Health, Behavioral Health, and Safety Health, Behavioral Health, and Safety

Services Competencies: A Tool to Support Health Managers and Staff

Introduction

For over fifty years, Head Start* has had a commitment to health and wellness.¹ Promotion and prevention activities are central to the program's requirement to provide comprehensive services to support children's healthy growth and development. Today, a growing body of research demonstrates that healthy growth and development are critical for school readiness and later learning.²,³ Recent studies suggest that high-quality early childhood health and nutrition services provide the foundation for lifelong wellness.⁴

"An important part of the formative work for agencies and organizations involved in supporting children from birth through age 8 at the national, state, and local levels is to assess and revise as needed any current statements of professional competencies for both practitioners and leaders, and to review the extent to which all professional learning and workforce development opportunities, policies, and supports are informed by and aligned with those competencies."

https://www.nap.edu/catalog/19401/ transforming-the-workforce-for-children-birththrough-age-8-a

Institute of Medicine 2015

Competencies are the ability to do something successfully or efficiently. Competencies are a way to assess what an individual values or does not value; knows or does not know; and can do or cannot do.

Health services managers and staff, supervisors, and program directors can use The Competencies Tool as a framework for identifying the critical elements in effective implementation of health services. Health leaders and staff can also use The Competencies Tool to identify their areas of strength as well as areas for improvement. This may build staff member as well as organizational capacity to provide high-quality early childhood health services and help children and families achieve positive health outcomes.

Many organizations and government agencies use a competency model to recruit, develop, and retain qualified individuals. The 2015 Institute of Medicine report (see sidebar) on how to support children's health, development, and learning, recommends a shared knowledge base and set of competencies for the early childhood workforce. It also highlights the need for role specific knowledge and competencies.

^{*}The term Head Start in this document refers to both Head Start and Early Head Start programs.

What is The Competencies Tool?

The Competencies Tool is a set of 68 individual competencies. Each is indicative of an attitude, knowledge, or skill.* The competencies are consistent with science-informed practices for early childhood health staff.

- The resources consulted to develop the competencies included:
- the Head Start Program Performance Standards;
- Caring for Our Children, National Health and Safety Performance Standards for Early Care and Education Programs, 3rd Edition (CFOC3);
- two descriptive studies of Head Start health services; and
- Transforming the Workforce for Children Birth Through Age 8: A Unifying Foundation

The competencies are organized into four categories. The first category, Overarching (O), includes a set of crosscutting competencies that are relevant to all health services. The other three categories, Child and Family Health (CFH), Engaging Families (EF), and Leadership (L), address one aspect of Head Start health services.

The Competencies Tool is not an exhaustive list of everything one person may need to know or be able to do. Individual competencies may not be relevant to every job description. In some agencies, more than one person may be responsible for meeting the health

requirements. In addition, health services staff may have other responsibilities that are not included in this list. Specific competencies, in whole or in part, may apply only to Early Head Start. Other competencies address management and leadership responsibilities. In some programs the health manager may not have certain competencies but will need to know how to manage teams of people or consultants with these skills. Each program will determine its own approach, job descriptions, and written services plan.

How to Use The Competencies Tool

Staff can use this tool to increase their awareness of the attitudes, knowledge, and skills needed to deliver high-quality health and safety practices. There will be some competencies where one excels, and others where one may benefit from continued learning. Developing staff expertise across multiple categories will assist programs to effectively provide and manage Head Start health services.

Programs can also use The Competencies Tool to

- explore values and ideas about health care practices;
- examine how to communicate with families about health topics;
- hire and supervise health services staff; and
- create individualized professional development plans for health staff.

Today's Head Start health services can provide a child a lifetime of advantages!

^{1.} Cooke, R. (1965) Recommendations for a Head Start Program. Johns Hopkins University.

^{2.} Center on the Developing Child at Harvard University (2010). The Foundations of Lifelong Health Are Built in Early Childhood.

^{3.} High, Pam C. and the Committee on Early Childhood, Adoption, and Dependent Care and Council on School Health (April, 2008). School Readiness Technical Report. Pediatrics. 121(4), 1008-1015.

^{4.} Campbell, F., Conti, G., Heckman, J.J., Moon, S.H., Pinto, R., Pungello, E., Pan, (2014). Early Childhood Investments Substantially Boost Adult Health. Science, 343(6178): 1478–1485.

^{*}Other sets of competencies refer to knowledge, skills and abilities or KSAs rather than attitudes. *The Competencies Tool* includes attitudes to underscore the need to be willing to consider multiple perspectives, engage in self-reflection, and consider ongoing professional development to learn new knowledge and skills.



Health Services Managers and Staff Competencies

OVERARCHING COMPETENCIES			
	-	etencies reflect the most critical set of attitudes, knowledge and skills. They form a or providing health services within early care and education programs.	
O-1	Α	Value the connections between health and learning	
O-2	A	Acknowledge how one's own values, beliefs, attitudes, and preferences affect interactions with children, families, and staff	
O-3	K	Have a working knowledge of the Head Start Program Performance Standards (HSPPS) and other federal, tribal, state, and local requirements regarding health and safety in early care and education ¹	
O-4	K	Understand the general principles of health and wellness, including promotion, prevention, early identification, and intervention	
O-5	K	Understand the risk factors that make some people healthy, and other people unhealthy (e.g., determinants of health²) that contribute to health disparities³ among culturally and linguistically diverse populations	
O-6	S	Assist staff and families to understand children's healthy growth and development	
O-7	S	Model and reinforce healthy and safe behaviors	
O-8	S	Assist children and families to address challenges that affect their well-being, promote resilience, and strengthen protective factors	
0-9	S	Be able to find and use appropriate sources of evidence-based or science-informed health and safety information	
O-10	S	Share culturally, linguistically, and developmentally-appropriate science-informed health education materials with children, families, and staff	
O-11	S	Apply the principles of health literacy ⁴ when communicating with staff and families	

¹Throughout the tool there are references made to federal, state, local, and tribal regulations. Users of the tool need to know the pertinent information regarding the entities that have authority over a program or its families.

²Healthy People 2020 defines determinants of health as "The range of personal, social, economic, and environmental factors that influence (an individual's) health status."

³"Health disparities are differences in health outcomes between groups that reflect social inequalities." Centers for Disease Control and Prevention (2011). CDC Health Disparities and Inequalities Report—United States, 2011. MMWR, 2011:60, p.1.

⁴Health literacy is "The degree to which individuals share the capacity to obtain, process, and understand basic information and services needed to make appropriate health decisions (Ratzan and Parker, 2000)." Nielsen-Bohlman, L., Panzer, A.M., Kindig, D.A. (Eds). (2004). Health Literacy: *A Prescription to End Confusion*. Washington, DC: National Academies Press, p. 32.

CHILD AND FAMILY HEALTH COMPETENCIES

These competencies address the healthy growth and development of young children from birth to five years of age, family well-being, and Head Start requirements regarding the health and safety of children, families, and staff.

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CFH-1	A	Believe that children and families have the right to be healthy and safe
CFH-2	A	Acknowledge the importance of safe, responsive, and nurturing relationships for healthy social and emotional development
CFH-3	K	Be familiar with early childhood developmental milestones including cognitive, motor, language, and social and emotional
CFH-4	K	Be aware that maternal and family health and wellness beginning with preconception ⁵ influence health across the lifespan
CFH-5	K	Know current pediatric periodicity schedules (EPSDT), dental periodicity schedules, and immunization recommendations and requirements, and understand screening, assessment, and examination results
CFH-6	K	Be aware of changes in health care delivery systems (e.g., eligibility, provider participation, covered services) ⁶
CFH-7	K	Understand how toxic stress and adverse childhood experiences influence health and development
CFH-8	K	Know the importance of healthy oral development, risks and protective factors
CFH-9	K	Know about food safety and sanitation practices (e.g., food preparation, cross-contamination, temperatures, and storage including breast milk and infant formula)
CFH-10	K	Be familiar with individual child and adult nutritional needs, preferences, and special dietary requirements including feeding recommendations for infants (e.g., breastfeeding, introduction of solids) and young children (e.g., food allergy/intolerance, portion size, BMI)
CFH-11	K	Know about physical activity and screen-time recommendations for infants, toddlers, and preschool children, and physical activity recommendations for adults
CFH-12	S	Assist eligible families to access health insurance for themselves and their children
CFH-13	S	Assist families to access medical and dental homes
CFH-14	S	Identify whether children are up-to-date on their EPSDT and immunization requirements

 $^{^5}$ The Centers for Disease Control and Prevention (CDC) define preconception health as "the health of women and men during thier reproductive years. For more information: $\underline{\text{http://www.cdc.gov/preconception/overview.html}}$

⁶The examples listed in this and other competencies are not meant to be exhaustive.

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CHILD AND FAMILY HEALTH COMPETENCIES

CFH-15 S	Help families identify and overcome barriers to completing further diagnostic testing, follow-up, and treatment
CFH-16 S	Develop and implement Individual Healthcare Plans (IHP) for children with special health care needs, in collaboration with families, the medical home, and other related service providers
CFH-17 S	In collaboration with the program's mental health consultant and families, promote children's social and emotional well-being, assess risk and make appropriate referrals for children with mental health concerns
CFH-18 S	In collaboration with the program's mental health consultant, assess risk and make appropriate referrals for families living with challenges such as domestic violence, child abuse and neglect, substance abuse, depression (especially for prenatal and post-partum women) and other mental health issues
CFH-19 S	Demonstrate infection control procedures: basic assessment, initial management, and prevention of communicable diseases
CFH-20 S	Identify indoor and outdoor hazards related to common child and adult injuries, and apply age and developmentally appropriate injury prevention strategies
CFH-21 S	Demonstrate safe methods that meet state and tribal requirements of administering medications, including consent, handling, labeling, storing, disposing, and recognizing possible side effects
CFH-22 S	Support family-style meals for children and staff as appropriate
CFH-23 S	Support positive oral health practices during program hours
CFH-24 S	Ensure that program staff can provide first aid and CPR and always have access to well-maintained first aid supplies in order to respond to medical and dental emergencies
CFH-25 S	Plan and oversee ongoing training to meet programmatic health and safety requirements
CFH-26 S	Assure staff implement health and safety practices including daily health checks
CFH-27 S	Establish and maintain confidentiality policies and procedures
CFH-28 S	Maintain effective recordkeeping systems, and accurately track individual child and family health information
CFH-29 S	Collect and use child and family health history, including current health needs, to help children and families achieve optimal wellness
CFH-30 S	Facilitate comprehensive services including appropriate education, information, support, and referrals for prenatal and postpartum women, fathers, and significant family members

CHILD AND FAMILY HEALTH COMPETENCIES

CFH-31 S	For enrolled pregnant women, develop a plan for the two-week newborn visit to offer support and identity family needs
CFH-32 S	Assure that programs implement and inform staff and families about safe sleep practices for infants

ENGAGING FAMILIES COMPETENCIES

These competencies reflect the relationship-based approach found in the *Head Start Parent*, *Family, and Community Engagement Framework* and recognize that families are the primary decision makers for their children's health

decision makers for their children's health.		
EF-1	A	Believe that families are experts about, and the primary decision makers for, their children's health
EF-2	K	Understand how the attitudes, beliefs, and traditions of individuals from diverse ethnic, cultural, religious, educational and socioeconomic backgrounds, sexual orientations, and genders affect health practices
EF-3	K	Be familiar with strength-based communication strategies such as reflective listening and motivational interviewing
EF-4	S	Develop and sustain trusting relationships with families
EF-5	S	Identify and use family strengths when addressing health concerns
EF-6	S	Partner with families to promote safe, healthy, and nurturing home environments
EF-7	S	Educate families about how all aspects of health affect children's learning and school readiness
EF-8	S	Engage families in the review and development of program policies and activities related to all areas of health (e.g., health education curriculum, menu planning)

LEADERSHIP COMPETENCIES

These competencies address how to effectively manage and lead Head Start health services and work collaboratively with families, staff, individual providers, health organizations, and service delivery systems.

delivery systems.		
L-1	A	Be open to multiple perspectives, new information, and novel approaches to working with children, families, and staff
L-2	A	Be willing to take advantage of professional development and support activities (e.g., training, higher education, and professional networking)
L-3	K	Know how to access and use external health resources, including technical assistance providers, health consultants, and state, tribal, and community agencies

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LEADERSHIP COMPETENCIES

L-4	K	Understand adult learning principles
L-5	S	Gather and use community health data, make use of available resources, and develop strategies to address service delivery gaps and barriers to care
L-6	S	Use data to plan, implement, and evaluate health services
L-7	S	Report program-level health information to meet program, federal, tribal, and state requirements and requests, including the Head Start Program Information Report (PIR)
L-8	S	Use technology to improve efficiency and strengthen the quality of health services
L-9	S	Demonstrate responsive program management practices (e.g., collaboration, communication, meeting facilitation)
L-10	S	Develop, disseminate, review, and update program health and safety policies and procedures
L-11	S	Conduct ongoing monitoring activities to assure healthy and safe program practices and implement improvements as needed
L- 12	S	Maintain a state of readiness to address the needs of children, families, and staff that cover the three phases of an emergency: preparedness, response, and recovery
L-13	S	Be able to successfully use USDA Food and Consumer Services Child Nutrition Programs
L-14	S	Assist families and staff to increase their health literacy
L-15	S	Promote staff wellness, including stress management, injury and illness prevention (e.g., staff immunizations), and healthy active living
L-16	S	Establish partnerships with local health care providers to support the health needs of children and families and promote healthy communities
L-17	S	Maintain a Health Services Advisory Committee (HSAC) that includes engaged Head Start families, health professionals, program staff, and other community volunteers

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