

# School Health Documentation in Special Education Evaluations and IEPs

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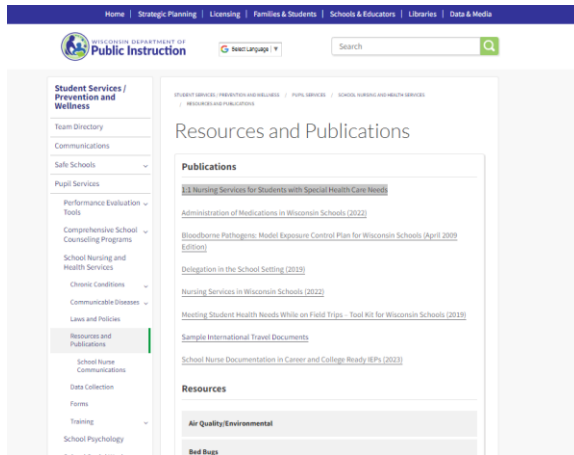


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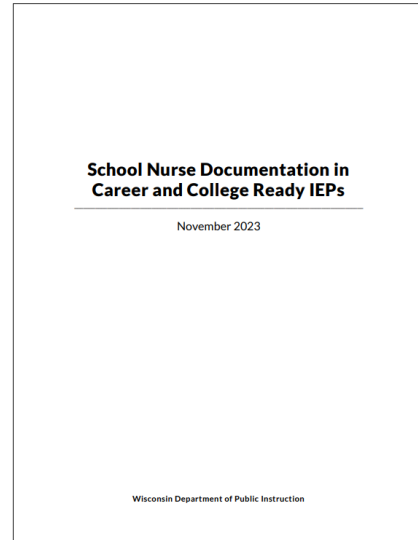
## By attending this session, you will be able to:

- Describe the importance of documenting health information in Special Education
- Explain the role of the school nurse in Special Education
- Identify where health information should be documented on ER-1, I-4 form, and OHI criteria sheet
- Determine possible language to use in such documentation
- Contrast health plans and IEP health documentation

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[https://dpi.wi.gov/sites/default/files/imce/sspw/pdf/School\\_Nurse\\_Documentation\\_in\\_Career\\_and\\_College\\_Ready\\_IEPs.pdf](https://dpi.wi.gov/sites/default/files/imce/sspw/pdf/School_Nurse_Documentation_in_Career_and_College_Ready_IEPs.pdf)



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## Comprehensive Evaluation

The Individuals with Disabilities Education Act (IDEA) requires special education evaluations be sufficiently comprehensive to identify the student's disability-related educational needs, **whether or not commonly linked to the student's identified impairment(s)**

34 CFR 300.304 (c)(6)

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## Documentation in Special Education

A student is to be assessed in all areas related to the suspected disability, including, as appropriate:

- health
- vision
- hearing
- social and emotional status
- general intelligence
- academic performance
- communicative status
- motor abilities

So need to document the results of these “assessments”

(IDEA 34, C.F.R. § 300.304)

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## Rationale and Requirements for Health Documentation in Special Education

Under special education law, two-part test to be considered a “child with a disability”

- ❖ First, does the child meet the educational eligibility impairment criteria for one of the disability areas that adversely affects his/her educational performance?
- ❖ And, as a result of the disability, does the child need specially designed instruction?

**Need BOTH so must document BOTH!**

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## **“Adversely affecting educational performance...”**

Educational performance may include:

- Cognitive performance, including academic and pre-academic skills.
- Communication skills.
- Personal/Social skills.
- Sensory processing and motor planning skills.
- Adaptive skills, including self-help skills

School nurses document in all and any areas for which they or team have information

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## **School nurses and IEPs**



School nurses may be involved in:

- Determination of (health) disability needs.
- Providing in-service training for staff regarding the individual health needs of the child.
- Provide and/or delegate to unlicensed personnel to provide specialized healthcare services in the school setting (requires supervision).
- Assist with transition planning related to chronic health conditions of a student.
- Documentation and billing for Medicaid school-based services.

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# School Nurses and Special Education Evaluations

Eligibility determination for special education services requires an individualized educational evaluation. This evaluation must draw upon a variety of sources and ensure that all information obtained is documented and carefully considered.

IDEA mandates that individuals with appropriate expertise in the area of concern should conduct the evaluation and determine additional data needed.

School nurses are the health care experts in schools.

School nurses often serve an important role in explaining how the impairment categories and medical diagnoses relate to each other.

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# School Nurses and Special Education Evaluations

School nurses are the health care experts in schools.

## IDEA and Section 504 Teams - The School Nurse as an Essential Team Member

**MAIN POSITION**  
It is the position of the National Association of School Nurses (NASN) that the registered professional school nurse (hereinafter referred to as a school nurse) is an essential member of a multidisciplinary education team that identifies, evaluates, and monitors students who may be eligible for services through the Individuals with Disabilities Education Improvement Act (IDEA) (2004) or Section 504 of the Rehabilitation Act of 1973.

**BACKGROUND & RATIONALE**  
Federal and state laws define and protect a student's right to education. Two, in particular, define how and what schools must do to support student learning when general education methods and supports are not enough. These are Section 504 of the Rehabilitation Act of 1973 and the Individuals with Disabilities Improvement Act of 2004.

Section 504 of the Rehabilitation Act of 1973 (Pub. L. 95-132) as amended through the Americans with Disabilities Amendment Act (ADA) in 2008 established legal support for individuals with disabilities, including students in federally funded programs and activities such as schools. This federal civil rights law ensures that every student is entitled to a free and appropriate public education (FAPE) (U.S. Department of Education, 2015). Under Section 504, FAPE provides a student with a physical or mental impairment that impacts one or more major life activities with related services and accommodations in the general education classroom. These services address the student's individual educational needs to achieve equity with nondisabled students. A physical or mental impairment under Section 504 standards can be from a chronic disease or condition, a disability, or an injury and necessitates an evaluation by and input from a school nurse to determine if access to learning is impacted.

In 1975, Congress enacted the Education for All Handicapped Children Act (Pub. L. 94-142), with numerous amendments that further defined and effected the meaning of disability as it relates to learning. The latest amendment titled the Individuals with Disabilities Education Improvement Act (2004) often referred to as IDEA or IIDEA includes specific provisions for identifying and evaluating students who may need special education services, its components, as well as procedural safeguards for implementation.

School districts are mandated to identify and evaluate all children who experience difficulty in accessing their education, regardless of severity, to determine if they qualify for education accommodations (such as 504 plans) or special education services (such as individual education programs). This mandate includes the related services of school nursing and health services as needed (34 C.F.R. 300.103). IDEA mandates that students receive a comprehensive, multidisciplinary evaluation conducted by individuals with the appropriate expertise in the area of concern.

The school nurse is the team member qualified to evaluate the health needs of the student, many of which may not be apparent without a thorough health assessment. If health-related barriers are not recognized, appropriately interpreted, and addressed, those students risk academic failure. Caution must be taken when an education team chooses not to evaluate a student's health or chooses to have non-



Medicaid **Topic #1475**

ESSA- SISP

PEDIATRICS  
OFFICIAL JOURNAL OF THE AMERICAN ACADEMY OF PEDIATRICS

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# Wisconsin Statute

## [DHS 107.36\(1\)\(e\)](#)

(e) *Nursing services.* Professional nursing services relevant to the recipient's medical needs are covered school-based services. These services include evaluation and management services, including screens and referrals for treatment of health needs; treatment; medication management; and explanations given of treatments, therapies and physical or mental conditions to family members or school district or CESA staff. The services shall be performed by a registered nurse licensed under s. [441.06](#), Stats., or a licensed practical nurse licensed under s. [441.10](#), Stats., or be delegated under nursing protocols pursuant to ch. [N 6](#). The services shall be prescribed or referred by a physician or an advanced practice nurse as defined under s. [N 8.02\(1\)](#) with prescribing authority granted under s. [441.16\(2\)](#), Stats., and shall be identified in the recipient's IEP.

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## Health documentation for an **evaluation** and **IEP**

Findings address the severity and nature of the health disability and how it affects the student's involvement and progress in the general education curriculum.

Contains enough health information to support allocation of resources, including services such as nursing, supplemental aids, support for school personnel, and accommodations.

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# Where to document health information

- Information From Existing Data (ER-1)
- Information from Additional Assessments and Other Evaluation Materials (ER1)
- Determination of Disability Category and Need for Specially Designed Instruction (ER 1)
- Need for Specially Designed Instruction (ER-1)
- Information about the Student- Functional Performance (I -4)
- Effects of Disability (I-4)
- Summary of Disability-Related Needs (I-4)
- Measurable Annual Goals (I-4) School nurse may or may not document goals.
- Statement of Supplementary Aids and Services (I-4)
- Related Services Needed to Benefit from Special Education (I-4)
- Program Modifications or Supports for *School Personnel* (I-4)

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## ER-I (Evaluation Form)

May 2022 latest version

EVALUATION REPORT INCLUDING:  
 THE DETERMINATION OF DISABILITY CATEGORY AND  
 NEED FOR SPECIALLY DESIGNED INSTRUCTION  
Form IEP-1 (Rev. 5/2022)

Page \_\_\_\_ of \_\_\_\_

SCHOOL DISTRICT \_\_\_\_\_

Name of Student: JUDYKA IEP's Student ID \_\_\_\_\_

Type of Evaluation:  Initial  Reevaluation

Date when the determination of disability category and need for specially designed instruction was made \_\_\_\_\_

The evaluation report must be sufficiently comprehensive to document the IEP team's determination of the disability category and need for specially designed instruction. The IEP team must include information about academic achievement and functional performance. [For additional information, see Guidelines for Special Education.](#)

**Discrepancies regarding all areas of concern identified in the referral or during the review of existing data must be included in this information from Existing Data and/or Information from Additional Assessments.**

**I. INFORMATION FROM EXISTING DATA** [Refer to the Student IEP \(Form\)](#) and Existing Data Review Form (ED-1) to ensure the data is reflected in this section. Must include information about the student's academic and functional **early literacy or reading** skills. Include information from any relevant areas identified as **concerns from the referral**. Bring the review of existing data related to **academic or functional IEPs**, such as achievement in content areas, cognitive learning, communication, **postsecondary** and self-determination, physical and health, social and emotional learning.)

**A. Information provided by**

Parent(s)/family:

Teachers, related service providers:

Other sources (e.g., postsecondary transition, medical, **IEP**, etc.):

**B. Summary of previous evaluations and assessments**

Classroom-based, district-wide or state assessment results:

Other evaluations and assessments:

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# Information from Existing Data

Information provided by teachers, related service providers and others:

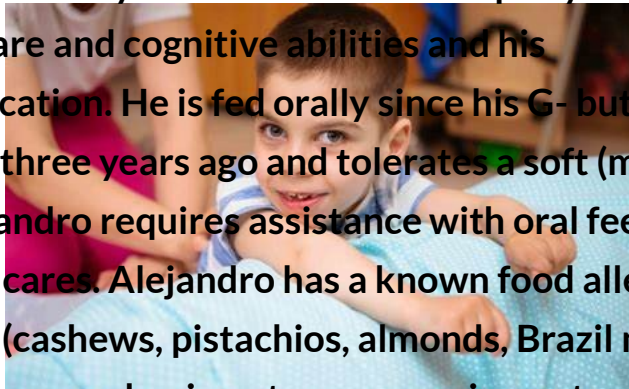
Document concise educationally relevant health history in language understood by educators. Known information before evaluation started.

Might include:

- Hearing and/or vision screening results
- Attendance pattern
- Medication schedule ( ex. how often comes to take on time)
- Level of self-care skills (requires assistance, totally dependent, independent, requires supervision)

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**Alejandro is a 5-year-old with cerebral palsy that affects his self-care and cognitive abilities and his communication. He is fed orally since his G- button was removed three years ago and tolerates a soft (mashed) diet. Alejandro requires assistance with oral feedings and daily cares. Alejandro has a known food allergy to tree nuts (cashews, pistachios, almonds, Brazil nuts, chestnuts, macadamia nuts, pecans, pine nuts, shea nuts, and walnuts) with history of anaphylaxis.**



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## INFORMATION FROM ADDITIONAL ASSESSMENTS AND OTHER EVALUATION MATERIALS

Include any information collected during the evaluation related to areas of concern (e.g., academic or functional skills such as achievement in content areas, cognitive learning, **communication**, independence and self-determination, **physical and health**, social and emotional learning).

### Functional:

- **Document information from assessment of situation.**
- **Classroom observations done after evaluation process started**

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### Information from additional assessments

#### Functional assessment (gathered during evaluation process)

A home visit was made by the school nurse on \_\_\_\_\_. Present were Alejandro, his mother and 2-year-old sister. Health records were reviewed at this visit. His food allergy to tree nuts was confirmed. Alejandro has emergency epinephrine ordered for any signs or symptoms of anaphylaxis or if tree nuts are inadvertently ingested. His hearing and vision have been professionally assessed and there are no concerns for either. Alejandro requires assistance with daily cares including feeding, diapering, and toileting. The school nurse was unable to understand Alejandro's verbalizations without interpretation by his mother. The school nurse did note Alejandro's frequent attempts to communicate and noted he did not seem frustrated but was observed smiling throughout the attempt. Alejandro was noted to walk using specially designed crutches. He also scooted on the floor on occasion.

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# Determination of Disability Category

School nurse may document on criteria sheet alone or in conjunction with other evaluation team members. Most common disabilities school nurse will be involved in an evaluation:

- Other Health Impaired (OHI)
- Orthopedically Impaired (OI)
- Traumatic Brain Injury (TBI)
- Emotional Behavioral Disability (EBD)



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# OHI Disability Checklist (Criteria Sheet)

Last updated  
5/2022

**CRITERIA FOR DISABILITY CATEGORY  
OTHER HEALTH IMPAIRMENT**  
Form ER-1-CH (Rev. 05/2022)

Date form completed \_\_\_\_\_ LEA \_\_\_\_\_

Name of Student \_\_\_\_\_ WISE# \_\_\_\_\_ LEA's Student ID \_\_\_\_\_

Initial Evaluation (Must complete all sections)  Renovation (Must complete all sections)

This form is provided to assist individualized education program (IEP) teams in one part of a comprehensive special education evaluation to document if a student meets the disability category criteria under Chapter 115, Stats., and PR 11.00, Wis. Admin. Code. The IEP team should complete this form to document whether or not the student meets the disability category criteria or contribute to meet the criteria during a reevaluation. Attach the criteria form to the Evaluation Report. IEP sample form ER-1, that includes additional information to determine special education eligibility.

Other health impairment covers hearing loss(es), visual, or otherwise, due to chronic or acute health problems. The term includes but is not limited to a heart condition, tuberculosis, muscular, nervous, respiratory, asthma, sickle cell anemia, hemophilia, epilepsy, head trauma, diabetes, or acquired brain injury caused by internal or external causes. [NOTE:](#) If your diagnosis from a licensed physician is not required for the IEP team to consider OHI, explain or reference data or evidence.

Criteria for the disability category of Other Health Impairment may be documented as follows (all **yes/no** questions must be checked **Yes**):

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**SECTION I. HEALTH CONDITION**

Yes  No Does the student have a health problem? (Including, but not limited to, a heart condition, tuberculosis, muscular, nervous, respiratory, asthma, sickle cell anemia, hemophilia, epilepsy, head trauma, diabetes, or acquired brain injury caused by internal or external causes or degenerative conditions. **NOTE:** If your diagnosis from a licensed physician is not required for the IEP team to consider OHI, explain or reference data or evidence.)

Yes  No Is the health problem chronic or acute? If yes, check ALL that apply.

- Chronic (long-standing, continuous over time, or recurring frequently). Explain or reference data or evidence.
- Acute (acute or intense). Explain or reference data or evidence.

Yes  No Does the student's health problem result in limited strength, vitality, or alertness? If yes, check ALL that apply.

- Limited strength (ability to perform typical or routine tasks at school). Explain or reference data or evidence.
- Limited vitality (ability to sustain effort or endure throughout an activity). Explain or reference data or evidence.
- Limited alertness (ability to manage and maintain attention, to organize or attend, to prioritize environmental stimuli, including a regulated attention). Explain or reference data or evidence.

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## Section I. Health Condition

Yes     No    Does the student have a health problem? (Including, but not limited to a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, diabetes, or acquired brain injuries caused by internal occurrences or degenerative conditions.) NOTE: **A prior diagnosis from a licensed physician is not required for the IEP team to consider OHI.** Explain or reference data or evidence:

School nurses can use the information from the ER-1 Functional Performance sections and from the Assessment and Diagnosis sections of an Individualized Health Care Plan.

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## Section I. Health Condition

**Alejandro is diagnosed with cerebral palsy a condition most likely caused by his traumatic birth history. His cerebral palsy affects his self-care and cognitive abilities and his communication. Alejandro has a known food allergy to tree nuts (cashews, pistachios, almonds, Brazil nuts, chestnuts, macadamia nuts, pecans, pine nuts, shea nuts, and walnuts) with history of anaphylaxis. Alejandro has emergency epinephrine ordered for any signs or symptoms of anaphylaxis or if tree nuts are inadvertently ingested.**

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## Acute or Chronic

Yes  No Is the health problem chronic or acute? If yes, check ALL that apply.

Chronic (long-standing, continuous over time, or recurring frequently). Explain or reference data or evidence:

*Alexandro was diagnosed with cerebral palsy during his first year of life after failure to meet developmental milestones and other neuromuscular concerns were noted by family and healthcare professionals.*

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## Acute or Chronic

Yes  No Acute (severe or intense). Explain or reference data or evidence:

*Alejandro experienced an allergic reaction later diagnosed as a tree nut allergy. He experienced a life-threatening reaction requiring emergency treatment and hospitalization.*

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## Strength, Vitality, or Alertness

Yes  No Does the student's health problem result in limited strength, vitality, or alertness? If yes, check ALL that apply.

Limited strength (inability to perform typical or routine tasks at school). Explain or reference data or evidence:

*Alejandro experiences spastic movements of both his arms and legs. This causes difficulty in grasping objects or using them as intended. For example, he is unable to direct a spoon to his mouth without help while eating. He is able to ambulate, but safety is a concern particularly as he enters kindergarten in a more crowded classroom with large numbers of other students.*

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## Strength, Vitality, or Alertness

Yes  No Limited vitality (inability to sustain effort or endure throughout an activity). Explain or reference data or evidence:

*Alejandro requires rest breaks as his muscles tire particularly when he is standing or ambulating.*

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## Section II. Educational Performance

- Yes     No    Is the student's educational performance in *one or more* of the following areas adversely affected as a result? If yes, *check ALL that apply. Consider both academic and nonacademic skills and progress.*
- Pre-academic or academic achievement
  - Adaptive behavior
  - Behavior
  - Classroom performance
  - Communication
  - Motor skills
  - Social/Emotional Functioning
  - Vocational skills
  - Other. *Describe:*

*Explain or reference data or evidence (required):*

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## Section II. Educational Performance

Alejandro requires additional assistance with activities of daily living not required of other kindergarten students (feeding, toileting, safety monitoring) Alejandro's verbal communication is often unintelligible to those unfamiliar with his communications. Alejandro is at risk for injury if he is exposed to his food allergens. Alejandro has a cognitive disability that affects his ability to self-advocate, protect himself from exposure to his allergens, or alert staff to symptoms of food allergy. Alejandro experiences spastic movements of both his arms and legs. This causes difficulty in grasping objects or using them as intended. He requires adaptations for holding objects such as a crayon or marker and needs assistance to direct his arm and hand movements. ]

*Special education teacher or other team members may document regarding academic achievement or also in other areas.*

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### Section III. DISABILITY CATEGORY CRITERIA DETERMINATION

- Yes     No    The documentation of the criteria above demonstrates limited strength, vitality, or alertness, due to chronic or acute health problems which adversely affects the student’s educational performance. The student meets the eligibility criteria under the disability category of Other Health Impairment. A student whose disability has an adverse effect on educational performance must be found to require specially designed instruction in order to be eligible for special education (document the need for specially designed instruction on the ER-1).

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## Need for Specially Designed Instruction

#### B. NEED FOR SPECIALLY DESIGNED INSTRUCTION

In order to be eligible for an IEP, the IEP team must determine that the identified disability(ies) adversely affects educational performance and the student needs specially designed instruction as a result. Specially designed instruction means adapting, as appropriate, the content, methodology, or delivery of instruction to address the unique needs of the student that result from the student’s disability; and ensure access of the student to the general curriculum, so the student can meet the educational standards of the public agency that apply to all students.

1. Describe **how the student’s disability affects their access, engagement and progress** in the grade-level general education curriculum, including how the disability affects academic or functional skills (e.g., achievement in content areas including early literacy/reading, cognitive learning, communication, independence and self-determination, physical and health, social and emotional learning).
2. Based on a root cause analysis of the effects of the student’s disability, describe the student’s academic and/or functional **disability-related needs**. What skills and/or behaviors does the student need to develop and/or improve so the student can meet age/grade level standards and expectations (e.g., decoding, identifying the main idea, basic math calculations, and word problems)?

*(The student needs to develop/improve...)*

1	
2	
3	
4	
5	

*(Add more rows, if needed.)*

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## Need for Specially Designed Instruction

Describe how the student's disability affects their access, engagement and progress in the grade-level general education curriculum, including how the disability affects academic or **functional skills** (e.g., achievement in content areas including early literacy/reading, cognitive learning, **communication, independence and self-determination, physical and health**, social and emotional learning).

**Include:**

**Level of self care skills ( requires assistance , totally dependent, independent in diabetic management, requires supervision)**

**Requires IHP or EAP**

**Health related needs**

Can use statements from OHI or other criteria sheets

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## Need for Specially Designed Instruction

Based on a **root cause analysis** of the effects of the student's disability, describe the student's academic and/or **functional disability-related needs**. What **skills and/or behaviors does the student need to develop and/or improve** so the student can meet age/grade level standards and expectations.

Alejandro experiences spastic movements of both his arms and legs related to his cerebral palsy. He requires assistance with self cares and feeding. Alejandro requires an emergency action plan to prevent and treat any exposure to tree nuts. Alejandro is at risk for injury if he is exposed to his food allergens. Alejandro has a cognitive disability that affects his ability to self-advocate, protect himself from exposure to his allergens, or alert staff to symptoms of food allergy. **Alejandro is not able to participate in his education if he is ill or injured after exposure to food allergens.**

(The student needs to develop/improve...)

- Ability to communicate symptoms of allergic reactions

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Photo by Philipp Berndt on Unsplash

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INDIVIDUALIZED EDUCATION PROGRAM: \_\_\_\_\_ Page \_\_\_\_ of \_\_\_\_  
 Linking Present Levels, Needs, Goals, and Services Form  
 Form 14 (Rev. 9/2022)

SCHOOL DISTRICT \_\_\_\_\_  
 Name of Student \_\_\_\_\_ WISEid \_\_\_\_\_ LEA's Student ID \_\_\_\_\_

**I. INFORMATION ABOUT THE STUDENT**

Information about the student, including strengths, effects of the disability/special factors, present level of academic achievement and functional performance, and any concerns must be considered when identifying the student's disability-related needs and developing goals and services to address those needs. Include strategies that have been effective in improving the student's academic achievement and functional performance and access to general education. Refer to [Form 14](#) for more information. **Parents are important members of the IEP team and are encouraged to share information throughout the process. The student should be included, whenever appropriate, and encouraged to provide input throughout the process.**

**A. Strengths**

Describe the student's strengths that can be used to engage the student in learning (including academic, cognitive learning, communication, independence and self-determination, physical/health, social and emotional learning).

**B. Current Academic Achievement and Functional Performance (including academic, cognitive learning, communication, independence and self-determination, physical/health, social and emotional learning)**

**Academic achievement** generally refers to a student's performance in academic content areas (e.g., reading, math, written language, etc.). For preschool children, academic achievement generally refers to knowledge and skills such as early language development, communication, early literacy, cognition and general knowledge. Academic achievement statements must include information about student achievement and/or progress compared to age-grade-level standards. Sources of information may include state, district-wide, or classroom assessments, rubrics, screeners, recent evaluations, etc.

1. Describe the student's present level of academic achievement (including reading achievement). For preschool children, describe the child's acquisition and use of knowledge and skills (including early language/communication and early literacy).

**Functional performance** includes activities and nonacademic skills needed for independence, access to instruction and performance at school, in the home, in the community, for leisure time, and for post-secondary and lifelong learning (including reading). Some examples include activities of everyday living, school/work site habits, health-enhancing physical activity and social and emotional skills. Functional performance statements must include information about student achievement and/or progress compared to age-grade-level expectations.

2. Describe the student's present level of functional performance). For preschool children, describe the child's positive social and emotional skills (including social relationships) and use of appropriate behaviors to meet their needs and the impact on early literacy.

Last revision 6/23

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## Information About the Student

**Functional performance** includes activities and nonacademic skills needed for independence, access to instruction and performance at school, in the home, in the community, for leisure time, and for post-secondary and lifelong learning (including reading). Some examples include activities of everyday living, school/work/play habits, health-enhancing physical activity and social and emotional skills. Functional performance statements must include information about student achievement and/or progress compared to age/grade-level expectations.

- Can cut and paste from ER-1.
- Concise health history that is educationally relevant and written in language educators can easily understand.
- Enough information needs to be documented to support allocation of resources (school nursing, school health and other aids and services).
- Can conclude with general nursing statement that also serves as justification for Medicaid billing and need for school nursing or school health services (see examples on form).

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### Functional Performance

Alejandro is a 5-year-old with cerebral palsy that affects his self-care and cognitive abilities and his communication. He is fed orally since his G- button was removed three years ago and tolerates a soft (mashed) diet. Alejandro requires assistance with oral feedings and daily cares including toileting. He wears a diaper as he does not have full bladder or bowel control and may have incontinence episodes between bathroom visits. Alejandro has a food allergy to tree nuts (cashews, pistachios, almonds, Brazil nuts, chestnuts, macadamia nuts, pecans, pine nuts, shea nuts, and walnuts) with history of anaphylaxis. Alejandro has emergency epinephrine ordered for any signs or symptoms of anaphylaxis or if tree nuts are inadvertently ingested. He has limited comprehension skills and limited ability to communicate which places him at increased risk of exposure and inability to communicate symptoms of an allergic reaction.

**Alejandro requires an emergency action plan and accommodations while at school to prevent the exposure to his allergens and respond effectively and efficiently if an exposure occurs to prevent death or disability. These accommodations and emergency response may be performed by the classroom teacher, or various school staff under the direction of the school nurse and building administrator utilizing school health and school nursing services.**

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## Other sample allocation of resources statements

- “Nursing and school health services are required to provide medication management and administration to maintain health status and attendance pattern in order to obtain IEP goals.”
- “Nursing services are required for the assessment and monitoring of xxx health condition/status; communicate with parents and healthcare providers; health planning, and medication treatments needed to minimize the impact of her health condition on the attainment of her IEP goals.”
- “School health services are required for medication administration so that xxx can concentrate and control his impulsivity in order to attain his IEP goals.”
- “XXX requires tube feedings to maintain nutritional status while at school. This tube feeding will be performed by the classroom teacher assistants under the delegation of the school nurse.

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## Effects of Disability

*Effects of the disability identifies how the student’s disability affects academic achievement and functional performance. The effects are what the IEP team observes when the student has difficulty accessing, engaging and making progress in the general education curriculum, instruction, and environments. This item must be addressed for all students, regardless of the areas of impairment, including students identified as speech and language only.*

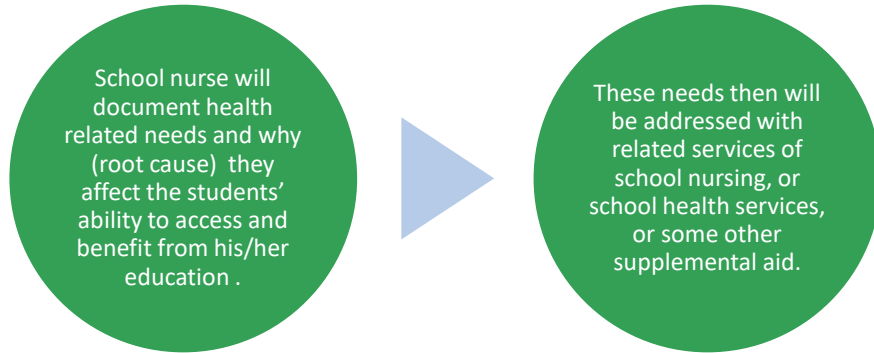
- **Identifies how the student’s disability affects health and academic achievement and functional performance.**
- **Similar to *Need for Specially Designed Instruction* in Evaluation Report**
- **Nursing diagnosis from IHP (nursing assessment ) may assist.**

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## Summary of Disability-Related Needs

A disability-related need:

1. Addresses the effect of the student's disability on access, engagement, and progress in the general curriculum and environment;
2. Addresses the root cause why a student is not meeting age/grade level academic standards and functional expectations; and
3. Specifies what skill/behavior the student needs to develop/improve so the student can meet age/grade level standards and expectations.



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## Root Case Analysis of Disability-Related Needs

- Organizational need
- Need to maintain safe blood sugar levels in order to concentrate
- Need to receive adequate nutrition
- Injury prevention (seizures, cerebral palsy, food allergies)
- Need to maintain breathing status (asthma, Cystic Fibrosis)
- **ADHD health condition that qualified student for OHI as it affected his vitality and alertness may have disability related need of organizational skills. This need then will be addressed with medication administration at school which is a school health service**

*(The student needs to develop/improve skill...)*

1	Ability to attend and concentrate which will be improved with medication they will receive under School Health Services
2	Need to receive adequate nutrition (G-tube) met with school health services.
3	Need to maintain normal blood sugar levels so can concentrate met with school health services (staff assists with blood sugar checks).
4	
5	

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## Measurable Annual Goals

Some districts may ask school nurse to write annual goals. This section is where health related self-care needs/goals of learning to be independent could be documented if such goals are critical to their educational success.

Otherwise suggest address student health outcomes in IHP (nursing care plan).

\* Goals are required if billing for Medicaid services (either in the IEP or a nursing care plan/IHP)

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## Program Summary Supplemental Aids and Services

### IV. PROGRAM SUMMARY

Include a statement for each of A, B, C and D below to allow the student to (1) access, be involved in and make progress in the general education curriculum, (2) be educated and participate with other students with and without disabilities to the extent appropriate, (3) participate in extracurricular and other nonacademic activities, and (4) advance appropriately toward attaining the annual IEP goals. Include frequency, amount, location, & duration (if different from projected IEP beginning and ending dates). The services must be stated in the IEP so the level of the LEA's commitment of resources is clear to the parent(s) and other IEP team members. At least one special education service must be specified; include other services, if needed.

Projected beginning and ending date(s) of IEP services & modifications from \_\_\_\_\_ to \_\_\_\_\_,  
 (month/day/year) (month/day/year)

#### A. Supplementary Aids and Services

Aids, services, and other supports (accommodations) that are provided in regular education, other educational settings, and in extracurricular and nonacademic settings, to enable students with disabilities to be educated with nondisabled students to the maximum extent appropriate. The amount of time specified for each service must be appropriate to the service and stated in a manner that can be understood by all involved in developing and implementing the IEP. *For each supplementary aid and service, identify the corresponding annual goal(s). In some situations, there may not be a corresponding goal. In those situations it is acceptable to identify the disability-related need(s). If assistive technology devices are provided, specify the type that will be used.*

None needed

Describe	Frequency & Amount <i>(describe the circumstances, if appropriate)</i>	Location	Duration	Addresses Goal(s) # _____	Addresses Need(s) # _____

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## Supplementary Aids and Services

Most likely will not relate to a “goal” but instead related to a disability-related need.

If can't use hours or minutes, then describe the circumstances under which the aid or service will be provided. For example, “whenever the student feels symptoms of low blood sugar levels.”

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## Statement of Supplementary Aids and Services (I-4)

List accommodations (similar to ones that could be on a 504 plan) that enable student with a disability to be educated with students without disabilities to the maximum extent appropriate. [ 34 C. F. R. §3000.34 and Wis. Stat. § 115.76 (16)].

Examples:

- extended time ( when taking graded exams)
- alarm clock (to remind to come to office to take medication)
- permission to leave class randomly (to check blood sugar)
- ability not to take test (if blood sugar out of normal range)
- wearing of percussion vest for student with cystic fibrosis (addresses need for adequate respiration)

***“Student will leave class early to provide safe mobility to class” frequency –daily every class period; amount -5 minutes; location- all classrooms- safety and fatigue prevention***

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## Related Services Needed to Benefit from Special Education

Related services can be **direct services** that involve hands on nursing interventions: medication administration, tube feeding, urinary catheterization, glucose testing, physical assessment or

**indirect services** which are provided on behalf of the student: calling parent to update IHP, communicating with medical provider to clarify orders, delegating nursing procedure to UAPs

- **School Nurse Services** – services provided by a qualified school nurse
- **School Health Services**- services that may be provided by either a qualified school nurse or other qualified person

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## Program Modifications or Supports for School Personnel

- Document services and support that **teachers and school staff require** to they can help student reach IEP goals.
- Statement of nursing interventions that support educational staff.
  - School nurse will train staff...*
    - *to follow EAP*
    - *to observe for medication side effects;*
    - *to use rectal diastat; in seizure management.*

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## Program Modifications or Supports for **School Personnel**

“School nurse develops and maintains an Individualized Health Plan (IHP-nursing care plan), Health Plan, or Emergency Action Plan (EAP) that addresses student health needs and the plan(s) is/are on file in the health office.”

As an EAP or Health Plan is directed to staff to support them in caring for the student, an additional statement “The school nurse has trained staff in the implementation of the Health Plan or Emergency Action Plan,” or “The school nurse has trained staff to respond to/manage students’ (seizures/diabetes/potential for anaphylaxis.” The school nursing and school health services provided should be documented under the Related Services section (C).

*“The parents have been provided a copy of the health plan. The school nurse has reviewed with the teacher.”*

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## How health plans fit into IEPs



A **School Health Plan** is not the same as an “**Individualized Healthcare Plan (IHP)**” which the school nursing profession has defined as the counter part of the nursing care plan used in health care institutions. **The IHP is created by school nurses to document the nursing process and is for use by nurses only.**

A School Health Plan is written to address health conditions that affect the health and safety of the student and are written to be followed and implemented by school staff. Health Plans may address both chronic and acute health needs. A Health Plan may address health care needs that affect or have the potential to affect attendance and academic performance.

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# How health plans fit into IEPs



- **Individualized Healthcare Plan (IHP)** –nursing care plan for School Nurse
- **Student Health Plan** – summary of health and safety needs of student for school staff
- **Emergency Action Plan (EAP)** - used by lay staff in an urgent or emergency situation



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## IHP – Individualized Healthcare Plan

- Foundational document from which other health information flows to other plans
- Uses and documents Nursing Process (Assess, Plan, Implement, Evaluate/Goals)
- Documentation of student health needs
- (Professional) Nursing care to be provided to meet needs
- Plan to evaluate the outcome of this nursing care

**SAMPLE Individual Health Care Plan (IHP)** Page \_\_\_\_ of \_\_\_\_

For health needs that may result in an emergency and/or need management or monitoring

Student Name: \_\_\_\_\_ Date of IHP: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Grade: \_\_\_\_\_ Medical Diagnosis: \_\_\_\_\_ Date Created: \_\_\_\_\_  
 Health Care Provider: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_  
 By: \_\_\_\_\_

Circle area of concern: Medical management, direct management, safety, vital functions, elimination, nutrition, rest, cognition.

NURSING ASSESSMENT	NURSING DIAGNOSIS	NURSING INTERVENTIONS	EVALUATION

**Individual Health Care Plan (IHP)** Page \_\_\_\_ of \_\_\_\_

For health needs that may result in an emergency and/or need management or monitoring involving a student's education

Medical Diagnosis: \_\_\_\_\_

Student Name: \_\_\_\_\_  
 School: \_\_\_\_\_  
 Grade: \_\_\_\_\_  
 Health Care Provider: \_\_\_\_\_ Date Initiated: \_\_\_\_\_

IHP Part of IEP Plan Yes/No: \_\_\_\_\_  
 Appropriate Nurse Signature or Credentials (Creator of IHP) and Date of IHP Creation: \_\_\_\_\_

Student has checked only those that apply:

Individualized Emergency Program (IEP) \_\_\_\_\_ IEP Part of \_\_\_\_\_  
 Emergency Action Plan (EAP) \_\_\_\_\_ Emergency Action Plan (EAP) \_\_\_\_\_

Nursing assessment: Health Conditions or Other Impairments Impeding the Student's Education and Participation in School Activities

Information Regarding Equipment or Other Special Information: \_\_\_\_\_

Nursing Assessment and Planning: This nursing assessment and planning is the creation of the IHP that included checks off that apply:  
 1 Student emergency care and health care management  
 2 Student emergency care and health care management  
 3 Information from emergency, accident, or other sources  
 4 Review of student records to include medical records, if available.

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# Student Health Plan (SHP)

20xx-20xx  
**Student Health Plan**

STUDENT:  
PARENTS:

Alternate Contact: \_\_\_\_\_

Health Concerns:

History:

Current Status:

Guidelines:

I was involved in the planning of, and/or agree with, the procedures identified in the above plan.  
I give permission for this information to be shared with appropriate staff at school.

School Nurse \_\_\_\_\_ Date \_\_\_\_\_ Parent \_\_\_\_\_ District \_\_\_\_\_

In case of emergency transport this sheet should accompany student.

Insert student picture

A Health Plan provides a summary of the health and safety needs of the student but does not necessarily address how those health needs affect the student's involvement and progress in the general education curriculum. A Health Plan may include specific aids and services (accommodations) that are required to meet the health and safety needs of the student or may support their attendance and academic performance such as monitoring blood sugar levels or receiving medication while at school.

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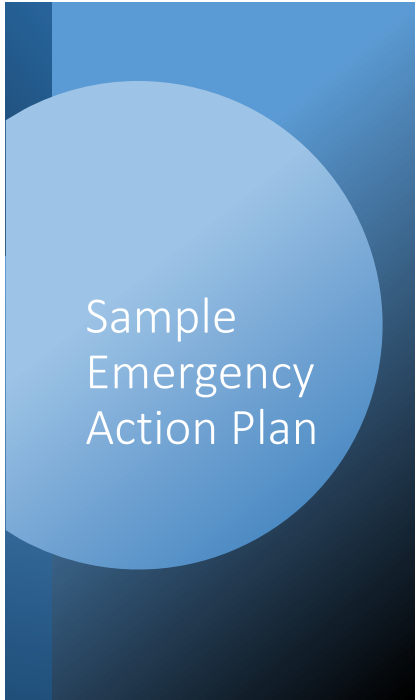
## Emergency Action Plan (EAP)

Maintenance of student's health and safety in an anticipated life-threatening emergency.

- Logical step by step order
- Understood by individuals with limited nursing/medical knowledge
- Shared with appropriate building staff



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**EMERGENCY ACTION PLAN**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 School: \_\_\_\_\_  
 Parents/guardians: \_\_\_\_\_  
 Grade: \_\_\_\_\_  
 Healthcare Provider: \_\_\_\_\_

Health Concern:	
If found unconscious/unresponsive, call EMS, initiate CPR Use AED	
IF YOU SEE THIS:	Do This:
Trained Staff Members:	
Emergency Medication Location:	

I was involved in the planning of, and/or agree with, the procedures identified in the above plan. I give permission for this information to be shared with appropriate staff at school.

School Nurse \_\_\_\_\_ Date \_\_\_\_\_ Parent \_\_\_\_\_ Date \_\_\_\_\_

In case of emergency transport this sheet should accompany student.

## Use of Health Plans

It is considered best practice by the school nurse profession, not to include a student’s Health Plan as an official (attached) part of the IEP document. If anything in the Health Plan changes (time student checks blood sugars, medication dosages, etc.) the IEP team would need to re-convene to make that change, or an I-10 form needs to be completed.

Instead, under the Program Modifications or Support for School Personnel section of the IEP document, school nurses can include a statement to the effect that “School nurse develops and maintains an Individualized Health Plan (IHP-nursing care plan), Health Plan, or Emergency Action Plan (EAP) that addresses student health needs and the plan(s) is/are on file in the health office.”



## School Nurses should attend IEP meeting because...

School nurses understanding of various health conditions and how they impact the education and educational performance of students cannot be underestimated. It is often said that school nurses bridge the healthcare and educational systems. This dual expertise of school nurses is evident in the documentation they provide for Special Education evaluations and College and Career Ready IEPs (DPI 2023).

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## Hopefully you are now able to:

- Describe the importance of documenting health information in Special Education
- Explain the role of the school nurse in Special Education
- Identify where health information should be documented on ER-1, I-4 form, and OHI criteria sheet
- Determine possible language to use in such documentation
- Contrast health plans and IEP health documentation

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## Lingering Questions?



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<https://dpi.wi.gov/sped/program/other-health-impairment>

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## Resources

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