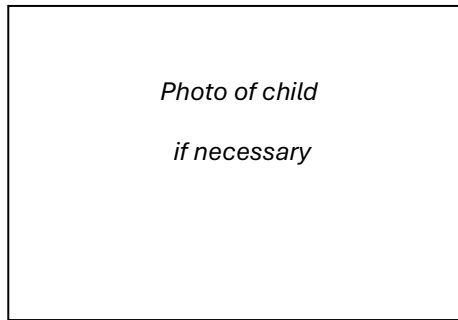


Individual Healthcare Plan (IHP)



Child's Name: _____



Section	Detail	Pupil Information / Response
1. Pupil Details	Name of school/setting	
	Child's name	
	Group/class/form	
	Date of birth	
	Child's address	
	Medical diagnosis or condition	
	Date of plan	
	Review date (annually)	
2. Family Contact Information	Contact 1 Name	
	Relationship to child	
	Phone no. (work/home/mobile)	
	Contact 2 Name	
	Relationship to child	
	Phone no. (work/home/mobile)	
3. Medical Contact Information	Clinic/Hospital Contact (Name & Phone)	
	G.P. (Name & Phone)	
4. Support in School	Person responsible for support, where necessary.	
	Staff training, where necessary, in addition to paediatric first aid. (who, what, when)	
5. Medical Needs & Symptoms	Description of medical needs	(Include symptoms, triggers, and signs)

	Actions, Treatments & Facilities	(Required actions, equipment, devices, or environmental adjustments)
6. Medication	Name of medication and expiry date.	
	Dose & Method of administration	
	When to be taken	
	Side effects / Contra-indications	
	Administration details	Self-administered / supported to administer
7. Daily Care & Support at school, if required.	Daily care requirements	
	Educational, social & emotional needs	
	Arrangements for school visits/trips	
8. Emergency Procedures	What constitutes an emergency?	
	Action to be taken	
	Person responsible in an emergency	(Note if different for off-site activities)
9. Plan Development and review date.	Plan developed with	Name; Date; Review date;
	Form copied to / people made aware of;	Class teachers / Teaching Assistants / Office Staff / Kitchen Staff Supply Teachers / Designated Safeguarding Leads.
10.	Parent / guardian signature,	Signature;

Implementation Guidance

The level of detail required in this plan depends on the complexity of the child's condition and the degree of support they need to participate fully in school life.

The primary goal is to provide clarity regarding what needs to be done, when, and by whom, ensuring the child's safety and well-being are maintained throughout the school day.

This form is based on the voluntary guidance provided by the Department for Education. This plan should be developed in partnership between the school, parents, pupils, and relevant healthcare professionals to ensure effective support.

For diagnosed conditions, including asthma and allergies, an Action Plan is also required from the doctors. A temporary one from school / nursery will be required to be filled in prior to receiving this.