

ONE PLAN FOR EDUCATION, HEALTH AND CARE: MEDICAL REPORT

Personal Details

Name of pupil:

D.O.B: NHS number Gender:

Home Address:

School:

The information and outcomes included in this report may change in the future to reflect the student's changing needs

This report has been compiled using healthcare records.

Health needs that are identified are not met by NHS staff alone. Parents and Education staff may be required to meet these needs with training and support from NHS staff.

Data Protection: The information on this form is subject to the provisions of the Data Protection Act 1998. Where applicable information entered will be forwarded to the relevant officer for action or for a reply to be given.

Name: XXXXX XXXXXX DOB: XX/XX/XX NHS No: XXX XXX XXXX RXK

OT: XXXXX XXXXXX Physio: XXXX XXXXXX Designated Medical Officer: Dr D Gandhi

Paediatrician: Dr xxxxx SALT: XXX XXX

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Medical Report provided by

Agency	Name, designation, contact details	Sign and Date

Other health professionals, currently involved, but not contributing directly to the report:

Name, designation, contact details	Role

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Section C:
C1. Medical Report:

SENSORY ABILITIES

Hearing:

Vision:

CURRENT HEALTH STATUS

General health:

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Section G: Health Provision.

Health outcomes (e.g. By the end of Key Stage X, child will be able to do y)	What support is needed?	Who will provide it?	When, how often and how long?

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Discriminatory abusive or insulting language or behaviour, on the part of staff, service user, carer, and/or contractor will not be tolerated. All discrimination- related incidents will be investigated and acted upon.

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