

**SAN BERNARDINO COUNTY  
HEAD START SERVICE PLAN**

**Subpart B-EARLY CHILDHOOD DEVELOPMENT AND HEALTH SERVICES  
Content Area: PART 1304.20-CHILD HEALTH AND DEVELOPMENTAL SERVICES**

PERFORMANCE STANDARD	STRATEGIES	INDIVIDUAL (S) RESPONSIBLE	TIMELINE	DOCUMENTATION/ MONITORING
<p><b>1304.20 (a) (1)</b>  <b>Determining child health status. In collaboration with the parents and as quickly as possible, but no later than 90 calendar days (with the exception noted in paragraph (a) (2) of this section) from the child's entry into the program, grantee and delegate agencies must:</b>  <b>(1) Make a determination as to whether or not each child has an ongoing source of continuous, accessible health care. If a child does not have a source of ongoing health care, grantee and delegate agencies must assist the parents in accessing a source of care.</b></p>	<p>At the time of enrollment, the Generalists will ensure that each family has a medical home. If a family does not have a medical home, the Generalists will work with the family to ensure one.</p>	<p>Generalists</p>	<p>Ongoing</p>	<p>Application                      Emergency Cards                      MHP</p>
<p><b>1304.20 (a) (1) (ii)</b>  <b>(ii) Obtain from a health care professional a determination as to whether the child is up-to-date on a</b></p>	<p>At the time of enrollment, the Generalist ensures that all immunizations are current and up-to-date.                      The Generalist continues to ensure that immunizations are completed in a timely fashion when due.</p>	<p>Health Coordinator                      Generalists</p>	<p>Time of Enrollment                      Ongoing</p>	<p>California Blue Immunization Card</p>

<p><b>schedule of age appropriate preventative and primary health care, which includes medical, dental and mental health. Such a schedule must incorporate the requirements for a schedule of well child care utilized by the Early and Periodic Screening Diagnosis, and Treatment (EPSDT) program of the Medicaid agency of the State in which they operate, and the latest immunization recommendations issued by the Centers for Disease Control and Prevention, as well as any additional recommendations from the local Health Services Advisory Committee that are based on prevalent community health problems.</b></p>	<p>The Health Coordinator trains the Generalist 3X a year on immunizations through Health Advisory Committee members from Public Health.</p>	<p>Public Health</p>		<p>Immunization report due October 10<sup>th</sup> of each year</p>
<p><b>1304.20 (a) (1) (ii) (A)</b></p> <p><b>(A) For children who are not up-to-date on an age appropriate schedule of well child care, grantee and delegate agencies must assist parents in making the necessary arrangements to bring the child up-to-date,</b></p>	<p>Generalists work in conjunction with the Health Coordinator to ensure that children who have not received up-to-date immunizations are given proper and timely referrals to low cost/no cost clinics or a local CHDP provider for services.</p>	<p>Generalists Health Coordinator</p>	<p>Ongoing</p>	<p>Resource Referral Immunization Schedules TB Clinic Schedules</p>
<p><b>1304.20 (a) (1) (ii) (B)</b></p> <p><b>(B) For children who are up-to-date on an age appropriate schedule of well child care, grantee and delegate agencies must ensure that they continue to follow the recommended schedule of well child care.</b></p>	<p>Center staff will continue to work with parents, to discuss the importance of maintaining up-to-date immunizations and Health checks.</p>	<p>Teachers Generalists Health Coordinator</p>	<p>Ongoing</p>	<p><b>Physical immunization record</b></p>
<p><b>1304.20 (a) (1) (ii) (C)</b></p> <p><b>(C) Grantee and delegate agencies must establish procedures to track the provision of health care services.</b></p>	<p>Generalist will track children's' health examinations and ensure that medical and dental examinations have occurred in a timely manner. All health examinations are recorded and kept confidential in the children's' files.</p>	<p>Generalist</p>	<p>Ongoing</p>	<p>Excel tracking Genesis</p>

<p><b>1304.20 (a) (1) (iii) &amp;(iv)</b></p> <p><b>(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, and</b></p> <p><b>(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.</b></p>	<p>When a staff member suspects a child has a health or developmental problem, he/she will immediately begin a referral to the appropriate entity, in conjunction with the Health Coordinator and/or the Disabilities Coordinator.</p> <p>Monthly service delivery team meetings will be conducted to discuss the implementation and follow up of all referrals made.</p>	<p>Teachers</p> <p>Health Coordinator</p> <p>Disabilities Coordinator</p> <p>Generalists</p> <p>HS Director</p> <p>Parents</p>	<p>Ongoing</p>	<p>Referrals</p> <p><b>Health Plans</b></p> <p>Service Delivery documentation</p>
<p><b>1304.20 (a) (2)</b></p> <p><b>(2) Grantee and delegate agencies operating programs of shorter durations (90 days or less) must complete the above processes and those in 45 CFR 1304.20 (b) (1) within 30 calendar days from the child's entry into the program.</b></p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>
<p><b>1304.20 (b) (1)</b></p> <p><b>(b) Screening for developmental, sensory and behavioral concerns.</b></p> <p><b>(1) In collaboration with each child's parent, and within 45 calendar days of the child's entry into the program, grantee and delegate agencies must perform or obtain linguistically and age appropriate screening procedures to identify concerns regarding a child's developmental, sensory (visual and auditory), behavioral, motor, language, social, cognitive, perceptual, and emotional skills. To the greatest extent possible, these screening procedures must be sensitive to the child's cultural background.</b></p>	<p>PSD staff use various screenings for developmental, sensory and behavioral concerns. Consents for the screenings are completed by the parents at the time of enrollment. If a screening discloses concern, parents are immediately made aware, and further follow up action, such as a referral to the appropriate entity is made.</p>	<p>Teachers</p> <p>Health Coordinator</p> <p>Parents</p>	<p>Within 45 calendar days after enrollment.</p> <p>As needed</p>	<p>Acuscreen, Speech Screen, DRDP plus, Ages and Stages Social/Emotional</p> <p>MHP</p> <p>Hearing/Vision</p> <p>Physicals</p>

<p><b>1304.20 (b) (2)</b>  <b>(2) Grantee and delegate agencies must obtain direct guidance from a mental health or child development professional on how to use the findings to address identified needs.</b></p>	<p>Mental Health and Disabilities Staff advises staff and provides guidance on how to make referrals to the appropriate entity.  Mental Health and Disabilities Staff also assist staff in determining the appropriate procedures for developmental screenings.</p>	<p>Teachers   Mental Health and Disabilities Staff</p>	<p>Ongoing</p>	<p>Referrals</p>
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<p><b>1304.20 (c) (1) &amp; (2)</b>  <b>(c) Extended follow up and treatment</b>  <b>(1) Grantee and delegate agencies must establish a system of ongoing communication with the parents of children with identified health needs to facilitate the implementation of the follow up plan.</b>  <b>(2) Grantee and delegate agencies must provide assistance to the parents, as needed, to enable them to learn how to obtain any prescribed medications, aids or equipment for medical and dental conditions.</b></p>	<p>Generalist will establish a system of ongoing communication with Parents of children with identified health needs, via telephone calls, home visits, written correspondence, and/or parent conferences.   The Health Coordinator and Generalists assist parents to obtain resources, including prescription medications.</p>	<p>Health Coordinator   Teachers   Generalists</p>	<p>Ongoing</p>	<p>Service Activity Documentation   Genesis case notes</p>
<p><b>1304.20 (c) (3) (i) &amp; (ii)</b>  <b>(3) Dental follow up and treatment must include:</b>  <b>(i) Fluoride supplements and topical fluoride treatments as recommended by dental professionals in communities where a lack of adequate fluoride levels has been determined or for every child with moderate to severe tooth decay and</b>  <b>(ii) Other necessary preventive measures and further dental treatment as recommended by the dental professional.</b></p>	<p>At the time of enrollment consent forms are signed by parents. Parents also sign First 5 Dental form.   The Health Coordinator/Generalists will work with local dentist collaboratives to ensure that dental screenings are conducted throughout the year to ensure proper dental care.   Teachers will practice daily toothbrushing with the children to instill the importance of daily dental care.</p>	<p>Teachers   Health Coordinator   Generalists</p>	<p>At the time of enrollment   Ongoing</p>	<p>Dental Consent Form   Consent Form   First 5 Dental Form</p>

<p><b>1304.20 (c) (4)</b>  <b>(4) Grantee and delegate agencies must assist with the provision of related services addressing health concerns in accordance with the Individualized Education Program (IEP) and the Individualized Family Service Plan (IFSP)</b></p>	<p>Teachers will incorporate Individualized Education Program (IEP) goals into the Child's Individual Plan and also into the lesson plans.</p> <p>Disabilities Coordinator will in conjunction with Teacher and Parent write HS IEP.</p>	<p>Teachers  Disabilities Coordinator  Parents</p>	<p>Ongoing</p>	<p>IEP/IFSP  Child's Individual Plan  Lesson Plan</p>
<p><b>1304.20 (c) (5)</b>  <b>(5) Early Head Start and Head Start funds may be used for professional medical and dental services when no other source of funding is available. When Early Head Start or Head Start funds are used for such services, grantee and delegate agencies must have written documentation of their efforts to access other available sources of funding.</b></p>	<p>The grantee agency will provide treatment for medical and dental care, when no other source of funding is available.</p> <p>PSD will work with other agencies to obtain services, including the CHDP program.</p> <p>PSD will also utilize the Health Services Advisory Committee as a link to other outside resources.</p>	<p>Teachers  Generalists  Health Coordinator  Health Services Advisory Committee</p>	<p>Ongoing</p>	<p><b>Health Services Advisory minutes</b></p>
<p><b>1304.20 (d)</b>  <b>(d) Ongoing Care</b>  In addition to assuring children's participation in a schedule of well child care, as described in section 1304.20 (a) of this part, grantee and delegate agencies must implement ongoing procedures by which Early Head Start and Head Start staff can identify any new or recurring medical, dental, or developmental concerns so that they may quickly make appropriate referrals. These procedures must include: periodic observations and recordings, as appropriate, of individual children's progress, changes in physical appearance (e.g. signs of injury or illness) and emotional and behavioral patterns. In addition, these procedures must include observations from parents and staff.</p>	<p>All Teachers conduct a Daily Health Inspection of the child, prior to the parent leaving the Center. This will ensure that if a child is sick, he/she is taken to the doctor immediately by the parent.</p> <p>Observed changes will be brought to the Service Delivery Team and shared with Program Supervisor, Health/Ed Specialist, Teacher, and Site Supervisor as needed.</p>	<p>Teachers  Health Coordinator</p>	<p>Ongoing</p>	<p>Daily Health Check Form  <b>Service Delivery Team</b>  <b>Referrals</b>  <b>SAD Sheet</b>  <b>Child's Individual Service Record</b></p>
<p><b>1304.20 (e) (1)</b>  <b>(e) Involving Parents</b>  <b>In conducting the process, as described</b></p>	<p>Teachers, Generalist, and Site Supervisors will work with parents, and ensure that timely referrals are given, as needed.</p>	<p>Health Coordinator</p>	<p>Ongoing</p>	<p>Referrals</p>

<p>in sections 1304.20 (a), (b), and (c), and in making all possible efforts to ensure that each child is enrolled in and receiving appropriate health care services, grantee and delegate agencies must:  <b>(1) Consult with parents immediately when child health or developmental problems are suspected or identified:</b></p>		<p>Parents   <b>Teachers</b>   <b>Site Supervisor</b></p>		
<p><b>1304.20 (e) (2)</b>  <b>(2) Familiarize parents with the use of and rationale for all health and developmental procedures administered through the program or by contract or agreement, and obtain advance parent or guardian authorization for such procedures. Grantee and delegate agencies also must ensure that the results of diagnostic and treatment procedures and ongoing care are shared with and understood by the parents:</b></p>	<p>Screening Consent Forms are signed by parents upon enrollment into the program.   All results of screenings are shared during parent conferences, home visits, or as needed by the Teachers and/or the Health Coordinator, Generalist, and Area Content Specialists.</p>	<p>Teachers   Health Coordinator   <b>Teachers</b>   <b>Site Supervisor</b></p>	<p>At the time of enrollment   Ongoing</p>	<p>Screening Consent Form</p>
<p><b>1304.20 (e) (3)</b>  <b>(3) Talk with parents about how to familiarize their children in a developmentally appropriate way and in advance about all of the procedures they will receive while enrolled in the program.</b></p>	<p>During the enrollment process, staff will discuss with parents the importance of demonstrating procedures ahead of time. Teachers will discuss program setting and provide staff introductions with parents at time of the facility tour. Parent Handbooks are discussed with parents at time of enrollment.</p>	<p>Generalists   Parents   Teachers</p>	<p>At the time of enrollment</p>	<p>Parent Handbooks</p>
<p><b>1304.20 (e) (4)</b>  <b>(4) Assist parents in accordance with 45 CFR 1304.40 (f) (2) (i) and (ii) to enroll and participate in a system of ongoing family health care and encourage parents to be active partners in their children's health care process;</b></p>	<p>Center staff help to assist parents with obtaining medical and health resources. Center staff encourage parents to attend medical and developmental appointments.   Interest Survey forms are given to parents.   Parents are encouraged to participate in the Health Service Advisory Committee.   Generalists provide resource lists to parents.</p>	<p>Teachers   Generalists   Parents</p>	<p>Ongoing</p>	<p>Referral   <b>Resource List</b>   <b>Lesson Plans</b>   <b>Interest Service form</b></p>

<p><b>1304.20 (e) (5)</b>  <b>(5) If a parent or other legally responsible adult refuses to give authorization for health services, grantee and delegate agencies must maintain written documentation of the refusal.</b></p>	<p>The Generalist obtain timely written parental consent for authorization of health services. If a parent declines, written documentation is maintained to document refusal of services.</p>	<p>Health Coordinator  Parents  <b>Generalist</b></p>	<p>At time of referral</p>	<p>Permission to Refer for Individual Assessment  <b>Consent Form</b></p>
<p><b>1304.20 (f) (1)</b>  <b>(f) Individualization of the program.</b>  <b>(1) Grantee and delegate agencies must use the information from the screenings for developmental, sensory, and behavioral concerns, the ongoing observations, medical and dental evaluations and treatments, and insights from the child's parents to help staff and parents determine how the program can best respond to each child's individual characteristics, strengths and needs.</b></p>	<p>Teachers and HS Director use the Child's Individual Plan with Creative Curriculum to individualize each child's learning needs, in addition to the results of the screenings, observations and assessments.</p>	<p>Teachers  Site Supervisor</p>	<p>Ongoing</p>	<p>Lesson Plans  Child's Individual Plan</p>