

Health support plan

for education, child/care and community support services*

CONFIDENTIAL

To be completed by the PRINCIPAL, DIRECTOR or HOME-BASED CARE PROVIDER, with the FAMILY and OTHERS as indicated below, for a child/student/client who requires individual health and personal care support in school, preschool or child care. This plan should be based on written health care advice from a health professional. It will involve risk assessment for staff in planning for the child/student/client. This information is confidential and will be available only to supervising staff and emergency medical personnel.

Worksite name _____

Name of child/student/client _____ Date of birth _____
Family name (please print) First name (please print)

Date of this plan _____ Date for next review _____

Complex/invasive health support

Does the child/student/client have complex/invasive health care needs? Yes* No

(eg gastrostomy or other tube feeding, postural drainage, routine oxygen, tracheostomy care, catheter/stoma management)

*Refer to attached notes to assist in the completion of this Health support plan

First aid

Is there any individual first aid requirement, other than basic first aid response? Yes* No

(eg in relation to asthma; anaphylaxis (including administration of prescribed adrenalin via an Epi-pen; administration of prescribed intranasal midazolam for seizure management; management of anxiety)

*Refer to attached notes to assist in the completion of this Health support plan

Routine supervision for health care-related safety

Is there a known recommendation for additional supervision for health care-related safety? Yes* No

(eg a medication authority for administration during times when the child/student is in the care of staff; identified risk of self-harm or suicidal thoughts and behaviours; illness-related problems)

*Refer to attached notes to assist in the completion of this Health support plan

Personal care

Is there a need for additional support with daily living tasks? Yes* No

(eg assistance with personal hygiene (nose-blowing, handwashing, menstruation management), continence care, oral eating and drinking, transfers and positioning)

*Refer to attached notes to assist in the completion of this Health support plan

Other considerations

Is there a need for additional support related to the wellbeing of the child/student? Yes* No

(eg related to psychological wellbeing; interrupted attendance; learning in other settings such as hospital and CAMHS programs; deteriorating health; grief and loss issues; palliative care)

*Refer to attached notes to assist in the completion of this Health support plan

Agreement

***This plan has been developed for the following services/settings:**

- School/education
- Child/care (including out of school hours care)
- Respite/accommodation
- Transport
- Outings/camps/holidays/aquatics
- Work
- Home
- Other (please specify) _____

When will this child/student commence attending school/preschool or childcare?

If not immediately, detail actions and timelines to enable attendance, and any interim provisions

Principal/director
or care provider _____ Signature _____ Date _____
Family name (please print) First name (please print)

Staff/contact person
(if relevant) _____ Signature _____ Date _____
Family name (please print) First name (please print)

Who, apart from the family and those listed above, will have a copy of this plan?

1. _____ Role _____
Family name (please print) First name (please print)

Signature _____ Date _____

2. _____ Role _____
Family name (please print) First name (please print)

Signature _____ Date _____

3. _____ Role _____
Family name (please print) First name (please print)

Signature _____ Date _____

Authorisation

*I have read, understood and agreed with this plan and any attachments indicated above.
I support use of this plan by supervising staff.*

Parent/guardian
or adult student/client _____ Signature _____ Date _____
Family name (please print) First name (please print)

Child/student _____ Signature _____ Date _____
Family name (please print) First name (please print)

Health support plan

for education, child/care and community support services*

Notes to assist completion of the Health support plan

The following notes are to assist schools, preschools and childcare services to complete a Health support plan for a child/student with individual physical or psychological health support needs.

The health support plan should:

- Comply with *Guideline: Health support planning in Education and Care Settings*
- Be based on this child/student/client's health care plan(s)
- Identify responsibilities to be undertaken by each of the parties to this plan – routinely and in an emergency
- Consider related support issues for siblings, peers, families and the wider community
- Encompass all settings, for example: classroom activities, excursions, camps, aquatics, out of school hours care, sport, transport
- Document provision of staff information and training
- Identify facilities and equipment accommodations
www.decs.sa.gov.au ▶ Facilities
- Identify processes for communications between all parties
- Identify processes for incident management, monitoring and review
www.decs.sa.gov.au/ohs ▶ OHSW audit

Complex/invasive health support

Does the child/student have complex/invasive health care needs? YES

For example gastrostomy or other tube feeding, postural drainage, routine oxygen, tracheostomy care, catheter/stoma management

If so, consider:

- Referral to the Access Assistant Program
- Record keeping required by the worksite

If a Health Support Officer is appointed from the Access Assistant Program, a *Worksite operational plan* will be completed to ensure everyone is clear about how this service will work with education/childcare staff. Consideration will need to be given to roles and responsibilities at the worksite and between home and the service.

First aid

Does the child/student have a known first aid need? YES

For example, in relation to asthma; anaphylaxis (including administration of prescribed adrenalin via an Epi-pen; administration of prescribed intranasal midazolam for seizure management; management of anxiety

If so, consider:

- Planning with/for the Ambulance Service
For example, ambulance access to the site; identifying who will call and meet the ambulance; whether the child/student will be accompanied and if so, who will do this – and how will they communicate with and get back to the worksite
- Medication and equipment storage – routine checking and accessing in an emergency.
Who needs to be notified at the time?
This includes emergency contacts and others, for example siblings, other teachers/support staff
- Documentation including completion of the first aid log, individual student logs/records and completion of accident/injury report requirements
- Other post-incident management including reviewing plans and procedures and possibly staff support and counselling, maybe accessing a personnel counsellor.

Routine supervision for health care-related safety

Is there a known recommendation for additional supervision for health care-related safety? YES

For example a medication authority for administration during times when the child/student is in the care of staff; identified risk of self-harm or suicidal thoughts and behaviours; illness-related problems;

If so, consider:

- Who is responsible for provision of this support and who will make sure it happens? This includes completion of agreed documentation/observation logs in relation to duties undertaken
- Where and how will documentation be kept?
- Are there any issues related to communication, for example a need for visual cues
- What about special times and settings, for example camps, excursions, swimming/aquatics, out of hours activities.

Personal care

Is there a need for additional support with daily living tasks? YES

For example assistance with personal hygiene (nose blowing, handwashing, menstruation management), continence care, oral eating and drinking, transfers and positioning

If so, consider:

- Student privacy, dignity, protection
- Safety for staff as well as students
Planning learning opportunities, including maximising self-management skills. Care and learning plans can assist with this.
Personal hygiene needs, including well placed soap dispenser, mirror, disposal systems, facilities for washing and changing clothing if required
- Storage, security and insurance for daily and spare aids and equipment
- Additional equipment such as a shelf, cupboard, change table, hoist, nappies, sanitary pads, nappy bin. See Special Education Resource Unit website: web.seru.sa.edu.au/
- Facilities such as two-way locking doors, ramps, rails, lift, tap and door modifications there is a facilities web ref for DECD.

Other considerations

Is there a need for additional support related to the wellbeing of the child/student, their family, peers, staff and other community members? YES

For example related to psychological wellbeing; interrupted attendance; learning in other settings such as hospital and CAMHS programs; deteriorating health; grief and loss issues; palliative care

Other considerations (cont)

- Individual curriculum planning: negotiated education plan, part-time attendance arrangement; part-time/short-term distance education; flexible assessment to accommodate interrupted attendance; planning for physical activity, camps, excursions, laboratory work; units of work that enable academic credit for learning done within the context of participating in treatment and care. Education Office support services e.g. the Special Educator can assist sites with this planning
- Environmental accommodations: minimize risks; provision of a quiet place; special provisions for worksite invacuation and evacuation
- Communication: within the worksite; between the site and family and health professionals
- Siblings: teacher mentor; community mentor.