

Nutrition Assessment

Head Start Performance Standards

§ 1302.42 (b) (4)

Policy

Nutrition is an integral part of every child's growth and development, starting prenatally. Good nutrition influences children's attention span and ability to learn.

Staff and families will work together to identify each child's nutritional needs. Each child will receive a Nutrition Assessment when they first enroll in Head Start. The Health Services Supervisor will provide and/or arrange for training and ongoing support for staff who will complete the **Child Health History, Nutrition, & Lead Questionnaire** with Head Start parents/caregivers.

Nutrition Questionnaire

At registration the parent/guardian completes the age-appropriate questionnaire (**Infant/Toddler Health History, Nutrition, & Lead Questionnaire** or **Child Health History, Nutrition & Lead Questionnaire**) to gain insight into child's food patterns at home to help identify the family's food needs and to determine any concerns about the child's feeding or nutritional status. Home visitors will complete a **Prenatal Health History and Nutrition & Lead Questionnaire** to assess prenatal nutrition needs. (Please see the **Prenatal Health Policy and Procedure**)

When completing a nutrition assessment, Head Start staff will consider all relevant information about the child to determine nutritional needs and develop a specific follow-up plan if necessary. Results will be entered into ChildPlus.

For Early Head Start children, the teacher will complete the 6-month Follow-up Nutrition Questionnaire section with the parent/guardian.

Complete the Nutrition Assessment

After the parent has answered the Nutrition Questionnaire questions, staff will complete the detailed Nutrition Assessment by following the steps listed below. Information and follow up notes will be entered into ChildPlus.

1. Evaluate the adequacy of the child's diet.
 - For infants under 12 months of age, compare the child's current intake of formula or breast milk, solids, and/or table foods to the guidelines in the Infant Nutrition Guide. *Determine if the infant is receiving age-appropriate feeding.*
 - For children between 1 and 3 years, compare the child's current "typical" food intake to the guidelines in the Child Nutrition Guide. Note the recommended number of servings of each food group and what is age-appropriate portion size. *Determine which food groups are missing or low.*
 - For children between 3-5 years, assess parental concerns about growth or eating habits.
 - Determine if the parent has any concerns about the child's growth. Ask if WIC or the child's primary care provider is tracking the child's growth. Have growth concerns been identified? Are they being addressed?

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2. If hemoglobin/hematocrit results are available, evaluate them based on the guidelines in the **Hemoglobin/Hematocrit Screening Policy and Procedure.**
3. Specify any nutrition or feeding-related concerns identified by teaching staff or parents, such as:
 - Food allergies or intolerances
 - Chewing, swallowing, or digestive problems
 - Vegetarian or vegan diet
 - Inconsistent meal pattern
 - Baby bottle tooth decay
 - Excessive juice or sugar sweetened beverage consumption
 - High-sugar, high-fat diet
 - Mealtime struggles (ex. Picky eating, overeating)
 - Child eats non-food items
 - Late to wean
 - Bottles in bed
 - Early introduction of cow's milk or solids
 - Use of low-fat milk or foods before two years of age

Provide Appropriate Nutrition Follow-up.

If the Nutrition Assessment reveals nutrition issues, follow up appropriately by providing resources or education. Staff will include the Health Services Supervisor for referrals or additional guidance.

Make Referrals

If any of the following conditions exist, send a referral to the Health Services Supervisor, documenting all relevant information.

- Documented food allergies; particularly dairy allergies, multiple food allergies, or food anaphylaxis
- Diagnosed medical conditions requiring a special diet, such as diabetes, cleft lip or palate, oral motor/swallowing problems, severe reflux or constipation, anemia, or low hemoglobin
- Child with delayed feeding skills
- Significant changes in growth percentiles- i.e. rapid weight gain or loss
- Child below 5th or above 95th percentile in weight for height
- Child receiving treatment for obesity or lead exposure
- Any weight loss in a child under two years of age

Record the Assessment Results

Place the completed **Health History, Nutrition, Lead Questionnaire** in the child's file.

In ChildPlus, scan the document to add under health attachments and create an event with results reflecting any concerns. If the child has a food allergy, medical condition requiring a special diet, or needs other mealtime accommodations, flag the child for CACFP.