

Sample care plan

It is advised that a care plan is completed for all learners who have continence difficulties that affect their school day. As the care plan is a working document designed to assist school in their care for a learner, this should include all the information they require.

It should be completed by school with the parents/carers and involve the child as far as their age and development allows. If school have any concerns, if the child's condition or treatment is complex, or if there are any disagreements, schools may consult the school nurse, or the relevant healthcare professional.

Details of child

child's situation changes)

Name of School:
Child's name:
Date of birth:
Year group:
Home address:
School name:
School address:
Date of plan:
. Planned review date:
(The plan should be reviewed at least annually or more frequently if the

Name of person(s) completing plan and their role:				
	••••••			
		•		
Family contact in	<u>itormat</u>	<u>ion</u>		
Name				
Relationship to child	d			
Telephone	Home:			
number	Work:			
	Mobile:			
Email				
Address if different to child				
Name				
Relationship to child				
Telephone	Home:			
number	Work:			
	Mobile:			
Email				
Address if different to child				
Siblings' names				



<u>Health contacts</u>		
Specialist nurse		
Consultant		
General		
Practitioner		
Health		
Visitor/School		
nurse		
Education contacts		
Class teacher		
Special Needs coordinator (relevant)	if	
Other support staff in schoo		



Description of child Sive brief details of child's interests, behaviour and relevant conditions, e.g. speech and language, mobility.
<u>Description of continence difficulty</u>
Child's understanding of the issues and the support they need Use this space to include how the child would like to be supported with their bladder and/or bowel issues



Goals for continence management Describe how the child's bladder and bowel health is going to be promoted and maintained and how potential and independence are going to be appropriately promoted. You may include goals for parents, child and /or school staff depending on individual needs.
Medication
Details of medication. If any medication needs to be taken in school refer to the school's medical policy and follow school procedures.
e.g. details of drinking, toileting and changing routines, aides used and any reward schemes



<u>Details of help required for personal care, who will provide this, where</u> and how
<u>Arrangements for sporting activities, school visits/trips etc</u>
<u>Details of staff training needed/undertaken</u> <u>I</u> nclude who has been trained, the training given, by whom with dates and signatures of trainer and staff member



Use and disposal of continence products and aids Include arrangement for soiled clothes and underwear, provision or new/spare equipment eg catheters).
Problems that may occur Describe what would constitute a problem or emergency for the child and what action should be taken. Schools should always act in line with their safeguarding, medical and first aid policies.
Name of parent/carer
Signature of parent/carer
Role/job title of school representative
Signature of school representative
Signature of child/young person Date Date

