

# Small Group, Large Group and School Age Child Care Licensing

**POLICY STATEMENT: Individual Health Care Plans**

All programs must maintain as part of a child’s record, an Individual Health Care Plan (IHCP) for each child with a chronic medical condition which has been diagnosed by a licensed health care provider as required by 606 CMR 7.11(3)(a)-(c). An IHCP ensures that a child with a chronic medical condition receives health care services he or she may need while attending the program.

Programs must develop an IHCP in collaboration with the parents/guardians, school age child who is

9 years or older (when appropriate), program educators and the child’s licensed health care practitioner, who must authorize the IHCP.

***The IHCP must include the following:***

* description of the chronic condition which has been diagnosed by a licensed health care practitioner
* description of the symptoms of the condition
* outline of any medical treatment that may be necessary while the child is in care
* description of the potential side effects of the treatment
* outline of the potential consequences to the child’s health if the treatment is not administered

An educator must have successfully completed training relative to a child’s ICHP. This training must be given by the child’s health care practitioner or, with the child’s health care practitioner’s written consent, by the child’s parent or the program’s health care consultant. The training must specifically address the child’s medical condition, medication and other treatment needs. Some examples of an ICHP would include children with asthmatic conditions, allergic reactions, ADHD, or diabetic conditions. IHCP’s are *not* required for children *without* chronic conditions needing oral or topical medications.

In the event of an ***unanticipated***, non-life-threatening condition requiring treatment (as specified in the IHCP) the educator must make a reasonable attempt to contact the parents/guardians prior to administering the unanticipated medication or beginning the unanticipated treatment. If parent/ guardians cannot be reached immediately, they should be notified as soon as possible after the medication or treatment has been administered to the child.

Educators must ensure that they document the administration of all medications and medical treatments in the child’s medication/treatment log.

Written parental and licensed health care practitioner authorization shall be valid for one year, unless withdrawn sooner and must be renewed annually, *or when the child’s condition changes*, for administration of medication and/or treatment to continue.

Additional information regarding Individual Health Care Plans:

* + Educators with written parental consent and authorization of a licensed health care practitioner may develop and implement an Individual Health Care Plan that permits older school age children *who are 9 years or older* to carry their own inhalers and epinephrine auto-injectors and use them as needed, without the direct supervision of an educator. All educators must be aware of how the inhaler or epinephrine auto-injector will be kept secure from access by other children in the program. Whenever an IHCP provides for a child to carry his or her own medication, the licensee must maintain an on-site back-up supply of the medication for use as needed.
	+ A copy of the IHCP must be maintained in the child’s file. It is recommended that a copy of the IHCP also be located in the classroom.
	+ There must be one person trained in the implementation of a child’s IHCP whenever the child is in the care of the program.
	+ In addition to a licensed health care practitioner, training to implement an IHCP may also be given by the child’s parent or the program’s health care consultant with the licensed health care practitioner’s written consent.

Additional medication requirements to consider:

* + Emergency medication such as Epipens must be immediately available for use. For example, Epipens must be brought with children for outdoor play or walks as required by 7.11(2)(f). Training by a licensed health care practitioner for the specific administration of an Epipen is ***highly*** recommended but not required.
	+ All staff who administer medication of any kind must be trained in medication administration as required by 7.11(1)(b)2.

**Individual Health Care Plan Form**

**Plan must be renewed annually or when child’s condition changes**

*Check all that apply….*

**Plan was created by: Plan is maintained by:**

# Child’s Photo

 Parent

 Doctor or Licensed Practitioner

 Program’s Health Care Consultant

 Older school age child (9+ yrs. of age)

 Other:

 Director

 Assistant Director

 Child’s Educator

 Other:

|  |
| --- |
| Name of child: Date: |
| Any change to the child’s Health Care Plan?**YES** (indicate changes below) **NO** (updated physician/parental signatures required) |
| Name of chronic health care condition: |
| Description of chronic health care condition: |
| Symptoms: |
| Medical treatment necessary while at the program: |
| Potential side effects of treatment: |
| Potential consequences if treatment is not administered: |
| Name of educators that received training addressing the medical condition: |
| Person who trained the educator (child’s Health Care Practitioner, child’s parent, program’s Health Care Consultant): |

Name of Licensed Health Care Practitioner (please print):

Licensed Health Care Practitioner authorization: Date:

Parental/Guardian consent:

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Date:

***For Older Children ONLY (9+ years of age)***

With written parental consent and authorization of a licensed health care practitioner, this Individual Health Care Plan permits older school age children to carry their own inhaler and/or epinephrine auto-injector and use them as needed without the direct supervision of an educator.

The educator is aware of the contents and requirements of the child’s Individual Health Care Plan specifying how the inhaler or epinephrine auto-injector will be kept secure from access by other children in the program. Whenever an Individual Health Care Plan provides for a child to carry his or her own medication, the licensee must maintain on-site a back-up supply of the medication for use as needed.

Age of child: Date of birth: Back-up medication received? YES NO Parent signature: Date: Administrator’s signature: Date: