APPENDIX 6

Individual Health Care Plan Cover sheet

The individual health care plan is to be developed in consultation with the parent, staff and student, where practicable, and on the basis of information from the student's doctor, provided by the

For students with anaphylaxis the student's ASCIA Action Plan for Anaphylaxis (Appendix 7) and risk management strategies

(Appendix 8) must be attached and form part of this individual health care plan.

Photo of student

₩					
MARSDEN HIGH	MARSDEN HIGH SCHOOL Phone 9874 6544				
22A Winbourne	22A Winbourne Street WEST RYDE NSW 2114				
Student Name:			Class:		
DOB:		Medicare	number:		
ERN/Student number:					
Health conditions (including anaphylaxis)					
If anaphylaxis, confirmed allergies to:					
Learning and support needs of the student (including learning difficulties, behavior difficulties and other disabilities)					
Impact of any of the conditions (as mentioned above) on implementation of this individual health care plan					
Medications at school:					
Other support at school:					
For students with anaphylaxis: Adrenaline autoinjector supply/storage/replacement:					



Parent contact:	Parent information (1)	Parent information (2)			
	Name:	Name:			
	Relationship to child:	Relationship to child:			
	Address:	Address:			
	Home phone:	Home phone:			
	Work phone	Work phone:			
	Mobile phone:	Mobile Phone:			
	·				
Other emergency	Name:				
contacts if parent is	Relationship to child:				
unavailable	Address:				
	Home phone:				
	Work phone:				
	Mobile phone:				
	·				
Medical practitioner	Name:				
contact:	Address:				
	Phone:	Mobile:			
	Email:	Fax:			
Emergency care:					
	onse plan is required if the student is a	at risk of an emergency.			
For students at risk of ana	phylaxis the ASCIA Action Plan for A	naphylaxis is the emergency			
response plan. This plan is	s obtained by the parent from the stud	dent's doctor and not developed by			
the school.	, , , , , , , , , , , , , , , , , , ,	,			
Emorgonov Sonvice Centa	cts: (e.g. ambulance, local hospital, m	andical control			
Emergency Service Conta	icis. (e.g. ambulance, local nospital, n	redical certife)			
In the event of an emerger	ncy and an ambulance is called gover	nment schools can print and			
ambulance report from wit		Timent schools can plint and			
ambalance report from wit	THIT ETAN IOI THE STUDENT.				
Special medical notes:					
•	relating to religion, culture or legal iss	sues e a blood transfusions			
	sferred to the care of medical personne				
will if practicable in the circumstances, be provided to those personnel. It will be a matter for the					
professional judgment of the medical personnel whether to act on the information.					



	nents attached:			
Please	tick which of the following documents are attached as part of the individual health care plan:			
0	An emergency care/response plan. (for students with anaphylaxis this is the ASCIA Action Plan for Anaphylaxis)			
0	A statement of the agreed responsibilities of different people involved in the student's support			
0	A schedule for the administration of prescribed medication			
0	A schedule for the administration of health care procedures			
0	An authorisation to contact the medical practitioner			
0	 Other documents – please specify (for anaphylaxis this should include strategies to minimise risk and details of communication and staff training strategies) 			
This in consul	Iltations: dividual health care plan has been developed as part of the learning and support plan, in tation with those indicated below and overleaf and with the knowledge and agreement ⁷ of the t's parent/caregiver. Information has been provided by:			
0	Student			
	Parent/Carer			
0	General Practitioner			
0	Medical specialist			
Depart	ment staff involved in plan development:			
1	Phone:			
2	Phone:			
3	Phone:			
	Phone:			
Health Therap	care personnel involved in managing the student's health at school: (e.g. Community Nurse, bist)			
•	Phone:			
	1 11010.			

⁷ If the parent does not agree to the development of a health care plan it may still be necessary to develop one. The reference to the parent agreeing to the plan should be deleted in those circumstnaces



2	Phone:
3	Phone:
Plan for review:	
The plan will be reviewed on:	ewed at least annually or when the parent notifies anged. Principals or their delegated exective staff
Signature of Parent/Carer:	Date
Signature of Principal:	Date

NOTES:

Information in this individual health and emergency care plan remains specific to meet the needs of the individual student named and should not be applied to the care of any other student with similar health and emergency care needs. All individual health and emergency care plans must take into account issues of confidentiality and privacy to ensure information about the student is treated appropriately.

When discussing the individual health care plan with parents and students reasonable adjustments necessary for them to participate may need to be considered. This may include adjustments in the provision of written materials including alternate formats, use of a translator/interpreter, and involvement of a support person or disability advocate.

Schools are subject to the Health Records and Information Privacy Act 2002. The information on this form is being collected for the primary purpose of ensuring the health and safety of students, staff and visitors to the school. It may be used and disclosed to medical practitioners, health workers including ambulance officers and nurses, government departments or other schools (government and non-government) for this primary purpose or for other related purposes and as required by law. It will be stored securely in the school.

For more information about individual health care plans:

http://www.schools.nsw.edu.au/studentsupport/studenthealth/individualstud/devimpindhcplan/index.php

When developing risk management strategies for a student at risk of anaphylaxis, government schools may use Appendix 8 or the Work Health and Safety risk assessment. For further information see the Department of Education and Communities intranet at https://detwww.det.nsw.edu.au/adminandmanage/ohands/safeworklearn/riskmanage/index.h tm

