

## First Aid & Health Care (including Head Lice) Policy

#### **Background**

As part of being a Government school, Huntingdale Primary School has a responsibility to provide equitable access to education and respond to diverse student needs, including health care needs. At Huntingdale Primary School all children have the right to feel safe and well and know that they will be attended to with due care when in need of first aid. The school has a duty of care to ensure it develops appropriate protocols in administering first aid. Staff are sometimes asked by parents to administer medication for their children while at school. Parents, students and school staff need to understand the processes and protocols involved with this.

#### **Purpose**

To:

- Ensure that staff, parents and students are familiar with the school's first aid procedures.
- Support and respond to the health care needs of students.
- Ensure students feel safe and supported at school.
- Ensure on enrolment or when a health care need is identified, develop and maintain clear plans and processes to support the student's health care needs.
- Administer first aid to children when in need in a competent and timely manner and within the limits
  of their skill, expertise, training and responsibilities.
- Ensure the medications are administered appropriately to students in our care.
- Communicate children's health problems to parents when considered necessary.
- Manage infectious diseases.
- Abide by legislated requirements for school exclusion, infectious disease notification and immunisation status recording.
- Support the personal hygiene routines of students.
- Provide supplies and facilities to cater for the administering of first aid.
- Maintain a sufficient number of staff members trained with a Level 2 First Aid certificate.
- Follow DET's Values of Accountability, Human Rights, Impartiality, Integrity, Leadership, Respect and Responsiveness
- Ensure the school is compliant with first aid policies and procedures as outlined in the *School Policy* and *Advisory Library* <a href="https://www2.education.vic.gov.au/pal/first-aid-students-and-staff/policy">https://www2.education.vic.gov.au/pal/first-aid-students-and-staff/policy</a>

## **Implementation**

- The Principal has the overall responsibility of implementing this policy and will delegate roles and responsibilities to other staff members in regard to first aid and health care management.
- This policy works in conjunction with the school's anaphylaxis and asthma policies as well as the Department of Education and Training's (DET) Occupational Health and Safety Guidelines.





#### **Health Care Needs**

#### **Before Enrolment**

 The school will inform parents/guardians about the school's policy for supporting student health prior to and on enrolment. This policy will be placed on the school website for parents/carers to access.

## When a need is identified

- The office staff will ensure that parents/carers provide accurate information about a student's:
  - o Routine health care support needs, such as supervision for medication.
  - Personal care support needs, such as assistance with personal hygiene, continence care, eating and drinking, transfers and positioning, and use of health-related equipment.
  - Emergency care needs, such as predictable emergency first aid associated with an allergic reaction, seizure management, anaphylaxis, or diabetes.
- Information will be recorded on CASES21 about:
  - The student's health condition.
  - o Medication to be stored and supervised at school.

NOTE: When information is being collected the school will inform parents/guardians that personal information will be shared with relevant staff and DET professionals e.g. School Nurse, classroom teachers.

## Planning Process

• The student's medical/health practitioner will provide a medical advice form that will guide the planning and details of the student's medical condition, medication required at school and recommended emergency and routine health and personal care support for the student. This will be the basis of the Health Care Plan.

NOTE: The plan should be developed shortly after the school has received the medical advice from the student's medical/health practitioner. If there is a time delay between receiving this advice and developing the plan, the school may put in place an interim support plan containing an agreed strategy, such as calling an ambulance.

- In relation to camps and excursions, parents/guardians complete a Confidential Medical Information School Council Approved School Excursions form on Operoo.
- The office staff will communicate to the Assistant Principal or nominee about the health needs of a student and organise a meeting to discuss the plan with the parents/guardians and other school staff, if required.

#### **Monitoring and Review**

- Plans should be reviewed:
  - When updated information is received from the student's medical or health practitioner.
  - When the school, student or parents/guardians have concerns in the support.
  - o If there is a change in support.
  - At least annually or as per legislation/ministerial orders

NOTE: The advice received from the medical or health practitioner is reviewed annually unless it is agreed that the annual review of the plan is not required. In this case, it is up to the Principal's discretion whether to request updated medical information.



## **Record of Student Medical Conditions and Management**

- It is the responsibility of parents to inform the school:
  - A child's medical condition.
  - o Communicate any changes to their child's health that could affect them at school.
  - Provide any medication needed to be taken by the child (and fill in the correct forms- see below).
  - o Provide copies of any health plans to the school (e.g. asthma management, anaphylaxis).
  - o Of any changes to their contact details in a case of a medical emergency.
  - o Keep medical information up to date on Operoo
- The school will keep up to date records of each child's medical condition using CASES21.
- At the commencement of each year, requests for updated first aid information will be sent home
  including requests for any 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.
- Teachers will be provided with asthma, allergy and anaphylaxis plans and this will be kept in the roll and also the emergency evacuation bag.
- All students who have health plans (e.g. anaphylaxis) will have them displayed in their classroom and the health centre and copies located in all roll folders.
- Any changes/updates to any students' medical condition will be updated to all staff.

### Staff Training

- Staff must familiarise themselves with the school's first aid procedures.
- Staff should provide first aid treatment within the limits of their skill, expertise, training and responsibilities in order to discharge their duty of care.
- The school will ensure that it keeps a sufficient number of staff who are trained with Level 2 First
- The school will ensure that a staff member is always available to assist a sick or injured person.
- At the commencement of each year all staff will participate in refresher training in first aid management e.g. CPR and asthma.
- As per DET guidelines anaphylaxis updates will occur twice yearly.
- General organisational matters relating to first aid will be communicated to all staff at the beginning and throughout the year as necessary.

#### Register of Staff Trained in First Aid

- As per DET Occupational Health and Safety Guidelines, the school will maintain a First Aid Summary Sheet detailing the staff who are first aid trained.
- These will be displayed in each of the main buildings, the health centre and OHS noticeboard.

## First Aid Risk Management & First Aid Kits

- Assessment of the first aid requirements of the workplace must be completed using a First Aid
  Risk Assessment in consultation with the Health and Safety Representative (HSR). Location of the
  school (for example, proximity to medical facilities).
- A Health Centre located in the administration building will be available for use at all times.
- A staff member will be allocated the role of maintenance and upkeep of the Health Centre including purchasing of supplies.
- A comprehensive supply of basic first aid materials including a sharps container will be stored in the health centre according to the DET's First Aid and Infection Control Procedure.
- The school will provide:
  - Asthma Kits



- Major first aid kits
- Portable first aid kits
- Boxes for student medications (e.g. anaphylaxis)
- Basic first aid supplies in yard duty bags
- A stocktake of first aid materials will be conducted using DET's First Aid Contents Checklist.
- Each classroom block will be equipped with a 'blood spill kit' and first aid kit (e.g. band aids to treat minor cuts).
- On display in the Health Centre will be student medical alerts (e.g. anaphylaxis) and first aid procedural posters. Folders will contain CASES student grade lists and medical information. This will be regularly kept up to date.
- All student medications will be checked to ensure that they are in date. Parents will be contacted when medications are out of date and need replacing.
- Students will have access to Ventolin and a disposable spacer provided by the school.

## **Camps and Excursions**

- All school camps and excursions will have sufficient first aid trained staff attend.
- A comprehensive first aid kit will accompany all camps, along with a mobile phone (school and staff personal mobiles).
- All children attending camps or excursions will have provided a signed medical form providing
  medical details and granting teachers permission to contact a doctor or ambulance should instances
  arise where their child requires treatment. Copies of the signed medical forms to be taken on
  camps and excursions, as well as kept at school.
- For school camps, at least two staff members will be designated to be in charge of first aid. This role includes:
  - Reading student medical and permission notes on Operoo and keeping a list of all students who have medical conditions and communicating this to staff/parents attending.
  - Collecting and collating student medication before the camp leaves school and ensuring parents have filled in the form for administering medication.
  - Administering medication to students while at the camp and keeping a record of this.
  - At the end of camp providing details to the school of any serious first aid incidences and filling in the relevant paperwork for CASES21 or EDUsafe.

#### Care Arrangements for ill students

- Parents will be advised not to send sick children to school.
- Where a teacher believes that a student is genuinely ill during the school day, they may be sent to the Health Centre with a note.
- The first aid officer will assess the situation including discussing with the child their symptoms and investigate if the child has signs of a fever, redness in the cheeks, paleness, a rash or feeling hot etc.
- If the first aid officer feels the incident is not serious the child may rest in the Health Centre for a short amount of time and be returned to class.
- If the first aid officer feels the child is more seriously ill, they will:
  - o Call the parents and request that the child be collected from school.
  - Have the parents sign the child out using the school register.
  - o Recommend that they see their GP and
  - o Inform the school if it is a serious illness.



#### First Aid Procedures

- Where possible, first aid should only be provided by staff who have been designated as the first aid providers. However, in an emergency, other staff may be required to help within their level of competence.
- If a student is hurt, injured or in need of first aid in the classroom or in the playground they can first be assessed by the teacher on duty. Minor injuries such as cuts can be treated by the teacher on duty.
- More serious injuries-including those requiring parents to be notified or suspected treatment by a doctor require a level 2 first aid trained staff member to provide first aid.
- All children sent to the Health Centre will be supervised by a staff member at all times.
- When at the Health Centre students will be assessed by the first aid trained staff member and be treated accordingly.
- Any children with injuries involving blood must have the wound covered at all times.
- Any child who presents with vomiting/diarrhoea will be sent home.
- For more serious injuries/illnesses, the parents/guardians must be contacted by the administration staff so that professional treatment may be organised. Any injuries to a child's head, face, neck or back must be reported to parents/guardian.
- The school can also contact NURSE-ON-CALL (on 1300 60 60 24) if advice is needed.
- No medication will be given to children without written permission from parents.
- It is recommended that all students have personal accident insurance and ambulance cover.

## **Emergency Situations**

- Ultimately all teachers have the authority to call an ambulance immediately in an emergency.
- If the situation and time permits, a teacher should confer with others (Principal or senior member of staff or first aid officer) before deciding on an appropriate course of action.
- In doing so, the health and safety of the child will be the only determining factor. Ambulance membership, or potential costs to families will not be a point of consideration. Such a decision will always be made with a conservative 'better safe than sorry' attitude.
- Parents (or next of kin for an adult) will always be contacted as soon as possible so that they may be in attendance when the ambulance arrives.
- The Principal (or next most appropriate staff member available) will be responsible for contacting
  the ambulance service. Contact with DET's Emergency and Security Branch should also be made at
  some point.
- A safe entry point will be made available for the ambulance, and students will be kept away from any accident scene.
- The school's administrative staff will ensure a CASES21 printout of a student or staff member's details will be available to ambulance officers upon arrival.
- A familiar staff member will always accompany a student to the hospital if the attending ambulance officers approve.
- The Principal will ensure that they are aware of the hospital to which the child is being transported
  in case they need to inform parents or next of kin, or in case they have to arrange the collection of
  the accompanying staff member.



- Any student who is collected from school by parents/guardians as a result of an injury, or who is
  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 the treating first aid teacher considers the injury to
  be greater than "minor" will be reported on DET's Accident/Injury form and entered onto CASES21.
- Reports will be generated each month so that the Leadership Team can analyse the data looking for any trends.
- Serious injuries, fatalities, or any incident that exposed a person to immediate risk to their health or safety must be reported to the Department of Education Incident and Support and Operations Centre 1800 126 126, Worksafe on (13 23 60) and on EduSafe Plus.
- When relevant, counselling should be offered to affected staff through the DET's Employee Assistance Program by calling 1300 361 008.

#### **Infectious Diseases**

#### Prevention

- The school will record the immunisation status of each student on CASES 21.
- The school will ensure it encourages students' personal hygiene:
  - Soap dispensers will be in all toilets.
  - o Antibacterial hand rub, tissues and waste bins will be in all classrooms.
- The school will provide:
  - Blood spill kits for use.
  - o PPE items- Gloves, masks etc.
  - o A sharps disposal unit will be in the health centre.
- As part of the curriculum, health and hygiene will be taught to students.

#### **Control Measures**

The school will:

- Ensure that unwell children do not attend school. Children will be isolated who become unwell during the day and be sent home as soon as possible.
- Notify the Department of Health and Human Services (DHHS) immediately if a child is suspected of having pertussis (whooping cough), measles, mumps, rubella, meningococcal disease or polio, even if we believe a doctor has already done so. Notification is through Communicable Disease Prevention and Control; telephone: 1300 651 160 (24 hours).
- Inform DET of notifiable cases of infectious disease using the IRIS incident alert and include confirmation that DHHS has been notified.
- Exclude students from school who have an infectious disease using the following table <a href="https://www2.health.vic.gov.au/public-health/infectious-diseases/school-exclusion/school-exclusion-table">https://www2.health.vic.gov.au/public-health/infectious-diseases/school-exclusion/school-exclusion-table</a>
- Respond to influenza, gastroenteritis and other common infections e.g. cold or flu-like symptoms
  or vomiting or diarrhoea by limiting the child's contact with others, encourage families to seek
  medical attention and request that the child stay at home until symptoms have passed.

#### **After**

The school will consider what should be communicated to the school community on the advice by DHHS and DET. The communication should:

- Maintain student confidentiality, be fact based and be written in a way not to cause alarm
- Inform parents and guardians that a school community member/s has been diagnosed with an
  infectious disease. Name the condition and suggest they seek medical advice regarding their
  child's health if they have concerns.



#### **Head Lice**

Responsibility for managing head lice is shared between parents/guardians and the school.

## Parents/guardians should:

- Regularly, preferably once a week, check for lice or eggs in the hair of their child and all household members.
- Notify the school if their child is affected, when treatment commenced and not send their child to school with untreated head lice.

#### Schools must:

- Exercise sensitivity towards students and families with head lice.
- Maintain student confidentiality to avoid stigmatisation.
- Support and provide practical treatment advice to parents/guardians.
- Alert parents/guardians of an infestation, particularly the parents of other students in the same class as the affected child/children.
- Use discretion about informing the school community about an infestation.
- Obtain informed written consent of parents/guardians prior to students being inspected for head lice.
- The consent form:
  - Will be provided to parents via Operoo for completion as part of enrolment when the child starts
- Visual head checks without physical contact do not require parent/guardian consent and will be made by staff people authorised by the principal e.g. health leader, classroom teacher
- Students identified with live head lice should be:
  - o Provided with a note to take home to inform the parent/carer that their child may have head lice at the conclusion of the school day.
  - Excluded from school until the day after treatment has commenced, as set out in the Health (Infectious Diseases) Regulations 2001, School Exclusion Table.

NOTE: Principal has the overall responsibility to exclude a student from school.

NOTE: The presence of eggs in the hair is not a cause for exclusion. There is no requirement for a general practitioner or local council to issue a clearance certificate in order for the child to return to school.

#### **Distribution of Medication**

- No medication including headache tablets will be administered to children without written permission of parents or guardians.
- The Principal will decide the most appropriate staff member to administer medications to be given at school.
- If students require to be given medication, parents must fill in a form giving permission for a first aid trained staff member to do this (See Appendix 1). This should be consistent with the doctor's/dosage instructions.
- A signed note from a parent stating the name of the medication, dose and the time to be administered will suffice if a parent is unable to attend the school office.
- The school will ensure that any medications are stored appropriately either in the Health Centre, school office or refrigerator as required.
- A register will be kept of students who have been given medication at school.
- Classroom teachers will be informed if a child needs medication during class teaching times.
- Epipens will be visibly located in a central position in the Health Centre.



- Consistent with Asthma policy, students with permission, may carry their own personal Ventolin and be taken as needed.
- Parents must fill in the Medical Authority Form for students attending excursions and camps that need medication.
- Parents/carers of students that may require injections are required to meet with the Principal and first aid officer to discuss the matter.

#### **Useful links**

COVID-19

https://www.dhhs.vic.gov.au/coronavirus

#### **Exclusion List**

https://www2.health.vic.gov.au/public-health/infectious-diseases/school-exclusion/school-exclusion-table

#### Asthma

https://asthma.org.au/

## **Anaphylaxis**

https://www.allergy.org.au/patients/about-allergy/anaphylaxis

#### Head lice

https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/head-lice-nits

## **Evaluation**

- CASES21 Reports
- EDUSafe Reports
- Annual review of First Aid and Anaphylaxis Checklists
- This policy will be reviewed every three years as part of the school's cyclic review.

This policy will be reviewed as part of the school's 3 year cycle or as needed to comply with DET policy changes.

## **Document Status**

Reviewed	School Council Ratification	Next Review
February 2018	20 <sup>th</sup> February 2018	20 <sup>th</sup> February 2021
March 2021 Principal & First Aid Officer		March 2024



# **MEDICATION AUTHORITY FORM**

For students requiring medication to be administered at school

This form should, ideally, be signed by the student's medical/health practitioner for all medication to be administered at school but schools may proceed on the signed authority of parents in the absence of a signature from a medical practitioner.

- For students with asthma, Asthma Australia's School Asthma Care Plan
- For students with anaphylaxis, an ASCIA Action Plan for Anaphylaxis

**Student Details** 

Please only complete the sections below that are relevant to the student's health support needs. If additional advice is required, please attach it to this form.

Please note: wherever possible, medication should be scheduled outside school hours, e.g. medication required three times daily is generally not required during a school day – it can be taken before and after school and before bed.

Name of school:							
Name of student:	of student:Date of Birth:						
MedicAlert Number (if relevant):							
Review date for this							
Medication to be add Name of Medication	Dosage (amount)	Time/s to be taken	How is it to be taken? (eg oral/topical/i njection)	Dates to be administered	Supervision required		
				Start: / / End: / / OR □Ongoing medication	□ No − student self- managing □ Yes □ remind □ observe □ assist □ administer		
				Start: / / End: / / OR □Ongoing medication	□ No — student self- managing □ Yes □ remind □ observe □ assist □ administer		
Medication delivered Please indicate if the		fic storage instru	uctions for any me	edication:			



Medication delivered to the school
Please ensure that medication delivered to the school:
<ul> <li>□ Is in its original package</li> <li>□ The pharmacy label matches the information included in this form</li> </ul>
Supervision required
Students in the early years will generally need supervision of their medication and other aspects of health care management. In line with their age and stage of development and capabilities, older students can take responsibility for their own health care. Self-management should be agreed to by the student and their parents/carers, the school and the student's medical/health practitioner.
Please describe what supervision or assistance is required by the student when taking medication at school (e.g. remind, observe, assist or administer):
Monitoring effects of medication  Please note: School staff <i>do not</i> monitor the effects of medication and will seek emergency medical assistance if concerned about a student's behaviour following medication.
We collect personal and health information to plan for and support the health care needs of our students. Information collected will be used and disclosed in accordance with the Department of Education and Training's privacy policy which applies to all government schools (available at: <a href="http://www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx">http://www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx</a> ) and the law.
Authorisation to administer medication in accordance with this form:
Name of parent/carer:
Signature:Date:
Name of medical/health practitioner:
Professional role:
Signature:Date:
Contact details: