



STATE OF CONNECTICUT



DATE: April 6, 2018
TO: Youth Camp Operators
FROM: Debra L. Johnson, ^{DJ} Director, Division of Licensing
RE: Guidance Regarding Individual Plans of Care

As you know, revisions to the youth camp licensing regulations became effective September 1, 2017. Recently, the Licensing Division of the Office of Early Childhood (OEC) has received many questions pertaining to the requirement for individual plans of care. In response to those questions, the following guidance is being provided in hopes that it will provide clarity pertaining to this requirement.

Section 19a-428-3 of the Regulations of Connecticut State Agencies requires that the operator of the youth camp maintain on the licensed premises a current record for each enrolled camper which includes a health record. Such health record shall include, but not necessarily be limited to, "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 a camper with special health care needs or disabilities, developed with the child's parent(s) and health care provider and updated, as necessary. Such plan shall include appropriate care of the child 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 child."

Examples of special health care needs and disabilities are provided above. A written individual plan of care is required when a child has a special health care need or disability AND it is necessary that special care be taken or provided while the child is at camp. The special health care need or disability which necessitates the individual plan of care is typically documented by the health practitioner on the physical examination record or on a medication order and may be supported by accompanying documentation.

If the health record of a child and/or accompanying documentation documents a special health care need or disability (e.g. child has ADHD), but does not require that special care be taken or provided during the time the child is at camp, an individual plan of care is not required. For example, the mere fact that a child wears glasses or is allergic to a medication, does not require an individual plan of care, as special care of the child during camp may not be necessary. Similarly, if a child has an order for a medication but no other special care is required beyond the administration of the medication, a separate care plan is not required.

An individual plan of care may be necessary for intermittent actions. For example, turning off the lights or music for an autistic child while the child is experiencing a behavioral response may be contained in a plan of care. At other times, the lights and music could be used.

A health record which documents that a child has asthma would likely require an individual plan of care specifying preventative measures to avoid asthma triggers and steps to take when an attack occurs.

If a child has an allergy to insects or food and has an order for an EpiPen, an individual care plan would be required as special care would be necessary during camp. Such special care may include steps to take to avoid an allergic reaction and actions to take in the event of a medical emergency.

Individual plans of care shall be signed by the parent(s). Each staff who provides direct care or supervision to the child must also sign the plan.

A sample form to use when developing individual plans of care is available on the OEC website at http://www.ct.gov/oec/lib/oec/licensing/camps/yc_individual_plan_of_care_sample_form.pdf.