Every child with a chronic medical condition diagnosed by a licensed health care practitioner must have an Individual Health Care Plan on file at the program, even if there is no medication, or the medication associated with the plan does not need to be administered at the program.
**Do’s**

The IHCP Must have the following:

- Description of the chronic condition.
- The symptoms of the condition.
- Any medical treatment that is necessary while the child is in care.
- When to give treatment(s). If the plan has more than one treatment, make sure that it clearly states what medication to administer for each of the symptoms listed.
- The potential side effects of the treatment.
- The potential consequences to the child’s health if the treatment is not administered.
- The Educator(s) in the program must have been successfully trained in the child’s chronic medical condition/needs by the child’s health practitioner, or receive training by the parent or the program’s health care consultant, as authorized by the practitioner.
- Make sure that the plan is signed and dated by both the parent and the Health Care Practitioner annually.
- Make sure that the treatment listed on the IHCP is in the program while the child is in care.
- Medication must be stored in its original box with its original label.

**Don’ts**

- Don’t accept a plan that has missing information.
- Don’t have information or directions for the medication written as needed or a PRN (per request as needed).
- Don’t allow multiple chronic health conditions to be listed on one IHCP. A plan must be written for each chronic health care condition. (i.e. If a child has asthma and is allergic to bees, then this child would have two separate IHCP’s).
- Don’t change, cross out, or add information on the plan after it is created and signed by the doctor and parent.
- Don’t allow the child to attend the program unless the Director, Nurse, or designated staff has reviewed the IHCP and found it to be complete, and all related medication is provided.
- Don’t forget to check that the medication provided as listed on the IHCP is current. For prescription medications, the script and the date stamped on the medication has to be current; for non-prescription medications, the date stamped on the medication box must be current.
- Don’t provide a generic form of the medication treatment listed on the plan, unless the plan states such.

**Tips**

- When creating/obtaining an IHCP, make sure that it has all of the information listed in the “Do’s” section of this brochure.
- Make sure that a medication consent form is fully completed for each medical treatment that is listed on the IHCP. If the medication listed on the IHCP is a prescription medication, then the consent form only needs to be signed by the parent. If the medication is non-prescription, then the consent form must be signed by both the parent and health care practitioner.
- All medication listed on a IHCP is considered an emergency life-saving medication, therefore it has to be readily available for the child for which it is intended. This medication must follow the child whether indoors or outdoors.
- If an allergy/action plan is received, review it to make sure it has all the necessary information. If it is only missing the information about whom the doctor authorizes to train, and whom at the program will be trained, then the following should be added prior to the health care practitioner signing the IHCP: “I authorize the parent or program’s health care consultant to train {'name of program'} staff in my child’s chronic health care needs and treatment.”