Working with Head Start and Early Head Start A Guide for Healthcare Providers

Created by the **Kansas Head Start Collaboration Office**

Healthcare Providers

What is **Head Start?**

Who is Eligible?

At least 90 percent of children enrolled in a HS program must be from low-income families (less than \$24,300 annual pre-tax income for a family of four); the remaining 10 percent can be from families whose earnings exceed the low-income guidelines but who would still benefit from HS services.

Children are automatically eligible if they are homeless, have a disability, are in foster care or if their family receives Temporary Assistance for Needy Families (TANF) or Supplemental Security Income (SSI).

HS is a federal program established in 1965 to promote the school readiness of children from low-income families. Together with EHS, HS provides comprehensive services to children from birth to 5 and their families, with the goal of ensuring healthy cognitive, physical, social and emotional development.

younger than 5 is Head Start (HS) and Early Head Start (EHS).

As a healthcare provider, you have a front-row seat for the early years of a child's life. Doctors, nurses, dentists and clinical staff are uniquely positioned to notice when a young person is struggling. Whether it's a question of inadequate nutrition, financial stress or falling short of developmental

milestones, you are likely to meet families in need of extra assistance, either

Many of these challenges are beyond the scope of a medical or dental practice. And most practitioners don't have time to keep tabs on all available social services, much less the ins and outs of accessing those programs. One useful, comprehensive resource to keep in mind for children

HS and EHS offerings vary based on the individual needs of each family, but may include:

- Quality child care and early education
- Housing assistance
- Developmental screenings

temporarily or long-term.

- Mental and dental health treatments
- Parental education and support
- Assistance with Medicaid, WIC, and CHIP referrals

Services can be offered in a home-based setting or care center, and are designed to be culturally and linguistically sensitive. The Federal Office of Head Start and Head Start Performance Standards require all programs to serve USDA-approved meals in their centers and assist families with establishing a medical and dental home. HS and EHS providers also aid families in getting their children up-to-date with the State Early Periodic Screening Diagnostics and Treatment (EPSDT) schedule and the CDCrecommended vaccination schedule. In addition to EPSDT requirements, HS and EHS programs must meet 179 different Head Start Performance Standards related to Health, Nutrition, Mental Health and Safety.

Making Contact



The Head Start National Center on Health has dedicated staff who can assist health professionals wanting to learn more about HS and EHS and how to get involved. You can reach the National Center on Health by phone at 888-227-5125 (toll-free) or via email at nchinfo@aap.org.

You can also contact the Kansas Head Start Collaboration Office (HSCO) for information on HS and EHS programs in your area at 785-368-6354 or by email at Kimberly.Kennedy@ks.gov; visit the web site at: www.dcf.kansas.org/ISD/ees/childcare hs coll.htm

More Ways to Help



Examples of successful collaborations between health-care providers and HS include clinic days for at-risk populations; a Healthy Start fair; and satellite medical and dental clinics at HS and EHS sites.



HS and EHS programs are always looking for allies in the healthcare field. Your expertise would be of great value on advisory committees or to help educate program staff and families.

Adding vision and hearing screenings to regular check-ups would also aid families in keeping their child's development on track.



Encourage your colleagues to learn more about the importance of early childhood development, and keep information about HS and EHS at your office or practice for interested families.

The need for pediatric dentists especially those accepting Medicaid is particularly pressing. Medical providers can help fill the gap by incorporating oral health screenings and fluoride applications as part of well-child visits.

Remember that when we set a child on the path to healthy development, we are helping not only a single individual but his/her entire family; future classmates and teachers; and the community at large.





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