

SPECIAL NEEDS ACCOMMODATION PROCESS (SNAP) TEAM CARE PLAN

For use of this form, see AR 608-75; the proponent agency is OACSIM.

Part A - Demographic Information

1. Name of child		2. Date of birth (YYYYMMDD)	
3. Type of placement		4. Date of placement (YYYYMMDD)	
5. Sponsor name		6. Spouse name	
7. Home phone	8. Duty phone	9. Cell phone	
10. Emergency point of contact (POC) name		11. Emergency POC phone number	

Part B - Medical Requirements

Below are medical requirements for reasonably accommodating the above named child in a Child and Youth Services Program.

1. Medications No Yes (list each medication separately)

Name	Dosage	Frequency	Special Instructions (e.g., refrigeration)

Individuals authorized to administer medications to child or youth while attending CYS programs (for example, nurse, family child care provider, child and youth program assistant, self). NOTE: Self administration of medication will be determined by age and maturity of child or youth.

Names:

2. Physical accommodations

- Facility accessibility (e.g., ramps; widen doors)
- Assistive devices and/or technology (e.g., Braille computer; canes)
- Transportation (where applicable/feasible)
- Other (explain) _____

3. Dietary restrictions

- Food allergies (e.g., peanut butter)
- Special diet
- Other (explain) _____

4. Routine or "as needed" medical procedures

- Glucose monitoring
- Use of hand held or powered nebulizers
- Catherization
- Gastrostomy tube feeding
- Other (explain) _____

Part C - Program Accommodations

1. Specific plans or accommodations reflected in child's Individualized Family Service Plan (IFSP), Individualized Education Program (IEP) or 504 plan that impact on child care setting.

2. Management techniques used in home setting

- Behavior modification
- Time out
- Other (explain) _____

3. Child can be accommodated within CYS established staff/child ratios

- No Yes

4. Assistance with activities for daily participation in CYS settings

- Dressing
- Eating
- Toileting/diapering
- Small motor
- Large motor
- Supervision (adult/child ratio)
- Play/work in large groups
- Play/work in small groups
- Field trips (walking)
- Field trips (transported)
- Special events (usually large groups)
- Other (explain) _____

5. Assistance with activities for occasional participation in CYS settings

- Dressing
- Eating
- Toileting/diapering
- Small motor
- Large motor
- Supervision (adult/child ratio)
- Play/work in large groups
- Play/work in small groups
- Field trips (walking)
- Field trips (transported)
- Special events (usually large groups)
- Other (explain) _____

Part D - Child and Youth Services Staff Training

1. Type of training required

2. Trainer

3. Projected training date (YYYYMMDD)

4. Frequency

5. Location

Signature of Chair, SNAP Team

Date (YYYYMMDD)

Signature of Child and Youth Services Coordinator

Date (YYYYMMDD)

Signature of Army Public Health Nurse

Date (YYYYMMDD)

Signature of Parent

Date (YYYYMMDD)