EMAA HEAD START
PIR TRACKING

_____ _____ _____
Child's Name Parent/Guardian Name Family Advocate's Name

Directions: Begin filling out at Final Enrollment. ***Update as needed in a different colored ink****. Family Advocate is responsible. Area Support Assistant will initial & date as updated information is entered.*

FAMILY NEEDS ASSESSMENT/PARTNERSHIP AGREEMENT
Completed? Yes No Date____/____/____

In Family Goal Setting Process? Yes No

Has this **family** experienced homelessness **during the enrollment year**? (Definition of "homeless" per the McKinney-Vento Homeless Assistance Act) Yes No

If so, did **family acquire housing during the enrollment year**? Yes No

Written referral by Child Welfare Agency (FSD)? Yes No

Was this child in **foster care** at **any point during the program year?** Yes ____ No ____

Did EMAA Head Start receive a **child care subsidy** (**vendor care**) for this child? Yes ____ No ____

	At Enrollment	At End of Enrollment
Receiving **TANF**	Yes No	Yes No
Receiving **SSI**	Yes No	Yes No
Receiving **WIC**	Yes No	Yes No
Receiving **SNAP (Food Stamps)**	Yes No	Yes No

	At Enrollment
At least one parent/guardian is a member of U.S. military on **active duty**	Yes No
At least one parent/guardian is a **veteran** of U.S. military	Yes No

At least one parent/guardian **completed** the following **during this program year** or **At End of Enrollment:**

Grade level in school prior to high school graduation (i.e. 8th grade, 11th grade)	Yes No
High school or was awarded a GED	Yes No
Associate Degree	Yes No
Baccalaureate or Advanced Degree	Yes No
Job Training Program, Professional Certificate or License	Yes No

Activities a father/father figure **engaged in during this program year**:

Family Assessment	Yes No
Involvement in child's Head Start development experiences such as home visits, parent-teacher conferences, etc.	Yes No
Family goal setting	Yes No
Head Start program governance such as participation in Policy Council or policy committees	Yes No
Parenting education workshops	Yes No

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PIR HEALTH (for **enrolled child**)	**At Enrollment**	**At End of Enrollment**
Medicaid Eligibility (**circle what applies**)	Yes No Potential	Yes No Potential
Primary Health Coverage (**circle what applies**)	None Med/CHIP CHIP Med Other Private	None Med/CHIP CHIP Med Other Private
Other Health Coverage (**circle what applies**)	None Med/CHIP CHIP Med Other Private	None Med/CHIP CHIP Med Other Private

Does **enrolled child** have:	**At Enrollment**	**At End of Enrollment**
An ongoing source of continuous & accessible routine, preventive & acute **medical** care?	Yes No	Yes No
An ongoing source of continuous & accessible routine, preventive, & acute **dental** care?	Yes No	Yes No

Did **enrolled child** receive preventive dental care (fluoride app, cleaning, sealants) **during this enrollment year?** Yes No

Place a "Y" on the line if this child **received ongoing medical treatment for the following chronic health conditions, (**health conditions that continue over a long period of time) **since last year's PIR was reported**:

____ Anemia ____ Hearing Difficulties ____ Vision Problems ____ Asthma
____ Diabetes ____ High Lead Level

PIR MENTAL HEALTH (To be **completed by Teaching Staff AND Family Advocate together**. Do not include routine communication with staff or parents or routine child screenings & assessments)

Did a Mental Health Professional:

Consult with program staff about the child's behavior/mental health?	Yes	No
Provide 3 or more consultations with staff **since last year's PIR was reported**?	Yes	No
Consult with parent/guardian about the child's behavior/mental health?	Yes	No
Provide 3 or more consultations with parent/guardian **since last year's PIR was reported**?	Yes	No
Provide an individual mental health assessment?	Yes	No
Facilitate a referral for mental health services?	Yes	No

Mental Health Referrals:

Was the child referred by the program for mental health services outside of Head Start **since last year's PIR was reported**? Yes No

If so, did the child receive mental health services since last year's PIR was reported? Yes No