Individualized Healthcare Plan

Name	DOB Allergies:
School	Grade/Teacher
Parents/guardians	
Parents/guardians	
Physician	Phone number
Emergency Contact (#1)	Phone number
Emergency Contact (#2)	Phone number
Medical Diagnosis: Cerebral Palsy	
Vision Screening Score & Date:	
Hearing Screening Score @ Date:	
_	
Nursing Assessment:	
Seizures	Respiratory concerns
Feeding or eating difficulties	Cardiovascular impairments
☐ Vision	Skin problems
Hearing	□ Pain
Speech/language deficits	Learning Disabilities
Bowel/bladder problems	Intellectual Disabilities
Safety Impairments	Mobility/balance/posture
Muscle Impairments	concerns
(rigidity/tremors/contractures)	Social impairments

Additional Notes: Here I would give a brief depiction of the student and address the marked boxed into further detail. CP is such a vast medical diagnosis with so many variances, I find it best to highlight key issues above.

Johnny is a 13 year old male with CP in the 8th grade. No history of seizures. He has a peg tube for tube feeds and a trach (# 6 shiley). He has a bolus feed during lunch in a private room by the paraprofessional. Isosource 1.5 480ml. Tolerates well. Trach since birth related to pulmonary dysplasia. Minimal suction need, able to cough up most secretions on his own. He wears glasses for vision correction, but has no hearing deficits. He communicates with a communication board and tablet. He is minimally able to ambulate and requires the use of a motorized wheelchair. He has muscle rigidity and receives medication to assist. Johnny has no cardiovascular concerns. Currently, his skin is intact. Areas around his peg and trach have been known to show irritation in the past. Pain related muscle spasms is treated and per Johnny, 1 initials "alleviated."

Johnny does well in Mrs. Whatshername's class on a 504. No intellectual concerns noted. Assist x1 when up to use the bathroom. He requires cushioning around his bony prominences and braces on hands to prevent contractures. Within his classes, Johnny has established friendships, and working on establishing a few more outside the classroom.

Current Health status: Poor, fair, good, excellent and why? # of absences Good. Able to attend school most days. Verbalizes feeling "good."

Pertinent Past Medical History: surgeries/hospitalizations/birth circumstances
Prolonged hospital stay at birth, broncho-pulmunary dysplasia. Recurrent aspiration
pneumonia infections. Failure to thrive. Peg placed.

Social and Cultural Contexts: Family dynamics, religious/cultural concerns, access to care?

Lives at home with mom and dad. Fully involved in care and school. No religious/cultural constraints. Receive great care via dad's insurance

Current Academic and School Function: requiring special education or not? Grades? Participation outside of school in activities?

Currently on a 504 in the general curriculum. Receives mostly Bs. Partakes in debate club.

Nursing Diagnosis:

Risk for injury related to neuromuscular impairment as evident by assist devices and gait disturbances.

Goal: Student will remain free of injury during school

Nursing Interventions:

- Nurse will assess physical environment to ensure safety (non-skid surfaces, hand-rails, wheelchair brakes locked, etc)
- 2. Staff will be educated on the use of assistive devices/maintenance (braces, wheelchairs, etc) and response to emergencies (see EAP)
- 3. Discuss with parents: adaptive devices, equipment, and other strategies used at home to minimize injury while allowing for independence.
- 4. Collaborate with physical therapy to optimize gait and increase muscle strength.

Evaluation:

- Student will be free of injury.
- Any injuries incurred will be reported and evaluated to prevent reoccurrence.

Nursing Diagnosis:

Potential for altered nutrition/ fluid intake related poor muscle tone, spasticity and contractures as evident by dysphagia, feeding tubes, and aspiration risks.

Goal: Student will maintain adequate nutrition and fluid intake while at school

Nursing Interventions:

- 1. Nurse will coordinate to maintain the prescribed feeding and fluid schedule per parents/guardian/physician/nutritionist.
- 2. Nurse will ensure the appropriate assistance, time, and preparation for student's consuming.
- 3. Nurse will ensure proper delegation according to the State Nurse Practice Act. Nurse will ensure that staff are properly trained on assisting child with feeding and fluid administration and when to report problems. Nurse will keep a checklist, training sheet, and review of skills, and evaluation will be documented. Nurse will periodically review, evaluate, and document.

Evaluation:

• Consult with student's healthcare provider for assessment of growth patterns.

- Parents provide information from appointments.
- Student gains weight appropriately

Nursing Diagnosis:

Self care deficit related to neuromuscular and musculoskeletal impairment, contractures, and decreased muscle strength as evidenced by limited range of motion and limited ability to perform gross and fine motor skills and postural instability

Goal: The student will engage confidently in self-care activities within their abilities

Nursing Interventions:

- 1. Intra-disciplinary team will foster self-care on an individual basis to student.
- 2. Health Services staff will encourage student to assist in their own care as age and capabilities permit.
- 3. Refer to occupational therapist or physical therapist for equipment adaptation needs.
- 4. Nurse or delegated staff will assist with toileting/ambulating/feeding student as scheduled and PRN.
- Nurse will provide feedback to MD and family regarding level of functioning at school

Evaluation:

- The student engages in self-care activities
- Will achieve a sense of competence and mastery

Nursing Diagnosis:

Impaired physical mobility related to neuromuscular impairment and movement/balance concerns as evident by gait and/or use of assist devices.

Goal: Student will have no skin breakdown. Students will participate in evacuation drills.

Interventions:

- 1. Proper positioning, turning, and cushioning will be collaborated with occupational therapy to maintain skin integrity
- 2. When performing bowel and bladder functions, skin will be assessed by delegated personnel.
- 3. Medications will be administered via delegated staff or school nurse as prescribed to alleviate muscle rigidity, tremors and spasticity.
- 4. Nurse will develop evacuation procedures for students and educate staff in the event of an emergency and will be practiced until competent, and thereafter, annually.

Evaluation

- Skin will remain intact
- Evacuation plan in place and rehearsed for emergencies

Nursing Diagnosis

Chronic self-esteem disturbances related to diagnosis of chronic illness with multiple unknowns.

Goal: Student will express a positive self-image

Interventions:

- 1. Nurse will monitor and assess students for maladaptive behaviors, ineffective coping mechanisms, and signs of depression.
- 2. Health Services team will encourage normal life events. Maximize involvement of the child in school activities. Plan and support the child's attendance on field trips. Advocate and support the child's attendance in extracurricular activities.
- 3. Collaborate with family and counselors to promote positive self-esteem

Evaluation

- The student will express feelings and concerns
- Student will develop positive relationships with peers
- Student will succeed in school as evidenced by attendance, grades, and other school achievements.

Nursing Diagnosis:

Pain related to related to multiple etiological sources (muscle spasms, contractures, constipation, gastric reflux) as evident by student's verbal cues, facial grimaces, and muscle tension.

Goal: Student will rate pain 3/10 or below

Interventions:

- 1. Nurse will discuss with parents non-verbal cues for pain in the student. Educate staff on these cues, so that student can be monitored.
- 2. Nurse/staff will administer medications as necessary to alleviate muscle spasms, constipation, gastric reflux, and other musculoskeletal concerns.
- 3. Collaborate with occupational/physical therapy so that braces and assist devices are not causing pressure points. Establish a turning and positioning schedule. Keep skin dry.

Evaluation

- Student will remain free of pain during school hours
- Student will have pain appropriately treated during school day.

Nursing Diagnosis

Impaired Verbal Communication related to neuromuscular impairment as evident by a decrease or absence of the ability to use or understand language.

Goal: Student communicates in a manner that can be understood by others

Interventions:

- 1. Nurse will assess vision annually and hearing as indicated by MD. Appropriate referrals made.
- Utilize technology support specialists/speech and language pathologists to incorporate latest technology in providing learning assist devices to student. Assess students academic growth with these tools. Monitor that devices are working properly as per recommendations.
- 3. Nurse will collaborate with parents on tools and resources used at home for communication.
- 4. Health Services will foster as much interaction as possible for student within their means

Evaluation

Student is communicate with school staff and peers

Nursing Diagnosis

Ineffective breathing related to lack of muscle strength and decreased lung expansion as evident by the need for oxygen, chest physiotherapy, suctioning, tracheostomy, etc.

Goal: Student maintains an effective breathing pattern.

Nursing Interventions:

- 1. Nurse will provide respiratory care and medication as prescribed by MD, and based on clinical need.
- 2. Nurse will ensure that all equipment is working and properly maintained.
- Nurse will train and review delegated staff on proper technique in performing care, require demonstration-back of procedures and provide further resources as necessary according to Ohio legislation. Proper documentation of these interventions recorded.
- 4. Provide staff with education regarding signs and symptoms of respiratory distress.
- 5. Collaborate with family and MD regarding the care, treatment regimen, and concerns pertaining to the student.

Evaluation:

- Student denies difficulty breathing.
- Staff able to identify signs and symptoms of respiratory distress

A student with CP has so many possible nursing diagnoses. I tried to pick the topics most relevant to school, safety and academic performance and still keep it generalized for the sake of a template usage.

Parent/Guardian: I/We have read this plan and agree to its implementation. The Emergency Action Plan (EAP) is attached and will be provided to all personnel who are involved in the daily supervision of the student.

Parent Signature:	Date:
Student Signature:	Date:
IHP prepared by:	Date:

List of Resources for those caring for student with Cerebral Palsy (According to Selekman, it is the nurse's responsibility to develop a list of resources should anyone require assistance or troubleshooting equipment.)

https://www.cincinnatichildrens.org/health/c/cerebral-palsy

https://www.cdc.gov/ncbddd/cp/facts.html

Below these videos illustrate the variances of people affected by CP along with key manifestations

https://www.youtube.com/watch?v=pm6BnzsqQbQ

https://www.youtube.com/watch?v=dERm_hShTuQ

Important phone numbers for those caring for student

Parents/Guardians:
Physician:
Physical Therapy:
Occupational Therapy:
Respiratory Care Services
Home Health Services
Other Important Numbers

Emergency Action Plan

Student Name	DOB
Parents/Guardians names	
Phone numbers	
Grade Homeroom Teacher	<u> </u>
	Picture of Student
In the event of an emergency,student's special assistance related to their medical condition	•
equipment medically necessary in the immediate full emergency preparedness bag) shall too be transported assistance will be sought.	uture (ie oxygen, ventilator, orted and stay with the student within

In the event of severe weather: Delegated staff will walk/transport the student to designated safe area and stay there with student until further notice.

In the event of a Lock down: Delegated staff will place the student in the safest location deemed possible given circumstances and location. Emergency personnel would be notified of location as soon as possible.

In the event of a building evacuation: Delegated staff will walk/transport the student to designated area outside the building and stay with the student until further directed.

Emergency Bag Items (developed in collaboration with parents/guardians/nurse/teachers to ensure student's safety. Individualized per student)

- 1. Special medical equipment (medication pump, ventilator, oxygen, etc)
- 2. Medications (inhaler)
- 3. Communication needs/devices
- 4. Social narrative tool (board to illustrate key ideas and maintain quiet)
- 5. Incentives to keep student guiet candy
- 6. Pertinent medical information card

References

National Association of School Nurses. (2015). *Individualized healthcare plans: The*role of the school nurse (Position Statement). Silver Spring, MD: Author.
Outlined the nursing process and the development of IHP

Cerebral Palsy. (2019, June). Retrieved from https://www.cincinnatichildrens.org/health/c/cerebral-palsy worked well as a quick resource on a student's condition

Selekman, J., Shannon, R. A., & Yonkaitis, C. F. (2019). *School nursing: a comprehensive text*. Philadelphia, PA: F. A. Davis Company. utilized in the development of assessment process

IHP Templates. (n.d.). Retrieved from http://www.txsno.org/tsnoresources/ihptemplates did not pertain to my health concerns, but developed an idea of how the template should flow

(N.d.) Retrieved from http://portal.nasn.org/text/6905 W22 7 001-002.pdf

Silkworth, C., Arnold, M., Harrigon, J., and Shipley Zaiger, D. (2005). *Individualized Healthcare Plans for the School Nurse. Saskatoon, Canada:* Sunrise Publishing. Retrieved from

https://www.schoolhealth.com/media/pdf/IHP GUIDE.pdf

I found this site most helpful in dealing with the concerns of children with chronic illness. I would further use this as a resource in addressing long-term care goals

Self-Care Deficit – Nursing Diagnosis & Care Plan. (2017, September 23). Retrieved from https://nurseslabs.com/self-care-deficit/utilized in the development of care plans

Individualized Healthcare Plans. (n.d.) Retrieved from https://education.ohio.gov/getattachment/Topics/Other-Resources/Diabete
s-Management/10-ODE-IHP.pdf.aspx

Great reference for IHP development. Clearly states that EAP should address the evacuation of students in the event of an emergency. I included this as an EAP b/c the majority of CP students suffer from mobility issues.

Clark, L., Embury, D., Jones, R., & Yssel, N. (2014). Supporting Students With Disabilities During School Crises A Teacher's Guide. *Teaching Exceptional Children*, *20*(10), 1–10. Retrieved from http://crcog.org/wp-content/uploads/2017/12/Supporting-Students-with-Disabilities-During-School-Crisis.pdf

Provided a great resource for developing Evacuation plan for children with disabilities

Burke, M. J. (n.d.). Marin County. Retrieved from https://www.ssdmo.org/cool_tools/inclusive/Resources/emergency_plan.p dfhttps://www.ssdmo.org/cool_tools/inclusive/Resources/emergency_plan. pdf

Did reference in EAP development, but most ideas were impractical to implement

Clark, S. (2015). *New Rules for School Safety plans*. Ohio School Boards Association. Retrieved from

https://www.ohioschoolboards.org/blogs/legal-ledger/new-rules-school-safety-plans

DeWine, Mike. (2018). Active Shooter Response: An Educator's Guide. *Active Shooter Response: An Educator's Guide*. Retrieved from https://www.ohioattorneygeneral.gov/Files/Publications-Files/Publications-for-Schools/Active-Shooter-Response-Companion-Workbook.aspx

In the 2 sites above, I tried to see what Ohio has developed in terms of emergency action plans for evacuations. Unlike other states, Ohio does not mention accommodations for those with disabilities.