



# HEALTH SUPPORT PLANNING FOR CHILDREN AND STUDENTS WITH COMPLEX AND/OR INVASIVE HEALTH CARE NEEDS:

## ***Working with the Children Youth and Women's Health Services (CYWHS) Access Assistant Program (AAP)***

### **INFORMATION ABOUT THE ACCESS ASSISTANT PROGRAM (AAP)**

#### ***Who does the Access Assistant Program support?***

This program provides services for children with invasive or complex health care needs and/or a physical disability while they are attending a government or non government preschool or school.

#### ***Who provides the care?***

Health Support Officers, registered or enrolled nurses employed by the program provide this care.

#### ***What type of health care is provided by Health Support Officers?***

Health Support Officers provide care that cannot be provided by school and preschool staff. Examples of the types of health care provided include:

- care of tracheotomy
- fluid, nutrition or medication via gastrostomy
- catheterisation at regular times of the day oxygen therapy
- personal care and meal time management can sometimes be provided as alternative duties only if time permits and when negotiated by AAP management.

#### ***How do Health Support Officers know what care to provide?***

Health Support Officers provide care according to a Health Plan which is developed by a CYWHS Community Health Support Program (Delegated Care) Registered Nurse. This health plan is developed in partnership with parents/caregivers, doctors and other health professionals who are involved in the care of the child.

#### ***How are Health Support Officers trained?***

Health Support Officers are support workers who are trained and individually competency assessed by a Registered Nurse to support students who are enrolled in the Access Assistant Program. The Registered Nurse will train the Health Support Officers accordingly to implement the child's health plan

#### ***How does a site request support from the Access Assistant Program for a child or student?***

The site completes an Access Assistant Program referral form with the parent/caregiver and submits it via district staff e.g. DECS Manager, Support and Disability (Catholic or Independent Education support staff). Management from the Access Assistant Program will contact the parent/caregiver within five working days upon receipt of this form to obtain more information to determine whether the AAP is able to provide the support requested.

#### ***How long will it take to provide services?***

Services are provided as quickly as possible, however, the process cannot commence until the Access Assistant Program has received a referral form which has been signed by the parent/caregiver, site manager and district staff.

It might be necessary to recruit the Health Support Officers. The Health Support Officers will then be trained and competency assessed to the child's health care needs. This can take between three to ten weeks in metropolitan areas and can sometimes take longer in country locations.

### **INFORMATION ABOUT CARE PLANS**

#### ***What is a Level Three Health Plan?***

A Level Three Health Plan is a plan written by a Registered Nurse, in partnership with parents/caregivers, doctors and other health professionals as required who are involved in the treatment of the child. Level Three Health Plans are implemented by Health Support Officers (HSOs).

#### ***What is a Level Two Care Plan?***

A Level Two Care Plan is a plan written by a treating health professional in consultation with parents/caregivers for implementation primarily by site staff. Health Support Officers will refer to these plans if linked to the Level Three Health Plan. These plans include asthma, seizure management, diabetes, oral eating and drinking, transfer and positioning.

#### ***What is a Health Support Plan?***

A Health Support Plan is an action plan written by sites detailing how individual child care plans will be implemented. The plans are written in consultation with the family and are based on information in the health care plans. For example: storage of medication, staff training and responsibilities, communication strategies



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## **What are the Health Care Plan Folders?**

The Health Care Plan folder is used to store all of the child's health plans. This folder needs to remain with the child or in their school bag at all times and will be accessed by all workers supporting the child including respite and out of school hours care.

## **What do the Health Care Plan Folders contain?**

- Level two health care plans provided by the child's treating health professionals for implementation by anyone designated in a worksite health support plan to do so, for example school staff and health support officers (health support officers can use a level 2 plan, as can out of school hours care and respite staff).
- Level three health plans developed by CYWHS Community Health Support Program (Delegated Care) nursing staff for implementation by health support officers, child care, family day care, out of school hours care, vacation care, and respite staff (to whom care has been delegated) and/or registered nurses and enrolled nurses.
- Medication authorities provided by a treating medical professional
- Level two personal care plans e.g. transfers and positioning, oral eating and drinking, continence care

## **Who can use the Health Care Plan Folder?**

Staff working with the child can use the folder to read and document information about the child's health support needs.

## **What will staff do if the child/student's Level Three Health Plan or relevant equipment is not brought to school?**

The Health Support Officer will inform the school staff who phones the parent/caregiver to ask for the plan/equipment to be sent in. If the parent/caregiver is unable to bring in the plan/equipment within the necessary time to ensure the child/student can be supported, the child is sent home as the Health Support Officer is unable to provide support without the health plan/equipment.

## **What if a Level Two Care Plan has an overdue review date?**

Review dates are indicators that a plan needs reviewing. These dates are not expiry dates and therefore plans can continue to be used as an interim until a reviewed plan is in place or the current plan is endorsed as accurate.

## **Who is responsible for following up plans with parents/caregivers at times of review?**

Access Assistant Program management:

- Level Three Health Plans: to organize with relevant Registered Nurses when a plan is due for review
- Medication authorities for enteral medication e.g. via gastro button

DECS site staff:

- Level Two Care Plans e.g. Asthma, epilepsy, oral eating and drinking, transfer and positioning
- Medication authorities (for medication not administered enterally e.g. via a gastro button)

## **What if there is a discrepancy between advice on a child/student's Level 2 Care Plan and Level 3 Health Care Plan?**

The Health Support Officer will contact the Registered Nurse to seek advice. The Registered Nurse will follow up the Level Three Health Plan with the parent and/or treating doctor. The Health Support Officer will inform the school staff who will contact the parent/caregiver for interim advice.

While waiting for the response the most significant advice is followed. If one plan recommends waiting 3 minutes before calling ambulance and one recommends waiting 5 minutes: the 3 minute plan is followed.

Who is responsible for maintaining the Student Health Care Plan folders?

Families are encouraged to take responsibility to maintain the folders and ensure that the plans are current and up to date.

## **What if site staff or program staff have a query or need advice?**

The pathway for queries from site staff:

School Support Officers > Line Manager > Disability Coordinator > Project Officer, Interagency Health Care

The pathway for queries from Access Assistant Program staff:

Health Support Officers > Access Assistant Program Team Leader or relevant registered nurse who developed the level three health plan

## **Where can I find more information?**

Further information is available at the following link:

[www.decs.sa.gov.au/speced2/pages/health/infoInvasive/](http://www.decs.sa.gov.au/speced2/pages/health/infoInvasive/)



# WHAT IS THE PROCESS FOR APPLYING FOR SUPPORT FROM THE ACCESS ASSISTANT PROGRAM ?

## ...AND WHAT HAPPENS AFTER THE REFERRAL ?

### Enrolment/review meeting with family

**ASK:** does this student/child have any known first aid or routine health support need?  
**OR DESCRIBE:** observations (e.g. first aid log) indicating new/changed health support needs  
**CONSIDER:** linked services (e.g. school and out of school hours care)

**YES:** additional health support likely

**EXPLAIN** that the family will need to provide a health care plan from the treating health professional  
**SHOW AND DISCUSS** the level 2 health care plans e.g. asthma care plan

*PROVIDE the family with the relevant care plans for completion by the student/child's treating health professional*

First aid and/or routine health support need is complex and/or invasive

Invasive and complex care includes:

- care of tracheostomy
- fluid
- nutrition or medication via gastostomy
- catheterisation at regular times of the day
- oxygen therapy

**YES**

**NO**

Provide information about the **Access Assistant Program** and complete a referral with the family

Submit the referral to the district office for endorsement: the referral will be forwarded to the Access Assistant Program by district office staff

Management from the Access Assistant Program will contact the parent/caregiver within 5 working days upon receipt of the referral form

A Registered Nurse will work with the family to develop a level 3 health plan and develop a health care plan folder

Once health plan is written, Health Support Officers will be recruited, trained and competency assessed.

Support arrangements are negotiated with the site to keep Regional staff informed and a site agreement developed.

Site staff to:

- conduct a risk assessment
  - develop a health support plan in consultation with family and AAP staff (if appropriate)
- Regional staff can assist with this process.

Attendance at school/preschool starts (as negotiated with site and family) and ongoing monitoring and review strategies are set in place.