#### SECTION 504 ACCOMMODATION PLAN

Student Name: Parent's Names:

Birthdate:

Grade: 2

Address: School:

Initial Referral Date:

Meeting date:

Reevaluation Date:

(team meeting prior to first day of classes)

Describe how the identified disability substantially limits a major life activity:

is diagnosed with severe hemophilia. is unable to care for himself during times of injury and trauma, which can lead to a life-threatening situation. may also lose some classroom and learning time when medical situations happen. will not be held responsible for tardiness due to his medical condition.

Accommodation/Action to be taken and person responsible:

After receiving documentation from parents and physician, 's Emergency Care
Plan and Individualized Health Care Plan (IHCP) will be written by the school nurse
and signed by 's parents.

2. All school staff will follow specific guidelines outlined in the Emergency Care Plan

and IHCP.

3. The school nurse and is mother will train the classroom teacher and all other designated staff who work with throughout the day regarding hemophilia. The mother may opt to bring a hemophilia nurse to any of these meetings.

4. The school nurse will instruct school staff in universal precautions regarding blood

spills.

- School staff who work with will read the attached sheet, "Hemophilia Quick Medical Reference for Educators".
- The school nurse will have extra information and a resource packet available for school staff regarding hemophilia.

7. School staff will maintain confidentiality and will discreetly speak to to protect

his self-esteem.

8. When injuries occur, school staff will remain as calm as possible.

- School staff will report any concerns to the school nurse for evaluation and referral to the parents.
- 10. School staff will send immediately to the school nurse when he has complaints or injuries and they will not keep waiting.

11. will wear a medic bracelet on his wrist.

12. The principal will provide adequate recess supervision.

13. When is outside of the school building, school staff will bring a walkie-talkie outside with them to reach the school nurse. The staff will also bring a bag containing an icepack for 's use.

#### - 504 Plan page 2

14. The Physical Education teacher will have a first aid kit and disposable cold packs available during P.E. class.

- 15. 's parents will be allowed to accompany him on any and all field trips and will not be part of a "lottery". They may accompany him on the field trip bus, if necessary. If a parent does not attend the field trip, then will be accompanied by his classroom teacher. 's care when off the school grounds cannot be delegated to anyone other than his parents or the classroom teacher. 's medical supplies and Factor VIII must always travel with him when he leaves school property.
- 16. The classroom teacher will leave the 504 plan accessible for all substitutes.
- 17. A school nurse will be on staff in the building during school hours. (9am-3pm)
- 18. 's parents will make the bus driver aware of his medical condition.
- 19. The staff of the Director of Buildings and Grounds will make sure the playground equipment is safe, stable and in good working order.
- 20. The school staff responsible for recess duty will send to the nurse for any type of injury.
- 21. The nurse will make the school staff aware of Jack's surgically implanted port in his upper right chest.

	The state of the s
Parent's Signature	Date
Principal's Signature	Date
School Couriselor/504 Coordinator	Date
School Nurse	Date
	2.4)
Classroom Teacher	Daté

Please note that this student has an inhibitor and, consequently, more significant physical challenges.

Not all of these accommodations may be appropriate for the student on successful prophylaxis.

Plan Expires

#### Section 504 Student Accommodation Plan

Student Number Student Name Student Street Grade 10 Student DOB School Home Phone Parent/Guardian

Describe the nature of the concern.

is a charming and engaging student who has had a very difficult 9th grade year. His complications with is a student with a Hemophilia have presented exceptional challenges for him to participate at school. medical diagnosis of severe hemophilia A (Factor VIII). Hemophilia is a rare bleeding disorder, which affects a person's clotting ability and usually affects soft tissue, muscles, joints, and internal organs. He is subject to limited motor ability during bleeding episodes, which may result in the need for crutches, wheelchairs, splints, and slings. Some severe bleeding episodes may result in bed rest or hospitalization. This year pain complications. He returns to school following episodes while still taking a lower dose of oxycontin. However, at times, neuropathic pain does not respond to medication. This can cause to have a very difficult time getting to sleep at night. The enormous volumes of pain for have resulted in numerous absences, tardies, and early dismissals from school. He had a medical exemption from all MCAS testing in 8th to to address his frequent bleeds. grade and surgery May 29,

Describe the basis for the determination of a handicapping condition/disability.

, a Hematologist from Children's Hospital in Diagnosis of severe hemophilia A (factor VIII) by Dr. as identified in an Inhibitor Patient Travel Letter written on

Describe how the handicap affects a major life activity.

's major life activities as they may cause an Bleeding episodes and/or pain management issues affect unusual amount of absences and/or tardies and a need for physical accommodation.

Describe the reasonable accommodations that are necessary.

'rior to the end of the first week of school in the fall, the SHS nursing staff will educate 's teachers as to his diagnosis, general presentation, and medical needs.

will be provided with a permanent pass to use the elevator throughout the year. 's mobility may be compromised due to his walking gait or bleeding episodes which will impact his prompt arrival to classes. He will not be penalized for such tardies.

Arrangements will be made by the SHS medical staff/504 Coordinator to accommodate building access near the front or attendance office when is on crutches or in a wheelchair & in need of parent transportation. will be provided with an opportunity to make up missed work. During periods of large numbers of

absences, home and school will prioritize make up work to be completed.

's allocated time for tasks will be increased as needed. He will be provided extended be fatigued or have and his teachers. Should time for tests, quizzes and projects as arranged by impeded writing due to an episode he may also demonstrate mastery of standards via alternative testing methods. (oral) In times of extensive absence the quality of make-up work should be prioritized over quantity. should not be penalized for late work or absences due to bleeding episodes.

feels it is appropriate. \*Allow access to the nurse's office without question whenever

\*Provide an extra set of books for home.

will notify teachers if \* The SHS medical staff, in conjunction w/communication from Mrs. should be given an opportunity to retake tests/quizzes that were given on days when he was in class, but not feeling his best due to an active bleed & the use of medication.

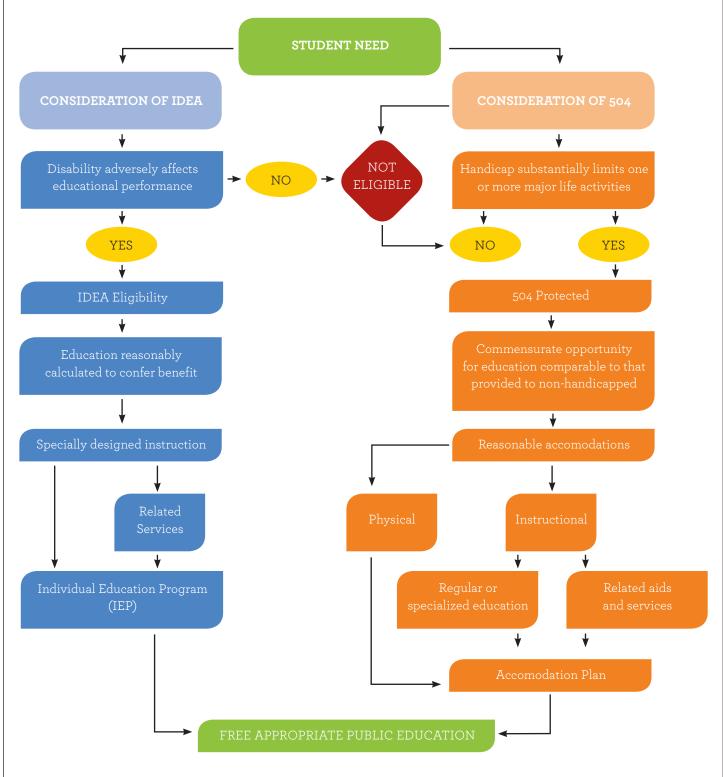
\* MCAS testing should be offered in a small group with frequent breaks as needed. Should a scribe be necessary

a doctor's note will be forwarded to the 504 Coordinator.

\* Due to someones from classes, will receive tutoring due to the symptoms and treatments for hemophilia per doctor's authorization letter. The district will pay an appropriate hourly rate, consistent with district rates, toward the fee of the tutors.

## IDEA/504 FLOW CHART

There are two laws for K-12 students in public school that may offer support and services for children with a bleeding disorder: the Individuals With Disabilities Education Act (IDEA) and Section 504 of the Rehabilitation Act of 1973. This chart will help determine which plan may be appropriate for your child.





Council of Administrators of Special Education, Inc. (CASE) – Student Access, A Resource Guide for Educators,

Section 504 of the Rehabilitation Act of 1973

See Special Education Handbook 2003, Appendix I, Classroom Accomodations, IDEA/504 Flow Chart http://www.eedstate.ak.us/tls/sped/Handbooko3/word/appisec1.doc (July 19, 2005).

### Reasonable Accommodations

- ❖ Walkie Talkies on playground
- Staff in-service
- ❖ Individualized Health Care Plan
- Schedule of Physical Education activities
- Extended travel time around building
- Extended time for homework/make-up work
- ❖ All medically related absences are excused with no loss of credit
- ❖ Field trips to include a nurse or parent
- Medications, needles and supplies maintained in the nurse's or central office
- Permanent pass to the school nurse
- Tutoring due to absences
  Health
- Physical education credits for participating in outside physical therapy
  Education Services, LLC
- ❖ Regular email contact from teachers regarding missed assignments
- Note takers
- Audio or video tapes of class lectures
- Extra set of books at home
- Homework posted on the school district internet
- Permanent pass for school elevator
- Locker position closer to waist level and near frequently traveled areas
- ❖ Seating to accommodate wheelchair, crutches, braces

Courtesy of Janet H Brewer M.Ed. Comprehensive Health Education Services



# STUDENTS WITH BLEEDING DISORDERS

This guide is meant as a starting point for discussions about how to best address the unique healthcare needs of students who have a bleeding disorder. It is important that YOUR hemophilia treatment center (HTC) be involved in these conversations from the start so that together you, the HTC team, and the school staff can appropriately address your child's individual needs.

#### Step 1: Nursing Assessment

Should include but not be limited to....

#### 1. Identifying Information / Contact Information

- Name of parent/guardian, address, phone, and emergency contacts
- ullet Name and phone number of primary care provider
- Name and phone number of hemophilia care provider

#### 2. Personal Health History / Hemophilia History

- · Family history of hemophilia
- · Initial diagnosis, progress of disease
- · Concurrent medical conditions
- History of hemophilia emergencies, hospitalizations, ER visits
- Number of days of school missed in the past year
- Limitation of activities
- Physical Education restrictions
- · Recess activities restrictions
- Student awareness of symptoms of excessive bleeding
- · Complications (target joints, inhibitors, etc.)
- Other medications in addition to factor
- Need and regimen for prophylactic factor

#### 3. School Hemophilia Management

- Factor Concentrate
  - > Brand name
  - > Dose, frequency, indications
  - > Method of administration
  - > Storage of factor at school
- · Administration of factor at school
  - > How dose is administered (i.e., port or other device, peripheral infusions, etc.)
  - > When factor will be administered at school
  - > Self-administered by student amount of supervision required

- > Administered by school nurse (Is it an option? Not all school systems will do this)
- > Administered by parent or visiting nurse
- > Ancillary supplies needed
- Equipment used (i.e., crutches, wheelchair, etc.)
- · Student's level of understanding and independence
- Access to the school nurse's office (i.e., case-by-case basis, permanent pass for the year)
- Student's medical alert identification such as bracelets, necklaces, shoe tags, etc.

#### 4. Educational Information / Considerations

- · School performance, grade level
- Need for 504 plan or IEP (see separate handout with more information on 504s and IEPs)
- Participation in special programs (i.e., field trips, school-sponsored activities, evening high school, alternative education program, work study, vocational programs, etc.)
- Transportation issues (in general, a student with hemophilia should not require special transportation, but each student's needs should be evaluated individually)
- · Availability and location of emergency supplies

#### 5. Psycho-Social Considerations

- · Family status, support available
- Family stresses and student's concerns
- Student's and family's understanding of the condition and ability to cope
- Developmental issues
- Disability awareness and/or bleeding disorder education to be provided to peers
- Involvement in community support groups
- Issues related to access to health care and hemophilia supplies, health insurance needs, any additional resources
- · Cultural issues
- · Adherence with hemophilia management plan



# Step 2: Individual Healthcare Plan (IHP or IHCP)

- A formal written agreement developed through a collaboration by the school staff, the student's family, and the student's health care provider(s)
- Identifies your child's health needs, and creates solutions to potential health problems that can occur in a school environment
- Provides a safe environment that helps your child learn and makes goals for your child's healthcare
- ullet The plan should address both routine and emergency care
- The plan should document what steps to take if the nurse is not available as well as what interventions the nurse will provide
- The plan should outline any classroom accommodations that may be needed, as well as guidelines regarding participation in PE, recess, field trips, etc.
- The plan should include information related to training school staff and educational planning

#### "Hallmarks" of a Good Individual Health Plan

- Contains information, guidelines & standards that promote a student's health & educational goals.
- Avoids unnecessary risk, restriction, stigma, illness & absence.

#### Step 3: Emergency Care Plan

(Some schools may include the Emergency Care Plan as part of the Individual Healthcare Plan)

- Types of injuries when to call parents, when to call the HTC, when to call 911
  - > Explain the difference between joint bleeds, muscle bleeds, soft tissue bleeds, mucous membrane bleeding
  - > Emphasize areas that require immediate attention: head trauma, blow to neck or abdomen, eye injury
  - > Educate on the signs and symptoms of a head bleed, which in rare cases can happen without known trauma or external manifestations
- Treatment of bleeds
  - > Explain the difference between early onset symptoms and late onset symptoms
  - > Emphasize the importance of early treatment
  - Obtain orders from the student's health care provider on appropriate Medication Authorization
     Form – parents should be responsible for providing the completed forms to the school

- Identify a clearly marked location/storage of medication and equipment
- The school should provide the following:
  - > Sharps container and gloves
  - > Locked storage for medication and equipment including refrigerator for the factor if requested
- The parent/guardian will provide when needed:
  - > Medications and all supplies for intravenous infusion
  - > Student's medical alert identification such as bracelets, necklaces, shoe tags, etc.
  - > Protective gear such as helmets, knees and elbow pads

#### Step 4: Misc.

- ${\boldsymbol{\cdot}}$  Field Trips / School Sponsored Activities
  - > All students have the right to participate participation cannot be denied because of the need for medication/ treatment or requirement of additional assistance
  - > If a field trip is planned, the teacher should give two weeks-notice to the school nurse so that a plan can be put into place for the student. The plan should always include factor and emergency supplies
  - > In some cases, a nurse or parent may be needed to accompany a student
  - > Prior to the field trip, the school nurse should provide to the teacher/staff member in charge copies of the student's care plan
- Staff Training training of appropriate staff should include:
  - > Definition of Hemophilia
  - > Confidentiality
  - > Symptoms to report to the school nurse
  - > Field trip and school sponsored activity accommodations
  - > Physical activity or PE restrictions
  - > Staff roles in the implementation of the Emergency Protocol Plan
  - > Student's functional limitations
  - > Available resources
- Evaluation

It's an ongoing process and should include the following:

- > Orders reviewed with family and health care provider annually and as necessary
- > Documentation of medications and treatments given
- > Communication with the health care provider and family
- > Need for staff training
- > Effectiveness of the plan to meet the student's health and educational needs at a minimum of every two to three months
- > Assessment and documentation of student's response to the management plan at a minimum of every six months.

 $SOURCE: \textit{The Child With Hemophilia in School.} \ \ Baltimore, MD: Maryland State Department of Education; 2007 http://cl.k12.md.us/depts/HEALTH/Guidelines/HemophiliaGuidelines.pdf$