IHPs, 504 Plans, and IEPs: What's the Difference?

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Our thanks to Donna Noble for compiling the information below about the different tools available to help homePEN children overcome some of the obstacles they may face in obtaining an education. Donna is a patient advocate for ThriveRx, as well as a special education teacher and HPEN-consumer caregiver. Thanks, too, to Mary Patnode, an Oley board member, retired school psychologist, and HPEN consumer, for reviewing the article and for her input.

Additional information about these programs can be found at the Web sites listed at the end of the article.

Children on home nutritional support often have special medical needs that require attention during the time they would be at school. Or they may miss school for extended periods of time due to illness. Many of these children do not require and are not eligible for special education, but do require some special consideration or accommodations from their school systems due to medical needs. So the question becomes, how can these children successfully obtain an education but still have their special medical needs met?

There are several tools available to help make this possible. The three major supports are the Individual Health Plan (IHP), the 504 Plan, and the Individualized Education Plan (IEP). For children on home parenteral and/or enteral nutrition (HPEN), one or all of these plans might be useful.

What is an IHP?

An IHP is a plan that considers how to deal with what might happen with a student medically while the student is in school. It is designed to address medical issues that do not impact the student’s learning. An IHP is a formal agreement that outlines the student’s needs and a plan for addressing those needs. Parents or caregivers, the student, the student’s health care provider, and a multidisciplinary team of school staff work together to develop the IHP.

An IHP serves both the student and the school. It gives the student and his or her family the opportunity to discuss their concerns with school staff, and helps establish student, family, and school roles and responsibilities. It clarifies important things like how medication will be administered, how the student’s health status will be monitored, the location where care will be provided, and who will be providing the care. It should provide for staff training and specify who will provide that training. It can serve as the basis for ongoing teamwork, both between the family and school staff and among staff members. It also provides the school with an accurate, centralized source of information about the student’s medical needs, and with direction and authorization should a health need arise suddenly. To be sure the plan remains current, review dates should be written into the plan.

The IHP format varies from state to state and often from district to district. Unlike an IEP or 504 Plan, which has a standardized format, IHPs are developed by the school district. Certain health organizations, such as the American Diabetes Association, have also created boilerplate IHPs. No state or federal protection comes with an IHP. An IHP can be used alone or in conjunction with a 504 Plan (see sample IHP in word or PDF format.)
If your child’s circumstances change or you are not satisfied with the staff response, you can always request a meeting with the school. As an IHP is an agreement and not a legally binding document, there is no legal recourse if the district does not comply with the document.

**Does my child need an IHP?**

If your child has a health impairment or physical disability, he or she should have an IHP. It documents his or her needs and the services to be provided to that child. Remember: Even if your child is not receiving medication or infusing during school, it is important to have an IHP in place so the staff knows how to deal with any emergencies related to the feeding tube or venous access device. For the health and safety of your child, staff need to be prepared to deal with a tube/line emergency. I strongly urge parents to add an IHP to their child’s 504 Plan or IEP. The medical care component of the student is not addressed in the 504 Plan or IEP.

**How do I develop an IHP?**

The first step is to speak with your child’s health care provider(s). Discuss the school environment and together try to outline the health issues that might need to be addressed while your child is at school. This should include things you plan on, such as your child receiving medication, and things you don’t plan on, like an enteral tube getting caught on a doorknob and coming out. Ask your child’s health care provider(s) to document your child’s health needs and what he or she feels your child requires for support. Then speak with the school about developing an IHP. Bring all of the documentation with you when you meet with school staff.

As you think about whether your child would benefit from an IHP, or the 504 Plan or IEP discussed below, remember that parents are supposed to be a key component in the development of all these tools. You should make sure you are included in all steps of the process. As a parent you can have much power in advocating for your child. Usually the most effective way to use this power is to approach the school district in a collaborative and cooperative manner.

**What is a 504 Plan?**

A 504 Plan is a legally binding agreement between the parent(s) and the school district. It is a part of the Americans with Disabilities Act (ADA). Children who have disabilities that do not interfere with their ability to progress in general education are not eligible for special education services, but they may be entitled to the protection provided by a 504 Accommodation Plan. 504 Plans are used widely and for diverse needs. They can cover a single issue or several concerns.

504 Plans typically address accommodations in academic areas, but they can also be applied to nonacademic areas (such as band) and extra-curricular activities, to allow the student to have the whole school experience. The 504 Plan can follow the student to college and is also applicable in the workplace.

504 Plans are not as involved as, and do not cover all of the things covered in, IEPs (see below). A 504 Plan should provide for staff training and specify who will provide that training. The plan should also include review dates.

A 504 Plan can be requested by the family or school personnel. It is developed by the parents and a team of school staff. The school team usually includes an administrator and a case manager. In many cases where the issues addressed in the 504 are related to the child’s medical conditions, the medical team is also included as an active participant.

**Does my child need a 504 Plan?**
If your child’s medical issues significantly limit one or more major life activities, including school, then he or she should have a 504 Plan. The goal of a 504 Plan is to level the playing field by providing accommodations and modifications that allow the student the same opportunities as their “typical” peers.

When you are considering whether your child needs a 504 Plan, it is a good idea to think about all the concerns created by his or her home nutrition needs. If you have several concerns then a 504 Plan might be helpful. Before the 504 Plan meeting, think of what your child might need while he or she is at school, and what accommodations your child might require to meet those needs. If a student needs to empty an ostomy bag, for example, he may need access to facilities not usually available to students. If your child will need to have medication administered during a test, she may require extra time for the test. If your child misses school due to medical appointments or illness related to home nutrition therapy, accommodations may be required so the days missed will not count against him.

**What is covered in the 504 Plan?**

A 504 Plan can include adaptive equipment or assistive technology devices; an aide; assistance with health-related needs; school transportation; or other related services and accommodations. Specialized instruction is not covered in a 504 Plan. For children on home nutrition therapy, a 504 Plan is important to ensure, for example, they have frequent bathroom breaks, a clean place to change an ostomy bag, access to education if they must be home for long periods of time, and accommodations for any other special needs that may arise.

**What is an IEP?**

IEPs are generally for students who have documented gaps in learning beyond what might be expected based upon the normal curve. An IEP is an individualized learning plan, developed by a team, to address these gaps. However, an IEP can also be used when the gap is anticipated, such as with a child who will have difficulty keeping up due to frequent illness and absences, or a child whose hearing impairment, orthopedic impairment, or emotional disturbance necessitates modifications and/or accommodations in the curriculum. It is a legally binding document based on the Individuals with Disabilities Education Act (IDEA). IDEA ensures services to children with disabilities throughout the nation.

The federal government lays out the rules for IEPs, and states implement these rules. States may interpret the federal mandates differently and therefore IEPs are not exactly the same across state lines. Eligibility for special education (and therefore an IEP) also varies slightly between states due to differences in interpretation of the federal law. It is important to keep this in mind if you are moving and looking at school districts.

IEPs give you backing and guarantee procedural safeguards, such as due process. IEPs also call for mandatory progress reports.

**Does my child need an IEP?**

If your child has a condition or disability that interferes with or impacts his or her ability to learn and makes it that he or she cannot succeed in school without modifications to the regular curriculum, then he or she may qualify for an IEP. There are many specific disability categories covered by an IEP, such as cognitive disability or a hearing impairment. There is also a category for “other health impairment.”

**Does my child’s home nutrition therapy need qualify him or her for an IEP?**

In order for a child to be eligible for an IEP as “other health impaired” (OHI), the child’s strength, vitality, or alertness must be substantially affected. Examples include medical conditions that cause a student to miss many days of school, or fatigue issues that cause a student to need half days or reduced assignments.
You should talk to your child’s health care provider(s) about whether you should seek an IEP for your child.

**How do I get an IEP for my child?**

Anyone can request that a child be evaluated for an IEP, including parents, teachers, or school administrators. Parents must be involved in the referral, assessment, and planning involved in developing an IEP.

Once a child is referred, the school district determines if the child is eligible through a multi-factored evaluation (MFE). The MFE is used to determine and describe eligibility issues. The data collected in the MFE also becomes the basis for the IEP; IEP goals and objectives should be directly related to the problems identified in the assessment process.

The MFE is conducted by licensed personnel hired by the school district. This might include psychologists, speech pathologists, special education teachers, school social workers, physical therapists, or others, depending on the child. Parents can add assessment results from another agency if they wish or if they disagree with the school district’s results. In many situations the information that parents provide from other agencies can be very helpful to school staff when determining eligibility and planning an appropriate IEP. All good assessment plans include information from the parent(s).

If parents do wish to provide additional assessment results, they may have to bear some or all of the financial responsibility for that assessment—unless the educational team agrees to the additional assessment ahead of time. There is no guarantee that using assessment from outside of the school’s resources will impact the decision of whether a child is eligible for an IEP.

After the initial evaluation, each child must undergo another evaluation every three years. IEP reviews are mandated by law and must involve the whole IEP team, including the parents. Any team member can also request more frequent reviews. If the IEP is not appropriate for the child, it can be revised.

**What is included in an IEP?**

An IEP can provide for modifications to the curriculum and accommodations in instructional methods and materials, assignments and classroom assessments, and time demands and scheduling. An IEP will also allow for accommodations during state testing situations, such as frequent bathroom breaks, extended time, and small group setting. Remember: any accommodations provided in the classroom must be available for standardized testing.

An IEP is developed by an IEP team. The team should include parent(s), the student if appropriate, a special education teacher, a general education teacher, a special education administrator, and related service providers as needed. Parents are a vital part of the IEP process. You need to advocate for your child and if you are not happy with parts of the IEP, you do not need to sign the document until you all come to an agreement. Parents must approve the entire IEP, including methods, materials, frequency of services, and so on. Further, any changes to the IEP (or any of these tools) need to be approved by the parents.

An IEP also comes with procedural safeguards, federal funding, and mandatory progress reports.

**What happens if my child needs to be home for long periods of time?**

This should be addressed in the IEP. Some families choose to have their child on home instruction exclusively, while other families send their child to school as much as possible but have provisions for home instruction addressed in the IEP. The number of hours provided weekly for home instruction is based on state law and regulations, as IDEA does not specifically address this. However, the IEP mandates the
services that are provided to the student, whether the learning takes place in the school setting or at home, so the amount of home instruction needs to be adequate to ensure the child progresses on goals set out in the IEP.

**What if I need more information or don’t think my school district is meeting my child’s needs?**

Here are some great Web sites for general information on IEPs, 504 Plans, and “Other Health Impairments”:

- [www.idea.ed.gov](http://www.idea.ed.gov)
- [www.nichcy.org/Disabilities/Specific/Pages/healthimpairment.aspx](http://www.nichcy.org/Disabilities/Specific/Pages/healthimpairment.aspx)

If your child is in school and you do not feel his or her needs are being addressed, talk to your school administrator. If that does not yield the results you want, ask to speak to the district special education coordinator. If your child has an IEP, you are already guaranteed due process rights. Part of the IEP process includes providing parents with a book on the rights guaranteed by the IEP. In the handbook it will list the appropriate numbers to call at the state level. Another good source of information is your state department of education Web site.

A video that includes Donna’s presentation of this material at the 2009 Oley conference is available to borrow from the [Oley Video/DVD Library](http://www.oley.org/newsletters/SeptOct09.pdf)

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