Systems that Support Health Services

This section reviews systems that support health services in Head Start. Health services plans are developed based on the Community Assessment and Self-Assessment process. It suggests data sources, such as the Program Information Report (PIR), risk management process, and public health data, to identify the health needs of the population served.

Systems that Support Health Services

Planning and Implementation of Health Services Based on the Community Assessment

Head Start Program Performance Standard 1305.3(c)

Determining community strengths and needs.

Each Early Head Start and Head Start grantee must conduct a Community Assessment within its service area once every three years. The Community Assessment must include the collection and analysis of the following information about the grantee's Early Head Start or Head Start area:

> *(1) The demographic make-up of Head Start eligible children and families, including their estimated number, geographic location, and racial and ethnic composition;*
> *(2) Other child development and child care programs that are serving Head Start eligible children, including publicly funded State and local preschool programs, and the approximate number of Head Start eligible children served by each;*
> *(3) The estimated number of children with disabilities four years old or younger, including types of disabilities and relevant services and resources provided to these children by community agencies;*
> *(4) Data regarding the education, health, nutrition and social service needs of Head Start eligible children and their families;*
> *(5) The education, health, nutrition and social service needs of Head Start eligible children and their families as defined by families of Head Start eligible children and by institutions in the community that serve young children;*
> *(6) Resources in the community that could be used to address the needs of Head Start eligible children and their families, including assessments of their availability and accessibility.*

Community Assessment Process

Head Start programs are mandated to conduct a Community Assessment every three years. As a health manager, one of your tasks

may be to identify the health needs of Head Start-eligible children and the resources within the community to provide these services.

Using the Community Assessment Matrix, you need to work with HSAC members to quantify the following:

- Number of children with health insurance (Medicaid, CHIP, private, or other)
- Number of children with no health insurance
- Number of health care providers serving children birth to 5
- Number of health care providers serving children birth to 5 accepting Medicaid
- Number of dental providers serving children birth to 5
- Number of dental providers serving children birth to 5 accepting Medicaid
- Immunization levels among school children
- Prevalence of health problems, such as anemia, asthma, obesity, high lead levels, vision or hearing problems, diabetes
- Incidence of communicable diseases
- Incidence of dental caries
- Number of children with disabilities, types of disabilities, and resources
- Incidence of child abuse and neglect
- Incidence of drug and alcohol abuse
- Number of children born to addicted mothers
- Reports of spouse abuse
- Rates of infant and child mortality
- Number of low-birth weight babies
- Rates of teen pregnancy
- Number of women receiving prenatal healthcare

To determine the capacity of your program and the surrounding community to provide services for identified health concerns, you need to review the 5 Steps to Community Assessment: A Workbook for Head Start and Early Head Start Programs Serving Hispanic and Other Emerging Populations. This workbook discusses the purpose of the Community Assessment and the five steps for conducting a comprehensive assessment:

1. Plan and organize
2. Design data collection
3. Gather data
4. Review and analyze
5. Make decisions

Data Collection

In the period between Community Assessments, the demographic make-up of your Head Start program may change. As the population's ethnic and linguistic composition changes, so may children's health needs. You need to meet with your HSAC to determine the best sources of recent health data for your community. Some resources may include:

- Recent data from the PIR
- Risk Management meetings
- Child health reports
- Local health departments
- State Medicaid offices
- Focus groups
- Agency for Healthcare Research and Quality (AHRQ)
- Centers for Disease Control and Prevention (CDC) (Data and Statistics)
- Human Resources and Services Administration (HRSA) (Geospatial Data Warehouse)
- National Center for Health Statistics (NCHS)
- Substance Abuse and Mental Health Services Administration (SAMHSA) (Office of Applied Studies)

Health Services Plan

As a health manager, you will plan health activities based on this assessment, as well as individual health information collected during intake. It is important to regularly review your plan to ensure the activities are meeting the needs of the changing community and emerging conditions. Your health services plan may include:

- Efforts targeted to specific health concerns
- Trainings for parents and staff
- Health fairs
- Providers to perform onsite screenings
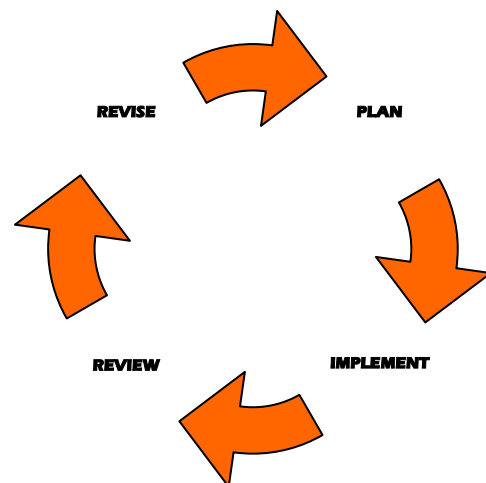
Additional Online Resources

For more information on the OHS Risk Management process, review the [Head Start Risk Management Process Information Memorandum](#).

Record Keeping

Head Start Program Performance Standard 1304.20 (c)

Extended follow-up and treatment.

Grantee and delegate agencies must establish procedures to track the provision of health care services.

> _(iii) Obtain or arrange further diagnostic testing, examination, and treatment by an appropriate licensed or certified professional for each child with an observable, known or suspected health or developmental problem;_
>
> _(iv) Develop and implement a follow up plan for any condition identified in 45 CFR 1304.20 (a) (1) (ii) and (iii) so that any needed treatment has begun._

Why is Record Keeping Important?

Head Start programs must establish and maintain efficient and confidential record-keeping systems. A record-keeping system for health services integrates four health components:

- the child health record
- tracking policies and procedures
- staff and volunteer records
- confidentiality policies and procedures

A well-documented health record-keeping system enables you to provide continuity and quality health services. The system manages health care treatment and follow-up, identifies prevailing health problems, as well as gaps in services; creating a more comprehensive picture of a child's health. It also provides a comprehensive medical history when transitioning a child and family out of Head Start.

Individual Child Health Record

The individual child health record officially documents a child's medical, dental, mental health, nutrition histories, screenings, diagnosis, treatment, and follow-up. This document is a legal record of health services and is maintained for every child enrolled in Head Start and EHS. The Child Health Record - English (also available in Spanish) contains information to assist you in arranging comprehensive health care. Other examples of child health records include the Health Data Tracking Instrument and the Parent-Held Child Health Record Template. You can refer to these to tailor a child health record that works best for your Head Start program.

Tracking Policies and Procedures

Head Start programs establish policies and procedures to track health information for all children and families enrolled in Head Start. Tracking health information is a systematic way to organize health information such as screenings, immunizations, and examinations for Head Start children and families. It also helps to ensure timely provision of health services. As a health service manager, you can use this information to keep up-to-date with scheduling appointments for follow-up services.

An efficient tracking system may include:

- State EPSDT requirements including Well-Child Visits and follow-up recommendations
- Dental visits
- Immunizations
- Dietary considerations
- Information that will be included on the Program Information Report (PIR)
- Information required by State licensing
- Additional information (if any) that is unique to your community or required by your HSAC

Health Tracking Tools

There are two types of health tracking tools: electronic and paper. There are pros and cons to each approach and deciding which method to use is a local program decision. When deciding which method works best, you should consider your program size, the feasibility of each method, accessibility to program staff, technical requirements, necessary training, resources for data entry, and capability. Electronic tracking systems, such as ChildPlus, HSFIS, and PROMIS provide a database of information that is easily accessible to all staff and they quickly generate reports by computer software. Paper-tracking systems maintain information that is manually summarized. It is a low-tech method of tracking information for programs with intermittent access to a computer.

These electronic tracking systems are used as examples, OHS does not endorse the use of a specific electronic tracking software package.

Programs differ on the information collected. With the HSAC you need to review your program child health record to ensure that the necessary information is being collected. It is critical to keep these questions in mind:

- What is the information we need to collect for the children and families we serve?
- How will we use this information?

As family service workers have an increasing role in health data collection, it is important to discuss what information is collected. This will help to coordinate efforts and minimize duplication.

Staff and Volunteer Health Records

All staff and regular volunteers should demonstrate that they are in good health.

- **Staff:** Head Start and EHS programs develop program-specific health policies for staff that take into consideration Federal, state, and/or local laws, as well as the local Health Department

recommendations. It is important to consult with the HSAC and to obtain legal counsel in developing this policy. Programs may develop a standard form for staff to take with them to their health care providers. This standardized form must meet the requirements of the *Americans with Disabilities Act* (ADA) and *Section 504 of the Rehabilitation Act*.

- **Volunteers:** Regular volunteers in Head Start or EHS Programs must comply with state, Tribal, and local laws regarding health examinations and screening for tuberculosis for volunteers. If state, Tribal, or local laws do not require a tuberculin skin test, you should consult your HSAC regarding the need for the tuberculin screening of volunteers. The screening may not be necessary for a volunteer who only comes into the program periodically. The HSAC also may suggest requiring other health screenings and procedures for volunteers; in some cases, state or Tribal requirements may mandate additional screenings or tests.

Staff and volunteer health records are covered by the same confidentiality policies as the Individual Child Health Record.

Confidentiality of Information

 Head Start Program Performance Standard 1304.52 (h)

Standards of conduct.

> *(1) Grantee and delegate agencies must ensure that all staff, consultants, and volunteers abide by the program's standards of conduct. These standards must specify that:*
>
> > *(ii) They will follow program confidentiality policies concerning information about children, families, and other staff members.*

The Importance of Confidentiality in Head Start

Maintaining confidentiality is a significant issue in managing the record-keeping system. It is important that each program develop guidelines to ensure that collected information is stored, released, and transferred in a way that protects the privacy of the child and family. A

confidential record-keeping system will ensure that information is released only to those individuals who either work with the child or evaluate the program.

Written confidentiality policies should include procedures for internal storage, use, and handling of identifiable health information. As a health service coordinator, you should review your confidentiality policy and be prepared to provide copies and consent forms to health care providers and other community partners.

Your Role as the Health Coordinator

In your role as the health coordinator, consider the following steps to maintain the confidentiality of each child's health record:

- Include the confidentiality policy in pre-service and in-service training for staff, such as family service workers, home visitors, and volunteers
- Orient parents of their right to access
- Keep the comprehensive records in a locked file or under a password, if the information is stored on a computer
- Determine how long to keep records
- Update records, as needed

Storing Health Information

Health data must be kept under lock and key in order to maintain the confidentiality of children and families. Access to health records must be strictly controlled. The Head Start program director has an administrative responsibility to identify staff persons who need health record information.

You Role as the Health Coordinator

In your role as the health coordinator, you should ensure that:

- Records are kept in a locked file or under a password, if records are stored on a computer
- Summary emergency cards are readily available in a central location, including the emergency consent form
- Confidentiality policy includes: who has access to which records and how the information will be collected
- Each child's health record contains a cover sheet requiring a signature, date, and the purpose for the person to access the file

Informed Parent Consent

Staff may only provide information concerning the child or family to a person other than the parent, legal guardian, or authorized representative when the parent or guardian provides informed consent.

You Role as the Health Coordinator

In your role as the health coordinator, review the informed consent forms and make sure forms include:

- Name of the person or institution to whom the record is to be released
- Date when the consent form expires
- Statement of how many times the record can be released
- Signature of the person allowing the information to be released

Health Insurance Portability Accountability Act

The *Health Insurance Portability and Accountability Act 1996 (HIPAA)* is Federal legislation that establishes national standards to protect the confidentiality of individual medical records and other personal health information. If a Head Start Program functions as a health care provider and electronically conducts transactions in conjunction with a health insurer (e.g., Medicaid), that program must comply with the HIPAA Privacy Rule regulations.

To comply, Head Start Programs must:

- Notify individuals (usually in writing) regarding their privacy rights and how their protected health information will be used and/or disclosed. For sample notification disclosures, please refer to www.hhs.gov/ocr/hipaa
- Develop and implement internal privacy policies and procedures to safeguard electronically transmitted protected health information in connection with an identified covered transaction and train employees to understand the policies
- Designate individuals who are responsible for implementing privacy policies and procedures and who will receive privacy-related complaints
- Establish privacy requirements in contracts with business associates that perform covered functions

- Have in place appropriate administrative, technical, and physical safeguards to protect the privacy of health information
- Meet obligations with respect to health consumers exercising their rights under the HIPAA Privacy Rule

The Role of the Parents

Parents should feel comfortable asking staff questions about how confidential information is stored and accessed. Parents should maintain copies of the program's confidentiality policy and hold staff accountable to upholding the policy.

The Role of the Family Service Workers and other Staff

Staff members who have access to child health records should be familiar and uphold the confidentiality policy of the program.

The Role of the Health Services Advisory Committee

The HSAC is able to help the health coordinator develop confidentiality policies and procedures for staff to ensure that child and family information is kept confidential and accessible only to necessary program staff who work with the child or evaluate the program.

Ongoing Monitoring and Self-Assessment

 Head Start Program Performance Standard 1304.51(i)

Program self-assessment and monitoring.

> *(1) At least once each program year, with the consultation and participation of the policy groups and, as appropriate, other community members, grantee and delegate agencies must conduct a self-assessment of their effectiveness and progress in meeting program goals and objectives and in implementing Federal regulations.*
> *(2) Grantees must establish and implement procedures for the ongoing monitoring of their own Early Head Start and Head Start operations, as well as those of each of their delegate agencies, to ensure that these operations effectively implement Federal regulations.*
> *(3) Grantees must inform delegate agency governing bodies of any deficiencies in delegate agency operations identified in the monitoring review and must help them develop plans, including timetables, for addressing identified problems.*

Annual Self-Assessment

Continuous quality improvement is a central tenet of the Head Start program, with the goal of meeting the *Head Start Program Performance Standards* and moving toward program excellence for serving children and families. To ensure continuous quality improvements, grantee and delegate agencies are required to conduct an annual self-assessment.

The self-assessment process provides grantee and delegate agencies with a method to regularly assess the effectiveness of key management systems as it relates to the implementation of program services. In effect, this process supports continuous improvements, which strengthens the quality of services delivered to Head Start eligible children and families.

The *Head Start Program Performance Standards* requires that at least once each program year, with the consultation and participation of the policy groups and, as appropriate, other community members, grantee and delegate agencies conduct a self-assessment.

The self-assessment process involves the collection of information from a variety of sources to determine the effectiveness of systems as it relates to the implementation and integration of program services. It is oftentimes recommended that grantee and delegate agency staff analyze, review and incorporate information from a variety of data sources, such as ongoing monitoring reports, Program Information Report (PIR), Child Outcome Data, Community Assessment, and the results from the most recent PRISM review. These sources of information can be used to identify program strengths, determine areas for improvement for planning appropriate strategies to address program services.

The *Head Start Program Performance Standards* designates the Head Start program director as having operational responsibility for carrying out the Self-Assessment. Head Start directors are responsible for leading a team of program managers, policy groups and community members in outlining a process and timeline for conducting the self-assessment. *(Excerpted from the Understanding the Self-Assessment Process)*

As the health coordinator, you may be asked to participate in the assessing the coordination of health services for enrolled children during the Self-Assessment process. To help you prepare, you can regularly monitor the other systems that support health services, such as: program governance, communication, human resources and fiscal management. To ensure you have all of these systems in you place, you can review the Implementation of Services and Partnerships grid.

Additional Online Resources

The following resources will provide you more information on the self-assessment process in Head Start.

- Thinking About How to Evaluate Your Program? These Strategies Will Get You Started
- Preparing Your Self-Assessment
- Head Start Self-Assessment: Your Foundation for Building Program Excellence
- Program Self-Assessment Booklets