

Prenatal & Newborn Health

Head Start Performance Standard

§ 1302.80

§1302.81

§1302.82

Policy

The prenatal period of growth and development has a lasting impact on a child's potential for a healthy life. Early Head Start Home-Based Program options provide services to pregnant parents and their families through the child's first three years of life. Early continuous supports and services provide the best opportunity for:

- Healthy pregnancies and positive childbirth outcomes
- Supportive postpartum care for the parents and child
- Fully involving partners in the lives of their very young children
- Nurturing and responsive care during infancy.

Head Start works closely with pregnant women, father, and/or partner to secure comprehensive prenatal and postpartum information, education and services that address as appropriate fetal development, the importance of nutrition, the risks of alcohol, drugs, and smoking labor and delivery, postpartum recovery parental depression, infant care and safe sleep practices, and the benefit of breastfeeding. . With each expectant family enrolled, a plan is developed collaboratively to ensure completion of risk assessments, prenatal medical and dental exams and any intervention that may be needed.

After an enrolled pregnant parent gives birth, Home Visitors will begin discussing the transition of participation from prenatal to newborn home visits when the newborn is 6 weeks of age. Within two weeks of the infant's birth, a 2 Week Post-Partum Visit is scheduled to ensure the well-being of the parent and the child. In case of lost of pregnancy the home visitor will continue working with the pregnant women, father, and/or partner for the next 30 days to support with resources and transition.

**Please see the Enrollment-Home-Based Program Options Policy and Procedure for more information.*

Procedure

Prenatal services will be delivered to the pregnant parent primarily through Home Visits. However, Home Visitors will encourage prenatal families to participate in socializations in the community when it meets the needs and goals of the family. Home Visitors will discuss the purpose of socializations and determine if it is beneficial to the family. If a prenatal family is attending socializations, Home Visitors will ensure there is an activity for the pregnant parent during socialization.

Frequency and length of visits may change as the pregnancy progresses. Home visits will occur weekly, for a duration of 90 minutes. Home Visitors will follow the **Prenatal Registration Timeline Checklist**. Home Visitors will document the plan for the prenatal parent using the **Prenatal Home Visit Record**. Home Visits are then documented in the Education Module under the Pregnancy Visits tab in ChildPlus (CP). *See SharePoint for guidance.*

At the Enrollment visit, the Home Visitor completes the **Prenatal Health History, Nutrition, Lead** form with the expectant parent to determine if a family has an ongoing source of continuous, accessible

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health care and if there are any health concerns. As medical and dental homes are identified, the Home Visitor will enter this information into CP.

PREGNANT PARENTS

1. Home Visitors will facilitate access to ongoing health care and health insurance. Families without health insurance are encouraged to apply for the Oregon Health Plan so they can establish both a medical and dental home. Information about the Oregon Health Plan and other health insurance resources are included in the health packet. If a family does not qualify for the Oregon Health Plan or for other insurance, Home Visitors will help them locate a clinic with a sliding fee scale where they can establish a medical and dental home. The Family Service Assistants and the Health Services Supervisor can assist in this process.
2. Home Visitors will help families identify possible early and continuing needs throughout the pregnancy by using the **Strengths and Needs Assessment**. It must be completed within the 45-day deadline. When a need is identified, Home Visitors must provide families with resources as appropriate. Home Visitors will facilitate access to the following as needed: nutritional counseling, food assistance, oral health care, mental health services, substance abuse treatment and emergency shelter or transitional housing in cases of domestic violence.
3. Home Visitor will conduct a **PhQ-9 screening** with the pregnant parent within 45 days of enrollment and at 4 weeks postpartum. Home Visitors will provide any resources or connect family to mental health services for support.
4. Home Visitors will provide the following prenatal and postpartum information, education and services: fetal development, importance of nutrition, risks of alcohol, drugs and smoking, labor and delivery, postpartum recovery, parental depression, infant care, safe sleep, and the benefits of breast feeding. (list can be found on the **Prenatal Health History**)
5. Home Visitors will use Growing Great Kids Prenatal curriculum and as supplemental information from Centers for Disease Controls (CDC Pregnancy information. .

Transition from Prenatal to Newborn Home Visits

Newborn enrollment options into the Home-Based or Center-Based program are discussed prior to the birth of the child. Home visitor will notify Health Services Supervisor as soon as possible after the child is born. Please see the **Enrollment-Home-Based Program Options Policy and Procedure** for instructions to complete transition paperwork.

1. A newborn visit must be scheduled in the first 2 weeks after birth. The Health Services Supervisor can accompany the Home Visitor on this visit. Information gathered from this visit will inform any follow-up care needed. Home visitors will complete the **Post-partum PhQ-9 and identify any family needs and offer support**.
2. Family and Home Visitor will develop a plan that will include any concerns.
3. Postpartum home visits will resume after the mother is ready, usually by week three after delivery but no more than 30 days if they intend to stay in the Home-Based program.
4. The prenatal file will be closed following the **Closing File Checklist and Change Notification form**. PIR questions for this family and their pregnancy must be completed upon the completion of the prenatal program.