

THE SCHOOL RE-ENTRY TOOLKIT

A Two-Part System for Supporting Students After Illness, Surgery, or Hospital Care

Created for: Students, Families, Teachers, School Staff, and Healthcare Providers

Purpose: This guide is designed to share general information and practical considerations to help support conversations among families, schools, and healthcare teams when a child is returning to school after illness or surgery. This should not replace guidance from a child's healthcare providers, educators, or other qualified professionals.

HOW TO USE THIS TOOLKIT

This toolkit has **two parts** designed for different audiences:

PART 1: Student & Family Guide

Written at a 6th-grade reading level

For students returning to school and their families

Warm, accessible, trauma-informed language

Fill-in-the-blank tools students can use immediately

PART 2: Professional Implementation Guide

Written for school staff and healthcare providers

Detailed checklists, legal frameworks, and protocols

Professional language with actionable steps

Templates and resources for official implementation

Hospitals and schools can distribute both parts together or separately based on the audience's needs.

PART 1: STUDENT & FAMILY GUIDE

1. WELCOME BACK (For Students)

Returning to school after being sick, in the hospital, or having surgery is a big step. You might feel excited to see your friends again, but you might also feel nervous, tired, or unsure. These feelings can change every day, and that is completely normal. When your body goes through something big, your mind and energy change too. You are not expected to "bounce back" right away or feel exactly like you used to.

This toolkit was made to help you feel safer and more supported as you return. It helps you share what you need without having to talk about private medical information. It also helps your teachers understand how to help you learn while your body and brain continue to heal.

You deserve patience, respect, and a chance to learn at a pace that feels right for you. You are not alone in this process, and you do not need to explain everything or pretend to be okay when you're not. This toolkit is here to guide you step by step.

2. WHY YOU MAY FEEL DIFFERENT NOW

After an illness, major treatment, or surgery, school may feel harder than it used to. This isn't because you're doing something wrong. It's because your body and brain are still recovering, even if you look the same on the outside.

How your body might feel different

You might feel tired even after doing small things, like walking between classes or sitting in your seat too long. You may feel dizzy, weak, or have headaches. Loud sounds or bright lights might bother you more than before. It may take you longer to move around or get comfortable in your chair.

How your thinking might feel different

Your brain might feel slower or foggy. You might forget steps in a task or lose focus during lessons. Reading might take longer, and writing might feel harder. You may

understand something one day and then struggle with the same thing the next day. This happens to many students who return after an illness.

How your feelings might change

It's common to feel nervous, stressed, or overwhelmed by things that never bothered you before. You may feel sad or frustrated because you want things to go back to normal. You may be afraid that people will treat you differently or ask questions you don't want to answer.

How your social life might feel different

You might want to see your friends, but you might also worry about what to say or how to talk about what happened. Some kids want to share everything. Some want to share nothing. Both are okay.

Everything you are feeling is normal. Nothing about your reaction is wrong or strange. This toolkit helps you communicate these changes without needing to explain private health details.

3. HOW THIS TOOLKIT HELPS YOU

This toolkit is designed to make your return to school easier. It gives you simple ways to tell teachers what you need so you don't have to explain your medical situation. It also helps your family and teachers understand what you are going through, even when they can't see it.

This toolkit will help you:

- Describe how you're feeling in clear, simple ways
- Decide who at school you feel comfortable talking to
- Understand what kind of school day feels safe right now
- Know what to do if you feel tired, stressed, or dizzy
- Figure out how to handle homework and tests
- Plan what you want to say — or not say — to friends
- Create a safety plan if you feel unwell during school
- Help teachers know exactly how to support you
- Help your family talk to the school without stress

You do not have to fill out every section.
You do not have to explain anything you don't want to.
You get to choose what feels right.

4. STUDENT PACKET: HOW SCHOOL CAN SUPPORT ME

You can fill this out alone or with a trusted adult. You don't need to share medical information. You only need to share how school feels for you right now.

About Me

My name is: _____

I am in grade: _____

My school is: _____

The adults at school I feel okay talking to are:

- My teacher
- School counselor
- School nurse
- Administrator
- Another adult I trust: _____

This helps your school know who to check in with and who to direct questions to — so you don't have to keep repeating yourself.

What I Want My School to Know

You do not have to explain your illness. You can simply describe what school feels like for you right now.

You might want your teachers to know that:

- You may miss school sometimes because you're still healing
- You may feel very tired or low-energy some days

- You might need breaks to stay focused or calm
- Your schedule may change because of appointments
- You may need extra time to finish work
- Loud noises, bright lights, or crowded spaces might be hard
- You are trying your best, even when it doesn't show

If you want to add more, you can write it here in simple words:

What Helps Me Do My Best

Every student learns differently, and recovering students may need small changes to help their brains and bodies work comfortably.

Things that may help you include:

- Extra time on classwork or tests when you're tired
- Having due dates moved back on days you don't feel well
- Getting notes, slides, or recorded lessons when you miss class
- Having a quiet place to work if the classroom feels too loud
- Taking short breaks to rest or breathe
- Getting instructions written down so you don't forget steps
- Doing smaller parts of assignments instead of long tasks

You can choose as many as you want. Or you can write your own ideas:

My Symptoms and How They Affect Me

Sometimes it's hard to explain what you're feeling, especially when adults expect details you don't want to share. These simple sentences help your teachers understand your day better.

My body feels different when:

- Walking long distances makes me tired
- Loud sounds or bright lights bother me
- I need to sit down or take breaks more often
- I feel dizzy, sore, or weak sometimes

My thinking feels different when:

- I lose focus faster than I used to
- I forget steps in assignments
- I understand something one day but not the next
- Reading or writing takes longer than normal

My feelings feel different when:

- I get worried or overwhelmed in class
 - I feel stressed by too much work at once
 - I don't want people asking questions
 - I feel behind even when I'm trying hard
-

My School Day Plan

You may not be ready for full days yet — and that is okay. Healing takes time, and you deserve a gentle return.

You can pick a plan that feels safe:

- Starting with half-days
- Coming only in the morning or afternoon
- Coming every other day
- Coming full days but with extra breaks
- Coming full days but with lighter work

You can also choose the types of breaks that help:

- A quiet break in the hallway or nurse's office
- A water or bathroom break
- A short walk to calm your mind
- A "pause break" at your desk

This plan helps teachers understand your limits without needing to ask questions.

My Homework Plan

Homework can feel overwhelming when you're recovering. It is okay to do less for a little while.

You may need:

- Less homework for now
- More time to finish things
- Shorter or broken-up assignments
- Help with long or confusing tasks
- A plan to skip work that isn't essential

Healing is not a race. School should fit around your recovery.

Talking to Friends

Thinking about what classmates might say can be stressful. You get to choose how much you want people to know.

If someone asks, "What happened?" you can say:

- "I'm still getting my energy back."
- "I don't want to talk about it, but thank you."
- "I'm okay, just taking things slow."
- "I'd rather not go into it right now."

No one needs more information than you want to give.

Safety Plan (If Needed)

If you suddenly feel dizzy, stressed, in pain, or overwhelmed, it's important to have a plan.

Adults I should go to:

- School nurse
- Counselor
- My teacher
- Other: _____

Places I should go:

- Nurse's office
- Counselor's office
- Main office
- Quiet room
- Hallway for a short walk

Things that help me feel safe:

- Slow breathing
- Quiet time
- Water
- Grounding exercises
- Talking privately to an adult

This helps you feel prepared instead of scared.

5. FAMILY GUIDE: SUPPORTING YOUR CHILD'S RETURN

When your child returns to school after being sick, having surgery, or spending time in the hospital, it can be stressful for everyone. You may feel unsure about what school will expect, how much your child can handle, and how to explain the situation without sharing private details.

This guide helps you understand what your child may experience, how to talk to the school, and what steps you can take to make the process smoother for your family. You do not need to be an expert. You only need to know your child — and you already do.

What Your Child May Be Feeling

Even if your child looks physically better, healing can continue for weeks or months. Their energy, thinking, and emotions may change from day to day.

Your child may:

- Get tired much faster than usual, even during simple activities
- Feel overwhelmed in busy or noisy places
- Worry about falling behind
- Be nervous to talk to classmates
- Feel sad or stressed even when things seem fine
- Forget things more easily
- Have trouble concentrating
- Feel embarrassed about needing extra help

These changes are normal. They do not mean something is wrong with your child. They mean their body and brain are working hard to get back to full strength.

How to Talk to the School (Without Sharing Personal Details)

You never need to explain your child's diagnosis, treatment, or medical history. Instead, you can focus on what your child needs at school.

Here is a simple way to communicate:

"My child is recovering and wants to return to school safely. Their energy and focus may change during the day. We would appreciate flexible support so they can stay engaged while still healing."

This kind of statement tells teachers exactly what matters without sharing anything private.

Who to Contact First

Most families begin by talking to:

- The school counselor
- The school nurse
- A trusted teacher
- The assistant principal

These adults can help spread the information so you don't have to repeat yourself many times.

You can say:

"We would like a point person at the school who can help coordinate support so my child doesn't have to explain things again and again."

This keeps communication organized and reduces stress for your child.

What to Expect During the First Few Weeks

The first weeks back can be unpredictable. Some days will feel easier than others. Your child may come home exhausted, emotional, or frustrated. This is part of the adjustment.

You can help by:

- Giving them quiet time after school
- Helping break homework into smaller parts
- Reminding them it's okay to take breaks
- Keeping routines calm and predictable
- Celebrating small steps
- Not expecting them to be "back to normal" right away

Your child's job is to heal, not to be perfect.

What to Do If Things Go Wrong

Sometimes flexibility isn't followed, or teachers forget, or your child feels overwhelmed. You should never feel helpless.

Here is a simple three-step plan for resolving problems:

Step 1: Check in with the teacher

Use calm, clear language:

"We want to work together. These supports help my child access learning while they're still healing."

Step 2: Involve the point person

You can say:

"We need help making sure the plan is consistent across classes."

Step 3: Contact an administrator

If needed:

"We are asking for access and safety, not special treatment."

You are not demanding anything unusual — you are protecting your child's right to learn comfortably.

Understanding Your Legal Rights

Your child may be entitled to formal support through federal laws. You do not need to be a lawyer to access these protections.

Section 504 of the Rehabilitation Act provides accommodations for students with conditions that affect learning. Examples include extra time, modified attendance, or rest breaks.

Individualized Education Program (IEP) under IDEA provides special education services if the condition affects educational performance.

Homebound or Hospital Instruction may be available if your child cannot attend school for an extended period (usually 2-4 weeks or more, depending on state rules).

To request these services: Contact your school's counselor, nurse, or special education coordinator and say:

"I would like to discuss whether my child qualifies for accommodations or services while they recover."

The school must respond and evaluate your request. You have the right to ask for help.

What Your Child Needs Most From You

Your child needs to know that you believe them, support them, and will advocate for them when they cannot do it themselves.

They need to hear:

- "I believe you when you say you're tired."
- "It's okay to go slower right now."
- "You don't have to explain yourself to anyone."
- "I will make sure school understands."
- "Healing is more important than grades right now."

Your calm confidence helps them feel safe.

6. QUICK TIPS FOR EVERYONE

For Students:

- You don't owe anyone an explanation
- Ask for what you need, even if it feels hard
- Rest is part of healing, not laziness
- It's okay if some days are harder than others

For Families:

- You know your child best — trust your instincts
- You have the right to ask for support
- You don't need to share medical details
- Be patient with yourself and your child

For Teachers:

- Small adjustments make a big difference
- Believe students when they say they're struggling
- Flexibility is not lowering standards
- Check in privately, not publicly

For Schools:

- Assign one point person to coordinate support
 - Share only what teachers need to know
 - Protect student privacy
 - Follow through on agreed accommodations
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PART 2: PROFESSIONAL IMPLEMENTATION GUIDE

SECTION 1: FOR SCHOOL ADMINISTRATORS

Your Role in Successful Reintegration

As a school administrator, you set the tone for how returning students are supported. Your leadership ensures that accommodations are implemented consistently, communication is clear, and the student's privacy is protected.

Students who return after hospitalization, illness, or surgery are not asking for special treatment. They are asking for access to learning while their bodies and minds continue to heal. Your response to their needs demonstrates your school's commitment to equity and inclusion.

Step 1: Assign a Reintegration Coordinator

Who it should be:

A school counselor, nurse, social worker, or trusted administrator who can serve as the primary point of contact for the family and student.

What they do:

- Receive the completed Student Packet from the family
- Communicate the student's needs to relevant teachers
- Monitor implementation of accommodations
- Serve as the go-to person if problems arise
- Check in with the student regularly
- Coordinate follow-up meetings

Why this matters:

Without a designated coordinator, families must repeat themselves to multiple staff members, students feel unsupported, and accommodations are inconsistently applied.

Step 2: Hold a Reintegration Planning Meeting

Before the student returns to school, schedule a meeting with:

- The student (if they feel comfortable)
- The family
- The reintegration coordinator
- Relevant teachers
- School nurse (if medical needs exist)
- Special education coordinator (if 504 or IEP is being considered)

Purpose of the meeting:

- Review the Student Packet
- Develop a clear reintegration plan
- Clarify what information will be shared with teachers
- Establish communication protocols
- Set a timeline for check-ins and plan review

Key principle: The family controls what medical information is shared. You only need to know what the student needs at school — not their diagnosis or treatment details.

Step 3: Communicate With Teachers Clearly and Respectfully

Teachers do not need to know the student's diagnosis. They need to know how to support the student's learning.

Sample communication to teachers:

"[Student name] is returning to school after a medical absence. They may experience fatigue, difficulty concentrating, or need additional time on assignments. The following accommodations have been agreed upon:

*- Extended time on tests and assignments

- Permission to take breaks as needed
- Reduced homework load temporarily
- Flexibility with attendance*

Please implement these accommodations consistently. [Coordinator name] is the point person for questions or concerns. Please protect the student's privacy and avoid drawing attention to their accommodations in front of peers."

What NOT to include:

- The student's diagnosis
 - Details about treatment or prognosis
 - Medical terminology
 - Information the family has not authorized you to share
-

Step 4: Monitor Implementation and Make Adjustments

Accommodations only work if they are actually implemented. Your job is to ensure follow-through.

How to monitor:

- Check in with the reintegration coordinator weekly during the first month
- Ask teachers how things are going
- Follow up with the family
- Schedule a review meeting 2-4 weeks after return

Red flags that indicate problems:

- Teachers say they "forgot" about accommodations
- Student reports that supports are not being provided
- Family expresses frustration or confusion
- Student's grades drop significantly or they show signs of distress

When adjustments are needed:

Meet with the team and revise the plan. Recovery is not linear — what works one week may need to change the next.

Step 5: Protect Student Privacy

Federal law (FERPA) protects students' educational records, including medical information.

Privacy guidelines:

- Share information only with staff who directly support the student
- Do not discuss the student's situation in faculty meetings or in front of other students
- Do not post accommodations publicly (e.g., on a bulletin board)
- Remind teachers that medical details are confidential

If other students or parents ask questions:

"We don't discuss individual students' private information. All students receive the support they need to succeed."

Step 6: Understand Legal Protections and Formal Plans

Some students may qualify for formal support under federal law. Understanding these options helps you provide appropriate services.

Section 504 Plan

What it is: Accommodations for students whose condition substantially limits a major life activity (including learning)

Common accommodations:

- Extended time
- Reduced workload
- Modified attendance policies
- Preferential seating
- Access to rest breaks
- Use of elevator or reduced walking

Process:

1. Family requests a 504 evaluation
2. School evaluates whether the student qualifies
3. If eligible, a 504 team develops an accommodation plan
4. Plan is reviewed annually or as needed

Timeline: Schools should respond to requests promptly (typically within 10-15 school days, though timelines vary by state)

Individualized Education Program (IEP)

What it is: Special education services for students whose condition affects educational performance and requires specialized instruction

When to consider: If accommodations alone are not sufficient and the student needs specially designed instruction or related services (like physical therapy, counseling, etc.)

Process:

1. Family requests an evaluation for special education
2. School conducts a comprehensive evaluation
3. Team determines eligibility
4. If eligible, an IEP is developed with goals, services, and accommodations

Timeline: Evaluation and eligibility determination must occur within 60 days in most states (check your state's specific timeline)

Homebound or Hospital Instruction

What it is: Educational services provided when a student cannot attend school due to medical reasons

Requirements vary by state but typically:

- Requires a physician's statement
- Applies when absence is expected to last 2-4 weeks or more
- Services may include home visits, virtual instruction, or modified assignments

Process:

Contact your district's special education or student services office to initiate homebound services.

Common Administrator Mistakes to Avoid

- ✗ Waiting for the family to ask for accommodations instead of proactively offering support
 - ✗ Requiring extensive medical documentation before providing basic flexibility
 - ✗ Treating accommodations as "special privileges" rather than access needs
 - ✗ Allowing teachers to decide whether to implement agreed-upon accommodations
 - ✗ Sharing medical information with staff who don't need to know
 - ✗ Assuming the student should be "back to normal" after a certain amount of time
 - ✓ **Instead:** Be proactive, protective, and responsive. Accommodations should be implemented immediately and adjusted as needed.
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Sample Reintegration Plan Template

STUDENT REINTEGRATION PLAN

Student Name: _____
Date of Plan: _____
Expected Return Date: _____
Reintegration Coordinator: _____
Family Contact: _____
Next Review Date: _____

RETURN SCHEDULE:

- Full-time return beginning: _____
 - Gradual return:
 - Week 1: _____
 - Week 2: _____
 - Week 3: _____
-

ACADEMIC ACCOMMODATIONS:

- Extended time on assignments and tests
 - Reduced homework load
 - Excused absences for medical appointments
 - Access to class notes/slides when absent
 - Preferential seating
 - Permission to take breaks
 - Modified physical education
 - Other: _____
-

PHYSICAL/ENVIRONMENTAL NEEDS:

- Access to elevator
 - Permission to use restroom without asking
 - Access to water/snacks
 - Reduced walking between classes
 - Quiet workspace available
 - Other: _____
-

SOCIAL/EMOTIONAL SUPPORT:

- Regular check-ins with: _____
 - Access to counselor as needed
 - Safe space identified: _____
 - Other: _____
-

COMMUNICATION PLAN:

Primary contact for family questions: _____

Method of communication: Email Phone In-person

Frequency of updates: _____

Information shared with teachers: _____

EMERGENCY PROCEDURES (if applicable):

Signs/symptoms requiring immediate attention: _____

Emergency contacts: _____

Emergency response plan: _____

SIGNATURES:

Family: _____ Date: _____

Administrator: _____ Date: _____

Coordinator: _____ Date: _____

Student (optional): _____ Date: _____

SECTION 2: FOR TEACHERS

Understanding Your Returning Student

When a student returns to your classroom after hospitalization, illness, or surgery, they may look the same as before. But their capacity for learning, focus, and participation may have changed significantly. These changes are invisible, which makes them easy to miss or misunderstand.

Your support can make the difference between a student who thrives and a student who struggles silently. You do not need medical training. You only need to be observant, flexible, and willing to adjust your approach.

What You Need to Know

Students returning from medical events often experience:

- **Fatigue that appears without warning** — A student may participate fully one day and be completely exhausted the next
- **Difficulty concentrating** — Their brain may need more time to process information or complete tasks
- **Memory challenges** — They may forget instructions, lose track of assignments, or need reminders
- **Emotional vulnerability** — Small frustrations may feel overwhelming; they may cry more easily or shut down
- **Physical discomfort** — Sitting for long periods, loud noises, bright lights, or crowded spaces may be difficult
- **Anxiety about being behind** — They may feel pressure to catch up immediately, which increases stress

These changes are not about effort or motivation. They are about recovery. Your patience and flexibility help students stay engaged without damaging their health.

Practical Classroom Strategies

Create a Safe, Predictable Environment

Students recovering from medical events need to know what to expect. Predictability reduces anxiety and helps them manage their energy.

How to do this:

- Provide a written agenda or schedule at the beginning of class
- Give advance notice when plans will change
- Post assignments and due dates clearly
- Offer a quiet corner or alternative seating if the student needs space

Build in Flexibility Without Lowering Expectations

Accommodations are about access, not reduced standards. The goal is to help students demonstrate their knowledge in ways that work for their current capacity.

Examples:

- **Instead of:** "Everyone must complete all 20 problems."
Try: "Complete as many as you can. Focus on showing your understanding."
- **Instead of:** "This essay is due Friday, no exceptions."
Try: "This essay is due Friday. If you need more time, let me know by Thursday."
- **Instead of:** "You need to participate in every group discussion."
Try: "Participate when you feel able. You can also share your ideas in writing."

Offer Breaks and Movement

Sitting still for 45+ minutes can be exhausting for recovering students. Allowing brief breaks prevents meltdowns and keeps them engaged longer.

How to do this:

- Allow the student to step into the hallway for 2-3 minutes
- Let them get water or use the restroom without asking
- Permit standing or walking quietly in the back of the room
- Normalize breaks: "If anyone needs to step out, that's fine."

Check In Privately, Not Publicly

Recovering students often feel self-conscious. Public attention can increase anxiety.

Good check-ins:

- Quiet conversation before or after class: "How are you feeling today? Do you need anything?"
- Written note on their paper: "Let me know if you need more time."
- Private signal (thumbs up/down) to assess how they're doing

Avoid:

- Asking in front of the class: "Are you okay? Do you need to sit down?"
- Drawing attention to accommodations: "Remember, some students get extra time."
- Hovering or constantly watching them

Prioritize Essential Learning

When students miss significant instruction, trying to make up everything creates overwhelm. Focus on what truly matters.

How to prioritize:

1. Identify the 3-5 most important concepts from the missed unit
2. Provide a summary or study guide covering essentials
3. Allow the student to demonstrate understanding through alternative assessments
4. Let go of non-essential assignments

Example:

"You missed our unit on the Civil War. Instead of completing all 15 assignments, let's focus on understanding the causes, key events, and outcomes. I'll give you a reading guide and you can show your learning through a short written reflection or a conversation with me."

Handling Specific Classroom Situations

When a student turns in work late

Instead of penalizing: Accept it without comment or gently say, "Thanks for getting this to me. Let me know if you need help with the next one."

Why: Recovering students are often doing their absolute best just to complete work. Penalties for lateness can feel punishing when they're already struggling.

When a student seems disengaged or distracted

Instead of assuming they don't care: Check in privately: "I noticed you seemed tired today. Is there anything I can do to help?"

Why: Disengagement is often a sign of exhaustion, pain, or overwhelm — not apathy.

When a student asks to leave class

Instead of questioning their need: Say, "Of course. Take the time you need."

Why: If a student asks to leave, they're likely at their limit. Trusting them builds their confidence to advocate for themselves.

When a student has a breakdown or becomes emotional

Instead of dismissing their feelings: Offer support: "I can see you're having a hard time. Would you like to step outside or talk to the counselor?"

Why: Recovery is emotionally taxing. Validating their feelings helps them feel safe.

When other students ask questions

Instead of sharing details: Say, "They've been dealing with some health stuff and are working hard to catch up. Let's give them space and be welcoming."

Why: The student's privacy must be protected. Peers should know only what the student has approved.

What NOT to Do

- ✗** ****Don't assume the student is "fine" because they look**
 - ✗** **Don't assume the student is "fine" because they look normal**
 - ✗** **Don't compare them to their "before" self ("You used to finish this so quickly!")**
 - ✗** **Don't minimize their experience ("Everyone gets tired sometimes")**
 - ✗** **Don't make them explain themselves repeatedly**
 - ✗** **Don't draw unwanted attention to their accommodations**
 - ✗** **Don't gossip about their situation with other staff**
 - ✓** **Instead:** Be kind, flexible, private, and patient. Trust that they're doing their best.
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Teacher Checklist: Supporting a Returning Student

Before the Student Returns:

- Attend reintegration meeting (if invited)
- Review accommodation plan provided by coordinator
- Understand what information can be shared about the absence
- Prepare academic catch-up plan (prioritize essential content)

- Consider classroom environment (seating, lighting, noise)
- Plan how to welcome student back naturally

First Day Back:

- Greet student warmly without making a big deal
- Provide brief, private check-in if appropriate
- Ensure student knows they can ask for help or breaks
- Implement agreed accommodations immediately
- Monitor for signs of fatigue or discomfort

First Few Weeks:

- Implement accommodations consistently
- Be flexible with deadlines while maintaining expectations
- Check in regularly but privately
- Communicate with family about progress and concerns
- Adjust accommodations if needed
- Celebrate small successes

Ongoing:

- Treat student as normally as possible while honoring needs
- Maintain communication with coordinator and family
- Watch for signs that additional support is needed
- Foster independence while remaining available
- Remember recovery is not linear

SECTION 3: FOR SCHOOL NURSES

Your Critical Role

As the school nurse, you are often the bridge between medical care and educational support. Families and students trust you with sensitive health information, and teachers look to you for guidance on supporting students' physical needs.

Your role is to ensure the student's medical needs are safely managed at school while protecting their privacy and helping them feel comfortable accessing care when needed.

Before the Student Returns

Coordinate with the family:

- Request any necessary medical documentation (physician's note, medication orders, emergency action plan)
- Clarify activity restrictions (if any)
- Understand signs/symptoms that require notification or emergency response
- Discuss medication administration needs
- Ask what the student wants staff to know vs. what should remain private

Prepare your office:

- Stock any needed supplies
- Ensure medication storage is appropriate
- Create a safe, comfortable space for the student if they need to rest

Communicate with school staff:

- Share general health information on a need-to-know basis only
 - Clarify when you should be notified
 - Explain any physical restrictions without disclosing diagnosis
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During Reintegration

Serve as the medical liaison:

- Be available for questions from teachers and family
- Monitor student's health status during the school day
- Check in with student regularly (without hovering)
- Document any health concerns or incidents
- Coordinate with healthcare providers as appropriate

Watch for red flags:

- Unusual fatigue or weakness
- Pain or discomfort
- Dizziness or balance issues
- Changes in mental status
- Signs of infection or complications
- Emotional distress

If concerns arise: Contact family immediately and follow emergency protocols if necessary.

Protecting Student Privacy

You have access to sensitive medical information that others do not need to know.

General guidelines:

- Share only what is necessary for safety and appropriate support
- Do not discuss diagnoses, prognoses, or treatment details with teachers
- Keep medical records confidential
- Let the family control what information is shared

Example of appropriate communication:

"This student needs to take breaks as needed and should have access to water throughout the day. Please send them to me if they appear unwell."

Example of inappropriate communication:

"This student had chemotherapy and is immunocompromised, so watch for signs of infection." (Unless family explicitly authorized this level of detail)

Nurse Checklist

Before Return:

- Receive medical documentation from family
- Review activity restrictions and medical needs
- Set up medication administration plan (if needed)
- Create emergency action plan (if applicable)
- Stock necessary supplies
- Identify signs/symptoms requiring immediate attention

Ongoing:

- Serve as medical liaison between family and school
- Monitor student's health at school
- Be available as a safe space for the student
- Communicate concerns to family promptly

- Document health-related incidents
 - Update staff if needs change
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SECTION 4: FOR SCHOOL COUNSELORS

Your Unique Position

School counselors are often the first point of contact for families navigating school reintegration. You understand both the academic and emotional dimensions of what students are experiencing, and you can coordinate support across multiple areas.

Your role is to help students process the emotional impact of their experience, facilitate social reintegration, and ensure they have the mental health support they need.

Before the Student Returns

Meet with family and student (if appropriate):

- Discuss social and emotional concerns
- Ask how the student wants to handle peer questions
- Assess whether individual counseling would be helpful
- Identify any peer support or buddy system opportunities

Assess mental health needs:

- Is the student showing signs of anxiety, depression, or trauma?
- Would they benefit from regular check-ins?
- Should you connect the family with outside mental health resources?

Prepare for social reintegration:

- With family permission, consider how to prepare classmates
 - Develop scripts for handling peer questions
 - Identify supportive peers who can help student feel welcomed
-

During Reintegration

Provide ongoing support:

- Schedule regular check-ins with the student
- Offer a safe space for processing feelings
- Monitor for signs of anxiety, depression, or social withdrawal
- Help student develop coping strategies
- Facilitate connection with peers

Watch for warning signs:

- Persistent sadness or withdrawal
- Increased anxiety or panic
- Significant changes in behavior
- Social isolation
- Statements about not wanting to live or feeling like a burden
- Academic disengagement beyond expected adjustment

If concerns arise: Communicate with family, provide appropriate referrals, and follow school safety protocols.

Supporting Peer Relationships

With family permission and student input, you may help facilitate social reintegration.

Options include:

- Brief classroom education about supporting returning students (general, not specific to one student)
- Small group conversations with close friends
- Peer buddy system
- Social skills groups

Sample script for close friends:

"Your friend has been away dealing with some health challenges. They may seem different or tired sometimes. The best thing you can do is be a good friend — include them, be patient, and let them share what they want to share without pushing for details."

Counselor Checklist

Before Return:

- Meet with student/family about social-emotional concerns
- Assess whether individual counseling is needed
- Develop plan for handling peer questions
- Identify peer support opportunities
- Coordinate with teachers on social-emotional needs

Ongoing:

- Check in regularly with student
- Provide safe space for processing feelings
- Monitor for mental health concerns
- Facilitate peer education/awareness (if requested)
- Connect family with community resources as needed
- Communicate with team about social-emotional progress

SECTION 5: LEGAL FRAMEWORKS & FORMAL SUPPORT

Understanding Students' Rights

Students returning from medical events may be entitled to protections and services under federal law. This section provides an overview of the most common legal frameworks that support these students.

Important note: This is educational information only. Families should consult with their school's special education coordinator, counselor, or an education advocate for guidance specific to their situation.

Section 504 of the Rehabilitation Act

What it provides:

Accommodations for students with disabilities (including medical conditions) that substantially limit one or more major life activities, including learning.

Who qualifies:

Students whose condition significantly affects their ability to learn or participate in school. This can include students recovering from surgery, managing chronic illness, or experiencing ongoing effects of medical treatment.

Common accommodations:

- Extended time on tests and assignments
- Modified attendance policies
- Reduced homework load
- Permission to take breaks
- Preferential seating
- Use of elevator or reduced walking
- Modified physical education
- Access to rest area
- Flexible deadlines

Process:

1. Parent/guardian requests a 504 evaluation in writing
2. School evaluates whether student qualifies
3. If eligible, a 504 team (including parents) develops an accommodation plan
4. Plan is documented and provided to teachers
5. Plan is reviewed annually or when needs change

Timeline: Schools should respond to evaluation requests promptly (typically 10-15 school days, though requirements vary by state).

Key principle: Accommodations provide access, not advantage. They level the playing field so students can demonstrate their knowledge despite physical or cognitive challenges.

Individuals with Disabilities Education Act (IDEA)**What it provides:**

Special education services for students whose disability affects educational performance and who require specially designed instruction.

Who qualifies:

Students whose medical condition creates an educational disability that cannot be

addressed through accommodations alone. They need specialized instruction, therapies, or related services.

Services may include:

- Specialized academic instruction
- Speech/language therapy
- Physical or occupational therapy
- Counseling services
- Assistive technology
- Modified curriculum
- Small group or one-on-one instruction

Process:

1. Parent/guardian requests evaluation for special education
2. School conducts comprehensive evaluation
3. Team determines eligibility under one of 13 disability categories
4. If eligible, IEP team develops Individualized Education Program with goals, services, and accommodations
5. IEP is reviewed annually; student is re-evaluated every 3 years

Timeline: Evaluation and eligibility determination must be completed within 60 days in most states (check state-specific requirements).

Key difference from 504:

IEPs provide specialized instruction and services, not just accommodations. They're more comprehensive but also require the student to qualify under specific disability categories.

Homebound or Hospital Instruction

What it provides:

Educational services for students who cannot attend school due to medical reasons for an extended period.

Who qualifies:

Students with a physician's statement indicating they are unable to attend school for a specified minimum period (typically 2-4 weeks, depending on state law).

Services may include:

- Home visits by certified teachers
- Virtual/online instruction
- Modified assignments
- Tutoring in specific subjects
- Coordination with hospital school programs

Process:

1. Physician provides written statement of medical need
2. Family contacts school district's special education or student services department
3. School arranges homebound services
4. Services begin while student is unable to attend school
5. Services end when student returns or no longer qualifies

State variations: Requirements and service levels vary significantly by state. Contact your district for specific information.

Family Educational Rights and Privacy Act (FERPA)

What it provides:

Protection of student educational records, including medical information in school files.

Key rights:

- Parents control access to their child's educational records
- Parents decide what medical information is shared with school staff
- Schools cannot share student records without parental consent (with limited exceptions)
- Parents can review and request corrections to records

Application to reintegration:

Families decide what information teachers and staff receive about the student's medical situation. Schools must protect this privacy and share information only on a need-to-know basis.

How to Request Support

For any of these services, families should:

1. **Make the request in writing** (email is fine)
2. **Address it to** the school principal, counselor, or special education coordinator
3. **Include:**
 - Student's name and grade
 - Brief statement of concern
 - Request for evaluation or services
 - Request for response in writing

Sample request:

"I am writing to request a Section 504 evaluation for my child, [Student Name], who is in [Grade] at [School]. [He/She/They] recently returned to school after [surgery/hospitalization/illness] and is experiencing difficulty with [fatigue/concentration/attendance]. I believe accommodations may help [him/her/them] access learning while recovering. Please let me know the next steps in this process and provide me with written notice of your response. Thank you."

What Schools Must Do

When families request evaluations or services, schools have legal obligations:

- ✓ **Respond in writing within a reasonable timeframe**
- ✓ **Conduct evaluations if requested**
- ✓ **Hold meetings with parents to discuss findings and develop plans**
- ✓ **Implement accommodations or services once agreed upon**
- ✓ **Review plans regularly and adjust as needed**
- ✓ **Protect student privacy**

Schools cannot:

- ✗ **Ignore or delay evaluation requests indefinitely**
- ✗ **Require extensive medical documentation before considering support**

- ✗ Refuse to provide accommodations that have been agreed upon
 - ✗ Share confidential information without parental consent
-

When Families Need Additional Support

If families feel their child's needs are not being met, they have options:

Step 1: Communicate concerns in writing

Document requests, agreements, and concerns in email or letters.

Step 2: Request a meeting

Ask to meet with administrators and relevant staff to resolve issues.

Step 3: Contact district-level support

Reach out to the district's special education director or student services coordinator.

Step 4: File a formal complaint

Families can file complaints with the state education department or U.S. Department of Education Office for Civil Rights.

Step 5: Seek advocacy support

Parent Training and Information Centers (PTIs) in each state provide free advocacy support and information.

SECTION 6: RESOURCES & SUPPORT ORGANIZATIONS

Federal Resources

U.S. Department of Education - Office for Civil Rights

Information on Section 504, disability rights, and filing complaints

Website: ed.gov/ocr

U.S. Department of Education - Individuals with Disabilities Education Act (IDEA)

Information on special education law and services

Website: sites.ed.gov/idea

U.S. Department of Health & Human Services - Maternal & Child Health Bureau

Resources for children with special health care needs

Website: mchb.hrsa.gov

Advocacy & Legal Support

Parent Center Network

Connects families to state Parent Training and Information Centers (PTIs) that provide free advocacy support

Website: parentcenterhub.org

Wrightslaw

Special education law, advocacy, and parent resources

Website: wrightslaw.com

Council of Parent Attorneys and Advocates (COPAA)

Legal resources and attorney referrals for special education issues

Website: copaa.org

Disability Rights Education & Defense Fund (DREDF)

Legal advocacy for people with disabilities

Website: dredf.org

Educational Support Organizations

National Center for Learning Disabilities (NCLD)

Information on learning supports, IEPs, and 504 plans

Website: nclld.org

Understood.org

Resources for parents of children with learning and attention issues

Website: understood.org

Learning Disabilities Association of America

Support and resources for students with learning disabilities

Website: ldaamerica.org

Health-Related Organizations

Family Voices

Family-led organization supporting children with special health care needs

Website: familyvoices.org

Children's Hospital Association

Resources for families of children with medical complexity

Website: childrenshospitals.org

American Academy of Pediatrics - HealthyChildren.org

Health information for families

Website: healthychildren.org

Mental Health Resources

National Suicide Prevention Lifeline

24/7 crisis support

Call or text: 988

Crisis Text Line

24/7 text-based crisis support

Text: HELLO to 741741

National Alliance on Mental Illness (NAMI)

Education, support groups, and resources for mental health

Website: nami.org

Helpline: 1-800-950-NAMI (6264)

Substance Abuse and Mental Health Services Administration (SAMHSA)

Treatment locator and mental health resources

Website: samhsa.gov

Helpline: 1-800-662-HELP (4357)

State-Specific Resources

Every state has:

- **State Department of Education** with special education divisions

- **Parent Training and Information Center (PTI)** providing free advocacy support
- **Protection and Advocacy (P&A) agency** offering legal advocacy
- **State chapters of disability organizations**

To find your state's resources:

Search "[Your State] Parent Training Information Center" or visit parentcenterhub.org

SECTION 7: IMPLEMENTATION CHECKLIST FOR SCHOOLS

Creating a School-Wide Reintegration System

To effectively support students returning from medical events, schools should establish a consistent, compassionate system that all staff understand and follow.

Administrative Checklist

- Designate reintegration coordinators** (counselors, nurses, or social workers)
 - Train all staff** on supporting returning students
 - Create standard reintegration protocols** that outline steps for families and staff
 - Develop template letters and forms** for families
 - Establish communication procedures** between hospital liaisons and schools
 - Create a reintegration team** including administrators, counselors, nurses, and special education staff
 - Stock copies of this toolkit** in counselor and nurse offices
 - Include reintegration procedures** in staff handbooks
 - Review legal requirements** for 504, IEP, and homebound services annually
 - Collect and review data** on reintegration outcomes to improve practices
-

Individual Student Checklist

When notified of a student's extended absence:

- Assign reintegration coordinator
- Contact family to express support and offer assistance
- Provide family with Student & Family Guide
- Arrange homebound services if needed

Before student returns:

- Schedule reintegration planning meeting
- Receive completed Student Packet (if family chooses to use it)
- Develop reintegration plan with family input
- Determine if 504, IEP, or other formal services are needed
- Share accommodation plan with relevant teachers
- Prepare classroom environment as needed

First week back:

- Coordinator checks in with student daily
- Teachers implement accommodations
- Monitor student's adjustment
- Communicate with family
- Make adjustments as needed

Ongoing:

- Regular check-ins with student
- Monthly communication with family
- Review and update accommodation plan as needed

- Monitor for signs that additional support is needed
-

FINAL THOUGHTS

For Students

You have been through something difficult, and returning to school is brave. You deserve support, patience, and respect as you heal. Remember:

- Your recovery matters more than perfect grades
 - It's okay to ask for help
 - You don't owe anyone explanations
 - Small steps forward are still progress
 - You are stronger than you know
-

For Families

You know your child best. Trust your instincts, advocate for their needs, and be patient with yourself and them. Remember:

- You have the right to ask for support
 - You control what information is shared
 - Recovery is not linear
 - Your child needs your calm confidence
 - You are doing your best, and that is enough
-

For Educators

Your flexibility, compassion, and willingness to adjust your approach can change a student's entire school experience. Remember:

- Accommodations provide access, not advantage
- Invisible challenges are still real
- Small gestures of kindness make huge differences
- Trust students when they tell you what they need
- You have the power to help students feel safe and supported

For School Leaders

Your leadership sets the tone for how returning students are treated. By creating clear systems, training staff, and prioritizing student wellbeing, you build a school culture where all students can thrive. Remember:

- Proactive support prevents crises
- Accommodations are equity, not special treatment
- Student privacy must be protected
- Consistency across staff is essential
- Every student deserves to feel safe at school

ABOUT THIS TOOLKIT

Created by: Bridge to Health Equity Foundation

Purpose: This toolkit provides practical, compassionate guidance for supporting students returning to school after hospitalization, illness, or surgery. It respects student privacy, honors family preferences, and provides educators with clear, actionable strategies.

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For questions or feedback: Email bridge2health.equity@gmail.com

