**Health Issues in Head Start**

**National Center on Health Webinar Series**

Narrator: Welcome to the National Center on Health Webinar Series, "Health Issues in Head Start." Today's focus is on developing procedures to assure timely and appropriate screening. The objectives for today's webinar are to review why Head Start programs conduct or ensure screenings, to review the areas to be included in a comprehensive screening approach, and to identify a tool and process for reviewing your existing screening procedures and establishing next steps to help improve them. But first of all, why do we screen?

Head Start's purpose is to promote the school readiness of children ages birth to five from low-income families by enhancing their cognitive, social, and emotional development. A key to this is identifying if children have any existing developmental, sensory, or behavioral issues that might impair their ability to learn. The Head Start Program Performance Standards specifically state that programs will screen for concerns regarding a child's developmental, sensory, meaning visual and auditory, behavioral, motor, language, social, cognitive, perceptual, and emotional skills.

It's very important to make sure the screenings you use are culturally and linguistically appropriate or have been validated or tested with the populations you serve. Sometimes there is no information to tell you if the screening has been tested with your population, so it's important to involve your Health Services Advisory Committee to help identify the most appropriate screening tool. The full wording for the Head Start Program Performance Standards is in the screening resources handout accompanying this webinar.

Screenings help us catch problems early so we can refer children for further assessment and possibly special services, treatment, or other resources that can help a child overcome those problems. A developmental delay, whether it's cognitive, social, behavioral, or physical, can have a serious impact on early learning. If we find out early, we can help start supportive services to help children continue to learn and grow rather than fall farther behind.

Hearing and vision screenings are included because of the strong impact that they have on learning in the first few years. One to three children in every thousand are born with some level of hearing loss. In addition to these numbers, children may have conditions which impact their hearing but can be treated. While the numbers vary from community to community, in some areas, as many as 30% of children have recurring ear infections, which can impact their ability to understand and learn language, interact with other children, and can be so painful that it's difficult to play, pay attention, and learn new things.

As many as 5% of children under five have vision problems that can impact their learning. The later we find this out, the more details a child will have missed seeing and the farther behind she will be in learning to identify things like shapes, letters, and numbers. But if we find out that glasses can fix her vision, that can be a simple fix to help her get the most out of her early learning experiences. But mostly, we provide screenings to make sure we are doing everything we can to help a child learn, grow, and be successful in school.

As you plan to develop your program's approach and system to ensuring these screenings occur, there are a few questions you can ask yourself. What screening instruments, equipment, or methods will you use? When will the screenings happen? Will they happen before the child starts the program? Will they happen once a child is in the program for one week but before four weeks? Make a specific plan for when the screenings should occur.

Another question is: Who will conduct the screenings? Will it be a child's teacher, a volunteer, the health manager, other managers, maybe a consultant? How will the screenings happen? Do they happen at the child's home, at the center, maybe at a nearby clinic? How will you make sure that all the screenings are completed on time? How will you track the results? When will the results be completed and shared with the family? Our Head Start Program Performance Standards on screening start with the phrase "In collaboration with each child's parent," because families know the most about their own children.

Family members are the ones to let you know the important firsts they have seen at home, like when she said her first word, took her first steps, or first drank from a cup. Many times they can be the ones to fill out or help fill out a screening form about the child's current abilities. If your screening tools are done by staff or professionals, be sure to include family members in the process because what they see at home might be very different from what someone else sees, especially in a new environment.

A comprehensive screening approach should also be sure to have a plan for how to share information about screening with families. You want to make sure to explain how the screenings are done, why they are done, and once you have the results, explain what the results are and what they mean.

Sometimes these explanations may need to occur in languages other than English, depending on your population and whether or not your families are comfortable with English. Your program's approach to screening should include information from the people who know the child best, the family and the teacher or caregiver or home visitor who has been working with the child. If a child has not slept well, has health conditions or medications that may impact energy level or is hungry or in pain, she may not demonstrate her full range of skills, abilities, and knowledge.

Another example is a child who comes in Monday mornings after a stressful weekend because of fighting parents, living in an unstable setting, or even living through an unusual event such as a hurricane or fires. Maybe next Monday morning is not the best time to get an accurate picture of her abilities. Waiting a day or two may make a big difference in the accuracy of the screening.

As mentioned earlier, it's important to be sure any screening instrument you use has been reviewed for its accuracy with the families in your community. For example, the Ages and Stages Questionnaire or ASQ, and the Parents Evaluation of Developmental Status, PEDS, have both been reviewed and found to be very accurate across a broad range of children from different communities. Other tools have been shown to have a high number of false failing scores for some children from specific cultural communities. Be sure you find out how accurate the tool is for your population before you invest money in it or train staff on it. The American Academy of Pediatrics has published, a review of several screening instruments currently available. This tool is included with this webinar. Your program's approach to screenings should include all the steps involved in follow-up for children with concerns identified through screening.

The follow-up you will need to do includes getting information from other agencies who conduct screenings and planning for how you will make sure this happens within your time frame of 45 days from the child's entry into the program, sharing the results of the screenings with families, including any concerns that indicate a need for referral for further evaluation, sharing the results of any screenings conducted by outside agencies, like vision and hearing, with the child's teacher, caregiver, or home visitor, referral to other professionals or agencies for further assessment and follow-up on the results of your referral.

Whenever you think of families, also think about language and culture and whether or not those come into play in what you are trying to do. All of these processes should be written into your procedures, and you will need to have a system to track or document referrals and ongoing communication for further assessment.

Now let's look at how you can examine your own screening systems to see if they are working well to assure timely screenings in all areas and follow up when needed. The Head Start National Center on Health has developed a tool to help you review your existing screening systems and procedures. This self-assessment tool will help you identify if there are any missing pieces you may need to add to your procedures to assure all screenings happen for all children in a timely manner. This tool is included in the materials with this webinar and is also available on the ECLKC website.

When you begin to review your existing systems, the main question to ask is: Do our procedures reflect what needs to happen? If the answer is "Yes, it's all written down, but it doesn't happen," then you need to identify exactly where the breakdown is in your system. Is it that you don't get results back in time from other professionals, or maybe, for one reason or another, the timelines aren't met? Maybe what you need is a Plan B or a backup plan to use when something comes up so you can assure all the screenings are happening on time. Once you have identified the breakdown, you can start by identifying next steps or Plan B wherever it's needed. If you ask, "Do our procedures reflect what needs to happen," and you use the tool and find that there are some pieces missing, or "Our procedures don't really reflect what happens," then the tool will help you determine what procedures may need to be revised and your next steps will be to write those missing or incorrect pieces.

The screening procedures tool identifies information that needs to be included for each area of screening. What screening instruments or methods will be used, when screenings will happen, who will do the screenings and who else can do the screenings in case the primary person is not available, and all of the different how, how they will be conducted by your program or be arranged for someone else to do, how you will include information from the families and share the results of the screenings with families, how you will follow up on any concerns identified through the screenings, and finally, how you will document the screening process results and all of your follow-up.

The first area is "what." What screening instruments or methods will you use? Your procedures need to describe how your program will select, purchase, store, and use a standardized screening instrument in each of these areas as well as sensory screening or arrange for someone else to do the screening. Many developmental screenings will include more than one of these areas, but you need to make sure all of them are screened, whether it's one instrument or more than one.

Program staff can be trained to do the vision and hearing screening, but the equipment and staff training can be expensive. The Health Services Advisory Committee can help with training and possibly

with fundraising or grant writing to get the equipment for the program. PreventBlindness.org, Tune in to Sound, and the Early Childhood Hearing Outreach Project are all sources for training in vision and hearing screening. The ECHO project also has a sample grant proposal that you can use to try to help get funds to purchase the equipment to do the screening.

The second area you need to address for each screening is "when." When will these screenings happen? The Performance Standards state that the screening must happen within 45 calendar days of the child starting the program, not within 45 days of the start of the year. If a child starts mid-year, for example, in February or March, you still need to complete the standard screenings within 45 days of his starting the program. Keep in mind, the child's first day in the program may not be the best time to do a developmental screening.

Other factors to keep in mind are: What day of the week might be best for this child? If he had a rough weekend, Monday might not be his best day. What time of day might be best for this child? Many people ask: What if the child has had a vision screening two months before entering the program? Do I need to do another? If a child has had a vision or hearing screening through a Well Baby or Well Child check and is up-to-date according to your state's EPSDT guidelines for vision and hearing screenings, the Head Start program does not need to assure another screening. For guidance on this and other common issues of policy clarification, see the screening resources handout with this webinar or the policy clarification section of the ECLKC website.

The next set of information your procedures should indicate is: Who will do the screenings? Note that there are two questions about "who." Procedures should indicate who will do the screenings, as in the health manager will conduct the vision screening, but also who can do the screenings as a backup. For example, the health manager will conduct vision screenings for each child in the health office. In the event that the health manager is not available, the education manager is also trained in the procedure and equipment and can conduct a vision screening if the health manager is not available. The "who" part of your procedures should also include the "where." Does it happen in the classroom, in the nurse's office, or maybe at a local clinic?

The next set of questions you'll have to answer is the "how" all of this is going to happen. How will you either conduct the screenings at the program or arrange for someone else to do it? If you are arranging for someone else to do it, make sure you have a memorandum of agreement or inter-agency agreement that indicates exactly how it will happen, what the timeline is from the time you call and ask for an appointment for the child and when the appointment will happen, how long it will take to get the results. If your community partner who offers to do the screenings is only available to do them in August and September, you will have to identify how screenings will happen if a child enters the program later in the year, or if they cannot guarantee an appointment within 45 days of your call, you may need to find a different partner so that you can meet the regulations in the Head Start Program Performance Standards. How will you both gather the information from families to include in the screening, and how will you share the results with them?

Another important "how" is how you will follow up on children who fail their screenings or have questionable results. The program needs to have a very specific set of procedures and timelines for referrals as well as how your staff will follow up with professionals who receive those referrals. The follow-up doesn't stop when you send a referral to another agency. You need to be sure the other

agency follows through with any needed assessments or actions. And, of course, the final "how" is how you will document this process, the results, and the follow-up.

Documentation of this information will help you show that you are meeting the requirements of the Head Start Program Performance Standards, help you gather data on the screening results for children in your program, and help you check up on the status of screenings and referrals for children in your program.

Let's do a quick review of what to do next. Grab your program's procedures for screenings and the tool that came with this webinar. Go through the tool and check off the areas that are well defined in your procedures. If you find your procedures are well defined and describe exactly what should happen and you have no empty boxes to check, then go back and star the areas where a breakdown occurs. Your next steps are to write backup plans or revise the plans to assure the screenings happen in time.

If you complete the tool and you find some parts are missing, writing the procedures for those missing parts is your next step. If you find you need support for any of those gaps, such as obtaining staff training, purchasing equipment or instruments, or identifying agencies to help with the screening, talk with your Health Services Advisory Committee or contact one of the resources listed on the screening resource handout with this webinar.

Thank you for all your hard work, taking the time to create such a comprehensive approach to screening. Your children, families, and programs will be in better shape thanks to you. The Head Start National Center on Health is available to answer your questions by email or phone. This concludes our webinar on screening procedures. Thank you for your participation.