CAPLAW enews brief

Guidance on Tracking Early Head Start Services for Pregnant Individuals

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On February 24, 2022 the Office of Head Start (OHS) issued an Information Memorandum (ACF-IM-HS-22-02) outlining best practices for tracking services provided to enrolled pregnant individuals by both Early Head Start (EHS) programs as well as through community partnerships established by EHS programs.

OHS notes that EHS services may be provided to expectant families and pregnant individuals based on community needs pursuant to Section 645A(a) of the Head Start Act, which authorizes funding for services "that encompass the full range of the family's needs, from pregnancy through a child's third birthday, to promote the child's development and move the parents toward self-sufficiency". Programs are required to identify the total anticipated number of pregnant individuals being served during the program year in their grant applications, and must provide high-quality prenatal and postnatal education in addition to access to other prenatal services through community program partners (45 CFR §1302.80). OHS emphasizes that it is important for EHS programs to accurately track, collect, and analyze data on services provided to pregnant individuals to ensure compliance with these requirements, as well as to inform "planning for the individual and collective needs of expectant families served by the program".

Services Provided Through the EHS Program

EHS programs directly providing services to pregnant individuals and expectant families should have a system in place to record interactions with these clients that documents contact with them, any needs identified through these interactions, and the type and content of the services provided to address those needs. OHS notes that all Head Start programs are already required to have systems in place to track attendance for each child served (45 CFR §1302.16(a)), and EHS programs may use those existing systems to record interactions with expectant families.

Services Provided Through Community Partners

Similar systems should be implemented to track services provided to pregnant individuals by community providers. OHS recommends establishing documented partnerships with these providers through working collaboratives, data sharing agreements, and memoranda of understanding (MOUs), although the privacy of any data or information shared with community partners through these collaborations should be protected as required by 45 CFR §1303 Subpart C. Information on establishing MOUs with community providers, as well as sample MOU provisions, may be found here. OHS notes that this IM is supported by a toolkit of resources hosted at the Head Start Early Childhood Learning & Knowledge Center (ECLKC) that EHS programs may use to identify ways to better engage with and provide high-quality services to expectant individuals and families. EHS programs are encouraged to continue to identify ways to better document their interactions with expectant individuals and families, and should stay in touch with their program specialist as they plan and provide services to those clients.

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