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Ref #: 1304.23 (a)(1)-(3)	Policy Council Approval Date: 8/28/07, 3/25/08, 4/22/08	Revision Date: 4/12/07, 3/4/08, 4/11/08

COMPONENT: NUTRITION

SUBJECT: IDENTIFICATION OF NUTRITIONAL NEEDS

PERFORMANCE OBJECTIVES: Head Start staff and families will work together to identify each child’s nutritional needs. A child’s healthy development is promoted through ongoing communication between staff and families concerning nutrition-related child assessment data, family eating patterns, the child’s feeding schedules and eating preferences, and community nutritional issues.

PROCEDURE:

The child’s health or medical history will be reviewed for important nutrition-related information, including height, weight, and hemoglobin/hematocrit results.

Staff will perform two growth assessments each year: once within 45 days of a child’s enrollment, and again in February. The growth assessments will be charted on a Growth Chart, and may be reviewed by the Nutrition Consultant to assist in identifying over- or under-weight children.

Hematocrit/hemoglobin results will be documented on the appropriate physical exam form and into child plus, but are not required for enrollment. According to the Tennessee EPSDT periodicity schedule, children age 3-5 are not required to have hematocrit/hemoglobin screens unless they are considered to be at risk by their health care provider. The family service worker, after receiving the physical, will review and send the names of the children, whose hemoglobin is less than 11.5, indicating the presence of anemia, to the Health and Disabilities Manager. **The Health and Disabilities Manager will obtain or assist with further diagnostic testing.** Parents should be encouraged to participate in the Supplemental Nutrition Program for Women, Infants, and Children (WIC) to provide additional nutrition assistance.

Information regarding family eating patterns, including cultural preferences, special dietary requirements for each child with nutrition-related health problems, and the feeding requirements for each child with disabilities will be documented using the Child Health Record. The Nutrition Consultant may review the nutrition health history to assist in identifying any nutrition-related needs.