

The Surreybrook School 234 Amity Road Bethany, CT 06524 203-393-2445 Individual Care Plan/Developmental Health History

Child's Name_____Birth Date_____

Special health care need or disability:		
Plan for appropriate care of the child in a medical or other emerg	gency. An individual plan of	
care is necessary 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 the child care program. (If medication is to be administered, an authorization form for the administration of medication must be completed and submitted with this individual plan of care.		
Other relevant information:		
Signature(s) of the Parent(s)	Date	
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Note: Section 19a-79-5a(a)(2)(E) requires a child's Health Record to include information care needs such as allergies, special dietary needs, dental problems, hearing or visual in		

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

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. Section 19a-79-4a(h)(2)(H)(viii) requires that the health consultant shall assist in the review of individual care plans as needed.

Signature of the staff responsible for _		
	(name of child)	

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Printed Name:	Signature:	Date Signed:
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