Health Care Plan for Children with Special Health Care Needs

Intent statement
Children with special health care needs are defined as those who have or are at increased risk for, a chronic physical, developmental, behavioral, or emotional condition requiring related services of a type or amount that is beyond what is generally required for children. A collaborative approach in which the primary care provider and the parent/guardian complete an individual Health Care Plan for a child with special health care needs and the parent/guardian works with the child care staff to implement the plan is beneficial to all.

Procedure and Practice
Upon admission, or at the time of diagnosis, any child who meets these criteria of a child with special health care needs will have a Routine and Emergent Health Care Plan completed by their primary care provider in their medical home which includes the following:

- A list of the child’s diagnosis/diagnoses;
- Contact information for the primary care provider and any relevant sub-specialists (i.e., endocrinologist, oncologist, neurologist, etc.);
- Immunization records;
- Medications to be administered on a scheduled basis;
- Medications to be administered on an emergency basis with clearly stated parameters, signs, and symptoms that warrant giving the medication written in lay language;
- Procedures to be performed;
- Allergies;
- Dietary modifications required for the health of the child;
- Activity modifications;
- Environmental modifications;
- Stimulus that initiates or precipitates a reaction or series of reactions (triggers) to avoid;
- Symptoms for caregiver/teachers to observe;
- Behavioral modifications;
- Emergency response plans – both if the child has a medical emergency and special factors to consider in a facility emergency, like a fire;
- Suggested special skills training and education for staff.

The Health Care Plan will be updated after every hospitalization or significant change in health status of the child. The Health Care Plan is completed by the primary care provider in the medical home with input from parents/guardians, and it is implemented in the child care setting. Staff caring for the child with special health care needs should be trained on that particular child’s Health Care Plan by the parent of the child. The Child Care Health Consultant will be involved to assist with providing information, resources and training.
Children with special health care needs could have a variety of different problems including (but not limited to) the following:

- Asthma
- Diabetes
- Cerebral palsy
- Bleeding disorders
- Metabolic problems
- Cystic fibrosis
- Sickle cell disease
- Seizure disorder
- Sensory disorders
- Autism
- Severe allergy
- Immune deficiencies

*Some of these conditions require daily treatments. Others require observation for signs of impending illness or an emergency.

Communication between parents/guardians, the child care program and the primary care provider (medical home) requires the free exchange of protected medical information. Confidentiality will be maintained at each step in compliance with any laws or regulations that are pertinent to all parties such as the Family Educational Rights and Privacy Act (commonly known as FERPA) and/or the Health Insurance Portability and Accountability Act (commonly known as HIPAA).

Benefits of Inclusion in Child Care

- All children with special needs, including children with special health care needs, develop increased social skills and self-esteem from attending child care with other children.
- Families of children with special needs gain social support and develop more positive attitudes about their child.
- Children and families without special needs become more understanding and accepting of differences and disabilities.
- Caregivers/teachers learn from working with children, families, and service providers and develop skills in individualizing care for all children.

Health Care Plan template for Children with Special Health Care Needs
http://cfoc.nrckids.org/WebFiles/AppedicesUpload/AppendixO.pdf

For additional information on care plans and approaches for the most prevalent chronic diseases in child care, see the following resources.

**Asthma:** How Asthma-Friendly Is Your Child-Care Setting?

**Autism:** Learn the Signs/ACT Early at http://www.cdc.gov/ncbddd/autism/actearly/
Food Allergies: Guides for School, Childcare, and Camp
http://www.foodallergy.org/section/guidelines1/

Diabetes: Diabetes Care in the School and Day Care Setting
http://care.diabetesjournals.org/content/29/suppl_1/s49.full

Seizures: Seizure Disorders in the ECE Setting
http://www.ucsfchildcarehealth.org/pdfs/healthandsafety/SeizuresEN032707_adr.pdf

**Applicable**
This policy applies to all staff, substitute staff, parents and volunteers in the child care setting.

**Communication**
This policy will be reviewed with parents upon application and a summary copy will be included in the parent handbook. This policy will be reviewed with staff upon implementation, at orientation, and during annual staff training.

**References**


Kentucky Child Care Health Consultation Program [http://kentuckycchc.org](http://kentuckycchc.org)

**Reviewed by**

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Director/Owner

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Board Member

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CCHC/Health Professional

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Staff Member

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Parent/Guardian

**Effective Date/Review Date**
This policy is effective immediately. It will be reviewed yearly by the center director.