

**South Windsor Public Schools'  
Procedures for the Development of  
Student Individualized Healthcare  
Plans**

## **Purpose of an Individual Healthcare Plan**

An Individualized Healthcare Plan (IHP) is a written document, developed by the registered professional school nurse, based on the nursing process, and implemented for the individual student with medical diagnoses or disabilities, in order to promote the student's health and well-being, prevent serious or life-threatening symptoms, and support the student's participation in an inclusive learning environment (Washoe County School District, 2014).

As stated in the position statement of the National Association of School Nurses (2015):

*The registered professional school nurse, in collaboration with the student, family and healthcare providers, shall meet nursing regulatory requirements and professional standards by developing an Individualized Healthcare Plan (IHP) for students whose healthcare needs affect or have the potential to affect safe and optimal school attendance and academic performance... Development of IHPs is a nursing responsibility, based on standards of care regulated by state nurse practice acts and cannot be delegated to unlicensed individuals (National Council of State Boards of Nursing [NCSBN], 2005). It is the responsibility of the registered professional school nurse to implement and evaluate the IHP at least yearly and as changes in health status occur to determine the need for revision and evidence of desired student outcomes.*

## **Who Qualifies for an IHP?**

IHPs will be developed for students with health conditions or diagnoses who meet the following criteria:

- a. In the school nurse's judgment, after collaborating with parents and receiving appropriate medical documentation, the student is at moderate to high risk of experiencing a serious or life-threatening symptom during the school day.
- b. The student has a recent history of serious or life-threatening symptoms and/or hospitalizations.
- c. The student may require specific or complex preventative measures, emergency actions, or interventions.
- d. Due to his/her age, developmental level or other factor(s), the student is unable to accurately report or describe symptoms or take independent action to prevent or self-manage symptoms.

For chronic health conditions that are not serious or life-threatening (i.e. Diapering, hearing loss, etc.) but which may require classroom accommodations, the school's principal, associate principal, or special services administrator should be notified so that they can evaluate the student for a Section 504 Plan or Individualized Education Program (IEP) pursuant to the District's procedures.

## **Plan Development**

Annually, the school nurse is responsible for developing or updating a written IHP for identified students at his/her assigned school(s) and for distributing the IHPs to appropriate school staff.

Each student's IHP will be developed/revised by the school nurse after gathering information from a variety of sources that shall include, but are not limited to: 1) the parents/guardians; 2) the primary medical provider; 3) teacher, 4) administrator, or 5) other school personnel familiar with the student or family; and may also include 5) other professionals in the community who provide support to the student and family.

When developing an IHP, the school nurse will take the health and educational needs of the student into account and use the district's IHP template (attached). Additional information may be included based on the needs of the student. The IHP will address all possible facets of the student's school experiences, including but not limited to bus transportation, field trips, etc. When listing the student's health condition(s) in the IHP, school nurses should avoid using medical terms that are not easily understood or interpreted by non-licensed school staff.

An IHP must include an Emergency Action Plan for the students with life threatening health conditions include an Emergency Action Plan (EAP) for the purpose of providing written directives to school staff in the prevention of symptoms and specific actions to be taken for an individual student if symptoms occur.

Due to time constraints and unavoidable delays in obtaining students' updated medical orders and other current health information at the start of the school year, the school nurse may opt to send a student's prior year IHP to staff, with a notation that an updated version is pending.

Hard copies of the previous years' IHPs will remain in the student's CHR per Connecticut retention guidelines.

## **Section 504 and IEP Consideration**

The school nurse shall determine, in consultation with the director of special education [or other appropriate personnel], whether to refer each student with an IHP to a Section 504 team or a Planning and Placement Team (PPT) for evaluation. A student shall be referred to a Section 504 team for evaluation if the school nurse and director of special education determine that the student may i) have an impairment that substantially limits a major life activity; ii) have a record of such an impairment, or iii) be regarded as having such an impairment, as defined by Section 504 of the Rehabilitation Act of 1973. A student shall be referred to a PPT team for evaluation if the school nurse and director of special education determine that the student may have one or more of the disabilities listed under the Individuals with Disabilities Education Act (IDEA).

If the student has an existing Section 504 Plan or Individualized Education Program (IEP) or is being evaluated for a Section 504 Plan or IEP, the Section 504 team or PPT team, at a meeting that includes the school nurse, will discuss whether it is appropriate to incorporate the IHP into the Section 504 Plan or IEP. In instances where the Section 504 team or PPT determines it is

appropriate to incorporate the IHP into the Section 504 Plan or IEP, the school nurse will participate in the PPT or Section 504 team meetings at least annually, or more often to the extent the IHP or student's health condition addressed in the IHP is going to be discussed at any additional Section 504 team or PPT meeting.

### **Plan Distribution**

Any staff member having supervisory responsibilities for the student (i.e. classroom teachers, specialist teachers, paraprofessionals, cafeteria staff), will be notified annually, or more frequently if there is a substantial change in the student's health condition, about a student's IHP. If a student has an EAP, the staff member will be provided a copy.

The school nurse will revise, re-date and redistribute a student's IHP as needed throughout the school year if the student's health status changes or additional health information becomes available.

If the student's IHP includes delegated services, the school nurse must personally meet with the delegated staff to review all sections of the plan and ensure their understanding and competence in carrying out the written directives. In the event that delegated staff is absent, the school nurse or school administrator will meet personally with substitute staff to appraise them of the student's IHP/EAP to ensure there is continuity of services.

If a student with a health diagnosis or disability does not require delegated services, an email from the school nurse with the IHP attached will be sent to appropriate staff advising them to review the information, print a copy for the substitute teacher folder, and contact the school nurse with questions.

### **Student Confidentiality**

School staff with access to a student's IHP shall always comply with FERPA. When exchanging student information with non-South Windsor personnel, school nurses are to obtain written parent/guardian permission, or written permission of the student if the student is 18 years of age, to release confidential educational or health information.