

Hematocrit/Hemoglobin (Anemia) Screening

Head Start Performance Standards

§1302.42 (b) (4)

Policy

To determine a thorough health picture of a Head Start child, our program completes many screenings and healthy child checks. Screening for anemia is more invasive (as it requires obtaining a small drop of blood from a finger prick) but provides important information about an individual's health and nutrition status. Since anemia is a preventable disorder, early identification of the toddler or child who may be at risk is essential. Once a child is screened for anemia, Head Start can help families with means and methods to address the problem.

Procedure

1. Obtain the anemia screening information, before the 90-day due date, through one of these methods:
 - a) Child's physical exam
 - b) Women, Infant, Children (WIC)
 - i) Refer to ChildPlus to see if the family participates in WIC
 - ii) Refer to the **Consent for School Activities** form to see if parent consents to contact WIC
 - iii) Staff will complete the **WIC Request for Data** form with each's child's name and date of birth
 - iv) Staff will send the completed form to the Health Services team via email or through courier services.
 - v) Health Services or designee will enter actual hemoglobin results in the ChildPlus database. Result options will be either "complete" or "continue to monitor."

Provide follow-up according to these guidelines:

For a child being monitored by a physician or by WIC for low iron results, Head Start staff will support and reinforce recommendations given to the family by a doctor and/or by WIC.

If a child is not receiving the appropriate follow-up by WIC or by a medical professional, the teacher will contact the Health Services Supervisor to determine the appropriate course of action.

Screening Results Guidelines

- Hemoglobin screening results of **11.0 g/dL or greater** and hematocrits of **33% or greater** are considered within the normal range.
- Hemoglobin screening results **under 11.0 g/dL** or hematocrits **under 33 %** are below the normal range. This could indicate that the child's iron may be low, increasing the child's risk for anemia. Staff will contact the parent/guardian to discuss the child's iron status when results fall outside the normal range. This is an opportunity for the teacher to discuss any nutritional needs, feeding concerns, and plans for follow-up. The Health Services Supervisor can provide handouts about iron-rich foods and dietary factors that impact iron absorption. **Families not currently on WIC should be referred for services if eligible.**

**Community Action Head Start
Washington County, Oregon**

The parent/guardian will be encouraged to call the child's primary health care provider with specific medical questions or concerns.