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# Migrant and Seasonal Head Start

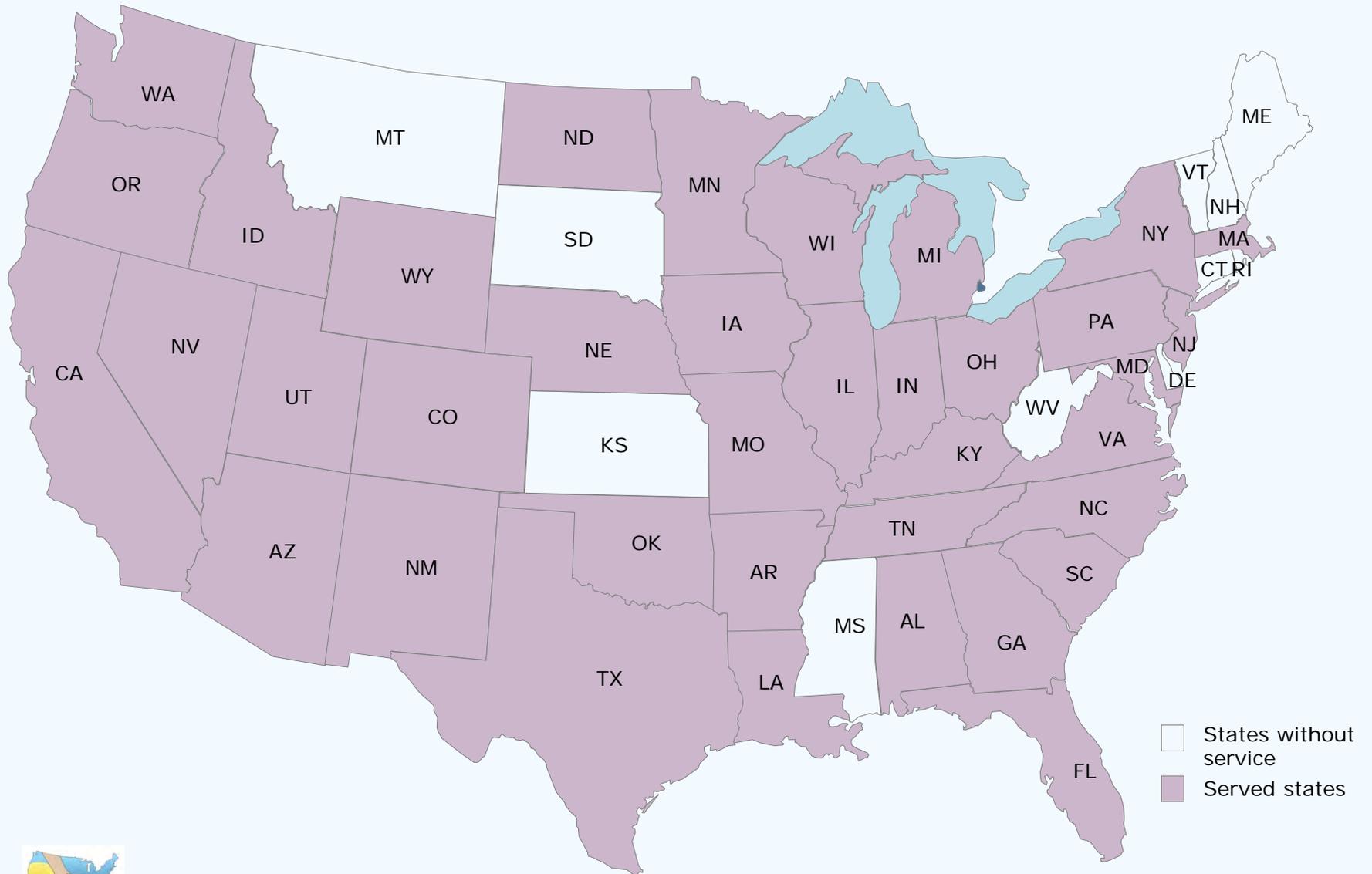


# MSHS

The Migrant Seasonal Head Start (MSHS) program is one of the largest community based service providers in the nation, providing a wide range of services to more than 34,000 migrant and seasonal children, ages birth to compulsory school age, and their families each year. The MSHS program provides education and support services to low-income children of migrant and seasonal farm workers and their families.



# Migrant and Seasonal Head Start in 38 States



# Migrant and Seasonal Head Start: 60 Agencies

Agency Types	Number of Agencies
Community Action Agency (CAA)	15
GOVERNMENT AGENCY (Non-CAA)	2
PRIVATE/PUBLIC FOR-PROFIT (e.g., for-profit hospitals)	2
PRIVATE/PUBLIC NON-PROFIT (Non-CAA) (e.g., church or non-profit hospitals)	37
School System	4

Agency Description	Number of Agencies
Delegate Agency	35
Grantee that Directly Operates Program(s) and has no Delegates	18
Grantee that Directly Operates Programs and Delegates Service Delivery	5
Grantee that Maintains Central Office Staff Only and Operates no Program(s) Directly	2

# MSHS Eligibility Criteria

- Income below federal poverty guidelines
- Birth to compulsory school age
- The *entire* family must have moved within the last 24 months in search of agricultural work
- 51% of income from agriculture within the last 12 months- families must meet this requirement each year



# Migrant & Seasonal

(Head Start Act, as amended 10/27/98)

## Definitions

The term “migrant and seasonal Head Start program” means:

(A) with respect to services for migrant farmworkers, a Head Start program that serves families who are engaged in agricultural labor and who have changed their residence from one geographical location to another in the preceding two year period; and

B) with respect to services for seasonal farmworkers, a Head Start program that serves families who are engaged primarily in seasonal agricultural labor and who have not changed their residence to another geographic location in the preceding two year period



# Enrollment

## *Number of Participants*



<b>MSHS Children (Cumulative)</b>	<b>32,764</b>
<i>MSHS Children Age 3-5</i>	<i>15,993</i>
<i>MSHS Children Age 0-2 (including EHS children)</i>	<i>16,689</i>
<i>Pregnant Women (EHS Programs)</i>	<i>78</i>
<b>Federally Funded Enrollment</b>	<b>34,893</b>

**Program Options: Center Base and Family Child Care**

# Health Insurance - Children

<b>Children with Health Insurance (at Enrollment)</b>	<b>25,861</b>
<b>Children with Health Insurance (at End of Enrollment Year)</b>	<b>29,360</b>
<b>Children without Health Insurance (at Enrollment)</b>	<b>6,821</b>
<b>Children without Health Insurance (at End of Enrollment Year)</b>	<b>3,322</b>

<b>Children enrolled in Medicaid and/or CHIP</b>	<b>27,647</b>
<b>Children enrolled in State funded Insurance</b>	<b>1,090</b>
<b>Children with Private Health Insurance</b>	<b>527</b>
<b>Children with other type of Health Insurance</b>	<b>96</b>

<b>Pregnant Women with Health Insurance (at Enrollment)</b>	<b>46</b>
<b>Pregnant Women with Health Insurance (at End of Enrollment)</b>	<b>69</b>
<b>Pregnant Women without Health Insurance (at Enrollment)</b>	<b>36</b>
<b>Pregnant Women without Health Insurance (at End of Enrollment Year)</b>	<b>13</b>



# Highlights

The need for oral health services for Migrant and Seasonal Head Start children

Questioning the reason why only 26% of MSHS families utilizing Health Center's as their health providers

## Problem Solving

Understanding

- Funding sources
- Time requirement for assessments and follow-up for highly mobile population

Development of Memorandum of Understanding

# Contributors to the development of the Memorandum of Understanding

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# Effective Partnerships Guide: Improving Oral Health for Migrant and Seasonal Head Start Children and their Families



# Key Areas

**THREE KEY AREAS** in which this guide will be extremely helpful are in establishing a solid business plan which incorporates the costs for oral health care services for MSHS children, planning ahead to provide ample time to address the details associated with the comprehensive provision of care (i.e. joint strategy for ongoing planning, service delivery and evaluation), and exploring opportunities to identify resources, acknowledge existing services



# Establishing a Solid Business Plan

- Optimizing Medicaid and Children's Health Insurance Program Funding
- Payment Models
- Collaborating with MSHS programs

# Planning Ahead

- Will help gain an understanding of the others' program needs and service capacity
- Will permit for a more cost-effective use of MHC providers' time, reduce unnecessary hospitalization, emergency room use, and improve coordination of services
- Will consider the transitory nature and limited residential period of the migrant family when planning for primary health care and oral health services of MSHS children

# Exploring Opportunities

Leverage resources and avoid duplication:

- Recruitment Efforts
- Enrollment in Medicaid or CHIP
- Transportation
- Translation & Interpretation
- Ensure Continuity of Services via Referral System



# Assisting Families in finding a MSHS program and a Health Center

**Find a Migrant and Seasonal Head Start Center**

Near:

MSHS Center     Health Center

**Search**

Enter a City name, ZIP Code, such as "20002", address, State name, or place name

**Search**    **Share**    **Embed**



# Questions and Comments

