



Individual Plan of Care for a Child with Special Health Care Needs
or a Disability attending programs at The Barn

Child's Full Name _____ Date of Birth ____/____/____

Special health care need, condition, or disability: _____

An individual Plan of Care is necessary when a child has a special care need, medical condition, or disability, and it is important for the child to be given the appropriate care for their needs while attending programs at The Barn.

Please give us a Plan for appropriate care/action for your child in the case of incident or emergency:

Other Information that would be important for us to know: (e.g. precautions to be taken to prevent a medical or emergency situation)

Parent/Guardian Signature: _____ Date: _____

NOTE: Section 428-3(a) requires a child's health record to include information regarding disabilities or special health care needs such as allergies, special dietary needs, dental problems, hearing or visual impairments, chronic illness, developmental variations or history of contagious disease, and an individual plan of care for the child with special health care needs or disabilities. The plan shall be developed with the child's parent(s) and health care provider and updated as necessary. Such plan of care shall include appropriate care of the camper in the event of a medical or other emergency and shall be signed by the parent(s) and staff responsible for the care of the participant.

Please use the reverse side of this form for signature(s) of all staff responsible for the care of this child.