10 Steps to Starting a Head Start Program in Your Office

**Background:** Head Start began as a summer program in 1965 and serves the nation’s most vulnerable children. It focuses on school readiness with inclusion of medical, dental, nutrition and mental health. All programs must comply with national program performance standards.

**Step 1**
Call the local Community Action Agency and speak with the director about oral exam federal compliance opportunities.

**Step 2**
Discuss with local officials (County Commissioners) what percentage of their Head Start children have received dental exams and what more can be done to reach one hundred percent of these children.

**Step 3**
Arrange appropriate follow-up care for those children identified with dental needs, including both fellow private dental practitioners and those working within Federally Qualified Health Centers. Establish appropriate referrals to local pediatric dental offices to provide follow up care for those children with extensive dental needs.

**Step 4**
Present in-services on early childhood decay to local pediatricians/family medicine staff and promote the need for caries risk assessment, anticipatory guidance, usage of fluoride varnish as appropriate and referrals to establish a dental home. Head Start oral health education could build upon such a foundation as provided during well-child visits.

**Step 5**
Become a registered state dental Medicaid provider. Take the opportunity to discuss with provider enrollment supervisor or state Medicaid dental director about your local assessment of the need for Head Start exams.
Step 6
Meet with community leaders to discuss health needs/support services for young children to access dental exams. These leaders could be from the United Way, faith based communities and/or local foundations that provide case management and support services such as transportation.

Step 7
Discuss opportunities to partner with local business community in holding events aimed at Head Start children receiving dental screening services and oral health education. These partnerships can include media coverage, catering services, goodie bags and legislative participation.

Step 8
Utilize local dental society meetings to coordinate Head Start screenings and follow-up care among multiple offices within a minimal number of days. Collaborate with local Head Start programs, businesses, faith-based communities, media, Women, Infant, Children Department (WIC), local medical providers and office staff to hold a Head Start dental screening morning 1-3 times per year.

Step 9
Evaluate the success of the program by administrative discussions with Head Start administrators, Community Action Agency and dental office staff. Realize the elevation in dental office community profile by performing this activity and become an important collaborator in oral health improvement of this vulnerable population.

Step 10
Visit the Women, Infant, Children Department (WIC) in the local health department or county offices and determine need for children under age 5 to have dental exams. The collaboration here is a natural fit.

Questions? Contact us!
American Dental Association
Jane Grover, D.D.S., M.P.H.
Director
Council on Access, Prevention and Interprofessional Relations
312.440.2751 or 800.621.8099 x2751
groverj@ada.org

For more information about the American Dental Association’s Action for Dental Health: Dentists Making a Difference campaign, visit ADA.org/action.