

Area:	Health Services
Subject:	HS12 - Involving Parents
Reference:	1304.20 (e)(1-5)
Policy:	SCOE, Partner and Delegate Agencies will involve parent/guardian in child health and developmental services

Procedure:

1. Prior to enrollment, Designated Health Staff/FSW will:
 - Complete with parent/guardian, the child Health History/Nutrition Assessment form, Consent form and Emergency Card in order to identify each child's health, nutrition and developmental needs. Assist parent/guardian with referrals to obtain a medical or dental home for their family as needed.
 - Provide each parent/guardian with a Health Services Information Sheet (RHS or EHS) and explain the program's health and dental requirements/services/developmental and sensory screenings.
 - Obtain and review child immunization records and inform parent/guardian of immunization requirements.
 - Complete a Notice of Needed Information/Exclusion form and give to parent/guardian if child is identified as needing medical/dental/immunization follow up and indicate when verification of health requirements/screenings are due to the program.
 - Will contact parent/guardian if child is identified as needing any medication or health procedures to be conducted during program hours. The Head Start Nurse will implement a health care plan in collaboration with parent/guardian, child's health care provider and Educator.
 - Will ensure that there are systems in place to identify any children in which parent/guardian have refused on site health screenings or services (e.g.: fluoride toothpaste, hearing screenings, blood lead testing, etc.)
 - Ensure all mandatory health postings (available on SCOE website) are displayed on Parent Health Board.
2. Upon child enrollment and throughout the program year, Designated Health Staff/FSW/Educator/Child Care Specialist will:
 - Provide parent/guardian opportunities to participate in Parent Policy Council Health Advisory Committee Meetings
 - Provide opportunities for parent/guardian to attend health, dental, and nutrition presentations that are scheduled throughout the program year that include but are not limited to: parent socials, parent policy council meetings, one on one parent health and nutrition education opportunities, CST/IEP/IFSP/Family Goal Setting meetings, etc.
 - Provide parent/guardian with any screening results conducted at facility and make referrals as needed.
 - Complete Notice of Need/Exclusion form and give to parent/guardian to update

child's individual EPSDT records.

- Supervised by:** Director of Health Services, Health Services Supervisor, Disabilities Supervisor
- Performed by:** Designated Health Staff, Family Services Workers, Child Care Specialists, Educators
- Forms needed:** Family Case Notes, Consent Form, Emergency Cards, Health History/Nutrition Assessment, Notice of Needed Information/Exclusion form, child medical and dental records, Dental Care Report, Screening Results forms, Consent for Administration and Medication, Individual Health Care/Asthma Plans, CST/IEP/IFSP meeting forms, Agendas, Sign in Sheets, Referral forms, Nutrition Referral form, Electronic Tracking Reports, Mandatory Health Postings, Family Partnership Agreement.
- Frequency:** Prior to Enrollment, Ongoing