**Individualized   
Health Care Plan (IHP)**

Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IHP Completed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IHP Review Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nursing Assessment Review Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nursing Assessment Completed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Nursing Diagnosis** | **Sample Interventions  and Activities** | **Date Implemented** | **Sample Outcome  Indicator** | **Date Evaluated** |
| **Managing Potential Diabetes Emergencies**  (risk for unstable blood glucose) | Establish and document student’s routine for maintaining blood glucose within goal range including while at school:   * Where to check blood glucose: * Classroom * Health room * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * When to check blood glucose: * Before breakfast * Mid-morning * Before lunch * After lunch * Before snack * Before PE * After PE * 2 hours after correction dose * Before dismissal * As needed * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * Student’s self-care skills: * Independent * Supervision * Full assistance * Brand/model of BG meter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * Brand/model of CGM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | **Blood glucose remains in goal range**  Percentage of time  0% 25% 50% 75% 100% |  |

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| **Nursing Diagnosis**  (continued) | **Sample Interventions  and Activities**  (continued) | **Date Implemented**  (continued) | **Sample Outcome  Indicator**  (continued) | **Date Evaluated**  (continued) |
| **Supporting the Independent Student**  (effective therapeutic regimen management) | **Hypoglycemia Management STUDENT WILL:**   * Check blood glucose when hypoglycemia suspected * Treat hypoglycemia  (follow Emergency Care Plans for Hypoglycemia and Hyperglycemia) * Take action following a hypoglycemia episode * Keep quick-acting glucose product  to treat on the spot * Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * Routinely monitor hypoglycemia trends r/t class schedule (e.g., time  of PE, scheduled lunch, recess)  and insulin dosing * Report to and consult with parents/ guardians, school nurse, HCP, and school personnel as appropriate |  | **Monitors blood glucose and appropriately responds to results**  Percentage of time  0% 25% 50% 75% 100% |  |
| **Supporting Positive Coping Skills**  (readiness for enhanced coping) | **Create Positive School Environment**   * Ensure confidentiality * Discuss with parents/guardians  and student preferences about  how the school can support student’s coping skills * Collaborate with parents/guardians and school personnel to meet student’s coping needs * Collaborate with school personnel  to create an accepting and  understanding environment |  | **Demonstrates positive coping**  Percentage of time  0% 25% 50% 75% 100% |  |