CCHC Outputs						NC HSAET		
Facility ID	Classroom Nickname	Assessment ID	# of TA Interactions- Coaching	# of TA Interactions- Consultation	Subject Matter Addressed in Consultation	Date of Assessment 1a	Pre 1a. Illness and Infectious Diseases	Post 1a. Illness and Infectious Diseases
cchc_outputs.facility _id Enter DCDEE Facility ID using system lookup	cchc_outputs.class room_nickname Data Entry Type: Text Descriptive Classroom Nickname to help track	cchc_outputs.asse ssment_id Enter NC-HSAET Assessment ID	cchc_outputs.ece _coaching Data Entry Type: Whole Number. Counts can be added to this column, based on a Quality Improvement Cycle	_consultation Data Entry Type: Whole Number. Counts can be added to this	cchc_outputs.subject_matter CCHC Subject Matter Areas: Policy Development and Implementation Illness and Infectious Diseases Children with Special Health Care Needs Medication Administration Safety and Injury Prevention Emergency Preparedness, Response, and Recovery Infant and Child Social and Emotional Wellbeing Child Abuse and Neglect Nutrition and Physical Activity Oral Health Environmental Health	hsaet_cchc.date_pr e_assessment_1a Date of FULL assessment	hsaet_cchc.pre_illn ess_and_infectious _disease Subscale range, calculated by TA based on instructions	
					Staff Health and Wellness			

Date of Assessment 1b	Pre 1b. Handwashing, Diapering, and Toileting	Handwashing, Diapering, and Toileting	Date of Assessment 2		with Special Healthcare Needs		Pre 3. Medication Administration	Medication Administration	Date of Assessment 4	Pre 4. Safety and Injury Prevention: Training, Policy, and Supervision
		hsaet_cchc.post_h andwash_diaperin g_toileting		hsaet_cchc.pre_ch ildren_with_special _health	hsaet_cchc.post_c hildren_with_speci al_health		hsaet_cchc.pre_3 _medication_admi nistration	hsaet_cchc.post_3 _medication_admin istration		hsaet_cchc.pre_sa fety_and_injury_pr evention
	Subscale range, calculated by TA based on assessment	Subscale range,	Date of FULL assessment	Subscale range, calculated by TA based on assessment	Subscale range, calculated by TA based on assessment	Date of FULL assessment		Subscale range, calculated by TA based on assessment	Date of FULL assessment	everillori

and Injury Prevention: Training,	Assessment 4a	Environment Including Safe Eating	Post 4a. Environment Including Safe Eating	Date of Assessment 4b	Pre 4b. Infant Safe Sleep	Post 4b. Infant Safe Sleep	Date of Assessment 4c	Pre 4c. Outdoor Environment		Assessment 5
		hsaet_cchc.pre_en					hsaet_cchc.date_	hsaet_cchc.pre_o	hsaet_cchc.post_o	
		vironment_includin				hsaet_cchc.post_inf			utdoor_environme	hsaet_cchc.date_p
ury_prevention		g_safe_eat	ude_safe		ant_safe_sleep		4c	nt		re_assessment_5
	Date of FULL assessment			Date of FULL assessment			Date of FULL assessment			Date of FULL assessment

Pre 5. Emergency Preparedness, Response, and	Post 5. Emergency Preparedness, Response, and	Date of Assessment 6	Child Social Emotional Wellbeing	Post 6. Infant and Child Social Emotional Wellbeing	Assessment 7	Pre 7. Child Abuse and Neglect	Post 7. Child Abuse and Neglect	Date of Assessment 8	Pre 8. Physical Activity	Post 8. Physical Activity
hsaet_cchc.pre_e	hsaet_cchc.post_e			hsaet_cchc.post_inf			hsaet_cchc.post_c			hsaet_cchc.post
mergency_prepar	mergency_prepare	hsaet_cchc.date_p	fant_and_child_so	ant_and_child_soci	hsaet_cchc.date_p	ld_abuse_and_neg				_physical_activit
edness	dness	re_assessment_6	cial_emo	al_emo		ect	eglect	nt_8	physical_activity	У
		Date of FULL assessment			Date of FULL assessment			Date of FULL assessment		

Date of Assessment 9	Pre 9. Nutrition	Post 9. Nutrition	Date of Assessment 10		Post 10. Oral Health		Pre 11a. Environmental Health: Hazards	Environmental Health: Hazards		Pre 11b. Food Handling	Post 11b. Food Handling
			hsaet_cchc.date				hsaet_cchc.pre_	hsaet_cchc.post_	hsaet_cchc.date		
hsaet_cchc.date_pr	hsaet_cchc.pre_n	hsaet_cchc.post	_pre_assessme	hsaet_cchc.pre	hsaet_cchc.pos	hsaet_cchc.date_pr	environmental_h	environmental_he	_pre_assessme	hsaet_cchc.pre_f	hsaet_cchc.post_fo
	utrition	_nutrition	nt_10 Date of FULL	_oral_health	t_oral_health	e_assessment_11a	eaitn_nazards		nt_11b	ood_handling	od_handling
Date of FULL assessment			Date of FULL assessment			Date of FULL assessment			Date of FULL assessment		

						ECE- For Cash a	Notes (Optional)			
Date of Assessment 12	Pre 12. Staff Health and Wellness	Post 12. Staff Health and Wellness	Date of Assessment 13	Development and Implementati	Development and Implementatio	\$ Total amount of incentives paid during this year	Achievement associated with the distribution of Incentive	# of distributions of Incentives during the FY	Description of items purchases	Optional Notes
hsaet_cchc.date _pre_assessmen t 12	hsaet_cchc.pre_ staff_health_and wellness	hsaet_cchc.post _staff_health_an d_wellness			hsaet_cchc.post _policy_develop ment			ece_grants_shared.ec e_number_distribution s incentives	ece_grants_shared.p urchases	notes.optional notes
Date of FULL assessment			Date of FULL assessment			Data Entry Type: Whole Number, Max Value 100,000 Entire value of cash and non-cash grants provided as incentives during this FY; Only enter whole dollar amounts.	Data Entry Type: Text Describe the eligibility met or achievement that	Data Entry Type: Whole Number, Max Value 52 If multiple grants or payments were provided during the FY, indicate the	Data Entry Type: Text Describe items purchased for the classroom/individual participant. If cash, state cash. Do not state other similar words such as dollars or payment.	Data Entry Type: Text.