



HEALTH SERVICES Subject: Confidentiality

Policy Council Approval: 6/25/13 ESC Board Approval: 6/26/13

Policy: Confidentiality of health records must be maintained to protect Head Start children and families. All correspondence, discussions, staffing, and records are to remain confidential. Head Start will follow Health Insurance Portability and Availability Act (HIPAA), FERPA, and the local school district standards and procedures for keeping child and family information private and secure.

Related Regulations: 45 CFR Part(s): 1304.52 (h) (1) (ii); 1304.51 (g); 1308.6 (e) (4) **Operational Procedures:**

- 1. Health records must be stored under lock and key and kept away from public access to prevent unauthorized review.
- 2. Health records will be made available to appropriate Head Start staff, when requested, in order to access information.
- 3. Information may not be shared with unauthorized persons without the specific consent of the parent/guardian.
- 4. If information is to be shared with someone other than the legal guardian, a signed Permission for Release and Exchange of Information is required.
- 5. Head Start staff will only share information regarding a Head Start child with other Head Start staff on a need to know basis.
- 6. Telephone requests for information are not acceptable unless the parent has previously authorized the release of this information in writing, or a witnessed telephone consent has been obtained.
- 7. Information collected by others and forwarded to the Head Start staff with parental consent becomes part of the child's record and thus becomes the burden of confidentiality for the Head Start program.
- 8. All Release of Information forms completed by Head Start should be properly placed in the child's folder .
- 9. Parents have a right to see all information in their child's file at any time.
- 10. On the Release of Information form, parents will be made aware of the nature and type of all information shared/received and how it will be used.
- 11. Parents may ask to speak to the staff in confidence. The staff must receive this information in a responsible, confidential manner. The staff's primary responsibility is to protect the child.
- 12. Head Start staff will receive training in the area of confidentiality annually.





HEALTH SERVICES Policy Council Approval: 2/19/09 Subject: Ongoing, Continuous, Accessible Health Care ESC Board Approval: 2/25/09

Policy: The program determines child health status in accordance with these procedures.

Regulations: 1304.20 (a) (1) (i); 1304.20 (a) (i) (ii) A-C); 1304.20 (a) (1) (iii) (iv); 1304.20 (e) (5) **Operational Procedures:**

- 1. In collaboration with the parents and no later than 90 calendar days from the child's entry into the program, the Head Start staff will:
 - a) 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, the program will assist the parent/guardian in accessing a source of care.
 - b) Obtain from a health care professional a determination as to whether the child is upto-date on a schedule of age appropriate preventive and primary health care, which includes medical, dental and any mental health services received. Such a schedule incorporates the requirements for a schedule of well child care utilized by the Texas Health Steps program of the state Medicaid agency, 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:
 - i. For children who are not up-to-date on an age-appropriate schedule of well child care, the program will assist parent/guardian in making the necessary arrangements to bring the child up-to-date.
 - ii. For children who are up-to-date on an age-appropriate schedule of well child care, the program ensures that they continue to follow the recommended schedule of well child care; and
 - iii. The program establishes procedures to track the provision of health care services.
 - c) Develop and implement a follow-up plan for any condition identified in 1304.20 (a)(1) (ii) and (iii) so that any needed treatment has begun.
- 2. The program obtains direct guidance from a mental health or child development professional on how to use the findings to address identified needs, as appropriate.
- 3. The program utilizes multiple sources of information on all aspects of each child's development and behavior, including input from family members, teachers, and other relevant staff who are familiar with the child's typical behavior.
- 4. Written documentation will be kept in the child's files concerning parents who refuse to give authorization for child health services.
- 5. Child Health services will be supported by staff or consultants at the site level.





HEALTH SERVICES

Subject: New or Recurring Medical, Dental or

Policy Council Approval: 2/19/09
ESC Board Approval: 2/25/09

Developmental Concerns

Policy: The program implements ongoing procedures for staff to identify health concerns.

Regulations: 1304.20 (a); 1304.20 (d)

Operational Procedures:

- 1. In addition to assuring children's participation in a schedule of well child care, the program will implement ongoing procedures by which Head Start staff can identify any new or recurring medical, dental, or developmental concerns so that they may quickly make appropriate referrals.
- 2. These procedures include periodic observations and recordings, as appropriate, of:
 - a) Individual children's development progress
 - b) Changes in physical appearance (e.g., signs of injury or illness)
 - c) Emotional patterns
 - d) Behavioral patterns
- 3. In addition, these procedures include observations from parents and staff.
- 4. Children with documented allergies are protected from known allergens.
- 5. Staff is aware of any food or allergy sensitivities documented on the Child Health History or the "Blue Card".





HEALTH SERVICES

Policy Council Approval: 2/19/09 **Subject: Conditions of Short-Term Exclusion and Admittance** ESC Board Approval: 2/25/09

Policy: The Region 9 Head Start program does not deny admission nor exclude any children from program attendance solely on the basis of his/her health care or medication requirements.

Regulations: 1304.22 (b); 1304.22 (b) (1-3)

Operational Procedures:

- 1. The Head Start program requests that parents inform the Head Start program staff of any health or safety needs of the child that the program may be required to address. The program shares information, as necessary, with appropriate staff according to the confidentiality policy.
- 2. The program may temporarily exclude a child with a short-term injury or an acute or contagious, short-term illness that cannot readily be accommodated from program participation for a short-term period, when keeping the child in school poses a significant risk to the health or safety of the child or anyone in contact with the child.
- 3. Parents will be informed of this policy in one or more ways, such as the parent handbook, home visits or parent/teacher conferences, or parent meetings.
- 4. The program does not deny admission to any child, nor exclude any child from program participation for a long-term period, solely on the basis of his/her health care needs or medication requirements. If keeping the child in school poses a significant risk to the health or safety of the child or anyone in contact with the child, and the risk cannot be eliminated or reduced to an acceptable level through:
 - reasonable and appropriate modification in the program's practices, or
 - providing supplementary aids which would allow the child to participate without fundamentally altering the nature of the program.





HEALTH SERVICES

Subject: Medication Administration

Policy Council Approval: 10/23/2014 ESC Board Approval: 10/29/2014

Policy: In an effort to ensure safe practices in the administration of medications and the performance of special procedures, trained and designated staff will perform medication administration for the Head Start Program.

Regulations: 1304.22 (c) (1-6); 1308.18 (c); 1308.18 (d)

Operational Procedures:

- 1. Prescription medication label is checked for accuracy to include:
 - a. Must be in the original, child-resistant container
 - b. Clearly labeled by a pharmacist
 - c. Child's full name (first and last)
 - d. Name and dosage of medication
 - e. Date the prescription was filled and prescription number
 - f. Name of the prescribing physician
 - g. Medication expiration date
- 2. Over the counter medications are kept in the original containers and have written orders from a physician that includes dosage and length of time to administer the medication.
- 3. All medication that is to be kept at room temperature must be stored in a locked cabinet. Medication that is to be refrigerated will be kept in a locked box and stored in the refrigerator. No food or drinks may be stored in the refrigerator designated for medications.
- 4. A designated staff member or nurse will administer, handle, and store child medications.
- 5. Physician's instructions and written parent/guardian authorization for medication administration will be obtained.
- 6. An individual record of all medication dispensed will be kept and reviewed regularly with the child's parents.
- 7. Staff will record changes in a child's behavior that have implications for drug dosage or type. Staff will assist parents in communicating this information to the child's physician as needed.
- 8. Staff designated to administer medication can demonstrate proper techniques for administering, handling and storing medication and any necessary equipment needed to administer medication.





HEALTH SERVICES Subject: Lead Requirement Policy Council Approval: 6/25/13 ESC Board Approval: 6/26/13

Policy: The program ensures children are up-to-date on a schedule of age appropriate preventive and primary health care, which includes lead testing.

Regulations: 1304.20 (a) (1) (ii) Operational Procedures:

- 1. The Texas Department of State Health Services *Risk Assessment for Lead Exposure: Parent Questionnaire* (screener) will be completed at enrollment on every enrolled child and placed in the chart.
- 2. All enrolled Head Start children are required to have a blood lead level (test) on file, per the Head Start Standards (1304.20). This can be obtained by getting documentation of a prior blood lead level (test) or referring the child to have one completed. Some available options include the local Health Department, North Central Texas Community Health Care Center, or the child's Primary Care Physician. This requirement must be met within 90 days after the child's entry date.
- 3. Children/families that have difficulty obtaining a blood lead level test will be assisted by Head Start staff in accessing necessary resources to assist them in becoming compliant with the Head Start Standards.