SERVICES FOLLOWING EARLY TERMINATION OF PREGNANCY

Purpose: UMCHS, Inc. will address situations with pregnant mothers in a supportive manner to help with the potential grieving process and in order to help support families and link them with needed resources. Services to will also meet Head Start Performance Standards as indicated in 1304.40.

A pregnant mother may be enrolled in an Early Head Start slot and be served prenatally via home visiting weekly from the assigned Family Advocate. Should the pregnancy be terminated, the Family Advocate should work with the family to identify what continued supports can be offered or what assistance can be offered to access needed resources. The slot will be filled with the next pregnant mother or infant/toddler according to priority pointing (see ERSEA policy,) however services will still be provided to the family for up to 8 weeks following termination of the pregnancy and utilize the Family Partnership process to determine a plan that best meets the individual needs of the family. In addition, the plan should consider how to best transition the family out of Early Head Start services in a supportive manner. The Family Advocate should consult with the Mental Health Services Manager in providing resources, feedback, and input into the development of the family support plan. These services should be outlined in the family support plan to address concerns and needs such as: medical, mental health, social services, nutrition, family planning, etc. Additional resources and services that may be drawn upon may include: WIC, family planning clinics, grief counseling, hospitals, primary care physician, mental health providers, and informational resources. In formulating the family support plan staff should utilize the Family Partnership process to address the needs of each member of the family.

In order to help prepare staff to support families after loss of pregnancy training and resources will be provided on an ongoing basis and continued to be addressed as needed during reflective supervision. In addition, the community assessment will address pregnancy loss and services available.