This folder contains all your health care plans, first aid plans, medication agreements and health support agreements.

This folder needs to remain with you or in your school bag at all times and will be accessed by all staff supporting you including respite and out of school hours care.

It is the parent/carer responsibility to provide the most current care plans and agreements. Notify both the Lead Nurse and school when a new plan has been provided.

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| |  |  | | --- | --- | | Your Name |  | | Your Birthday |  | | Allergies |  |  |  |  |  |  | | --- | --- | --- | --- | | Your Photo |  | | | | **PRIVACY** | | | | Your Health Support Plan Folder contains important and confidential health information about you. It is important that you keep your plan safe.  **If this folder is misplaced and someone finds it who should they call so that it can be returned?** | | | | Name | | Phone number |   Health support plan folder   |  |  |  |  | | --- | --- | --- | --- | | Name child/client |  | Date of birth |  | | Allergies: |  | | | |
| |  |  |  |  | | --- | --- | --- | --- | | This folder should accompany the child for use in the following settings: | | | | |  | Children’s centre, preschool or school |  | Childcare, Out of School Hours Care | |  | Camps, excursions, special event, transport (incl. aquatics) |  | Work experience or other education placement | |  | Respite, accommodation |  | Work | |  | Transport |  | Other (specify) |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | Name of plan or agreement | Review date | Review date | Review date | Review date | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |