-11	OTHER (e.g., TB Test, if indicated)	f indicated)					
Other	/ "		OTHER						
PART III ADDITIONAL INFORMATION FROM HEALTH EXAMI	N FROM HEAL		NER (optional) and	p	RELEASE OF HE	RELEASE OF HEALTH INFORMATION BY PARENT OR GUARDIAN	N BY PAREN	T OR GUARD	IAN
RESULTS AND RECOMMENDATIONS				I give perm check-up wif	ission for the health In the school as expla	I give permission for the health examiner to share the additional information about the health check-up with the school as explained in Part III.	the additional	nformation abou	ut the health
Fill out if patient or guardian has signed the release of health information.	ease of health infor	mation.		☐ Please c	heck this box if you d	\Box Please check this box if you do not want the health examiner to fill out Part III.	xaminer to fill o	ut Part III.	
☐ Examination shows no condition of concern to school program activities. ☐ Conditions found in the examination or after further evaluation that are of physical activity are: (please explain)	rto school program er further evaluation		importance to schooling or						
				Signature	Signature of parent or guardian			Date	
				Name, addr	ess, and telephone nu	Name, address, and telephone number of health examiner	ier		
				Signature	Signature of health examiner			Date	

If your child is unable to get the school health check-up, call the Child Health and Disability Prevention (CHDP) Program in your local health department. If you do not want your child to have a health check-up, you may sign the waiver form (PM 171 B) found at your child's school.

WAIVER OF HEALTH EXAMINATION FOR SCHOOL ENTRY

DATE OF BIRTH—Month/Day/Year	Teacher
Middle	
3	SCHOOL
	ZIP Code
First	City
CHILD'S NAME—Last	ADDRESS-Number, Street

PARENT OR GUARDIAN:

Please fill out this form if you want to excuse your child from the health examination required by California law for school entry. SIGN AND RETURN THIS FORM TO THE SCHOOL where it will be maintained as confidential information.

NOTE: SIGNING THIS WAIVER DOES NOT EXCUSE YOUR CHILD FROM RECEIVING THE IMMUNIZATIONS REQUIRED BY CALIFORNIA LAW FOR CHILDREN IN SCHOOL. ALSO, SIGNING THIS WAIVER WILL NOT DENY YOUR CHILD THE VISION AND HEARING TESTS DONE BY THE SCHOOL.

I have been informed about the health examination recommended by health professionals and required by state law. I have been informed about where my child can receive a health examination and about the income levels for receiving it at no cost to me.	at –
Please check one of the following:	
I choose not to have my child receive a health examination as part of the school entry requirement.	
I would like my child to receive a health examination, but I am unable to obtain it.	
Reason (see Health and Safety Code, Section 124085):	Ĩ
	Ì
Signature of parent or guardian Date	Ĩ

INQUIRE AT THE SCHOOL OFFICE OR YOUR LOCAL HEALTH DEPARTMENT IF YOU WANT MORE INFORMATION. CHDP website: www.dhcs.ca.gov/services/chdp

What Does CHDP Offer?

The CHDP Program helps prevent or find health problems through regular, no cost, health check-ups. A check-up includes:

- Health and developmental history
- Physical exam
- Vaccines
- Oral health assessment and referral to a dentist by age 1
- Nutrition screening
- Developmental and behavioral screenings
- Vision screening
- Hearing screening
- Health education
- Lab tests: anemia, lead and tuberculosis
- Referral to Women, Infants, and Children (WIC) program for children up to age 5

Other Services

The CHDP program can help you find:

- Dentists that accept Medi-Cal Dental for the care of your child's teeth
- Medical specialists
- Behavioral health services

Diagnosis and treatment can be paid for as long as your child has Medi-Cal.

Information

Contact your local CHDP office for more information about CHDP or if you need:

- Access to medical and dental doctors
- Help setting up an appointment
- Transportation resources
- Behavioral health services

You can find your local CHDP office by visiting the California Department of Health Care Services website at: www.dhcs.ca.gov/services/chdp

Shasta County Health and Human Services Agency - Public Health Branch Child Health and Disability Prevention Program 2660 Breslauer Way Redding, CA 96001

530-225-5122



Governor, Gavin Newsom State of California

English

Child Health and Disability Prevention (CHDP) Program

Early and Periodic Screening, Diagnostic and Treatment (EPSDT)

Medical and Dental Health Check-ups



FREE

For Babies, Children, and Youth under age 21 with Full Scope Medi-Cal or under age 19 with Low Family Income. No proof of legal status is required to receive CHDP services.

PUB 183 (English, 8/19)

Why Get Health Check-ups?

Health check-ups are important for all children and youth. Health check-ups are a time to:

- Find and address medical, dental and behavioral health problems
- Get vaccines
- Ask your doctor questions

Health check-ups can be used for foster care, sports, camp or school entry.



Who Qualifies?

- Children and youth under age 21 who are eligible and/ or enrolled in Medi-Cal.
- Children and youth under age 19
 with family income less than or
 equal to the current Federal Income
 Guidelines.
- No proof of income or legal status is required for CHDP services.

Babies and Toddlers Birth through 3 years

Regular health check-ups keep your baby happy and healthy. You will find out about your baby's growth, weight, health, and vaccinations. At your baby's health check-up your baby needs to:

- Be tested for lead and anemia
- Be screened for behavioral and developmental health
- Have a vision acuity screening beginning at age 3
- See a dentist for exams and fluoride varnish application every 6 months starting by age 1 or as soon as their first tooth comes in

In addition, your baby is eligible to:

 Receive 3 applications of fluoride varnish every year from your CHDP doctor to prevent cavities



Keep your child healthy by going to health check-ups.

During health check-ups the doctor can find and treat problems before they become serious.

School Children 4 through 12 years

Your child needs to be healthy and ready to learn. State laws require children to be up-to-date on their vaccines. Your child needs to receive the following services:

- Lead test before age 6
- Behavioral and developmental health screenings
- Hearing and vision screenings
- Dental exam every 6 months
- Fluoride application 2 times per year by your dentist and 3 times per year from your CHDP doctor until age 6

Feens and Young Adults 13 through 20 years

Teens need health check-ups too! This is a chance to make sure your teen is growing and developing well physically and emotionally. It is a time for you or your teen to ask the doctor questions. Your teen also needs to see a dentist every 6 months.



Shasta County Health & Human Services Public Health Branch

Immunization Clinic Schedule

2650 Breslauer Way (530) 225-5591

Monday 8:00 – 11:30 a.m. and 1:00 – 4:00 p.m. Tuesday 8:00 – 11:30 a.m. and 1:00 – 4:00 p.m. Wednesday 8:00 – 11:30 a.m. Thursday 4:00 – 6:00 p.m. Friday 8:00 – 11:30 a.m.

Appointments Preferred



Medi-Cal Providers

Child Health & Disability Prevention Program (CHDP)

Health Assessment Providers

These CHDP providers may have room for children on Medi-Cal. Some offices may have age limits on children.

Please call the office for specific information.

For details on insurance coverage or the Child Health & Disability Prevention Program (CHDP), call (530) 225-5122.

<u>ANDERSON</u>

Anderson Medical Associates 2830 East St. (530) 365-2545

Shasta Community Health Center 2965 East St. (530) 378-0486

BURNEY

Burney Health Center 37491 Enterprise Dr. (530) 999-9030

Pit River Health Services 36977 Park Ave. (530) 335-3651

Mayers Rural Health Center 20641 Commerce Way (530) 335-6070

COTTONWOOD

Lassen Medical Clinic 20833 Long Branch Dr. (530) 347-3418

FALL RIVER MILLS

Fall River Valley Health Center 43658 Hwy 299. E (530) 999-9020

ROUND MOUNTAIN

Hill Country Health & Wellness 29632 Hwy 299 E. (530) 337-6243

SHASTA LAKE CITY

Shasta Community Health Center 4215 Front St. (530) 276-9168

SHINGLETOWN

Shingletown Medical Center 31292 Alpine Meadows Rd. (530) 474-3390

REDDING

Mercy Family Health Center 2480 Sonoma St. (530) 225-7800

REDDING CONTINUED

Hill Country Health & Wellness 1401 Gold St., Suite A (530) 319-7066

Enterprise Family Health & Vision Center 3270 Churn Creek Rd. (530) 229-5000

Redding Rancheria Tribal Health Center 1441 Liberty St. (530) 224-2700 (Native Americans and their households)

Churn Creek Healthcare 3184 Churn Creek Rd. (530) 768-2436

Shasta Community Health Center 1035 Placer St. (530) 246-5710

Center of Hope-Hill Country Clinic 1201 Industrial St. 530-241-4100





Medi-Cal/VSP Eye Doctors

Child Health & Disability Prevention Program (CHDP)

These optometrists may have room for Medi-Cal patients. Some offices may have age limits on children.

Please call the office for specific information.

ANDERSON

Daniel Bernet, O.D. 2890 Ventura St. (530) 365-6471 VSP/Medi-Cal

COTTONWOOD

Michael Farrar, O.D. 3650 Main St., Ste C (530) 347-7347 VSP/Medi-Cal

PALO CEDRO

Palo Cedro Eye Care 9372 Deschutes Rd. (530) 547-2020 VSP/Medi-Cal

REDDING

Richard Martin 2005 Court St. Ste A (530) 605-4230 VSP/Medi-Cal

Cooper and Link 3241 Churn Creek Rd. Redding, CA 96002 (530) 222-2020 VSP/Medi-Cal Enterprise Optometry Group Mitch Martin, O.D. 3080 Victor Ave. (530) 222-3166 VSP/Medi-Cal

Janani Lannin, O.D. 1950 Court St. (530) 241-0778 VSP/Medi-Cal

Julie L. Gussenhoven 3416 Bechelli Lane (530) 222-1422 VSP/Medi-Cal

Enterprise Family Health and Vision 3270 Churn Creek Rd. 530-229-5000 VSP/Medi-Cal

Shasta Eye Medical Group 3190 Churn Creek Rd. (530) 223-2500 VSP/Medi-Cal

Site for Sore Eyes 555 E Cypress Ave. (530) 722-9992 *VSP*

REDDING (Continued)

Costco Vision Center 1300 Dana Dr. (530) 222-3166 VSP

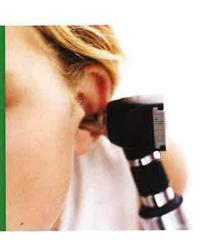
SHASTA LAKE

Dan's Optical 4624 Shasta Lake Dam Blvd. (530) 275-8581 VSP/ Medi-Cal

Updated 06/23/2023



Child Health & Disability Prevention Program (CHDP) (530) 225-5122



Audiologists accepting Medi-Cal

These Audiologists *may not* be accepting new clients *please call* to find out.

Audiology Services

Angela Batini, M.S. 2510 Airpark Dr. Ste 101 Redding, CA 96001 (530) 241-6656

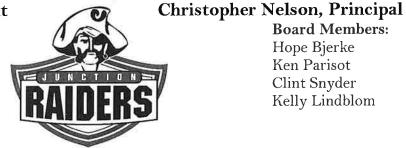


Junction Elementary School District

Clay Ross, Superintendent

Junction School

9087 Deschutes Rd. Palo Cedro, CA 96073 Phone: (530) 547-3276 Fax: (530) 547-4080 www.junctionesd.net



Board Members: Hope Bjerke Ken Parisot Clint Snyder Kelly Lindblom

Dear Parent or Guardian:

To make sure your child is ready for school, California law, Education Code Section 49452.8, now requires that your child have an oral health assessment (dental checkup) by May 31 in either kindergarten or first grade, whichever is his or her first year in public school. Assessments that have happened within the 12 months before your child enters school also meet this requirement. The law specifies that the assessment must be done by a licensed dentist or other licensed or registered dental health professional.

Take the attached Oral Health Assessment/Waiver Request form to the dental office, as it will be needed for your child's check-up. If you cannot take your child for this required assessment, please indicate the reason for this in Section 3 of the form. You can get more copies of the necessary form at your child's school or online from the California Department of Education's Web site at http://www.cde.ca.gov/ls/he/hn/. California law requires schools to maintain the privacy of students' health information. Your child's identity will not be associated with any report produced as a result of this requirement.

The following resources will help you find a dentist and complete this requirement for your child:

- 1. Medi-Cal/Denti-Cal's toll-free number or Web site can help you to find a dentist who takes Denti-Cal: 1-800-322-6384; http://www.denti-cal.ca.gov. For help enrolling your child in Medi-Cal/Denti-Cal, contact your local social service agency at (fill in appropriate local contact information, available at http://www.denti-cal.ca.gov/WSI/Bene.jsp?fname=ProvReferral.)
- 2. Healthy Families' toll-free number or Web site can help you to find a dentist who takes Healthy Families insurance or to find out if your child can enroll in the program: 1-800-880-5305 or http://www.benefitscal.com/.
- 3. For additional resources that may be helpful, contact your local public health department at (fill in appropriate local contact information, available at http://www.dhcs.ca.gov/services/medi-cal/Pages/CountyOffices.aspx).

Remember, your child is not healthy and ready for school if he or she has poor dental health! Here is important advice to help your child stay healthy:

- Take your child to the dentist twice a year.
- Choose healthy foods for the entire family. Fresh foods are usually the healthiest foods.
- Brush teeth at least twice a day with toothpaste that contains fluoride.
- Limit candy and sweet drinks, such as punch or soda. Sweet drinks and candy contain a lot of sugar, which causes cavities and replaces important nutrients in your child's diet. Sweet drinks and candy also contribute to weight problems, which may lead to other diseases, such as diabetes. The less candy and sweet drinks, the better!

Baby teeth are very important. They are not just teeth that will fall out. Children need their teeth to eat properly, talk, smile, and feel good about themselves. Children with cavities may have difficulty eating, stop smiling, and have problems paying attention and learning at school. Tooth decay is an infection that does not heal and can be painful if left without treatment. If cavities are not treated, children can become sick enough to require emergency room treatment, and their adult teeth may be permanently damaged.

Many things influence a child's progress and success in school, including health. Children must be healthy to learn, and children with cavities are not healthy. Cavities are preventable, but they affect more children than any other chronic disease.

If you have questions about the new oral health assessment requirement, please contact Jessica Snyder at 530-547-3276 or by email at jsnyder@junctionesd.net.

Sincerely,

Christopher Nelson

Principal





Medi-Cal Dental Services

Child Health & Disability Prevention Program (CHDP)

These CHDP providers may have room for Medi-Cal patients. Some offices may have age limits on children.

Please call the office for specific information.

If you would like help locating other dentists in Shasta County, please call Medi-Cal at 1-800-322-6384. For information about insurance coverage or the Child Health & Disability Prevention Program, call (530) 225-5122.

ANDERSON

Anderson Family Health & Dental Center 2965 East St. (530) 365-3147

BURNEY

Pit River Health Services 36977 Park Ave. (530) 335-3651

Mountain Valleys Health Centers Burney Dental Center 20615 Commerce Way (530) 999-9031

FALL RIVER MILLS

Frye Dental Inc 25515 Glenburn Rd. (814) 777-7861

ROUND MOUNTAIN

Hill Country Community Clinic 29632 Hwy 299 E. (530) 337-5750

REDDING

David Lee, D.D.S. 2138 Court St. (530) 241-1129 (Children 16+) Hill Country Health and Wellness Center of Hope 1201 Industrial St. Redding, CA 96002 (530) 337-6244 (can text for quick responses)

Li Min Hou, D.D.S. 1627 Hilltop Dr., Suite A (530) 223-2989 (Extractions/dentures only) 19 years old and up

Lila Wilson, D.D.S. 2100 Hilltop Dr., Suite A (530) 605-3350 (Children ages 4-12)

Redding Rancheria Churn Creek
Wellness and Dental Care Clinic
3110 Churn Creek Rd
Redding, CA 96002
530-768-2490
(Must have history of at least one visit at one of the Redding Rancheria sites)

Redding Rancheria Tribal Health Dental Clinic 1441 Liberty St. (530) 226-1750 (Native Americans and their households)

Shasta Community Health Center Dental Clinic 1400 Market St., Room 8103 (530) 246-5700 Western Dental Orthodontics 1667 Hilltop Dr., Suite E (530) 223-5500

SHASTA LAKE CITY

Shasta Community Health Center 4215 Front St. (530) 276-9129

RED BLUFF

Northern Valley Indian Health, Inc. 2500 Main St. (530) 529-2567, ext. 4 (All patients welcome)

Greenville Rancheria Dental 343 Oak St. (530) 528-3488 (All patients welcome)

Registered Dental Hygienists in Alternative Practice – [RDHAP]

RDHAPs can provide dental screenings, sealants, and cleanings, but cannot provide full-scope dental treatment.

Rose Johnson, RDHAP Mobile Clinic – home visits available (530) 215-6341



Don't forget to schedule your child's required dental assessment!

What is the Kindergarten Oral Health Assessment (KOHA)?

To make sure your child is ready for school, California law requires children to have a dental assessment by **May 31** in either kindergarten or first grade, whichever is their first year in public school.

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Why is it important?



Poor oral health can affect a child's attendance, grades and overall performance in school.

The KOHA helps ensure children are healthy and ready for a successful school year.

What is a Dental Home?

A dental home is a dental office where you and your child feel safe and comfortable going to.



STEPS TO COMPLETE THE KOHA:

- Look out for a registration form and information from your child's school.
 They will give you a:
 - Letter about the KOHA requirement
 - Form that the dentist will complete during your child's assessment
- Take your child to the dentist by May 31st. You can visit SmileCalifornia.org/Find-A-Dentist to find a dental home for your family.
- 3. Ask the dentist to fill out the KOHA form at your child's visit.
- 4. Give your child's school the completed form.
 At this point, you're done with the requirement but not with your child's dental care!

As a Medi-Cal member, your child is covered for two dental check-ups and cleanings a year.



Visit SmileCalifornia.org to find your child's dental home today.



Oral Health and School Readiness Fact Sheet

All children enrolled in Medi-Cal have dental coverage, but many parents and guardians may not realize their child has dental benefits or know how to access dental care.

A Child's Oral Health Affects Their Whole Body

Children with poor oral health may:

- Miss more school and receive lower grades than children who don't.
- Develop an infection or other serious health condition.
- Have trouble eating, speaking, and even sleeping due to pain.
- · Have low self-esteem.



Dental Check-Ups Are Important for School Readiness

- Establishing good dental care habits at home at a young age is important. However, it is critical to educate families that home care alone is not a substitute for a dental check-up.
- Healthy teeth not only help children eat, speak and sleep better, but also to perform better in school.
- According to a USC study, children with tooth pain were more likely to miss school days and four times more likely to have a low grade-point average when compared to children without oral pain.

The good news is that tooth decay is preventable!

The Kindergarten Oral Health Assessment Requirement

To make sure children are ready for school, California law requires that children have a dental assessment by
 May 31 in either kindergarten or first grade, whichever is their first year in public school.

Medi-Cal Offers Comprehensive Preventive and Restorative Dental Benefits to Both Children and Adults

- Members under the age of 21 are covered for two dental check-ups and cleanings a year.
- Members 21 years of age or older are covered for one dental check-up and cleaning a year.



Connecting Members to a Medi-Cal Dentist

- 1. Visit SmileCalifornia.org.
- 2. Click on the orange "Find A Dentist" button at the top of the page.
- 3. Search for Medi-Cal dental providers in their area that are accepting new patients.



Clear Form

Waiver of Oral Health Assessment Requirement

Please fill out this form if you need to excuse your child the oral health assessment requirement. Sign and return this form to the school where it will be kept confidential.

Section 1: Child's Information (Filled out by parent or guardian)

Child's First Name:		Last Name:	N	/liddle Init	ial:	Child'	s Birth D	ate:
						MM -	- DD -	YYYY
Address:							Apt.:	
City:					1	code:		
School Name:		Teacher:		Grade:		ar child dergarf		
Parent/Guardian First Nam	e:	Parent/Guardian Last Name:			_	ild's Ge) Male		male
Child's Race/Ethnicity:	00000	White Black/African American Hispanic/Latino Asian Other (please specify)		Native A Multi-ra Native I Unknow	cial Haw		acific Isl	ander

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Section 2: To be filled out by parent or guardian ONLY IF asking to be excused from this requirement

	the second
Plea	ase excuse my child from the assessment because (check the box that best describes the reason):
	I cannot find a dental office that will take my child's dental insurance plan. My child's dental insurance plan is:
	☐ Medi-Cal ☐ Covered California ☐ Healthy Kids ☐ None
	Other:
	I cannot afford an assessment for my child.
	I cannot find the time to get to a dentist (e.g., cannot get the time off from work, the dentist does not have convenient office hours).
	I cannot get to a dentist easily (e.g., do not have transportation, located too far away).
	I do not believe my child would benefit from an assessment.
	Other (please specify the reason not listed above for why you are seeking a waiver of this assessment for your child):
If as	sking to be excused from this requirement:
	MM - DD - TYYY
_	Signature of parent or guardian Date

The law states schools must keep student health information private. Your child's name will not be part of any report as a result of this law. This information may only be used for purposes related to your child's health. If you have questions, please call your school.

Return this form to the school *no later than* May 31 of your child's first school year.

Original to be kept in child's school record.

Oral Health Assessment Form

California law (*Education Code* Section 49452.8) says every child must have a dental check-up (assessment) by May 31st of his/her first year in public school. A California licensed dental professional must do the check-up and fill out Section 2 of this form. If your child had a dental check-up in the last 12 months, ask your dentist to fill out Section 2. If you are unable to get a dental check-up for your child, fill out the separate Waiver of Oral Health Assessment Requirement Form.

This assessment will let you know if there are any dental problems that need attention by a dentist. This assessment will also be used to evaluate our oral health programs. Children need good oral health to speak with confidence, express themselves, be healthy and, ready to learn. Poor oral health has been related to lower school performance, poor social relationships, and less success later in life. For this reason, we thank you for making this contribution to the health and well-being of California's children.

Section 1: Child's Information (Filled out by parent or guardian)

Child's First Name:		Last Name:	N	liddle Initi	ial:	Child's Birth Date:
		×				MM – DD – YYYY
Address:						Apt.:
City:					ZIP	Code:
School Name:		Teacher:		Grade:		ar child starts dergarten:
					ΙΥ	a
Parent/Guardian First Nam	e:	Parent/Guardian Last Name:	-		Chi	ld's Gender:
a						Male 🗖 Female
Child's Race/Ethnicity:		White		Native A	\me	rican
		Black/African American		Multi-rad	cial	
		Hispanic/Latino		Native ⊦	law	aiian/Pacific Islander
		Asian		Unknow	'n	
		Other (please specify)				

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Section 2: Oral Health Data Collection (Filled out by a California licensed dental professional)

IMPORTANT NOTE: Consider each box separately. Mark each box.

	1117	*Caries Experience
Assessment Date:	Untreated Decay (Visible Decay Present)	(Visible decay and/or fillings present)
MV - DD - YYYY'	□Yes □No	□Yes □No
Treatment Urgency:		
problem found (ca	Early dental care recommended ries without pain or infection; or child would nefit from sealants or further evaluation)	Orgent care needed (pain, infection, swelling or soft tissue lesions)
		MM - DD - YYYYY
Licensed Dental Pro	fessional Signature CA License Num	= :
*Check "Yes" for Caries Check "No" for Caries	experience if there is presence of untreated experience if there is no untreated decay an	decay <u>or</u> fillings d no fillings
*Check "Yes" for Caries Check "No" for Caries Section 3: Follow-up t	experience if there is presence of untreated	decay <u>or</u> fillings d no fillings
*Check "Yes" for Caries Check "No" for Caries Section 3: Follow-up t	experience if there is presence of untreated experience if there is no untreated decay <u>an</u> o Urgent Care (Filled out by entity respon	decay or fillings d no fillings sible for follow up)

The law states schools must keep student health information private. Your child's name will not be part of any report as a result of this law. This information may only be used for purposes related to your child's health. If you have questions, please call your school.

Return this form to the school *no later than* May 31st of your child's first school year.

Original to be kept in child's school record.

Keep Our School Healthy



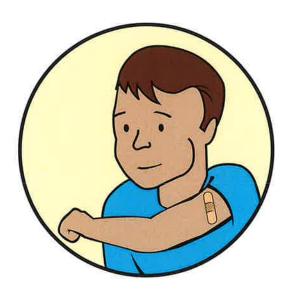
Send sick kids home



• Teach kids to cover their cough.

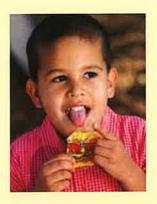


• Teach kids to wash hands for 20 seconds, often, with soap.



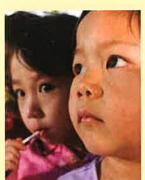
 Prevention through Vaccination.

Did you know there is lead in some candy?



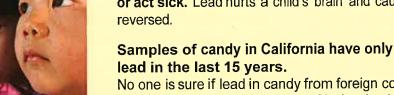
Lead has been found in some candies, including chili and tamarind candy from foreign countries.

The lead in the candy can come from many places. It can be in the soil where ingredients for candies are grown. It can be in the factories where candy is made. It can even be in the ink on the candy wrappers. People selling these candies may not know there is lead in it. You can't tell if candy has lead in it just by looking at it or tasting it.



What is lead poisoning and how does it hurt children?

Lead is a dangerous metal found in nature. It can be found in paint, dirt, and dust. It can also get into some things we eat. Even very small amounts of lead are not safe for children. A child can have lead poisoning and not look or act sick. Lead hurts a child's brain and causes problems that can't be reversed.



Samples of candy in California have only been regularly tested for

No one is sure if lead in candy from foreign countries is a new problem or an old problem. What we are sure of is that lead is dangerous for children.



What is being done about lead in candy?

Some candies have been banned and can't be sold in the United States. Candies from different countries are being tested for lead. . Mexican and American companies in Mexico and are being visited to make sure their candy is safe.

What should I do for my children and family?

Ask your health care provider if your child should be tested for lead. Most children are tested when they have their regular check-up at 1 and 2 years old.

How can I get more information about lead?

Ask your child's health care provider and contact your local Childhood Lead Prevention Program at (530) 225-5122. They can give you information about lead and help get your child tested.

 For more information about lead in candy visit: https://www.cdph.ca.gov/Programs/CEH/DFDCS/Pages/ FDBPrograms/FoodSafetyProgram/LeadinCandyFAQs.aspx Is your candy safe?

