



POLICY AND PROCEDURE FOR ENROLLMENT PROCESS FOR CHILD HEALTH CONCERNS

POLICY AND PROCEDURE FOR HEALTH NOTICE, DATA ENTRY AND FOLLOW-UP

Policy

For all activities described in this part, programs must collaborate with parents as partners in the health and well-being of their children in a linguistically and culturally appropriate manner and communicate with parents about their child's health needs and development concerns in a timely and effective manner. (b) At a minimum, a program must: (1) Obtain advance authorization from the parent or other person with legal authority for all health and developmental procedures administered through the program or by contract or agreement, and, maintain written documentation if they refuse to give authorization for health services; and, (2) Share with parents the policies for health emergencies that require rapid response on the part of staff or immediate medical attention. Based on the above policies UTRGV-PSJA-EHS-CCP Program staff will give the Parent a Health Notice to remind and assist them in keeping their child up to date on health requirements as mandated by the state guidelines (EPSDT SCHEDULE). (a) For all activities described in this part, programs must collaborate with parents as partners in the health and well-being of their children in a linguistically and culturally appropriate manner and communicate with parents about their child's health needs and development concerns in a timely and effective manner. *Head Start Program Performance Standards 1302.41 and 1302.41 Collaboration and communication with parents.*

What emergency or medical situations must I notify parents about? (a) After you ensure the safety of the child, you must notify the parent immediately after a child: (1) Is injured and the injury requires medical attention by a health-care professional; (2) Has a sign or symptom requiring exclusion from the child-care center as specified in Subchapter R of this chapter (relating to Health Practices); (3) Has been involved in any situation that placed the child at risk. For example, a caregiver forgetting a child in a center vehicle or not preventing a child from wandering away from the child-care center unsupervised; or (4) Has been involved in any situation that renders the child-care center unsafe, such as a fire, flood, or damage to the child-care center as a result of severe weather. (b) You must notify the parent of less serious injuries when the parent picks the child up from the child-care center. Less serious injuries include, but are not limited to, minor cuts, scratches, and bites from other children requiring first-aid treatment by employees. (c) You must notify all parents of children in the child-care center in writing and within 48 hours of becoming aware that a child in your care or an employee has contracted a communicable disease deemed notifiable by the Texas Department of State Health Services as specified in 25 TAC 97, Subchapter A (relating to Control of Communicable Diseases). (d) You must provide written notice within 48 hours to the parents of all children in a group when there is an outbreak of lice or other infestation in the group. You must either post this notice in a prominent and publicly accessible place where parents can easily view it or send an individual note to each parent. What if a child becomes ill while in care? If a child becomes ill while in your care, you must: (1) Contact the parent to pick up the child; (2) Care for the child apart from other children; (3) Give appropriate attention and supervision until the parent picks the child up; and (4) Give extra attention to hand washing and sanitation if the child has diarrhea or vomiting. How should caregivers respond to an illness or injury that requires the immediate attention of a health-care professional? For an illness or injury that requires the immediate attention of a health-care professional, you must: (1) Contact emergency medical services (or take the child to the nearest emergency room after you have ensured the supervision of other children in the group); (2) Give the child first-aid treatment or CPR when needed; (3) Contact the child's parent; (4) Contact the physician or other health-care professional identified in



the child's record; and (5) Ensure supervision of other children in the group. *Minimum Standards for Child Care Centers 746.307; 746.3605, and 746.3607.*

Based on the above policies the UTRGV-PSJA-EHS-CCP Program will ensure that there is a policy in place for implementing a health enrollment process for child health concerns and for implementing a health notice, data entry and follow-up.

Procedure for Enrollment Process for Child Health Concerns

1. When a parent applying for Early Head Start (EHS) they regularly disclose their child's health information and issues.
2. Once a family has been admitted into the EHS Program the Family Services Coordinator (FSC) schedules an enrollment with the parent.
3. The FSC will review the ChildPlus application and notes prior to meeting with the parent for the enrollment and can determine if there is a health issue and/or concern.
4. The FSC or EHS teacher will fill out the enrollment packet with the parent where the parent will disclose health issues and/or concerns.
5. The FSC or EHS Teacher will provide the parent with the health documents needed for the child.
6. The parent will return the needed health documents. If the parent is unable to get the forms due to the doctor not willing to fill it out or wants a fee, the FSC will contact the Program Coordinator of Health and Safety who will contact the doctor's office to make sure the forms are filled out and returned by email or mail.
7. The Program Coordinator for Health and Safety will contact the doctor (health specialist) regarding the health issue and/or concern to initiate a staffing.
8. The Program Coordinator for Health and Safety will make sure all necessary staff (including the designated FSC, EHS teacher, Center Manager, Center Director, and Director of Special Programs), the doctor, and other health specialists are present at the staffing as needed.

Procedure for Health Notice, Data Entry and Follow-Up

1. The Family Services Coordinator (FSC), Center Manager, Center Director or other designated staff will at least once a month run ChildPlus Report #3060 Expired Health Events and ChildPlus Report #3016 EHS Health Requirements to determine which parents need a Health Notice for their children for a physical, dental visit, immunizations, special diet, allergy, asthma, seizure or other health issue.
2. The FSC, Center Manager, Center Director or other designated staff will fill out the health notice to be given to the parent by themselves or the Early Head Start teacher to be returned as soon as possible.
3. Once the parent returns the needed health documents, the FSC, Center Manager, Center Director or other designated staff will input the health information into ChildPlus in the health section by Creating an Event.
4. If a child has a health issue and/or concern listed on the form from the doctor then the staff member who completed the data entry will email the Program Coordinator for Health and Safety and CC the designated FSC, Center Manager and Center Director of the health documents who will contact the family to set up the Staffing and follow up with the parent for the health issue and/or concern.

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5. If a child does not have a health issue and/or concern then the staff member who did the data entry will upload all health documents into ChildPlus as an attachment and titled appropriately so any Early Head Start (EHS) staff member can tell what the attachment is without opening it.
6. The Program Coordinator for Health and Safety will upload all health documents into ChildPlus for any child with a health issue and/or concern as an attachment and titled appropriately so EHS staff member can tell what the attachment is without opening it.