Plans of Care

The product of the nursing process in meeting student health needs is a Plan of Care (POC). While referenced often by the North Carolina Board of Nursing (NCBON), 21 NCAC 36 .0224, Components of Nursing Practice for the Registered Nurse does not define a POC, but rather lists the components of one. The component of "developing a plan of care that includes determining and prioritizing nursing interventions" is included as an expectation of practice.

The first step in developing a POC is determination of the impact of a health concern on the student and their education, by a Registered Nurse. As discussed in Section C, Chapter 3, this process begins with a nursing assessment to collect data that identifies current health issues. Information gathered during the assessment process supports a plan that meets health needs and promotes success in the classroom. A POC follows the nursing process as mandated by the North Carolina Board of Nursing and directs the nurse in the overall nursing care for the student, as well as school staff with responsibilities under the direction of the school nurse. A plan may be a detailed, formal document that is regularly evaluated and updated when the student receiving care requires on-going intervention by the nurse or has a complex set of problems. For example, most students with poorly controlled chronic health conditions such as asthma, diabetes, and seizure disorders, will have a formal POC. Often a student may have a less involved health care need that requires minimal regular assistance from the nurse, or ongoing evaluation and amendment of nursing care. The nurse will still follow the nursing process in making this determination, but may not need to develop a formal, written Plan of Care. This is often the case in crisis or episodic care although many students need assistance with health care issues to successfully access the educational process.

In the school setting, a POC is often termed an Individual Healthcare Plan (IHP). The National Association of School Nurses (NASN, 2025) position statement, Individualize Healthcare Plans(IHPs0-Pormoting Health and Learning for Student with Complex Needs. states that "the registered professional school nurse […] initiates and develops an Individualized Healthcare Plan (IHP) for students whose health care needs require more complex school nursing services. An IHP is a plan of care written by the registered nurse for students with or at risk for physical or mental health needs" (ANA & NASN, 2017). It is important that these plans be evaluated regularly and discontinued if no longer needed or updated as needs change, or annually at a minimum. When a student's health condition is well managed and required care is likely to be episodic, there may be various other plans developed as an intervention in the Plan of Care. The NASN (2020) position statement goes on to describe the components of the IHP by stating: Depending on the health condition, IHPs may prompt the development of student Emergency Evacuation Plans (EEP) and/or Emergency Care Plans (ECP), both of which are initiated and developed by the school nurse. These plans stem from the intervention component of the IHP and provide instruction on addressing healthcare needs or appropriate response to a student's emergent healthcare issue. These plans use language best suited for the non-medical educational staff (Sampson & Will, 2017). Emergency care plans may also be referred to as emergency action plans or EAPs.

North Carolina public school systems may be able to recover some expenses from provision of

medically ordered nursing care for public school students who have specialized health needs, documented on an IHP. NC Medicaid (NCDHHS Division of Health Benefits) requires inclusion on a Plan of Care (POC) as part of the documentation for those billable services. Eliminating the need for different types of plans in the school setting, the IHP may serve as a POC when all NC Board of Nursing (NCBON)-required components are reflected. District policies on use of a single plan may differ. Regardless of eligibility, it is good practice to develop a plan of care/individualized health care plan to direct the health care provided in schools.

The relationship between POC/IHP and Section 504 Plan/Individualized Education Program
A POC/IHP is a separate document from a Section 504 Plan (504) or Individualized Education Program (IEP). A POC/IHP is created by a registered nurse for any student whose health care needs interfere with the student's ability to access their education and is based on nursing assessment. Students who have special health care needs that interfere with equal access to their education require individual referral/evaluations for potential 504/IEP development. Placement in these programs depends on the results of the educational assessment and evaluation process. A POC/IHP does not replace the need for a 504 or IEP. School health services and school nurse services should be included in the 504/IEP as a means of accessing the student's education. The POC/IHP provides the specific instruction to school staff on managing the student's health care needs in school. For more information on 504/IEPs, please see Section E, Chapter 1 on *The School Nurse in Exceptional Children Services*. The school setting is a unique location for serving many health care needs of students, often done through use of the NC Board of Nursing regulated delegation process. The POC/IHP is a shared plan among all staff providing that care, developed and overseen by the school nurse, and written in language that may be understood by all who are part of the plan. It provides a format for summarizing key information, synthesizing a problem statement based on a nursing diagnosis, and formulating goals and a plan for action. It enhances communication among health providers, school staff, administrators, health aides and family. It also helps in directing comprehensive and high-quality health care. The use of a shared common Plan of Care reflects the setting as an education setting, not a health care setting.

Components and Definitions of the Plan of Care/Individual Health care Plan
Districts may use any POC/IHP template that meets their needs while fulfilling the requirements of the NC Board of Nursing (NCBON). The same template can also serve the purpose of Medicaid reimbursement. A POC or IHP should not be confused with the Individual Education Program (IEP) used to address education related needs for students served in the Exceptional Children's Program. A sample POC/IHP template is available on the NCDHHS Division of Public Health, Women's and Children's Health Section School Nurses webpage.

The components of a POC/IHP include:

- Student Problem (Nursing Diagnosis in lay terms)
- Goal(s)
- Intervention strategies including responsible staff
- Desired outcomes(s)
- Evaluation progress

The services of a Registered Nurse are routinely available for this purpose in public schools based upon the 1995 North Carolina State Board of Education established Special Health Care Services policy, recodified in 2016 as 16 NCAC 6D .0402, which states:

> Each LEA shall make available a Registered Nurse for assessment, care planning, and on-going evaluation of students with special health care service needs in the school setting. Special health care services include procedures that are invasive, carry reasonable risk of harm if not performed correctly, may not have a predictable outcome, or may require additional action based on results of testing or monitoring.

Student Problem/Nursing Diagnosis: According to the NCBON, formulating a nursing diagnosis includes "describing actual or potential responses to health conditions" for which care is indicated and "developing a statement of a client problem identified through interpretation of collected data." This provides the basis for the selection of intervention strategies to achieve desired outcomes for which the nurse is accountable. The student problem should be stated in "lay" terminology to facilitate understanding by school staff. The nursing diagnosis or student problem statement is not the medical diagnosis, but rather the student response or problem that results from the medical diagnosis that requires intervention at school.

Nursing Diagnosis and Student Problem Priority: The focus of school nursing practice is the development of the student's capacity to learn and grow. As a result, priorities should be established in the following order:

1. Safety of the student in the school setting
2. Effect on the student's basic health needs in the school setting
3. Management capabilities of student/family/school
4. Conditions that interfere with learning
5. Other issues that can enhance the student's quality of life

Student need, time limitations, and student capability may limit the nursing diagnoses or student problems that can be addressed in a limited time frame such as a semester or school year. School nurses have the unique opportunity to develop long-term relationships with students and families. These relationships may extend over several years or even the school career of the student. Student problems and nursing diagnoses may be developed, expanded upon and extended over this same period.

Goal: The goal or goals define what the future or resolution will be for the student; the valued health state. Goals are broad or global. Goals should be written using the **S**pecific, **M**easurable, **A**ttainable, **R**ealistic, and **T**imely (or time limited).

Outcomes: Outcomes are measurable behaviors that indicate steps in problem resolution or progress toward the goal or valued health state. These are written before nursing interventions and after nursing diagnosis/student problem selection. The projected outcome can be written by converting the nursing diagnosis statement of the student response into the desired health state to be achieved. Again, these should be written in the SMART format.

Interventions: These are actions taken to help the student move from the present state to the state of projected or desired outcome and thus to accomplish the overall goal. Strategies would include choices, capabilities, and resources of student, family and community, in addition to the research, findings and creativity of the school nurse. Interventions that are performed by other school staff should also be recorded on the plan. Strategies include the relevant physician orders, if any. Also included might be:

1. Screening and referral
2. Treatment(s) and medications(s)
3. Health maintenance
4. Education
5. Counseling
6. Behavior management program
7. Alterations in environment
8. Referral to other services

According to *School Nursing: Scope and Standards of Practice*, to complete the IHP process, the school nurse develops the plan collaboratively with the student, parents, health care providers, school community and others as appropriate and individualizes the plan specific to the student's needs to provide for continuity of care (NASN & ANA, 2022). The registered professional school nurse manages the activity of the plan.

Evaluation: Evaluation is a systematic review of progress with the plan and revision as needed. This includes a review of who, what, when, where, and how much. Evaluation leads to continued assessment of the student and revision of the Plan of Care to reflect student progress. Progress is determined through comparison of the assessment data to established student goals and outcomes in evaluating the progress made. This assessment during evaluation that leads to plan revision is the cyclic nature of the nursing process.

References

American Nurses Association & National Association of School Nurses. (2022). *School nursing: Scope and standards of practice* (4th ed.). Silver Spring, MD: Authors.

Bobo, N., Duff, C., Mattern, C., and Nasuta, M. (2017). *The Role of Individualized Healthcare Plans (IHPs) in Care Coordination for Students with Chronic Health Conditions*. Silver Spring, MD: National Association of School Nurses. (Recommended resource for the development and use of IHPs. It is available from the NASN Bookstore.)

National Association of School Nurses. (2025). *Individualized Healthcare Plans (IHPs)-Promoting Health and Learning for Students with Complex Needs.* Retrieved from: https://journals.sagepub.com/doi/full/10.1177/10598405251332784

Sampson, C. H., & Will, I. S. (2017). IHP Basics and Using IHPs with other educational, health and home care agency plans. In I. S. Will, M. W. Arnold, & D. S. Zaiger (Eds.). *Individualized*

healthcare plans for the school nurse: A comprehensive resource for school nursing management of health conditions (2nd ed., pp.1-10). Forest Lake, MN: Sunrise River Press.

U.S. Department of Education. (2025, August 21). *Questions and answers on the ADA Amendments Act of 2008 for students with disabilities attending public elementary and secondary schools*. https://www2.ed.gov/about/offices/list/ocr/docs/dcl-504faq-201109.html