



**BRAIN INJURY  
ASSOCIATION  
OF NEW JERSEY**

825 Georges Road, Second Floor  
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[www.bianj.org](http://www.bianj.org)

Helpline: 1-800-669-4323

No Brain Injury is  
Too Mild to Ignore,  
or Too Severe to  
Lose Hope

## **Planning Healthcare for Children with Traumatic Brain Injury in the School**

*By Judith A. Woop, M. Ed. R.N.*

According to the Centers for Disease Control and Prevention, every 23 seconds a person in the United States sustains a Traumatic Brain Injury (TBI). The New Jersey Center for Health Statistics identified 23,667 children diagnosed with TBI in 2007, yet only 1,260 students were classified in the schools as TBI receiving Special Education services.

Since under-identification and/or misidentification may occur within the educational system, parents of children returning to school after a serious brain injury should contact their child's school to begin planning for the student's re entry when the child is in the hospital, or awaiting discharge. Parents are encouraged to coordinate information between the medical/rehab facility and the school system.

Physical effects of brain injury such as seizures, headaches, fatigue, visual and hearing difficulties and loss of motor control and coordination will require accommodations and strategies to assist the student during the school day. Under guidelines developed by the New Jersey Department of Education, certified school nurses determine which students need an individualized healthcare plan and collaborate with parents and the student's medical home to address the student's physical and emotional needs. The Individualized Health Care Plan (IHP) includes management and monitoring of medications, physical accommodations and treatments / therapies the student will require while in school.

In order to coordinate delivery of health related services in the school, the IHP, provides written documentation to clarify and consolidate health information that is meaningful for students, family and staff. Parents / guardians will be required to sign a release to share this information between the school and medical providers and the school will also obtain parental and student permission to share relevant medical info with school personnel who have a legitimate need to know. In addition, the student and family will determine what information they wish to share with peers.

Nursing care plans include assessment and treatment of students, assistance with activities of daily living, transfers, creating a barrier-free environment, physical and occupational therapies, psychological counseling and delegation of non-nursing tasks to unlicensed assistive personnel. The school nurse will monitor the administration and compliance of daily medication and assist the student to identify medication strategies to manage pain. The student will learn to identify and implement effective memory strategies to arrive at the health office at scheduled times to perform self-care skills.



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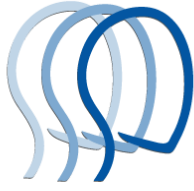
When the student re-enters school, class scheduling, lunch, rest periods, adherence to state physical education requirements, mobility throughout the school campus and the impact of medications on the student's cognitive and physical abilities will be reviewed with the educational support team, school nurse and administrators. Sports and extra-curricular activities as well as transportation to and from school are included in the total school plan.

In addition, the student, parents and school staff will meet to review medical / healthcare records and the school nurse will provide interpretation of the IHP to educational and support staff as needed. The school nurse will in-service staff on the nature of acquired brain injury and the effects of traumatic brain injury on memory to learning and behavior. Teachers will be able to monitor the student's activity tolerance and make adjustments in class assignments as needed. The teacher / nurse will provide classmates with age appropriate information of the student's condition to encourage empathy and understanding based on the parent's request.

A tour of the empty building and a walk through of the student's schedule prior to re-entry in order to modify the school environment will serve to promote safety, remove environmental hazards or barriers in hallways, encourage the use of hand rails in bathrooms and on stairs and arrange furniture to promote easy access for student. A successful reentry plan will also include an emergency evacuation plan and emergency management of the student during school hours. A review of the school emergency evacuation procedures will assist in determining the need for special adaptations for the student's disability.

The school nurse will establish a mode of communication with the parents/guardians to facilitate coordination of medical treatment and to monitor student's social and emotional adjustment. Parent participation is encouraged as a means of sharing student progress, and collaboration with the educational team and private therapy services will assist in promoting social skills enhancement, assist the student in managing negative behavior and involve peers in social skills training when appropriate.

It is anticipated that effective nursing interventions as outlined in the student's IHP and continuous evaluation of the student's progress will demonstrate that the student will be able to: participate in the usual school activities without signs of fatigue, improve school attendance with accommodations as needed, navigate the school environment with minimal directions from staff, report to the Health Office daily to take prescribed medications, participate in self care activities, utilize community resources as support and assistance with reintegration into school and describe himself / herself as an active part of the school community.



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The Brain Injury Association of New Jersey's Brain Injury: A Guide for School Nurses provides additional information about planning healthcare for children with brain injury in the school system, including a sample IHP for students with brain injury. The guide is free and available to download from the Association's website at [www.bianj.org](http://www.bianj.org).

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*Judith A. Woop is a member of the Brain Injury Association of New Jersey's Children & Adolescents Committee, past President of the New Jersey School Nurses' Association, and a professor at Caldwell College in their school nursing program.*

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