

Guide for Data Sharing Between the Arizona Head Start Association Program Members and the Arizona WIC Program

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Introduction

Background

A Memorandum of Understanding (MOU) between the Arizona Department of Health Services, Women, Infants and Children (WIC) Program and the Arizona Head Start Association, Inc. (AZHSA) Head Start Program Members has been developed to ensure coordination of services and confidentiality of data while streamlining administrative procedures for staff, participants, and applications for services of both the Arizona WIC and Head Start programs. As a result, a referral form to streamline the data sharing process has been developed. The Head Start and WIC Referral Form (Referral Form) can be found under the [Information and Forms section of AZWIC.gov](#)

The MOU has eliminated the need for a release of information to be completed between the Arizona WIC and Head Start programs in Arizona. WIC and Head Start staff shall inform participants that personal information may be shared with Head Start and WIC, respectively, for the purposes of enrollment and outreach for the WIC and Head Start programs.

Please refer to the Memorandum of Understanding for Data Sharing Between Arizona Department of Health Services, Women, Infants and Children (WIC) and Arizona Head Start Association, Inc. (AZHSA) Head Start Program Members under the [Information and Forms section of AZWIC.gov](#) for further information regarding data sharing and details of the memorandum.

Overview

This guide has been developed to assist local agencies with referrals between the WIC and Head Start programs. The guide is separated into two main sections. Section A defines the procedures for Arizona WIC staff to reference and Section B defines procedures for Arizona Head Start Program Member staff to reference. Each agency is encouraged to coordinate, at the local level, their preferred method of data sharing and participant referrals between WIC and Head Start in accordance with the MOU and these guidelines.

Definitions

This section includes definitions of words commonly used throughout the Guide for Data Sharing Between the Arizona Head Start Association Head Start Program Members and the Arizona WIC Program.

Local Agencies

Contractors that provide WIC services at the local level.

Sites

Locations that administer the Head Start program at the local level.

Authorized Representative

The person, other than the WIC participant, who has the authority to sign for the participants in an economic unit (household), who is responsible for following the WIC regulations, and may be issued and redeem WIC food benefits for authorized WIC foods. An Authorized Representative can be a parent, caretaker, legal guardian, relative with whom the participant lives, spouse or significant other, or an individual who has significant knowledge of family history of the participant.

Section A – Data Sharing Procedure for Arizona WIC Staff

The Head Start and WIC Referral Form – WIC Completion

The Head Start and WIC Referral Form (Referral Form) shall be completed by the local agency WIC staff when Head Start sites request information from WIC. The Referral Form includes the following information for WIC staff to complete:

1. A checkbox to indicate if the child is currently participating in Head Start or **not** currently participating in Head Start.
 - a. Please mark the “Currently Participating in Head Start” field if the client is currently enrolled in the Head Start program to signal the Head Start site that the client is not a new enrollee.
 - b. Please mark the “Currently Not Participating in Head Start” field if the client is being referred to Head Start and needs this information to complete the enrollment process.
2. A checkbox to indicate if the child is currently participating in WIC or **not** currently participating in WIC.
 - a. Please mark the “Currently Participating in WIC” field if the client is currently enrolled in WIC.
 - b. Please mark the “Currently Not Participating in WIC” field if the client is not in the HANDS system when the request is received.
3. Date of Referral
4. Child’s Full Name
 - a. Please list first name, middle initial (if applicable), and last name.
5. Child’s Date of Birth (DOB)
6. Authorized Representatives’/Caregivers’ Full Names
 - a. Please list first name, middle initial (if applicable), and last name.
7. Family’s Contact Phone Number
 - a. Please provide the phone number of the Authorized Representative/Caregiver.
8. Family’s Address
 - a. Please provide the address of the Authorized Representative/Caregiver
9. Authorized Representatives’/Caregivers’ Email Address
 - a. Please provide the email address of the Authorized Representative/Caregiver
10. Height
11. Weight
12. Hemoglobin (Hgb)
13. Date Taken
 - a. Please list the date that the anthropometric and biochemical data were recorded/completed.
14. Referring WIC/Head Start Clinic Contact Information
 - a. Please place clinic information in the box in the event that the clinic needs to be contacted.
15. Name of Staff Member Completing the Referral
 - a. Please enter the first and last name of the staff member in this field in the event the clinic and staff member needs to be contacted.

Methods of Receiving an Information Request from Head Start

Head Start sites shall request client information through the use of the Referral Form. There are three methods of obtaining a Referral Form from Head Start. These include:

1. Referral Form received via fax or secure email. Client is not present, but participating in the WIC Program.
2. Referral Form received via fax or secure email. Client is not present, and client is NOT participating in the WIC Program.
3. Client presents in the clinic with the Referral Form.

Method 1: Referral Form received via fax or secure email. Client is not present, but participating in the WIC Program

If the Referral Form is received by fax or secure email and the client is not present, determine if the client is currently participating in the WIC Program. If the client is currently participating in WIC:

1. The form may be faxed with a cover page from the local agency or sent via secure email to the Head Start site with the information requested.
2. Identify if the client is due for WIC services within two (2) weeks.
 - a. If the client does not have an upcoming appointment, the most recent anthropometric and biochemical data in the medical record shall be documented on the form and faxed back or sent back via secure email to the Head Start site.
 - b. If the client is due for WIC services within two (2) weeks where anthropometrics may be taken, WIC local agency staff may determine a method to ensure the form is completed at the appointment with current anthropometric and/or biochemical data or may provide the most current data available. Please refer to [Attachment A](#) - Head Start Acceptance Guidelines Table for acceptance guidelines at your local Head Start site. This information shall be sent back to the Head Start site or provided to the participant to take to Head Start. The form may be faxed with a cover page from the local agency to the Head Start site with the information requested, sent via secure email to the Head Start site with the information requested, or the form may be provided to the client to take with them to their local Head Start site.

3. Staff shall document in the Note field that the Head Start Referral Form was completed.
 - a. If faxed to Head Start, record the date that it was sent in the Note and the name of the intended receiving personnel from Head Start, if applicable.
 - b. If sent via secure email to Head Start, record the date that it was emailed in the Note and the name of the Head Start site.
 - c. If provided to the Authorized Representative at the WIC visit, document that the referral was provided to the Authorized Representative in the Note. Actual names are NOT to be added to notes to maintain confidentiality.
Note: A Verification of Certification (VOC) can also be provided to WIC Participants, and WIC Participants may share this with Head Start if they would like to do so. Staff shall NOT provide a VOC directly to Head Start staff.
4. Staff shall add Head Start in the Referral screen in the Care Plan section of HANDS and mark as “participating.”

Note: Best practice is to return the information requested on the Referral Form as soon as possible to the Head Start site.

Method 2: Referral Form received via fax or secure email. Client is not present, and client is NOT participating in the WIC Program

If the Head Start Referral Form is received by fax or secure email, the client is not present, and the client is not currently participating in the WIC Program:

1. The local agency shall determine a method to notify the Head Start site within two (2) weeks regarding the client’s participation status and the information requested will not be supplied by the WIC Program.

Method 3: Client presents in clinic with Referral Form

If the client presents in the clinic with the Referral Form to be completed, determine if the client needs to be seen for WIC services.

1. If the client is due for WIC services, take anthropometric and/or biochemical data as usual and complete the form with the current data. Give the form back to the client to bring back to their Head Start site.
2. If the client is due for services that do not include anthropometric or biochemical data or is not due for services, the most recent anthropometric and biochemical data in the medical record shall be documented on the form and provided to the client to bring back to their Head Start site.
3. Staff shall document in the Note that the Head Start Referral Form was completed. The Note shall include the method by which the referral was provided (i.e., fax, in person).
 - a. If faxed to Head Start, record the date that it was sent in the Note and the name of the intended receiving personnel from Head Start, if applicable.
 - b. If provided to the Authorized Representative at the WIC visit, document that the referral was provided to the Authorized Representative in the Note. Actual names are NOT to be added to notes to maintain confidentiality.
4. Staff shall add Head Start in the Referral screen in the Care Plan section of HANDS and mark as “participating.”

Note: If electronic sharing of this form is desired, the file **must be encrypted** and follow the local agency policy and procedure on electronic data sharing to protect confidentiality of client information. Local agency WIC staff shall coordinate with the local Head Start site as to the preferred method of data sharing.

Referral from Head Start to WIC

If the Referral Form is received from Head Start as a referral to WIC with completed anthropometric and/or biochemical data, please refer to Chapter 2 of the Arizona WIC Policy and Procedure Manual, Section G Health and Nutrition Assessment for acceptance criteria and documentation guidelines in HANDS. Staff will document in the Note that medical data was obtained from the Referral Form. For reference, the Note shall include the name of the Head Start staff member who completed the Referral Form. Once anthropometric and biochemical data has been recorded and the Note completed, the form may be shredded.

Collaboration

Each WIC local agency shall contact their local Head Start grantees or delegates and supply the local Head Start sites with information about the local agency WIC services, eligibility criteria, contact information, and location of local agency clinics. Each WIC local agency is recommended to have representation at the local Child-Parent Centers or Head Start Advisory Meetings to provide updates, answer questions, and learn about concerns that may be affecting participation in the Arizona WIC Program. Nutrition education and promotional outreach materials may be shared between Head Start and WIC and posted in WIC clinics.

Section B – Data Sharing Procedure for Head Start Staff

Guidelines Overview

Each Head Start office has their own guidelines for requiring anthropometric and biochemical data values. These guidelines are summarized in the Head Start Acceptance Guidelines Table. Each Head Start office is encouraged to contact their local WIC clinic to learn about their hours of operation, enrollment procedures and requirements, contact information, and locations of all clinics in the area.

The Head Start and WIC Referral Form – Head Start Completion

The Head Start and WIC Referral Form (Referral Form) shall be completed by the local Head Start staff when WIC clinics request information from Head Start. The Referral Form includes the following information for Head Start staff to complete:

1. A checkbox to indicate if the child is currently participating in Head Start or **not** currently participating in Head Start.
 - a. Please mark the “Currently Participating in Head Start” field if the client is currently enrolled in the Head Start program.
 - b. Please mark the “Currently Not Participating in Head Start” field if the client is not in the Head Start system when the request is received.
2. A checkbox to indicate if the child is currently participating in WIC or **not** currently participating in WIC.
 - a. Please mark the “Currently Participating in WIC” field if the client is currently enrolled in WIC.
 - b. Please mark the “Currently Not Participating in WIC” field if the client is not currently on WIC, but is being referred to the program.
3. Date of Referral
4. Child’s Full Name
 - a. Please list first name, middle initial (if applicable), and last name.
5. Child’s Date of Birth (DOB)
6. Authorized Representatives’/Caregivers’ Full Names
 - a. Please list first name, middle initial (if applicable), and last name.
7. Family’s Contact Phone Number
 - a. Please provide the phone number of the Authorized Representative/caregiver.
8. Family’s Address
 - a. Please provide the address of the Authorized Representative/Caregiver
9. Authorized Representatives’/Caregivers’ Email Address
 - a. Please provide the email address of the Authorized Representative/Caregiver
10. Height
11. Weight
12. Hemoglobin (Hgb)
13. Date Taken
 - a. Please list the date that the anthropometric and biochemical data were recorded/completed.

14. Referring WIC/Head Start Clinic Contact Information
 - a. Please place clinic information in the box in the event that the clinic needs to be contacted.
15. Name of Staff Member Completing the Referral
 - a. Please enter the first and last name of the staff member in this field in the event the clinic and staff member needs to be contacted.

Methods of Receiving an Information Request from Head Start

Local agency WIC staff shall request client information through the use of the Referral Form. There are three methods of obtaining a Referral Form from WIC. These include:

1. Referral Form received via fax or secure email. Client is not present, but participating in Head Start.
2. Referral Form received via fax or secure email. Client is not present, and client is NOT participating in Head Start.
3. Client presents at the site with the Referral Form.

Method 1: Referral Form received via fax or secure email. Client is not present, but participating in Head Start

If the Referral Form is received by fax or secure email and the client is not present, determine if the client is currently participating in Head Start. If the client is currently participating in Head Start:

1. The form may be faxed with a cover page or sent via secure email from the Head Start site to the WIC clinic with the information requested within two (2) weeks of receiving the request for information.
2. Staff shall document that the Head Start and WIC Referral Form was completed and noted in the Head Start program database.

Note: Best practice is to return the information requested on the Referral Form as soon as possible to the WIC local agency clinic.

Method 2: Referral Form received via fax or secure email. Client is not present, and client is NOT participating in Head Start

If the Referral Form is received by fax or secure email, the client is not present, and the client is not currently participating in Head Start:

1. The site shall determine a method to notify the WIC clinic within two (2) weeks regarding the client's participation status and the information requested will not be supplied by the Head Start site.

Method 3: Client presents at site with Referral Form

If the client presents at the site with the Referral Form to be completed:

1. If the client is due for services requiring biochemical and/or anthropometric data, take anthropometric and/or biochemical data and complete the form with the current data. Give the form back to the client to bring back to the WIC clinic or fax it to the WIC clinic.
2. If the client is not due for services, the most recent anthropometric and biochemical data in the medical record shall be documented on the form and provided to the client to bring back to the WIC clinic.
3. Staff shall document that the Head Start and WIC Referral Form was completed in the Head Start program database.

Referral from WIC to Head Start

If the Referral Form is received by Head Start staff with completed anthropometric and/or biochemical data provided by the WIC clinic staff, please refer to your site's policy regarding acceptance procedures. Please see [Attachment A](#) for specific guidelines per Grantee or Delegate program requirements. General Head Start acceptance guidelines are as follows:

1. Biochemical data is to be accepted within 90 days of entry into the program. If the hemoglobin (Hgb) value is less than one (1) year old, this value may be accepted.
2. A Hgb test is required yearly.
3. Anthropometric data may be accepted for 14-45 days from when it was taken.
 - a. These guidelines are summarized in the Head Start Acceptance Guidelines Table (see [Attachment A](#)).
4. Anthropometric data is required twice per year.

Note: If electronic sharing of this form is desired, the file **must be encrypted** and follow the local agency policy and procedure on electronic data sharing to protect confidentiality of client information. Local agency WIC staff shall coordinate with the local Head Start site as to the preferred method of data sharing.

**Attachment A –
Head Start Acceptance Guidelines Table**

Grantee or Delegate Program Name	When is height and weight completed (within so many days of entry)?	When do you require a hemoglobin value (90 days of entry)?	How many times do you do a growth assessment (once or twice a program year)?	If you do a growth assessment more than once, when are they completed?	How long is a hemoglobin value valid for (one year)?	Do you use the EPSDT for growth assessment for EHS children?	At what value do you refer child to PCP for low hemoglobin? At what value do you just provide info about anemia and iron?
Catholic Charities Westside Head Start	14 days of entry	90 days of entry	Twice	1st - within 14 days of entry 2nd - in January after Christmas break within 14 days	1 year	Yes, when provided	>11.0, no need to refer. If value 10.1- 11.0, provide information to parent, rescreen in 6 months, if value is 10.0 or less, refer to PCP.
Chicanos Por La Causa	45 days of entry	What the EPSDT/AHCCCS Guidelines guidelines state	Once at the center, plus EPSDT from medical provider	As needed by medical provider, WIC, etc	What the EPSDT & AHCCCS guidelines state	Yes	Depending on what lab place they attended and the values listed on the lab results we let the family know to take the conversation to their medical home

Grantee or Delegate Program Name	When is height and weight completed (within so many days of entry)?	When do you require a hemoglobin value (90 days of entry)?	How many times do you do a growth assessment (once or twice a program year)?	If you do a growth assessment more than once, when are they completed?	How long is a hemoglobin value valid for (one year)?	Do you use the EPSDT for growth assessment for EHS children?	At what value do you refer child to PCP for low hemoglobin? At what value do you just provide info about anemia and iron?
Child Crisis Arizona	90 days of entry	EPSDT guidelines	Once & EPSDT data from medical provider	Within 45 days of entry and all scheduled EPSDTs	1 year	Yes	< 11 refer to PCP and provide literature on anemia
Child Parent Centers, Inc. (CPC)	45 days of entry	90 days of entry	Twice	1st - within 45 days 2nd - around March	1 year	Yes, when provided	<11.0 for HGB, refer to PCP and/or WIC. Always provide information
City of Phoenix	90 days of entry	Do not do (Only EHS)	Twice	90 days of entry and the end of April	1 year	Yes	< 11.0 refer to PCP or WIC
Maricopa County	14 days of entry	90 days of entry	Twice	1st - within 14 days of entry. 2nd - in January after Christmas break within 14 days	1 year	Yes, when provided	>11.0, no need to refer. If value 10.1- 11.0, provide information to parent, rescreen in 6 months, if value is 10.0 or less, refer to PCP.

Grantee or Delegate Program Name	When is height and weight completed (within so many days of entry)?	When do you require a hemoglobin value (90 days of entry)?	How many times do you do a growth assessment (once or twice a program year)?	If you do a growth assessment more than once, when are they completed?	How long is a hemoglobin value valid for (one year)?	Do you use the EPSDT for growth assessment for EHS children?	At what value do you refer child to PCP for low hemoglobin? At what value do you just provide info about anemia and iron?
Northern Arizona Council of Governments	45 days of entry	45 days of entry	Twice	45 days and in January	1 year	Yes	10 or less
Pinal Gila Community Child Services, Inc.	30 days of entry	90 days of entry	Preschool = Once annually; Infant/Toddler = once annually if no concerns	Infant/Toddler = if "At Risk" 2nd Assessment takes place February & March	Preschool = 2 years Infant/Toddler = 1 year	Yes, if they are completed within the time frame	If less than 11.0 we provide information and refer to WIC, PCP or Nutrition Consultant
Southwest Human Development	30 days of entry	90 days of entry	Once	N/A	1 year	Yes (only if done within 30 days of entry)	10.9
Urban Strategies	90 days of entry	90 days of entry	Once per program year	N/A	1 year	Yes	Refer: 10 or below. Provide info: values of 10.1-11.4
Western Arizona Council of Governments	45 days of entry	90 days of entry	Twice	45 days and April	2 years for normal values; 1 year for abnormal values	No, we measure them w/in 45 days and in April	Less than 10.9 for Yuma and La Paz counties; less than 11.3 for Mohave county