

Psychosocial Services A Parent's Guide

Facilitating Your Child's School Reentry

The Children's Hospital of Philadelphia®

CANCER CENTER

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Executive Summary

The Oncology Psychosocial Services Team at the Children's Hospital of Philadelphia has prepared this handbook to provide you with information for transitioning your child with cancer back to school. The handbook includes helpful guidelines and recommendations for parents, information you can share with your child and information on 504 regulations and Individualized Education Plans (IEPs). It also provides links to additional resources including our Educator's Guide to Welcoming the Child with Cancer Back to School and online resources for parents of children with cancer and their school-aged children. We hope this information is beneficial to you as you collaborate with your child's healthcare team and school personnel to advocate for his or her transition back school. If you have specific questions or concerns about your child and his or her education, please feel free to speak with your child's hospital social worker, who can provide more information and resources to assist you.

Introduction

For children and adolescents with cancer, returning to school can be an exciting time. This transition helps children maintain a sense of normalcy, accomplishment and connection to peers. For younger children, the process is also important to facilitate a healthy developmental pathway for the child. Although returning to school is a joyous and hopeful time, it may also pose challenges for the child and parent. Therefore, it is essential to be prepared and informed of helpful strategies that will facilitate a smoother transition.

Children and adolescents with cancer experience much change during their illness and treatment and as they move off treatment and into survivorship. Their appearance, physical and cognitive abilities and daily routines may change over these time periods. These changes may make returning to and continuing in school more difficult for your child. However, engagement in academics and connection with peers are two ways children can reestablish routine and be reminded that some aspects of life need not change.

Parents play a crucial role in school reintegration, but parents may be anxious about the child's return to the classroom. Because school is a place of fun and learning, the child with cancer will benefit from returning as soon as he or she is medically capable. With proper planning and support, parents can help their children have a successful school re-entry.

The staff at The Cancer Center of The Children's Hospital of Philadelphia is available to you as a resource and for support. Together, we can facilitate your child's successful reentry into the classroom. From the time of diagnosis, we emphasize the need to make a child's life as normal as possible. Thus, we encourage children to return to school and to resume socializing with their peers as they had done prior to diagnosis. This handbook will provide information for parents, children, and educators on school re-entry after a child or adolescent is diagnosed with cancer. You will find guidelines for how to act as a facilitator in school reentry and helpful tips for addressing any challenges that may arise. Also, your child's educational rights and educational services, including Individualized Education Plans (IEPs) and 504 plans, are discussed, and we provide a sample letter for requesting educational services.

Information for Parents

Despite the changes they may experience, most children will adjust well to school after returning. However, cancer and its treatments can cause emotional, physical and cognitive changes which may affect the child in school. As a parent, you can help your child by watching for problems so they can be addressed before they become too hard to manage.

Physical Needs

Responding to the Physical Needs of Your Child

Physical problems after cancer treatment are likely to affect a child's ability to perform normal tasks at school. Your child may have obvious physical changes as a result of cancer treatment, such as an amputation, scar, hair loss, weight loss/gain or skin color changes. High doses of antibiotics or chemotherapy may cause hearing loss. Chemotherapy can also result in fatigue, physical weakness and a low blood count that may make the child prone to infection or illness. The child's growth may be delayed as a result of receiving a bone marrow transplant or total body irradiation.

These physical changes may affect how your child feels about him or herself. They may also impact how other children see them and interact with them. A child who feels isolated and different is more likely to have problems at school. Some of this may be avoided or lessened if the child is prepared for the transition and has support from school staff.

Your child's school may need to make special accommodations for his or her physical needs resulting from cancer treatment. Your child may prefer to wear head coverings in school because of hair loss, which might require permission from the school or your child's teacher(s). Children may need to be excused from certain physical education activities, such as gym class, to avoid severe fatigue or injury. If your child experiences extreme fatigue or reoccurring illness, brief rest periods or shorter school days may be needed. Dry mouth or weight loss caused by chemotherapy may indicate that the child needs to have a water bottle or extra snacks with them during the day. Children who experience bladder or bowel problems after treatment may need special privileges to bathroom passes. As the parent and your child's advocate, it is crucial that you be in contact with school personnel to see that your child's physical needs are met.

The healthcare plan for school (attached as an Appendix to this handbook) is a useful tool for communicating with your child's school about their special physical needs. You can complete this form with your child's attending physician, nurse, and/or social worker.

Academic Needs

Some treatments can affect your child's thinking skills. Possible problems include:

- trouble paying attention; may tend to "space out"
- difficulty understanding and remembering visual information
- problems writing quickly or accurately
- trouble keeping up with new material
- difficulty with math problems, columns, or graphs
- problems planning and organizing
- inability to copy from a blackboard
- trouble reading

You may also notice that your child's grades are not the same as they were prior to the cancer diagnosis. These cognitive changes may cause frustration for you and your child. You can ask the school about tutoring and special accommodations for any long-term absences that may occur. Receiving accommodations will make your child less likely to fall behind.

Noticing these problems and seeking help early on is important for your child's learning and self-esteem. Monitor your child's learning, and speak to his or her attending physician and the school about any changes or concerns. If your child is experiencing the possible problems listed above, arrange for testing to identify specific needs. Diagnostic testing is available through the Cancer Center. For more information on diagnostic testing through the Division of Oncology, contact your social worker or visit http://www.chop.edu/service/oncology/our-programs/pediatric-neuro-oncology/.

We included specific guidance on how to request that the school evaluate your child to determine educational needs (see Sample Letter on page 20). Information is also included about IEPs and 504 Service Plans (see page 19) as important documents to ensure your child receives special services in school to allow him or her to succeed academically.

Emotional Needs

Reactions to the Cancer Diagnosis

A child recently diagnosed with cancer is likely to have many different feelings, including sadness, frustration, anger, fear, guilt and confusion. It is important for parents to recognize that all these feelings are normal and that children need support in order to work through this difficult time. A child's understanding of what cancer is and how it will affect his or her life is dependent on the child's age and developmental level. However, regardless of age, developmental level and where in treatment the child is, all children need continuing support and reassurance. For example, it may help to discuss that they are still the same person despite cancer's ability to change the way they look, their outlook on life and their capability to manage all sorts of challenges.

Early School-age Children (Preschool – 3rd grade)

At this age, children are most troubled with procedures that are frightening, such as getting needles or having surgery. They see things in a concrete, immediate context and are not able to grasp (understand) the seriousness of their illness.

School-age Children (4th – 6th grade)

During this period, children focus more on peer reactions and their inability to do the things that other children are doing. Discussing feelings associated with not being able to do what other children are doing may reduce your child's feelings of isolation. Children this age also tend to have a better understanding of what cancer is and how it affects their health. For example, school-age children can understand that they need to take medication to improve their health. Some children may begin having difficulties following doctors' recommendations or treatment plans.

Adolescents (7th - 12th grade)

When it comes to cancer, teens are unique. While these young people may be facing cancer, they're also confronting all the usual issues associated with adolescence. After cancer diagnosis, they may feel very alone and dependent on others. Feelings of sadness and depression may also arise in adolescents. They may realize that they will not be able to do some things that are important to their development, such as learn how to drive or attend prom. Illness and treatment cause teens to feel different from their peers when they are trying so hard to fit in. Teens think about the changes in their body that will result from cancer and its treatment.

They worry about how they will look and how their friends may see them. Teens may also feel hopeless and fear that the treatment will not work. During this period, adolescents may also focus on the meaning of life and the cancer's effect on their identity. They may joke around about their cancer distract themselves from it, try to "think positively" or even rebel against parents, doctors and treatments. An adolescent's reaction to cancer is probably far less predictable compared to responses of younger children.

Reactions about Returning to School

Children, and the adults in their lives, have many concerns about returning to school after extended absence for treatment and hospitalization. It is necessary to be aware of your child's needs upon returning to school.

Early School-age Children (Preschool – 3rd grade)

Children at this age may feel some degree of fear and anxiety about returning to school, even if they have not been to school for a short period of time since their diagnosis. Attending school for this age group is beneficial because it helps start a healthy developmental pathway for the child.

School-age Children (4th – 6th grade)

These children may also display some school phobia if there has been little to no interaction with the school during diagnosis and treatment. Children at this age may begin to experience stress and feelings of being overwhelmed. They may wonder how they will be treated when they return to school, with some expecting special attention and others wishing to be treated the same as their peers. School-age children who have had little interaction with peers since diagnosis may feel sad, anxious, and have lowered self-esteem.

Adolescents (7th – 12th grade)

Adolescents may experience a variety of emotions about returning to school. Teens may be eager to return to school both to reconnect with peers and to gain a renewed sense of normalcy. They may have anxiety about having to go back after a long absence, having to make up missed schoolwork or perhaps having to repeat a year of school. Older children and teens may not want to go back to school because they look different or because long absences may have changed their social standing with friends. In addition, peer groups and social standing may shift as adolescents may not be able to return to prior activities such as competitive sports. Therefore, it may be helpful if caregivers help their child

explore possible replacement activities and point out the activities their child is still capable of doing. If treatment has altered the way they learn, teens may become frustrated and struggle to deal with the change. It is important to realize that adolescents may or may not verbalize their concerns depending on their comfort level. Attention should be placed on addressing these concerns whether or not they are verbalized.

Adults

Parents also have emotional reactions to their child returning to school. You may worry that your child will get an infection. You may also worry that going to school is an additional stressor for your child at this time. You are likely to feel not only anxious and perhaps reluctant about sending your child back to school, but also vulnerable and afraid for them. As a parent, you may also worry that your child will be unable to achieve as much as he/she did in the past and that your child's plan for the future must change as a result.

Teachers also have reactions to having a student in their class with cancer. They may have the fear of not knowing what to expect of the child physically and academically. Teachers may be overwhelmed with all that is going on. They may have feelings of shock, worry and grief over the illness and be unsure how to handle the student's needs. Teachers may also be nervous about the other students' reactions to the child's return. It is important that teachers seek answers to their many questions so that everyone can work together. It is also vital that teachers address your child's specific needs. As a parent, you can help ensure that the teacher takes these necessary measures by answering questions and by asking about your child's experience at school.



School Nurses

Including the school nurse in discussions is helpful as well. The nurse may be needed if the child feels ill at school or requires the administration of medications or other health services throughout the school day.

What if your child does not want to return to school?

It is important for you as a parent to discuss going back to school with your child. Talking about the concerns and worries your child may have will better prepare him or her to make the return. Finding excuses to miss school often indicates that the child is struggling with some part of going back. If your child is experiencing problems at school, you may want to meet with the school personnel to see what can be done to address the concerns. For example, you may come up with a plan that incorporates time at school and tutoring at home. Also, other strategies to help decrease your child's anxiety surrounding returning to school include scheduling social visits with friends before your child's first day back in the classroom; attending a fun event at school, such as a sporting event, play, concert or science fair; emailing or calling your child's teacher to see what the class is working on; and taking your child to meet with the school counselor to address any other concerns prior to the first day back to school. It will be beneficial to find ways for your child to be in school at least part of the time. Older children and teens may not want to go back to school because of their physical changes or because of changes in their relationships with friends. Another reason for not wanting to return may be that treatment has changed the way they learn and resulted in discouragement and frustration. Again, extra support at home and at school can help. Nurses, school liaisons, school counselors, school psychologists or CHOP representatives can help prepare the teacher and classmates for your child's return to school. Many things can be done to make the return to school more comfortable for you and your child.

School Re-entry

Steps for School Re-entry

- Identify an individual from the school who knows the student and your family, and who feels comfortable intervening for the student. This individual may be the school nurse, guidance counselor, school psychologist, principal or a social worker.
- You should contact this individual and arrange a conference meeting to discuss what types of accommodations your child will need to maintain academic progress.
- At the conference, all medical information should be discussed and explained. You should discuss your expectations of your child and the school. A plan for emergencies should be outlined, as well as a plan for what to do when your child gets sick with a fever. Requesting the presence of a representative from The Children's Hospital of Philadelphia at the meeting may also help you facilitate the discussion of important information.
- Also at the conference, you should discuss what information the school personnel should share with your child's teachers and classmates. The comfort level for disclosing information varies greatly from family to family, so it's good to make sure they understand what information you are comfortable sharing.
- Look into establishing an Individualized Educational Plan (IEP) or a 504 service plan (discussed on page 19).
- Continually reevaluate the student's needs to determine if they are being met. Revise the child's educational plan if necessary.
- Maintain regular communication with the school and the hospital.
- Discuss with your child his or her feelings about returning to school and the numerous steps the two of you can take to create a smooth transition.

How The Children's Hospital of Philadelphia (CHOP) Can Help

Many children transition back to school successfully supported by consistent communication between parent and school personnel. Other children require more support. The best way to address the difficulties of a child with cancer returning to the classroom is to be prepared and to tap into your resources. It may be helpful to consider inviting a Children's Hospital of Philadelphia representative (usually a child life specialist or social worker) to come to your child's school for a short presentation about your child's condition

and to help lead a class discussion. This individual will be able to answer questions that the teacher is unable to answer and will be able to respond to additional questions that the teacher may have. Such a presentation can help to ease the transition back into the school environment.

How to be a Good Advocate for Your Child

Get Involved, Be Informed

- Know the facts of your child's situation, including his or her strengths and weaknesses and the views of those who work first-hand with your child in school. If your child has a disability, know how it affects your child in school.
- Know your rights and relevant legal procedures. Make sure that you have all the details.
- Build positive relationships and contribute to the school environment. Get to know your child's teachers and other school personnel.
- Stay informed about what's happening in your child's school.

Keep Records

- Make your requests in writing even if you have also spoken directly to school personnel.
- Keep copies of everything you get or send to the school.
- If possible, send important letters to the school "Return Receipt Requested." If you hand-deliver materials, make note of the date and time, and the person who received it.
- Don't rely on phone calls or casual conversations. Keep a record of the conversation and of any formal meetings: date, time, name and position of the school personnel and any decisions reached.
- Whenever possible, ask for written confirmation of what is promised to you.
- Organize your records. A notebook or binder is helpful.

Prepare

- Decide what you think the school could do to solve the problems you've identified for your child. Make a list of possible accommodations you can suggest to the school.
- Arrange a meeting time and identify any legal requirements that relate to the meeting, such as what kind of notice you must receive, which staff must participate and any deadlines that apply.

- Decide what you want to accomplish. Prioritize. Be selective. It may help to bring a checklist and to agree with the school concerning the agenda or topics to be discussed before you go. Make a list of questions you want to ask if they are not addressed in the discussion.
- Bring materials that will help you get your point across: evaluations, report cards, evidence of your child's performance, records, copies of the law or guidebooks and/or private evaluations.
- As noted earlier, bring someone with you to the meeting. This person can be a CHOP representative, your spouse, a friend, or even your child if he or she wants to attend. If necessary, bring others who have worked with your child who may help the school see the problem differently such as a psychologist, therapist or community leader.
- Make and keep appointments for meetings, and call to confirm them the day before.

Use meeting time effectively

- Be polite and courteous at all meetings. Be on time and respect reasonable time limits.
- Acknowledge when good things have happened and special efforts have been made.
- Sit across from decision-makers. Keep eye contact.
 Take notes, or have a friend take notes while you listen.
- Say what you want in your own words. Be clear, concise.
- Ask questions! And make sure you get answers.
- Take the time to make good decisions

Repeat what they say to make sure you understand

 Don't feel pressured to discuss something if the school did not prepare you, or to make a decision immediately if you need a day to think about it.

Take breaks when needed to cool off, consult or cry

End meetings with a plan of action or "next steps." Set deadlines.

Use resources creatively

Go up the "chain of command." If you are unsuccessful in resolving matters with the principal, go to the superintendent's office, your special education director, or other personnel at the district level. If that is unsuccessful, go to the school board.

- Use your PTA, support groups, or talk to other parents in your child's class. Talk with other parents and advocates about what works and what does not work. Learn from each other's experiences.
- Look for other programs or resources that may help: violence prevention programs, instructional support centers and/or mediation.

Follow up

- Keep track of deadlines. Communicate with personnel.
- Report on progress as well as problems.
- Be firm about timelines, but patient enough for the school to accomplish what it needs within those timelines.
- Be sure to complete and return any paperwork that the school gives you. Also, remember to return phone calls.
 These steps help the school to accomplish what it needs to within those timelines.
- Get a summary of what was agreed to and who was present at meetings.

Remember

- YOU are an expert on your child.
- Focus on the problem, not the people. Avoid getting sidetracked by personal conflicts. Bring the focus back to your child.
- Don't get bogged down in "legalese." You will be the most convincing in your own words. Make sure the school dis trict staff speak clearly and don't get bogged down in jargon you don't understand – ask questions!
- Focus on the present and future, not the past. Work first on fixing the present problem; then, address remedies for the past.
- There may be more than one way to get what your child needs. Work toward mutually agreeable solutions. Be flexible and creative. Problem solve!

Information to Share with Your Child

(Handout for Teenagers)

(Parents can verbally share this information with younger children.)

Returning to School After Treatment

Before returning to school, it is important for you and your parents to contact the school and make arrangements to have a meeting. Possible topics you may want to discuss with the school include:

- Attendance, especially regarding doctor's appointments.
- Permission to wear a hat or scarf if your hair is not fully grown back by the time you return if you prefer to wear one. You can also talk to your teacher about having a "Hat Day" when all of your classmates are permitted to wear hats in class as a fun new event.
- School-related activities that you may not be physically ready for yet, such as gym class and carrying books.
- The possibility of having shorter days or fewer classes if necessary.

If you find that school is harder than it used to be before treatment and you have more difficulty keeping up with your schoolwork, ask for help. The Children's Hospital of Philadelphia can provide you with school liaisons (people that can communicate with the school) or social workers that can meet with your school's staff to help explain your situation and needs. It is also a good idea to talk to your doctor about the expected time away from school.

Cancer and School

School and Learning

Some cancers and treatments can cause you to have a more difficult time concentrating, remembering things, understanding what you read or writing. This can make it harder to keep up in class. Some of these problems may be temporary, but some may last longer.

Not everyone will experience learning difficulties after cancer treatment, but if you notice a difference in how you learn, it is important for you to ask for help. You should talk openly with your parents and doctor about these problems. Your parents and doctors can help you work with your teachers and guidance counselor to aid your adjustment to the changes.

Keeping up with Schoolwork

If you're missing school because of appointments or illness, ask for help in staying on track with schoolwork. Here are some things you can do to make sure you are keeping up with your school work:

- Ask a friend to take notes for you if you miss a class or ask teachers if you can photocopy their notes.
- Ask teachers to reduce your homework load, if possible and necessary.
- If needed, consider asking for a reduced schedule with fewer classes or shorter days.
- Ask your teachers if they would be willing to e-mail you assignments or send your work home with someone when you miss class.
- Consider getting a tutor or hospital teacher to help you with your work at home or the hospital.
- If you are away from school or in the hospital for an extended stay and feel well enough to complete schoolwork, ask your teacher if you can send completed schoolwork to him or her to be graded. Most schools now have Internet-based grade books so you can view your grades from wherever you are and see that you are still earning credit.

It is important to remember that your health is the primary focus. Schoolwork can wait, if necessary, until you are well again. Try not to feel embarrassed or upset if you need special attention or help at school. Let your teachers and counselors know that you are doing your best to keep up and ask for their help when you need it. They are there to help!

Keeping in Contact with Your Friends

There may be times during or after treatment when you can't go to school on a regular basis. Staying involved with school as much as possible may help you feel more connected to your friends and makes it easier for you to go back when you're ready. Here are some suggestions for staying in touch with your friends:

- You can use the internet, text messaging, instant messaging, e-mail, phone calls or visits. You and your friends can also use webcams or cell phone cameras to send messages to each other.
- If possible, try to arrange going to school for special events like games, assemblies, dances or plays. It may also be helpful to plan a school visit relatively close to your return.

Keeping in touch with your friends while away from school will help you feel closer to them and make you more excited to go back to school.

Interacting with Your Classmates

It is likely that your classmates will have different reactions to your cancer. Their reactions may depend on how long you have been away from school or your physical appearance. These are some suggestions for ways to deal with interacting with your classmates after you return to school:

- Consider asking a parent, teacher or school liaison (provided by CHOP) to give your class some basic information about your cancer and treatment before you return to school
- If you decide to talk with your classmates yourself, ask the teacher to arrange a time during class for you to discuss your situation. It may be helpful for you to have a parent or the school counselor there to help answer questions.
- If you decide to have someone else give the talk, you should decide whether or not you want to be there and how much you want people to know.
- Consider visiting the school before going back full time.
 You may want to go to school-related activities or go to class for a few hours.
- If it will make you feel more comfortable, ask a friend to meet you outside school on your first few days back so you don't have to walk in alone.
- Be prepared to answer questions, but if someone asks you something you don't want to answer, it's fine just to say, "I'd rather not talk about that." It will help if you prepare yourself with answers to questions you think you may encounter. Questions you may encounter include...

Can you catch cancer like you catch a cold?

Why did you lose your hair? Will it grow back?

What is chemotherapy? What is radiation?

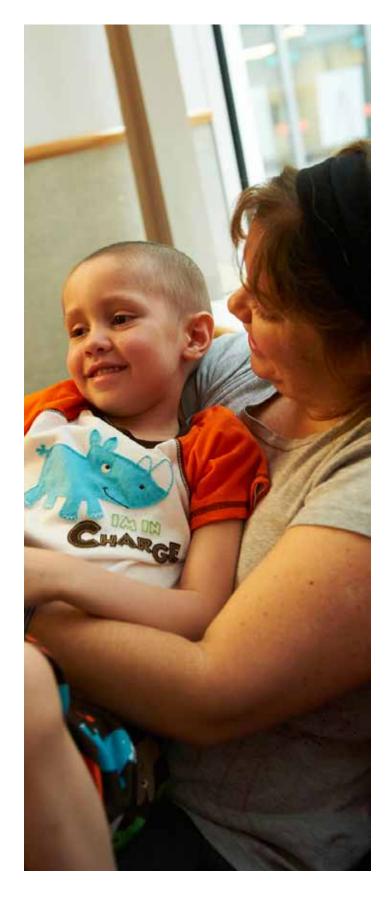
What happens when you get cancer?

Once cancer goes away, can it come back?

What do you do when you're in the hospital?

Providing your classmates with information about your situation and treatment will help your classmates better understand your situation. Arranging a class discussion may also help you feel more comfortable returning to school. You may get uncomfortable questions or comments but remember many people are just curious and simply want to help.

If you want to read more about other teens' experiences with returning to school, you can visit http://www.teenslivingwith-cancer.org/i-can-deal-with-it/school-issues/going-back-to-school/.





Information on IEPs and 504 Plans

What You Need to Know

Some children with cancer may experience learning problems as a result of cancer or cancer treatment. These may be quite severe, requiring the child to spend part of or all of the school day with a special education teacher in order to appropriately learn material. Some children may also need to be educated in the home environment to achieve academically. Children with these sorts of educational needs are provided them as part of an Individualized Education Plan (IEP). In order to access IEP services, the child must undergo academic and psychological testing and must qualify for services under the Individuals with Disabilities in Education Act (IDEA). There are legal guidelines regarding the timeline for implementing the IEP, and who should be included on the planning team, including the parents, special education teachers, other school personnel and additional therapists, as needed. Most often, if a child with a history of cancer qualifies for special education services, it will be under the category Other Health Impaired (OHI).

Other children with cancer may experience more mild learning problems. The cancer may have resulted in your child experiencing reduced strength, energy or alertness and these conditions may negatively affect his or her performance in school. Legally, under both the Individuals with Disabilities in Education Act (IDEA) and the Americans with Disabilities Act (ADA), certain changes must be made to a child's education plan and typical school routine to provide an appropriate level of education that accommodates the child's medical condition. In these cases a full assessment is not

needed. Children with cancer (or a history of cancer) typically have an impairment in one or more "major life activities" and qualify for a 504 Plan.

A 504 Plan is a plan developed by parents and school personnel to meet the individual needs of a student. The plan lists your child's learning difficulties and establishes specific goals for your child's education. The plan will include referrals to other services (if needed) and will provide for regular evaluation of the plan. Sometimes students will do better when their work is oral and not written. Therefore, if your child has a 504 plan upon returning to school, it can be changed later to address any cognitive changes caused by cancer or its treatment that develop later on. Learning as much as you can about potential problems and obtaining a 504 plan can help your child adjust more smoothly to any problems he/she may experience in returning to school.

Federal and State Laws protect the rights of your child to receive educational assistance through an IEP or 504 Plan if qualifications for these services are met. Therefore, you should not accept excuses from the school, such as a funding or staff shortage, when requesting these special accommodation services. Your child is entitled to receiving educational support services like IEPs and 504 Plans following a cancer diagnosis.

Establishing an education plan for your child can begin with a letter from your child's doctor describing his or her condition and how it will affect school performance. The following document is a sample letter for establishing an IEP or 504 Plan.

SAMPLE LETTER

Date

To Whom It May Concern:

This letter is to provide documentation for creating a 504 Plan in accordance with the federal Rehabilitation Act of 1973 for nine-year-old John Doe, who was diagnosed (date) with acute lymphocytic leukemia (ALL).

ALL is a life-threatening blood cancer that requires approximately three years of intensive treatment with chemotherapy and other medications. School absences may be frequent due to numerous clinic appointments, illness at home and/or hospitalizations caused by the patient's compromised immune system.

While John does not currently need special education services, it is possible in the future that he could benefit from an Individualized Education Plan (IEP) as some patients experience cognitive impairments over time (e.g., months or years) due to some of the treatments.

At this time we suggest the following 504 Plan accommodations:

- Intermittent homebound tutoring during hospitalizations and periods of illness at home.
- Access to lunch box/snacks throughout the day, particularly during periods of prednisone therapy.
- Water bottle on the desk or readily available.
- Assistance with medication when needed and ability to rest in nurse's office and/or use the bathroom when needed.
- Waiver of regular attendance policies to allow for reduced days, late arrivals etc.
- A second set of books at home and assistance with carrying backpack at school when needed.

John's parents may have additional requests. Should you need more information, please call us at 610-337-8160.

Sincerely,



Information to Share with the School

The school nurse and teacher play a very important role in the medical care of the child with cancer. After all, the child with cancer has special medical needs. The Children's Hospital of Philadelphia Division of Oncology can provide you with an educator's guide for welcoming a student with cancer back into the classroom. This information outlines the appropriate procedures to use when atypical medical situations arise.

We suggest that you provide your child's teacher with the link to accessing this information and encourage him or her to ask you any questions they may have regarding your child's medical condition.

The educator's guide can be accessed at cancer.chop.edu under the "Resources for Families" tab.

My Student's Healthcare Plan

Name:	DOB:	Grade:
School Name:	District :	
Medical Information		
Diagnosis:	Date of Diagnos	sis:
Treatment Plan (chemotherapy, radiation, other):		
Scheduled Treatments:		
Potential Side-Effects:		
Limitations or Restrictions (Adapt PE, Immunosupressed):		
Medical Care Needed In School:		
School Planning		
Student's Knowledge of His or Her Illness:		
Information to Share with Staff and Classmates:		
Other Siblings in School and Grades:		
Recommendations and Accommodations:		
School Re-Entry Plans (visit, conference, evaluation, etc.):		

My Student's Healthcare Plan continued

Hospital Contacts	A release of information form has been signed by a parent or guardian to allow this student's team at CHOP to share information with his/her school team (If also needed) A release of information form has been signed by a parent or guardian to allow this student's school team to share information with his/her team at CHOP.		
Name: Role:	Primary Team Contact	Ph:	Email:
Name:	Role:	Ph:	Email:
Name:	Role:	Ph:	Email:
School Contacts			
Name: Role:	Primary School Contact	Ph:	Email:
Name:	Role:	Ph:	Email:
Name:	Role:	Ph:	Email:
Family Contacts			
Name:	Relationship:	Ph:	Email:

Resources

Barakat, L. (2010). When Children With Cancer Return to the Classroom. Can be found following http://www.workingmother.com

Fasciano, K. (2007). ASCO Expert Corner: Returning to School After Cancer. Can be found following www.cancer.net/portal/site/patient/menuitem

National Cancer Institute. (1993). Young People with Cancer: A Handbook for Parents.

The American Society of Clinical Oncology. (2009). Returning to School after Treatment.

The American Society of Clinical Oncology. (2009). Cancer and School.

The Children's Hospital of Philadelphia. (2009). Welcoming the Child with Cancer Back to School: An Educator's Guide.

The American Cancer Society. (2011). Children Diagnosed with Cancer: Returning to School.

Organization Contacts for Educational Materials

CureSearch

Phone: 1-800-458-6223 Web: www.curesearch.org

This website provides links for parents and teachers for supporting patients of cancer and their siblings. It includes ideas about how a teacher or his/her classroom can help a child with cancer. Educators will find information on talking to a classroom about a student's cancer diagnosis.

American Childhood Cancer Organization

Phone: 1-855-858-2226

Web: www.acco.org

Provides information on cognitive late effects in survivors as well as support and advocacy information. This is a self-help network for parents of children with cancer. Services include support from other families, reading materials, a quarterly newsletter for parents and professionals, and a newsletter for children.

Leukemia and Lymphoma Society

Phone: 1-800-955-4572

Web: www.lls.org

This website provides information and resources related to leukemia and lymphoma and more specifically, it has National Education Programs that include archived teleconferences on: Educational Changes After Treatment: Middle School through College; New Beginnings After Childhood Cancer: Return to Elementary School; others on cognitive late effects, advocating for your child's school needs. Link to the booklet "Learning and Living with Cancer: Advocating for your child's educational needs": http://www.leukemia-lymphoma.org/attachments/National/br_1139926622.pdf

National Dissemination Center for Children with Disabilities

Phone: 1-800-695-0285 Web: www.nichcy.org

This center serves as a central source of information on: IDEA, special education law and research-based information on effective educational practices. The Center offers bilingual services and a team of research and information specialists who are available to talk with you and address your individual questions and concerns in English or in Spanish.

Legal Rights

The Philadelphia Education Law Center

Phone: 215-238-6970 Web: www.elc-pa.org/

Provides free legal assistance to parents, students, and advocates on education law matters, and advises parents of their rights to special services under the law. The center publishes a free guide for parents, "The Right to Special Education in Pennsylvania." To access the New Jersey ELC:

www.edlawcenter.org

Wrightslaw

Email: webmaster@wrightslaw.com

Web: www.wrightslaw.com

Wrightslaw is an information and support website covering a wide range of special education, legal and policy topics, and publishes materials on these topics. Additional resources include information on books, DVDs, websites and searchable libraries.