



Student Care and Health Policy

Rationale

St Mary's School Robinvale (St Mary's) is committed to providing a safe and supportive environment and in ensuring its duty of care to all students. The health of students is important for learning and wellbeing and therefore effective processes, professional learning and training to assist students that are injured, ill or require support for specific medical conditions are required.

Definition

First Aid basic medical treatment that is given to someone as soon as possible after they have been injured or become ill. They may require further treatment from a medical or health specialist

Minor injury (in relation to treating students in the yard or classroom) includes minor scratches and cuts that require minimum and quick treatment such as clean and/or application of band-aid.

Serious injury an injury that requires additional medical assistance of an external provider to administer first aid

Policy Statement

St Mary's provides effective procedures and professional learning and training in the management of first aid, caring of ill students and the administration of medicines.

Principles

- The school has a duty of care to administer first aid to students when in need, in a competent and timely manner.
- It is important for student learning and wellbeing that parents communicate student health problems to staff when considered necessary and in accordance with privacy requirements.
- The school does not administer any form of medication unless the medication is provided by the parent and has appropriate documentation outlining the dosage and times or circumstances
- The first aid room will have appropriate first aid supplies and facilities to cater for the administering of first aid, student medications and the short term caring for members of the school community who are ill.
- Staff are provided relevant training in first aid and specific medical conditions as required by legislation and within a school context.

Implementation

Duty of Care (see Duty of Care Policy)

- Teachers have a positive or pro-active (duty of care) to protect a student from reasonably foreseeable harm while the teacher is on duty.
- At all times when administering first aid, it should be done within the limits of competency and skills and with reasonable care.
- When there is a serious injury or illness, the teacher and principal are obliged to carry out appropriate first aid but not diagnose or treat the person. This is the competency of medical practitioners or medical emergency personnel (Catholic Schools Operational Guide)
- The school ensures that students with ongoing medical conditions have procedures in place that allow them to manage their condition
- The principal will regularly evaluate the effectiveness of the implementation of procedures and provide further training or clarification/modification of procedures and requirements.

Training

- All staff will undergo Level 2 recognised first aid training. This is updated at least every 3 years.
- All staff undergo additional training in relation to CPR and Anaphylaxis (see Anaphylaxis Management Policy) and Asthma Management (see Asthma Management Policy).

- All staff will be trained to assess and manage an asthma emergency and complete the free one-hour Asthma Education session at least every three years.
- Staff will be provided training in management of other conditions such as diabetes and epilepsy whenever a student is identified.
- A register maintains all first aid officers, listing first aid qualifications and renewal date. This is kept within the school documentation system.
- Staff review procedures in first aid, anaphylaxis, asthma and CPR at least twice per year.
- Induction on procedures and student medical conditions will be conducted annually for emergency teachers and when a new teachers begin.
- The principal will review the training needs annually or as required and ensure that staff are trained in accordance with the school, diocesan or legislation requirements.

First Aid Room

- The school has a dedicated first aid room. Students, staff and visitors will be cared for in this space until arrangements for them to be collected are made.
- The first aid room will be unlocked available for use at all times. This room is not to be used for any other purpose.
- A staff member will be designated to purchase and maintain the first-aid supplies, first aid kits, ice packs and oversee the general upkeep of the room.
- All staff are responsible for keeping the room clean and tidy at all times.
- Student photos and medical requirements will be displayed in the first aid room and throughout the school in particular areas, ie classrooms and staff room.
- First aid room has information and necessary resources to clean up any spills such as blood or vomit.
- Parent and emergency contact numbers as well as services such as Nurse- On-Call, are available through the school administration systems and or through PAM (SIMON).

First Aid Treatment

- All injuries or illnesses that occur during class time will be referred to the office when they cannot be managed within the classroom setting.
- Parents who collect children from school for any reason (other than emergency) must sign the child out of the school in a register maintained in the school office.
- Parents of ill children will be contacted to take the children home.
- Each class will have a basic portable first aid kit. It is the responsibility of the class teachers to ensure that kit is up to date with the necessary supplies.
- Yard duty teacher will carry a basic first aid kit (bum bag) and a communication device (ie cards) and will treat minor injuries that occur in the yard (see Duty of Care Policy)
- All injuries (not minor) or illnesses that occur during recess times will be referred to the staff member rostered on First Aid Duty.
- Any student with injuries involving blood must have the wound covered at all times. Procedures needs to be put in place to ensure that any blood spillage is properly cleaned and managed
- Medication (of any kind) will not be given to children without the permission of parents/guardians.
- All staff members have the authority to call an ambulance immediately in an emergency. If the situation and time permit, a staff member may confer with others before deciding on an appropriate course of action.

First Aid Kits

First aid supplies in the first aid room as well as in portable first aid kits will be consistent with the *School Policy and Advisory Guide* (DET). The school provides portable first aid kits for:

- Each learning space
 - Yard duty teachers (stored in their individual classroom – bum bag)
 - For offsite activities (each class takes a first aid kits)
- Yard duty and classroom kits will include:
 - At least two pairs of single use nitrile gloves
 - sterile saline sachets or ampoules for irrigating eyes and minor wounds
 - gauze and band aids
- Offsite activity kits will have required supplies depending on the nature of the activity and will include epipens and Asthma relievers.

Offsite Activities (see policy)

- Off-site activities will have at least one Level 2 first aid trained staff member at all times and school staff with Level 1 training. The nature of the activity and location will need to be taken into A comprehensive first aid kit will accompany all offsite activities, along with a mobile phone.
- All students attending offsite will have provided a signed medical form providing medical detail and giving teachers permission to contact a doctor or ambulance should instances arise where their child requires treatment. Copies of the signed medical forms will be taken on all offsite activities (available via PAM). Staff trained in managing anaphylaxis and asthma conditions will be included in all off site activities.
- Student requiring medications during the offsite activity will require a copy of their medication plan with relevant details (see medications). This plan and the medication must be given to the designated person who will store and administer any medication required during the offsite activity. A record of its administration must be kept and entered onto the school's register after the offsite activity has concluded.

Specific Student Medical Requirements

Medications

- The principal will designate teachers to be responsible for the appropriate storage and administration of prescribed and non-prescribed medication to students.
- All student medications must be in the original containers, must be labelled, must have the quantity of tablets confirmed and documented, and must be stored in a locked cabinet or refrigerator (or first aid room refrigerator), whichever is most appropriate.
- All medication administered is recorded on a medication administration record form.
- All completed medication administration record forms and details relating to students, their prescribed medication, dosage quantities and times of administering will be kept and recorded in a confidential official loose-leaf medication register.
- Parents will be encouraged, if appropriate, to consider whether they can administer medication outside the school day, such as before and after school and before bed.

Asthma (see Asthma Management Policy)

- All children, with a documented asthma management plan, will have access to Ventolin (or similar) and a spacer at all times.
- Asthma management plans for each student will be available in the first aid room and student classroom.
- Student medical conditions are available electronically through SIMON.

Anaphylaxis (see Anaphylaxis Policy)

- All staff will undertake the Australasian Society of Clinical Immunology and Allergy (ASCI) e-training course. This is valid for 2 years.
- Two staff members will undertake the Course in Verifying the Correct Use of Adrenaline Autoinjector Devices This course is valid for 3 years.
- A staff anaphylaxis and asthma briefing will be conducted twice-yearly.
- Epipens will be stored for quick and easy access in the first aid room. They should ideally be stored in a cool dark place at room temperature, between 15 and 25 degrees Celsius and not in a refrigerator.

Communication and Documentation

- At the commencement of each year, requests for updated first aid information will be sent home including requests for Anaphylaxis Action Plans, Asthma Management Plans, high priority medical forms, and reminders to parents of the policies and practices used by the school to manage first aid, illnesses and medications throughout the year.
- An up-to-date First Aid Room log book located in the first aid room will be kept of all injuries or illnesses experienced by children who require first aid, other than for simple injuries such as scratches and scrapes. This record is registered by the attending staff member. This includes those who are administered treatment by a doctor/hospital or ambulance officer as a result of an injury, or has an injury

to the head, face, neck or back, or where a teacher considers the injury to be greater than “minor”. Serious injuries will possibly need to be reported to Worksafe.

- For more serious injuries/illnesses, the parents/guardians must be contacted by the first aid officer or classroom teacher so that professional treatment may be organised. Any injuries to a child’s head, neck or back must be reported to parents/guardian.

Reporting Obligations to WorkSafe

WHAT IS A NOTIFIABLE INCIDENT? Incidents at a workplace which result in the consequences described below (notifiable incidents) must be reported to WorkSafe.

If you are uncertain about whether an incident is notifiable under any of the legislative provisions referred to below, contact WorkSafe on 132 360 to seek advice.

Incidents that result in death or serious injury Notification is required where an incident at a workplace results in: • death; or • serious injury. Serious injury is used in this context to describe those incidents that result in the consequences described in section 37(1) of the Act. They include, but are not limited to, incidents that result in a person requiring:

- medical treatment within 48 hours of exposure to a substance
- immediate treatment as an in-patient in a hospital
- immediate medical treatment for:
 - amputation
 - serious head injury
 - serious eye injury
 - separation of skin from underlying tissue (for example de-gloving or scalping)
 - electric shock
 - spinal injury
 - loss of bodily function
 - serious lacerations

See: <http://www.cecv.catholic.edu.au/OHS-WorkCover/Resources/Reporting-Notifiable-Incidents-to-WorkSafe>

WorkSafe must be notified immediately by calling 132 360 and then in writing within 48 hours using one of the following forms:

- Online Incident Notification Form
- Incident Notification form

The school administration office will assist staff with this process. The principal must be informed of all notifiable incidents, as soon as practicable.

Implementing Critical Incident Process

If a student or any other person in the school community has suffered a serious injury or has died in the school environment, it important that the impact on others is treated as a critical incident and appropriate process will be implemented by the Principal and school leadership team.

Risk Management

The principal will identify any risk management issues and follow the processes for risk management to ensure that risks are recorded, monitored and minimised in relation to school environment and planned activities both onsite and offsite activities.

Related Resources

- Anaphylaxis Management Policy
- Asthma Management Policy
- Accident and Incidents Records Policy
- Duty of Care Policy
- Offsite Supervision & Camps Policy