



FACT SHEET

ECELS Care Plan for a Child with Special Needs in Child Care

The Definition of a Child with Special Needs:

A child who has or is at increased risk for chronic physical, developmental, behavioral or emotional conditions and who requires health and related services of a type or amount beyond that required by children generally.

WHICH Enrolled Children Have a Special Need?

One in four children has a special need. Many child care providers enroll children who have a developmental delay. Some receive services from a specialist. Ideally, the specialist shares techniques the adults in the child's life can use to improve the child's delay every day. The same should be true for a child with asthma, a seizure disorder or a peanut allergy. An excellent way to learn more about children with special needs is to complete the online self-learning module from ECELS called: "Caring for Children with Special Needs."

WHO Needs a Care Plan?

Child care staff members should have a special care plan for any child who has a chronic medical or developmental condition. Care plans should specify daily care, and care for any situations when the child might require special care, including an emergency. An excellent reference book for providers is ***Managing Chronic Health Needs in Child Care and Schools: A Quick Reference Guide***, Ed. Elaine A. Donoghue, MD, FAAP and Colleen A. Kraft, MD, FAAP. This book offers policies and procedures necessary to consider in child care. It has over 35 quick reference sheets for specific conditions.

WHY Do Early Care and Education Providers Need Care Plans?

Providers need as much information as possible about the daily and emergency needs of all children. Include a Care Plan for Children with Special Needs in Child Care in your facility's admission packet. This lets parents/legal guardians know what type of information the program needs. Ask the parent/guardian to give the completed form to the program before the child's first day. The care plan guides plans for the care of the child and for education of the staff members.

Every program needs general policies and procedures for medication administration. Each child who needs medication should have the details specified in the care plan as well. Some children need special diets, adjustment of their activities or the environment. Some require an individual plan for medical and facility emergencies.

WHO Is Responsible For The Care Plan?

Every adult involved in the child's care must know and be able to implement the plan! The child's health care provider should complete the care plan. The parent/legal guardian must help the health care provider understand what the child's program must know, in non-medical terms. For some children, the parent/legal can complete most of the form. Then the health care provider should review and add any needed information. For a child with a complex condition,

parents should schedule an office visit with the health care provider to discuss and complete the form. The ECELS Care Plan has sections to make it easy to fill out those that apply to a specific child. Some children will have more than one health care provider or specialists who will contribute additional medical or educational information (i.e. IFSP, IEP)

WHAT Should A Care Plan Include?

The care plan may be very simple or complex depending upon the child's needs. Possible content includes:

- Contact information for families, doctors, including important sub-specialists
- Medical conditions(s) or behavioral concern(s)
- Allergies
- Medication(s)
- Medical procedure(s)
- Special diet
- Special instructions for classroom accommodation for play, nap, toileting, outdoor activity or transportation
- Special equipment or supplies
- Special training or instruction staff may need.

Instructions for Completing the Care Plan for Children with Special Needs

(See the Care Plan form at the end of this description.) A care plan should be updated to note changes in the child's medical condition or routinely whenever the child has a routine check-up. In Pennsylvania, many child care programs use the PA CD 51 (Child Health Assessment) form to collect information for the child care program at each checkup. The CD 51 has sections to note medical conditions, behavioral concerns or medications which the child may require while in care. If the completed CD51 form indicates that any of these conditions exist, the child's health care provider should complete a Care Plan too.

The following gives details about each part of the ECELS Care Plan Form.

Child's present weight: The child's current weight is important for EMS providers to determine medication dosages in an emergency.

Parent's/Guardian's name: Be sure to put a * by the person you want to be contacted first and that person's phone number.

Signature for consent: Parent(s)/guardian should be sure to sign this box. This gives consent for health care providers to communicate with the child care provider about the care plan.

Authorization for release of information form completed: Federal law requires that a parent/legal guardian sign a HIPAA consent form for medical professionals to share information from a child's medical record, although release of information to school health personnel is sometimes permitted without specific consent. It is best to give the authorization to the health care provider rather than depend on an exception to what most health care providers consider their routine requirement. This form specifies exactly what portions of the medical record parents/legal guardians want released.

Specialty Provider: Children with chronic medical problems may have one or more specialists. For example, a child with severe asthma may have an allergist or pulmonary specialist who is primarily responsible for medication adjustments, or determining when a visit to the emergency

room is necessary. A pediatrician, nurse practitioner or family doctor might make these decisions without involving a specialist too.

Emergency Information Form for Children with Special Needs Completed: The American College of Emergency Physicians and the American Academy of Pediatrics have developed a separate form to collect the information needed by EMS and emergency health care providers to take care of a child who is new to them. It summarizes the child's medical history. The child's health care professional should decide whether a child needs this form and then complete it.

Specialty Care Plan completed: For some children a medical specialist or support groups for their medical condition may have developed a specific care plan specific for their health problem (for example, asthma, food allergies, seizures). Note whether the parent/legal guardian and health care professional prefer that the child care staff members use these care plans. For a child with more than one chronic condition, a specialty care plan might best explain one condition and the ECELS Care Plan might best explain another.

Needed Accommodations: Children with some conditions might need special arrangements that other children in the program do not require. For example, Anthony, age 3 has milk, nut and hay allergies and asthma. Accommodations Anthony needs include: have his food brought from home and only served to him for all his meals, and special snacks for celebrations set aside for him. With parent consent, the program should post a written list of his allergies everywhere in the facility Anthony might go, perhaps with Anthony's photo attached so volunteers and visitors can be aware about which child the warning applies. Everyone must be vigilant about hand washing on arrival at the program each morning not only for infection control, but also to avoid exposing Anthony inadvertently to milk or nuts from someone else's breakfast. A nut free classroom would be best. His teacher should have immediate access to an EpiPen® kept close at hand and accessible to the teacher at all times wherever Anthony is. An easy way to make sure the emergency medicine is immediately available is to have whoever is supervising Anthony at any time is required to wear a fanny pack with an Epi-pen® while responsible for him. Everyone who is with Anthony during the day needs to recognize the symptoms of a severe allergic reaction, and how to use an Epi-pen® if necessary. In addition, the program might plan a field trip to somewhere other than to a farm while Anthony is in the class.

Recommended Treatment: Daily or emergency treatments may be necessary. In our example, Anthony may need to use a nebulizer or an inhaler with a spacer to receive asthma medications. Every teacher/caregiver who is responsible for Anthony needs to know how to properly assist Anthony with these treatments.

Medications Given at Child Care: The national American Academy of Pediatrics (AAP) developed a packet of three medication administration forms for child care providers to use: 1) An Authorization to Give Medication, to be completed by the parent/legal guardian, 2) A Form for Receiving Medication, to be completed by the child care provider accepting the medication, and 3) A Medication Log, to be completed by the child care provider giving the medication. This packet is available on the websites of ECELS (www.ecels-healthychildcarepa.org) and the AAP's Healthy Futures program (www.healthyfutures.org - Medication Administration curriculum.)

Medications Given at Home: Some children receive medication only at home for chronic conditions. In the event of an emergency, child care providers must be able to tell health care providers about all the medications a child receives.

Care Plan for a Child with Special Needs in Child Care

Today's Date _____

Full Name of Child	Birth Date	Child's Present Weight
Parent's/Guardian's Name (Please * first person to contact.)	Cell/Home/Work Phone #	Signature for Consent*
Emergency Contact Person (Name/Relationship)	Cell/Home/Work Phone #	* Consent for health care provider to communicate with my child's child care provider to discuss information relating to this care plan.
Primary Health Care Provider	Emergency Phone #	Authorization for Release of Information Form completed? <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
Specialty Provider	Emergency Phone #	Emergency Information Form for Children With Special Needs completed? <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
Specialty Provider	Emergency Phone #	Specialty Care Plan(s) completed? <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
Allergies <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please specify.		
Medical/Behavioral Conditions		
Needed Accommodations: (Please describe accommodation and why it is necessary.)		
Diet/Feeding		
Classroom Activities		
Toileting		
Nap/Sleep		
Outdoor or Field Trips		
Transportation		

Recommended Treatment	
Medications to be Given at Child Care <input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, Medication Administration Forms completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Specify medications on Medication Administration Forms.	
Medications Given at Home <input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, please list in additional information section or attach info.
Special Equipment/Medical Supplies <input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, please list in additional information section or attach info.
Special Staff Training Needs <input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, please list in additional information section or attach info.
Special Emergency Procedures <input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, please list in additional information section or attach info.
Other specialists working with this child <input type="checkbox"/> No <input type="checkbox"/> Yes	
Parent/legal guardian Signature Acknowledging Review of Above Information	
Additional Information/Comments on Child, Family, or Medical Issues	Additional Information Attached <input type="checkbox"/> No <input type="checkbox"/> Yes
Health Care Provider's Signature	Health Care Provider's Name Printed

Updated by Beth A. DelConte, MD, FAAP 8/2012