



National Association of School Nurses

Position Statement *Individualized Healthcare Plans (2008)*

SUMMARY OF THE POSITION:

It is the position of the National Association of School Nurses (NASN) that students whose healthcare needs affect or have the potential to affect safe and optimal school attendance and academic performance require the professional school nurse to write an Individualized Healthcare Plan (IHP), in collaboration with the student, family, educators, and healthcare care providers. It is also the position of NASN that it is the responsibility of the professional school nurse to implement and evaluate the IHP at least yearly to determine the need for revision and evidence of desired student outcomes.

HISTORY:

The IHP is a written document that outlines the provision of student healthcare services intended to achieve specific student outcomes. The management of school healthcare services for students with significant or chronic health problems is a vital role for school nurses (National Association of School Nurses [NASN] & American Nurses Association [ANA], 2005). The standard for this role is based on the nursing process and must include: Assessment, Nursing Diagnosis, Outcome Identification, Planning, Implementation, and Evaluation. Documentation of these steps for individual students who have healthcare issues results in the development of Individualized Healthcare Plans (IHPs), a variation of nursing care plans. IHPs fulfill administrative and clinical purposes including management of healthcare conditions to promote learning; facilitating communication, coordination, and continuity of care among service providers; and evaluation/revision of care provided (Herrmann, 2005).

DESCRIPTION OF ISSUE:

Chronic mental and physical health conditions or disabilities can interfere with school participation and achievement. Many students with stable conditions, such as attention deficit-hyperactivity or mild intermittent asthma, require basic school nursing services such as health care monitoring or medication administration. Some students need specialized services and require an IHP, which may include an emergency care plan (ECP) and/or a field trip plan. The need for an IHP is based on required nursing care, not educational entitlement such as special education or Section 504 of the Rehabilitation Act of 1973.

Sometimes, students need the additional protections of federal laws in order to fully participate in an educational program. PL 93-112 Section 504 of the Rehabilitation Act of 1973 (also called Section 504) identifies criteria that indicate accommodations may be required (504 plan) for an eligible student. PL 108-446 (2004), the Individuals with Disabilities Education Improvement Act (IDEIA) entitles students who are eligible for special education to receive services that are necessary to access or benefit from their educational program. Special healthcare services are outlined in the Individual Education Plan (IEP). For special education students, the IHP may be included as an attachment to the IEP.

The nursing process “provides the framework for the delivery and evaluation of nursing care” to students (Denehy, 2004, p. 7). *The Scope and Standards of Practice* (NASN & ANA, 2005) outlines how each step of the

nursing process is implemented to strengthen and facilitate educational outcomes for students. These steps parallel components of a well-written IHP.

Standard 1. Assessment: The data collection phase helps determine the student's current health status and any actual or potential health concerns.

Standard 2. Diagnosis: The professional school nurse uses the assessment data to formulate a nursing diagnosis, including a diagnostic label, etiology, and presenting signs and symptoms.

Standard 3. Outcome Identification: The professional school nurse identifies the desired results of nursing intervention and states these in measurable terms.

Standard 4. Planning: Interventions are selected to achieve desired results.

Standard 5. Implementation: The written IHP is put into practice and care provided is documented.

Standard 6. Evaluation: The professional school nurse measures the effectiveness of nursing interventions in meeting the identified outcome. Changes are made to the plan as needed.

The school nurse must determine which students require an IHP, prioritizing those students whose healthcare needs affect their daily functioning or safety. These students may have multiple healthcare needs, require lengthy procedures or treatments, require routine or emergency contact with the school nurse or unlicensed assistive personnel during the school day, or require special healthcare services as part of their IEP or Section 504 plan.

Performance and documentation of the nursing process are professional school nursing functions that cannot be delegated (National Council of State Boards of Nursing, 2005). The registered professional school nurse is responsible and accountable for creating the individualized healthcare plan (IHP), for managing its activities, and for its outcomes, even when implementation of the plan requires delegation to unlicensed assistive personnel (NASNa, 2006).

The IHP is developed collaboratively with information from the family, the student, the student's healthcare providers, and school staff, as appropriate (NASN & ANA, 2005). The IHP includes medical orders implemented at school. Evaluation identifies progress toward achieving student outcomes. The IHP is reviewed at least annually, updated as needed, and revised as significant changes occur in the student's health status or medical treatment.

Standardized IHP's, printed or computerized, are available for common chronic pediatric health conditions. These standardized plans help promote continuity of care but individualization is essential in order to meet the unique needs of each student. In addition, NASN encourages the use of standardized language such as North American Nursing Diagnosis Association-International (NANDA), Nursing Interventions Classification (NIC) and Nursing Outcomes Classification (NOC) in IHP development (Denehy, 2004). Standardized language facilitates communication with other nursing staff and data collection, links student health care and education outcomes, and helps nurses evaluate correlations between interventions and outcomes (NASNb, 2006). Furthermore, the use of standardized language enhances development of a common knowledge base for school nursing which is essential for evidence-based practice (Poulton and Denehy, 2005).

RATIONALE:

Professional school nurses are leaders in the provision of special healthcare services. Through coordination of care among the school and the home, primary and specialty medical care, and clinics, school nurses ensure continuity of care across settings and minimize the risk for miscommunication (Taras et al., 2004). School nurses are also responsible for the training, direction, and supervision of both licensed and unlicensed personnel and the delegation of select nursing tasks as directed by individual state nurse practice acts (NASN & ANA, 2005). An IHP is the written document that captures these professional activities provided to individual students (Selekman, 2006).

References/Resources

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