

T3C Training Series

Supporting Complex Medical & Medically Fragile Youth

Self-Study Manual

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How to Use This Manual

This is a self-paced training designed to take approximately 90 minutes. Each module includes what an instructor would normally say (presented as 'Read & Learn' content), followed by practice, reflection, and a self-check. If you are completing this on your own, read each section, complete the activities, and answer the knowledge check at the end. If you are facilitating a small group, use the 'Instructor Notes (Optional)' callouts.

Structure of Each Module

- What You'll Learn – a quick overview of the key points covered in the module.
- Read & Learn – full content written in clear, plain language (what a trainer would normally cover).
- Try It – short exercises and scripts to practice skills.
- Apply It – concrete steps you can take at home to transfer learning.
- Self-Check – 3–5 questions to confirm understanding.
- Instructor Notes (Optional) – short facilitation guidance if a leader is present.

DFPS Standards Callouts

- Privacy & confidentiality: §749.1003 (minimum necessary, secure storage).
- SIR for medical events: §749.503; follow agency timelines.

Module 1: Conditions & Early Recognition – Estimated 20 minutes

What You'll Learn

- Identify red flags for common conditions and respond promptly.
- Track baselines for early detection.

Read & Learn

Know the child's baseline: typical breathing, energy, sleep, appetite, and skin. Learn the care plan and keep emergency contacts visible.

Red flags include color change, labored breathing, unusual sleepiness, new seizures, or fever with lethargy. When in doubt, escalate as directed.

Try It

- Write your child's baseline in 5 lines.
- Circle which signs would trigger escalation in your home.



Apply It

- Post emergency contacts and the care plan in a discreet but accessible place.

Self-Check

1. Name two red flags that require escalation.
2. Why is knowing baseline important?

Instructor Notes (Optional)

- Keep a simple daily log near equipment.
- Post the escalation tree (who to call first, second, third).

Module 2: Equipment & Care Routines – Estimated 20 minutes

What You'll Learn

- Describe safe principles for oxygen, G-tubes, suctioning, and wound care.
- Organize supplies and logs for reliability.

Read & Learn

Follow individualized training for each device. Oxygen requires careful storage away from heat or sparks. G-tube care includes site cleaning, flushing, correct formula handling, and checking for redness.

Suctioning requires hygiene, readiness checks, and observation after the procedure. Keep wound care sterile as ordered and log dressing changes.

Try It

- Build a daily equipment checks log for your home.
- Create a labeled storage system for supplies.

Apply It

- Walk through a mock setup and teardown of equipment.

Self-Check

1. What are two elements of safe oxygen storage?
2. Give one G-tube site care step.

Instructor Notes (Optional)

- Use checklists to avoid missed steps; prepare backup supplies.
- If a device alarms repeatedly, stop and follow the escalation plan.



Module 3: Infection Control, Privacy & Documentation – Estimated 15 minutes

What You'll Learn

- Apply universal precautions at home.
- Protect privacy and document clearly.

Read & Learn

Hand hygiene, PPE, surface sanitation, and sharps disposal reduce infection risk.

Share only the information needed to coordinate care; store records securely and document facts, actions, and outcomes.

Try It

- Use the infection-control checklist to audit your kitchen and bathroom.

Apply It

- Create a locked storage area for meds and sharps.

Self-Check

1. What is the 'minimum necessary' standard?
2. Name two universal precautions relevant to home care.

Instructor Notes (Optional)

- Use timers to cue hand hygiene for the whole household.
- Keep MARs and logs current; review weekly.

Module 4: Emergency/Disaster Planning & Coordination – Estimated 15 minutes

What You'll Learn

- Design an evacuation plan that accounts for mobility and equipment.
- Plan warm handoffs and after-incident debriefs.

Read & Learn

Prepare go-bags with supplies, a backup power/oxygen plan, and accessible meeting points. Assign roles (who calls 911, who carries equipment).

After incidents, schedule follow-ups and debrief together to adjust plans.



Try It

- Draft an evacuation plan template for your home.

Apply It

- Run a 5-minute drill this week and note what to improve.

Self-Check

1. List two elements of an evacuation plan for medically fragile youth.

Instructor Notes (Optional)

- Practice evacuation; measure doorways for equipment clearance.
- Keep updated contact sheets and routes in the car.

Case Study

The Clogged G-Tube at 7 PM

A., 6, uses evening G-tube feeds. The pump alarms repeatedly; the site appears slightly red. After a restart attempt, A. is fussy and coughing.

Guided Prompts

- Outline immediate steps and who to call based on orders.
- List troubleshooting actions you are trained to perform and when to stop and escalate.

Tools & Templates

- Daily equipment checks log
- Infection control routine checklist
- Emergency evacuation plan template
- Privacy quick guide (minimum necessary)

Module Knowledge Check (10 minutes)

1. Name two early signs of distress.
2. What belongs in documentation after an incident?

Answer Key (for Self-Study Review)

1. Color change; labored breathing; altered responsiveness; unusual sleepiness; new seizures.
2. Facts, actions, outcomes; who was notified and when.



Resources & Referrals

- DFPS Minimum Standards §749 (Child-Placing Agencies) and §748 (General Residential Operations).
- STAR Health Behavioral Health Coordination & 24/7 Nurse Line.
- Local MHMR or mobile crisis number; 988 Lifeline.
- Education advocacy: local school district special education contacts; IEP/504 resources.
- Caregiver peer support and respite/IAC networks.

If you are in immediate danger or a youth is at risk, call emergency services and follow agency critical incident procedures.

