



*Supporting Head Start quality today, impacting Arizona's tomorrow!*

**AHSA Quarterly Meeting  
Standing Committee Minutes  
Integrated Health & Safety Committee**

DATE OF MEETING: 8/19/2021 Time: 1:30 pm – 3:00 pm		<b>IN-PERSON/VIRTUAL MEETING</b>
COMMITTEE MEMBERS PRESENT: Alana Mozar, Alice Haverland, Allison McNelly, Annie Myers, Carolyn Wilmer, Connie Morrison, Irma Iribe, Kim Pearson, Lizzy O'Hara, Luz Anderson, Marcela Zepeda, Marcia Archer, Margaret Velasco, Martha Jimenez, Marya Olmos, Nicole Neal, Nicole Peterson, Norma Rodriguez, Selina McCabe-Charley		
NEXT QUARTERLY COMMITTEE MEETING:		
AGENDA ITEM	DISCUSSION/RECOMMENDATION	PERSON(S) RESPONSIBLE/ PRESENTER
I. Call to Order & Welcome	Welcome and introductions	Carolyn Willmer
II. Adoption of Agenda	Approval of agenda Luz motioned to approve, Kim seconded.	Carolyn Willmer
III. Approval of Minutes	Approval of minutes for 2/18/21 Norma motioned to approve, Lizzie seconded.	Carolyn Willmer
IV. WIC Update	WIC services Brittany shared a powerpoint update about WIC services. The WIC-Head Start MOU went into effect on January 2 <sup>nd</sup> , 2019 and will remain in effect for 5 years, with the last effective day being 1/1/2024.	Brittany Howard WIC Nutrition Services Administrator

WIC has made changes to continue providing services during the pandemic. WIC continues to provide remote services to families. Heights and weights and hemoglobins are no longer required for children to enroll, as of March 2020.

Many of the WIC sites are staffed remotely, so encrypted emails are recommended, not faxes. If it is necessary to send a fax to a WIC office, you should contact staff by phone or email before sending the fax.

WIC is currently certifying families remotely, but once the Federal Declaration of Emergency ends, WIC will need to certify in person and heights/weights/hemoglobins will be required.

The [www.azwic.gov](http://www.azwic.gov) site has lots of information for families, including online support so families can determine if they are eligible, register, and find their local WIC clinic.

The best way to reach Brittany is by email: [Brittany.howard@azdhs.gov](mailto:Brittany.howard@azdhs.gov).

**POST-MEETING NOTE:**

The WIC website has information for Head Start staff making referrals. Go to [www.azwic.gov](http://www.azwic.gov) and scroll down. Click on “Local Agencies” and you will see a menu of options on the left. Click on “Information and Forms” and then scroll down to “Head Start Referrals”. The Head Start & WIC Referral Form is to be used by either agency to make referrals to the other. The authorizing representative is the child’s carer or a person with significant knowledge of the family’s history. There is also a space for the name (and contact information) of the staff making the referral. Carolyn checked with Brittany after the meeting and **the Head Start Referral Form Support Spreadsheet should be used in addition to the individual referral forms when referring more than 10 children.**



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	<p>Head Start programs should include a “permission to release information” form with the WIC referral. Signed by the parent/guardian, this will allow WIC to share the child’s information with Head Start.</p> <p>The <a href="http://www.azwic.gov">www.azwic.gov</a> site has lots of information for families, including online support so families can determine if they are eligible, register, and find their local WIC clinic.</p>	
<p>V. Vote for Chairs</p>	<p>Vote for a chairperson and a vice-chairperson.</p> <ul style="list-style-type: none"> <li>• Carolyn offered to continue as Chair at this time.</li> <li>• Marcia Archer will be Vice-Chair.</li> </ul>	<p>Group</p>
<p>VI. AHSA Goals</p>	<p>AHSA/HSSCO Goals</p> <p>The committee reviewed the Long-Range Goal #5:  Head Start/Early Head Start children receive needed health care including medical and dental prevention and treatment services; and <i>family-focused socio-emotional health prevention and treatment services</i>.</p> <p>The committee reviewed the Short-Term Objectives.</p> <p><b>Short Term Objective A:</b> With stakeholder input and feedback, will create a codified system for the collection of health data collected within the PIR and Head Start grantee data systems and annually reevaluate the system and data collected.</p> <p>The committee is working on this objective; The “codified system” is the AHSA IH&amp;S survey. This survey will incorporate the survey questions Chrisanda uses to report to ..... on sensory screenings in Head Start.</p>	<p>Carolyn Willmer</p>

**Short-Term Objectives B, C, D, E**

The committee reviewed Objective B: Well-child exams done within 90 days; Objective C: Sensory Screenings done within 45 days; Objective D: dental exams and treatment; and Objective E: Immunizations.

Because the goal is to ensure children receive necessary services, the sensory screening element is especially challenging, as there are multiple steps between screening a child and getting specialist evaluation and treatment. Carolyn reviewed a flow chart of the sensory screening steps with the committee. The committee agreed that children who fail their sensory screenings need to be evaluated by a specialist, not by their pediatrician. Carolyn will contact the AHCCCS EPSDT/MCH Coordinator to ask about AHCCCS policy on referring children directly to a specialist. Committee members expressed concern that some pediatricians don't take the Head Start report of a failed screening seriously, and fail to refer children to a specialist and/or discourage the parent from taking the child to a specialist.

The committee also discussed reporting concerns about quality of care to AHCCCS. Quality of care issues cover a variety of issues, including pediatricians who consistently fail to provide some element(s) of the EPSDT exam. Head Start programs in AZ need some coordinated, consistent way to report concerns to AHCCCS. The EPSDT/MCH Coordinator is the correct person to receive those reports, but the question is how to make reports in an organized manner. Carolyn suggesting routing all reports to her, but that would be a HIPAA violation. Some Head Start programs may not be able to report concerns to AHCCCS because they don't have parent permission to do so. The best approach is to have the routine parent authorization form include a clause allowing Head Start to share information with other agencies, specifically AHCCCS.

Carolyn had combined the IH&S Survey questions with Chrisanda's survey questions on sensory screening and shared the spreadsheet with the



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	<p>committee. Most of the sensory screening questions are the same. (See attached)</p> <p>Carolyn is going to create a format for the survey, and send the format out to the committee to include the questions, and include guidance on how to answer the questions using PIR or possibly ChildPlus.</p> <p>Committee members agreed to take the lead on each of the Short-Term Objectives:</p> <p><b>90-day well-child exams: Margaret and Marcia:</b></p> <p><b>90-day dental exams: Alice, Luz, Marcia</b></p> <p><b>Sensory (Vision &amp; Hearing): Chrisanda, Nicole Neal</b></p> <p><b>Immunizations: Carolyn</b></p> <p>The final survey will be distributed after the 2021-22 school year for completion by the grantees.</p> <p><b>POST-MEETING NOTE:</b> Carolyn contacted the AHCCCS MCH/EPSTDT Coordinator to ask about referrals for sensory screenings: should Head Start refer to the pediatrician, or directly to a specialist? The answer is that some plans require a referral from the pediatrician before a child can see a specialist and have the evaluation/treatment covered. Any pediatricians who don't refer Head Start children for a failed screening should be reported to the MCH/EPSTDT Coordinator.</p>	
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**POST-MEETING NOTE:**

Carolyn has contacted the Rachael Salley, the AHCCCS MCH/EPSTD Coordinator again with another question: how can Head Start best report concerns to her? Carolyn is thinking that immediate reporting for a quality-of-care issue involving treatment is appropriate; while “routine” issues like consistently missing elements of the EPSTD exam should be reported on a monthly basis. To ensure Head Start provides the appropriate information and documentation, a standard form would be best. Would Rachael have a form she would like us to use, or should we create our own?

**Short Term Objective F:**

Starting in March 2021, increase the availability of training and technical assistance to HS/EHS staff for supporting social/emotional (SE) well-being and family engagement (FE) in Head Start families. The first year would be focused on developing the systems to support early childhood staff education in SE/FE and raising awareness of the importance of SE/FE training for staff. The second year would begin training opportunities.

Obviously, the committee is behind on this goal. The committee needs to start with gathering information about current activities in this area. Members of the committee agreed to take the lead on researching the following agencies/resources:

**ACTION ITEMS for OBJECTIVE F!!!**

**Alana:** Will provide copies of internal trainings from her own agency, and will review Early Childhood Workforce Development activities, and will check with the UofA.

**Marcela:** Will check with her organization’s consultant.

**Carolyn:** Will check with the ASU College of Social Work and NAU. Also will check with COP Head Start mental health staff to ask about organizations providing training in social/emotional and family engagement. Also will check



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	<p>with Nicole Peterson at the AZ Dept. Education, and with Phoenix Children's Hospital. Carolyn will also discuss with the other committee chairs.</p> <p><b>Selina:</b> Will check ECLKC for resources.</p> <p>: Carolyn will discuss with other Committee Chairs.</p> <ul style="list-style-type: none"> <li>○ Idea - work with AZ Workforce Registry.</li> <li>● Gave time for questions and answers.</li> </ul>	
<p>VII. Sharing and Questions</p>	<p>Anything of concern.</p> <ul style="list-style-type: none"> <li>● 45 day screenings – Classrooms are often being shut down due to Covid-19 cases in children or staff and many campuses are not allowing Head Start social workers on-site. The group strategies to complete screenings, such as performing screenings off-campus, and in cabanas with tent sides.</li> <li>● Children who are not toilet trained must have an IEP with toileting/diapering listed on it. BCCL did not accept the agency toileting/diapering IEP plan - what to do? Connie reports bodily function issues such as toileting require a 504 plan. Members will share ideas. Carolyn will invite BCCL to next meeting.</li> <li>● Head Start programs are using a variety of Covid-19 safety tactics: staff are masked, children are masked when possible, children have fun masks to wear, families are provided with disposable masks, one program is already using the ZONA machines to disinfect classrooms toys/objects, some programs are laundering cloth masks and fabrics.</li> </ul>	<p>Committee and Members</p>

VIII. Committee Up-date:	<p>AHSA representation on the following state/regional committees:</p> <ul style="list-style-type: none"> <li>• Obesity &amp; Food Insecurity: Maureen &amp; Chrisanda</li> <li>• State Hearing Rules: Rules are published, so the committee may not be active anymore. Carolyn will double check with Ana Heron-Valenzuela who was on the committee.</li> <li>• Oral Health Coalition: Chrisanda, Marcia, &amp; Jordyn</li> <li>• Eye on Learning Committee: Chrisanda</li> <li>• Asthma Coalition: Liz</li> <li>• School Readiness Coalition: Liz</li> <li>• Lead Coalition: Marcia, Luz, Liz, &amp; Carolyn</li> </ul>	All members
IX. Adjournment	<p>Motion to adjourn by Alana, seconded by Selina. Closed at 3:43</p>	Carolyn Willmer