

Describe medical needs and give details of child's symptoms:

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Daily care requirements: (e.g. before sport/at lunchtime)

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Describe what constitutes an emergency for the child and the action to take if this occurs:

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Follow up care:

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Who is responsible in an Emergency: (State if different for off-site activities)

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**Healthcare Plan Agreed by:**

Health Care Professional Signature .....

Health Care Professional Name .....

Headteacher Signature .....

Headteacher Name .....

Parent/Guardian Signature .....

Parent/Guardian Name .....