**Logo

Description automatically generatedIntimate Care Plan**

**Note: The ‘Care Plan Contextual Information’ must be completed first**

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| **Describe intimate care needs (including frequency, resources, changing procedures, the level of care required)**  **Frequency:**  **Resources required:**  **Changing procedures:**  **Level of care needed:** |

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| **Child’s name:** | | **Date of birth:** | **Class:** | **Any items lent to child?**  **Date returned to school** |
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