

**ATCAA Early Childhood Services**  
 Early Head Start ❖ Head Start ❖ California State Preschool  
*Developing People – Changing Lives – Building Community*

**Health Action Plan**

Dear Head Start Family,  
 Head Start Program Performance Standards and California Department of Social Services require that children who attend Head Start meet certain health requirements listed on our Health Procedure Agreement form. Our staff members strive to help you keep your child healthy and safe. Currently your child's health file is incomplete or may need proof of follow up care. Please review the requirements below so that we can help you create a plan to keep your child's health file up to date.

- Immunization Appointment
- Completed Immunization Record Paperwork
- Physical Appointment
- Completed Physical Paperwork
- Dental Appointment
- Completed Dental Paperwork
- Vision Follow-Up Care Appointment
- Completed Vision Follow-Up Care Paperwork
- Hearing Follow-Up Care Appointment
- Completed Hearing Follow-Up Care Appointment
- Other (please specify): \_\_\_\_\_

Please list any concerns you may have about completing this requirement.

Family problems          Attendance          Remembering appointment day & time  
 \_\_\_\_\_  
 Transportation  
 \_\_\_\_\_

Below please collaborate with staff to write a plan of action.

<b><u>Action Steps</u></b>	<b><u>Due Date</u></b>	<b><u>Completion Date</u></b>	<b><u>Signatures</u></b>
Schedule Appointment	10/24/22		<b><u>Staff:</u></b> _____ <b><u>Parent/Guardian:</u></b> _____
Find transportation to appointment	10/31/22		<b><u>Staff:</u></b> _____ <b><u>Parent/Guardian:</u></b> _____
Develop strategies to remember appointment	11/7/22		<b><u>Staff:</u></b> _____ <b><u>Parent/Guardian:</u></b> _____
Attend appointment and receive diagnosis	11/17/22		<b><u>Staff:</u></b> _____ <b><u>Parent/Guardian:</u></b> _____