Health in the Individualized Education Plan (IEP)

Transition services in the IEP promote movement from school to post-school activities. Post-school activities include:

- Post-secondary education (e.g. college, community college),
- Vocational training,
- Employment,
- Continuing and adult education,
- Independent living and
- Community participation – including leisure and recreation

Lack of attention to health-related needs in the IEP can jeopardize any of the goals in these post-school pursuits. It is important for any youth with special health care needs to know how to manage their own health care and work with their health care providers. Transferring responsibility for self-care to a youth is a complex process dependent on factors such as the youth’s health needs and cognitive abilities, as well as family and cultural factors.

Ways Health Can Be Addressed in the Transition IEP:

Present Levels of Academic Achievement and Functional Performance is the place where the student’s baseline performance is documented. For the Transition IEP, this reflects the information gathered in the Age Appropriate Transition Assessment. For health issues, the Present Levels section can describe current impact of the student’s health in relation to the disability or condition, a description of the student’s current knowledge and skills around recognition and management of their health needs. In addition, this is the place to record a student’s needs for supports, equipment, accommodations and adaptations. The Present Levels serves as a baseline to measure progress toward annual goals. Activities to improve current functioning in health condition management and accommodations needed due to current functioning can be incorporated into the IEP.

Examples of statements for Present Level:

- Number of days of school missed due to health condition
- Impact of communication skills on ability to get needs met, e.g., “John cannot verbally indicate when he needs to be repositioned to avoid pressure sores.”
- Ability to self-administer medications, e.g., “Latesha needs reminders at lunch to access and take her medications.”
- Ability to recognize and take action on symptoms, e.g., “LeBron knows that when he sees sparkly lights, he is about to get a migraine and needs to go to the school nurse’s office and take his medication.”
- Need for accommodation because of symptoms, e.g., “Michael needs twice the usual time between classes due to pain and fatigue associated with his arthritis.”
Measurable Postsecondary Goals must be measurable and must occur after the student graduates from school. The goals should always address the areas of education/training and employment. If appropriate, postsecondary goals should also address the area of independent living. Independent living skills are defined as skills or tasks that contribute to the successful independent functioning of an individual in adulthood in the domains of leisure/recreation, home maintenance, personal care, and community participation. The IEP team decides whether there is a need for goals in the area of Independent Living. Depending on the student, health issues can be important in each of these areas, but health issues are most often found in the area of personal care.

Examples of Postsecondary Goals
- After high school, Anna will live in her own apartment and manage her diabetes independently.
- After graduation, Joshua will hire and manage his own personal care attendant.

Measurable Annual Goals address not only recommendations for specially designed instruction related to the general education curriculum, but also education needs that result from the student’s disability. For transition students, these goals can also address post school activities of the Postsecondary Goals. These goals should include as much self-care and independent management of health conditions as possible so as to optimize adulthood employment, independent living and community participation.

Examples of Annual Goals
- John will learn self-catheterization so he can independently take care of his toileting needs while attending culinary school.
- Monique will contact two adult health care providers to interview during the first semester so she can chose a provider who will care for her before she turns 21.
- Yuri will learn to order and pay for his medicines so he can live independently in the community.
- Keisha will identify symptoms that need urgent and emergent care and will develop a plan for emergency care.
- James will learn how his oral care habits, medications and diabetes affect his teeth and oral health and identify a dentist to care for him.
- Jo will understand how alcohol and other drugs interact with her seizure medications so she can live safely in the community.
- Makeala will create a health organizer to track medications and appointments with her physicians.

Related Services, Supplementary Aids, Program Modifications - According to the IDEA law, each IEP should include a statement of related services, supplementary aids, program modifications and/or supports needed to help the youth progress on the annual goals, be mainstreamed when possible, and participate in extracurricular and non-academic school activities as appropriate.
Related services can include school nurse services, school health services, transportation, therapies such as OT, PT and Speech, psychological services, counseling, therapeutic recreation and modified physical education. Some health related goals will require the school nurse and others might be carried out by school personnel with training and/or monitoring from a registered nurse or therapist.

Examples of Accommodations/Modifications:
- Immediate access to water or inclusion of a water bottle throughout the day
- Permission to have snacks available because of blood sugar or other health problems
- Use of smart phone or alarm watch to track medication schedule
- Shortened school day or class period to accommodate reduced stamina

Health Topics That Can Be Addressed in the IEP

Healthy Choices in Daily Life - especially those impacting home living and independence, leisure and recreation, and community life
- Nutrition
  - Food choices, including limitations or parameters
  - Basic cooking skills, including safety
  - Shopping
- Cleanliness and safety in home
- Personal hygiene and emotional health
- Physical activity
- Safety at home and in the community
- Understanding effects of recreational drugs, alcohol on health conditions
- Relationships and sexuality

Managing Health Conditions
- Developing a personal health history and care plan for health condition(s)
- Understanding and managing medications
  - Pharmacy location and access
- Learning to self-advocate at the doctor’s office - speaking up for needs, asking questions
- What to do in an emergency
  - Knowing signs and needs for personal emergency care and how to access that care
  - Knowing what to do in a disaster such as an earthquake

Health and Employment
- Does health or disability condition require work accommodations?
  - Physical environment
  - Work hours
  - Medication administration
• Other accommodations?
  • Does health or disability condition require skill development for maintaining employment?
    o Self care activities
    o Self advocacy for health needs

Nuts and Bolts of the Health System
• How to get health insurance
• Keeping an accurate, up-to-date medical history
• Choosing and connecting with an adult physician
• Arranging transportation to appointments