

Rationale:

The policy addresses a range of health care issues to assist the school in providing health care to students:

1. Basic health care for all students;
2. Specific provision for students with identified health risks or with intensive needs arising from existing disabilities or medical conditions; and
3. Dealing with accidents and emergencies and taking precautions against these.

Purposes:

The primary objectives are to:

1. Put practices in place for safeguarding the health care of all students;
2. Access appropriate resources to meet the needs of students requiring intensive health care;
3. Ensure the staff are aware of their legal rights and obligations and are appropriately supported.

Responsibilities:

Principal:

- Assess available internal and external resources and consult with the district education office to evaluate whether health care needs of enrolling students can be met by the school and to identify staff that will need to be involved,
- Access the most appropriate level of professional advice and assistance (eg community health nurse where available, school staff or outside medical services),
- Negotiate a health care authorisation with parents, school staff and appropriate health professionals (eg medical practitioner, local pharmacist, private nursing service) on the appropriate level of care that the school can provide in terms of medication/procedure, health maintenance procedures, and/or emergency medical procedures,
- Ensure that the necessary training is undertaken by relevant staff members,
- Ensure that relevant school staff are fully aware of specific health care needs of particular students,
- Ensure that school staff administer or supervise the administration of medication or undertake a health maintenance procedure or emergency medical procedure only if they are trained and only in accordance with the agreed plan,
- Assure parents that student needs will be dealt with in a professional and confidential manner,
- Arrange the safe and confidential storage of students' health care records,
- Inform staff of their legal rights and obligations, and
- Develop good health practices in the school.

Staff:

- Decide whether to enter into agreements with the principal and parents to administer/supervise prescribed medication or conduct prescribed health maintenance and/or emergency medical procedures,
- Before deciding to assist, consider whether they are competent and confident to provide support with a sufficient degree of safety;
- In emergency situations provide essential health care for a student if professional assistance cannot be promptly accessed,
- Register and store relevant medication safely and fully record processes performed,
- Deal with sensitive student information in a professional manner, and
- Promote good health practices in the school.
- Education Assistants work with individual students in mainstream and special education settings and, with appropriate training, may agree to provide support requested by the school and agreed with the parents.

Parents:

- Share responsibility with the school in managing the delivery of an appropriate level of care to the student,
- Advise the school if the student is likely to be affected by medication,
- Advise if the student is bringing any medication that the school considers should be stored,
- Advise the school of any medical condition for which a health care authorisation and/or an emergency authorisation is needed and convey the prescribing doctor's written advice,
- Arrange for the student to self-medicate (provided this is supported by medical advice) or for another avenue of support if the school cannot provide it, and ensure medication is current and appropriately labelled.

Determining "Duty of Care"

"Duty of care" entails a case by case assessment of the care that it is reasonable for parents to expect and for schools to provide. Schools need to determine in advance of any care agreement whether responsibility for the health care of a student is a routine matter or requires specialist expertise that can only be provided by an appropriately trained health care professional. There are some processes that staff without professional health care training can undertake in the same way that a parent does, if appropriately trained and/or supervised and if they have entered an agreement to do so. There are other processes that are deemed by health authorities to require the intervention of an appropriate health care professional. However in exceptional circumstances, some selected school staff members may agree to be trained to perform these medical procedures so that action can be taken in emergencies. A special level of responsibility applies in emergencies.

Individual Duty of Care

All persons having charge of others have an obligation to provide essential medical support and attention to anyone who is unable because of age or sickness to administer the support themselves (Criminal Code s.262). In deciding what action to take, school staff must consider the circumstances of each case. In routine circumstances schools deliver or procure the necessary care from a trained source of assistance and in accordance with any medical plans, which the school has developed with the parents. In emergency circumstances where no trained source of assistance can be accessed in time, school staff may provide essential support. Before taking alleviating action, staff need take into consideration whether they have sufficient skills to assist the student, the age and capacity of the student, the magnitude of the risk and their own safety. Staff accept a health maintenance responsibility for a student with intensive health care requirements only if they feel competent, are trained and are approved by the Principal to perform the tasks involved.

4.2.5 Training

The *Occupational Safety and Health Act*, 1984 requires the employer to provide employees with such information, instruction, training and supervision as is necessary to enable them to perform their work (*Occupational Safety and Health Act*, 1984 Section 19(1)b refers). Adequate planning and training is required before school staff can assume any health maintenance responsibility for students. Training may be highly specialised, the need may be critical (eg setting criteria for when to call the ambulance) or training may be simple (familiarisation with the student's preferences). Specific training is not required for the administration of medication or for minor first aid. However it is essential that checks be made in each case so that the student is correctly identified and the medication is dispensed in the correct dosage. Administering some medications require training.

Emergencies

Planning for emergencies at the school level is essential and will be developed as part of a school's Risk Management. Schools must have well-developed emergency plans to address all known contingencies and staff must be aware of their responsibilities under these plans. Emergency situations require a different level of responsibility of staff than normal situations as there is a potential for criminal liability under the *Criminal Code* if action is not taken in an emergency. Section 262 of the *Code* imposes a duty upon "every person having charge of another" to provide "the necessaries of life" to anyone, "who is unable by reason of age, sickness, mental impairment, detention, or any other cause, to withdraw himself from such charge".

Where action can reasonably be taken to prevent or reduce harm to the student/s concerned, school staff members are expected to take such action, for instance, in providing or obtaining assistance in an emergency situation.

First Aid

In order to be able to take immediate care of a student who is injured or ill, schools will develop first aid facilities and procedures which are reviewed regularly and are based on an assessment of risks at the location. The school will ensure that there are:

- Suitably stocked first aid boxes,
- A supervised, hygienic place for sick or injured students who need to lie down,
- Widely understood procedures (eg who calls the ambulance, evacuation procedure for the injured student, information to be recorded), and
- Standard precautions for the control of infection (eg control of blood-borne infections, including recommended cleaning agents).

Communicable Diseases

Students with Communicable Diseases

A student may not attend school or participate in an educational program of the school if the student is suffering from a medical condition that is infectious, contagious or otherwise harmful to the health of persons at the school or in the educational program. Students who have an infectious disease should not attend school and should not return to school until they are fully recovered. Students with certain skin diseases may go back to school the day after treatment has commenced.

Climatic Issues

Prolonged High Temperature

Prolonged high temperature is deemed to occur when the maximum temperature at an official weather centre in the immediate vicinity of the school exceeds 40 degrees Celsius for two consecutive days and it is forecast by the Bureau of Meteorology that the temperature in the vicinity of the school will exceed 40 degrees Celsius the next day.

If these conditions occur, parents or guardians can withdraw their children in one of the following ways:

1. They can keep students home and provide a note when students return to school.
2. They can come to school and collect students at a specified time during the lunch period.

The school will not be closed in periods of prolonged high temperature. Classroom activities will be modified to suit the weather conditions.

Sun Protection

The school will promote a sun protection policy to ensure staff and students have reasonable protection:

- Maximum use is made of shade for outdoor activities and indoor facilities are preferred
- The amount of shade within the school grounds is increased by planting trees and building shelters,
- Activities are flexibly scheduled to reduce, as far as practicable, the amount of time spent in the sun between 10am and 3pm,
- A 'no wide brimmed or legionnaire's hat – no play in the sun' policy is enforced,
- The wearing of cover-up clothing, hats and sun screen is promoted for all outdoor activities,
- As part of the school health education program, a variety of learning activities is provided to develop knowledge, attitudes and skills about sun protection, and
- Positive role modelling of sun protection behaviours is demonstrated by parents and school staff

Administration of Medication

Parents' Responsibilities

Parents are responsible for seeking assistance from the school if a student needs to receive medication during school hours for providing the medication, and for working closely with the school towards meeting the student's needs. The following information must accompany a request for assistance:

- The nature of assistance required, bearing in mind that medicating out of school or students self-medicating are the preferred modes (unless the medical practitioner indicates otherwise),
- Advice about the related condition because in some cases a health care authorisation and an emergency authorisation will also be needed (eg asthma, allergic reaction to bee sting).
- Information from the prescribing doctor including the form the medication takes, when to administer and how often, any symptoms associated with misuse, over-use or under-use .

Parents may be asked to provide additional information, such as:

- Whether the student can assume responsibility at some time in the future, and
- Whether parents or a nominee are available to administer medication/procedure if there is no school staff to do so.

The parent must ensure that medication is clearly labelled, is not out of date and is provided in the quantity agreed, and that equipment is in good working order. If medication is being taken, the parents must advise the school of any likely effects that could affect student performance.

School's responsibility

Schools have a responsibility to manage requests for health care assistance. The principal consults with the parents, the school staff and the community nurse, and then determines what assistance is needed (based on advice from the medical practitioner and if necessary the Department of Health), what can be provided by the school and what can be accessed from other sources. The choice of a prescribed medication is recognised as beyond staff responsibility and is not a subject on which comment is provided.

- Individual members of staff may decline to administer prescribed medication or undertake a health care procedure.
- All relevant medical information must be available to those staff who have the student under their care. The potential hazards involving the use and misuse of any drug or medication can be severe. Staff need to be informed if a student's performance or behaviour is likely to be affected by a medication.
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- Medication which is not labelled correctly or is out of date, or equipment that is not in good working order will not be accepted for use.
- Schools will normally not be involved in administering non-prescribed medication.
- If it is agreed that an amount of medication will be stored by the school, the agreed amount will be handed to the assigned staff member for safe storage. Most prescribed medication will be stored in a lockable compartment or cupboard which can only be accessed by authorised persons. Medications which are required to be refrigerated should be under the care of the staff member who is responsible for the student and should be isolated in a secure labelled container. An arrangement with the school is necessary if the student needs to have the medication immediately accessible (eg ventolin for asthma)

Enrolment Information

The information obtained in the *Application for Enrolment* will indicate whether the principal needs to obtain more information from the parent about the student's health care needs. The principal will assess the suitability of the school in terms of the student's needs, using the criteria set out in section 84 of the *School Education Act 1999*, which relate to "(a) the nature of the benefit or detriment for the child and all other persons concerned; (b) any additional cost involved in providing the program for the child; and the effect of the child's behaviour, or disability or other condition, on the child's participation in the program".

Preservation of Medical Records

Medical records are deemed to be confidential and their collection, storage and security are the responsibility of the principal. All agreements relating to the administration of medication, performance of medical procedures and emergency medical plans, and all records of medication given and procedures performed must be retained for the period up to that student's 25th birthday. If the student is transferring between schools within the State, the record should be transferred to the new school.

Requests for Information from Medical and Other Health Practitioners

Requests for school related information about a student's health must be submitted via the parent to the principal who will determine the appropriate level of detail to report and will advise teachers accordingly. Information released by the school is then passed to the parent for forwarding to the practitioner. Direct communication with the student's practitioner only occurs with the permission of the parent.

Students with Intensive Health Care Needs

Rationale

Students with intensive health care needs are entitled to receive an appropriate program of education. The school setting should be the least restrictive environment that reasonably provides for students' health and safety. Factors such as the welfare of all students, the health care procedures required, the qualifications and availability of local staff, and the stability of the school environment must be taken into account.

Placement

The chief executive officer has ultimate responsibility for determining the placement of a student with intensive health care needs pursuant to sections 82 to 85 of the *School Education Act 1999*.

School responsibility

The principal must contact the district education office when applications are lodged seeking placement of students with intensive health care needs and when health care authorisations are being developed.

Pre-enrolment

When considering an *Application for Enrolment* of a student with intensive health care needs, the principal should firstly consult with the district education office to assess whether:

- The student's condition can be managed in the local environment without high risk of injury or life threatening illness,
- Arrangements can be made to cater for the student adequately and staff will agree to be involved,
- The learning processes or safety of other students in the school will not be seriously affected,
- Procedures proposed are supported by medical advice, and
- Extra staff assistance will be needed.

Post-enrolment

If a student develops intensive health care needs subsequent to enrolment in a school, the principal must assess these needs and consult with the district education office as soon as possible to determine whether an appropriate level of care can be provided.

Health Care Authorisation

- Principal consults with parents, health care deliverers (including doctors, nurses, para-medical staff, and therapists) on the content of the Authorisation. Staff who will be involved agree to receive appropriate training. The advice of the Department of Health may also need to be sought by the Department.
- Principal ensures that each student with intensive health care needs has a current Authorisation. The Authorisation is reviewed annually, or whenever the parent has obtained the medical practitioner's advice that the student's condition has altered.
- Information about individual students contained in the Authorisation is treated with confidentiality and respect. Judgement must be made about who has a "need to know."

Plans must include such details as:

- Symptoms and consequences of the condition,
- Indicators of the need for medical intervention,
- Clear instructions to cover all foreseeable circumstances including management in class, in outside play/activity areas, and management on excursions or school camps,
- Emergency procedures,
- Specific information about medication including administration and storage, timing, dosage and possible side effects,
- Written advice from medical practitioners regarding the medical procedure for the student – no plan is to be implemented without these signed authorisations,
- The people who will be responsible for particular actions, and the source of their training,
- Consideration of issues of privacy and confidentiality,
- Recording of all instances where medication/procedures have been administered,
- Date of agreement of the parties, and date for review.

Staff involved with a student with intensive health care needs must be aware of the details of the health care authorisation. Copies must be kept in school files and be available to all adults who need to use it. Some students' emergency plans, or aspects of them, may need to be displayed in prominent places, (bearing in mind the possible need for confidentiality regarding the student's medical details).

Copies of Health Care Authorisations must also be provided to parents and, where appropriate, to the student.

Health Care Procedures

Health care procedures are divided into two categories:

1. "Health maintenance procedures" involve the administration of medication or a treatment both of which may be performed by persons whose training is recognised as appropriate, who are authorised by the Department and who have entered into the agreement with the school and the parents to perform the procedure, and
2. "Medical procedures" performed by trained medical professionals (doctors, nurses) and selected staff in emergency situations only.

Only trained members of staff are to be involved in administering any of these procedures, provided their agreement and the approval of the Department have been obtained

Medical Procedures

Students with severe conditions that are potentially unstable may be at immediate risk if medical procedures are not performed. In these cases it is known in advance that at some time a certain medical procedure may be required to preserve life.

Identified personnel will have to receive training in order to apply the medical procedure if a life-threatening situation arises. Staff are permitted to undertake such procedures if they have been approved by the Department to carry out the procedure and if the situation is considered life threatening.

Emergencies

In most cases it is possible to access medical assistance within a reasonable time, particularly where emergency situations are predictable because of an existing condition (for example, asthma or diabetes).

Where a student has intensive needs, it is the responsibility of the parent to provide the school with adequate information including medical advice on the specific action to be taken under emergency conditions. Collaborative discussion on developing the medical emergency agreement must involve relevant school staff, parents and the school principal.

However, in those rare circumstances where the crisis is not predictable or the trained staff members cannot be accessed, a school staff member who is not trained may undertake intervention and will be legally covered. Where feasible and relevant to the circumstances, the staff member must:

- Check that the medication or procedure is given in accordance with the directions in the Health Care Authorisation, and
- Check the label and dosage of the medication and the identity of the student (and cross-check these details with a second adult person where practicable).

Assistance offered by more qualified persons (eg first aiders) must not be impeded. Medical advice or assistance must be sought immediately after the emergency situation. All actions must be taken promptly recorded; and the principal and the parents must be informed.

School staff must be made aware that they might breach their duty of care to the student if they were to refuse to provide assistance in an emergency situation. This applies when the staff member is reasonably aware that certain action is needed which could prevent or reduce harm being done to the student and where the staff member is able to take that action.

Calling an ambulance, without providing further help, may not be adequate in an emergency situation where staff are reasonably able to take some sort of affirmative action. The absence of parental consent or instructions from a doctor will not necessarily protect a staff member from liability in emergency situations. If a staff member reacts in a reasonable manner in an emergency situation, the absence of parental authority is not likely to raise an issue of liability.

Records

A school staff member undertaking a health maintenance procedure or medical procedure for a student must make a signed record of the medication and/or procedure, including the time and date it was administered. The forms for reporting accidents and incidents should be used if appropriate.

Excursions

Students requiring special medical assistance may attend school excursions provided adequate medical assistance is available from the staff attending the excursion. Alternatively agreement may be reached between the Department and the family about accessing other suitable health care.

When an excursion is planned, the teacher and the parents of children with intensive health care needs must consider the impact on the students. The principal must ensure that appropriate contingency plans have been made to deal with emergencies involving students with intensive health care needs. The teacher in charge of the excursion must have adequate and up to date medical information about the intensive needs of the student; take charge of and appropriately store sufficient pharmaceutically labelled medication, and make suitable arrangements for contact with parents/guardians, medical authorities and any other relevant personnel in the event of an emergency.

Training

Training in procedures identified as "health maintenance procedures" will be made available for relevant staff. Staff involved in the management and support of students with intensive health care needs must be appropriately trained. Basic assessment and decision-making are essential issues to be addressed in any training. Training may be general (eg the provision of school-based first aid training), or very specific (eg intermittent clean catheterisation); it may be simple (diet monitoring) or highly technical (resuscitation). In some cases it will be sufficient for parents to provide training and familiarisation.

Other than in life-threatening circumstances, training in the procedures identified as "medical procedures" will not be provided. Staff who are agree to do so will be trained to undertake potentially intrusive procedures if circumstances arise where a student with a high level of medical risk is considered to be in a critical situation and immediate medical assistance cannot be procured from an appropriate practitioner.

Effective date

The effective date for this policy is February 2012

Review date

The review date for this policy is February 2013



JOLIMONT PRIMARY

HEALTH CARE PLAN

To be completed by the school in consultation with the child's parents

Student's name:

Date of birth:

Gender M / F

Year level:

Class teacher/ s:

Medical condition:

School will
provide
student
photograph

Medication / treatment / action

Treatment:

Any special requirements for excursions?

Student Medication record established: Yes / No

Expiry date of medicine: Commencement date: Conclusion date:

How and where the medication is to be stored: _____

Medical Emergency Plan

Emergency contact/ s

Name _____ Relationship to student _____

Phone _____ Mobile phone _____

Action in case of an emergency:

Emergency doctor's name _____

Phone _____

Emergency transport requirements _____

Trained Staff Member's name/s _____

Training given by (can be the parent / principal / medical practitioner / other) _____



JOLIMONT PRIMARY
Health Care Plan And Authorisation

(To be completed and signed by the treating medical practitioner)

Student's Name: _____

Current Year: 2012

The doctor treating the student for the condition is asked to provide precise and clear instructions to enable the school to maintain duty of care **about health care needed during school hours**.

No action can be undertaken unless the information is provided and the doctor signs agreement to the plan.

The advice will remain current **only for the year indicated** unless an earlier update is needed because there are changes to the student's health necessitating a change to the Health Care Plan.

Name of medication/ treatment:

Method of administration/treatment:

If the student is able to self-administer/self-treat, what support would the school need to provide?

Administration /treatment (frequency; how much; how long)

Symptoms indicating action / medication is needed?

Symptoms of over dosage/over treatment

When would the school need to seek medical assistance?

Triggers that could lead to the child requiring treatment

Recommended individual & environmental prevention practices for the wellbeing of the student.

I verify that I have read this document and agree with implementation as outlined.

Medical practitioner 's name _____

Signature _____

Date _____

**AGREEMENT BETWEEN THE SCHOOL, THE PARENT AND TRAINED STAFF
MEMBER/S ABOUT THE STUDENT'S HEALTH CARE PLAN**

Student's Name: _____

Current Year: 2012

The following signatories agree to participate in the implementation of this agreement that provides for

- the day to day care of the student during the school day, and
- the care of the student in emergency situations.

The agreement authorises the School and staff to follow the advice of the student's medical practitioner set out in the Health Care Plan. It is valid only for the year indicated and will need to be updated each year, or earlier if there is a change to the student's health necessitating a change to the Health Care Plan.

Signature of Parent/ guardian/ care giver (please circle) _____ **Date:** _____

Signature of Principal _____ **Date:** _____

Signature of Staff member _____ **Date:** _____



JOLIMONT PRIMARY

Request For Medication Or Treatment To Be Administered

Student's Name: _____ **Current Year:** 2012

To be confidentially stored until the student is 25 years old.

NOTE: Where possible student medication should be self administered by the student or administered by parents at home at times other than during school hours. If the Principal of the school is to approve of school staff administering or supervising the administration of medication to a student then the following requirements must be met.

The doctor prescribing the drug must be aware that the school will supervise or carry out administration of medication on the instructions provided. Therefore a medical practitioner must complete the form *Health Care Plan*. These instructions are a mandatory requirement if special arrangements are to be made for the school staff to administer the drug or monitor the student after drug administration.

Drugs for administration should be delivered to the schools into the care of the designated staff member, who will prepare a student medication record and store the drugs in a locked cupboard. All drugs should be contained in properly labelled containers showing the name of the drug, the name of the student and the appropriate dose and frequency. Unlabelled drugs will not be administered.

_____ is taking the following drugs as prescribed by
(Child's full name)

Doctor _____ for the purpose of treating _____
(Doctor's full name) (Condition)

Name of drug: _____ Dosage: _____

Time to be given: _____ Completion Date: _____

Replacement of drug: (if appropriate)

Comments: _____

Tick the box that is appropriate for your child's administration of medication.

- My child is capable of self administering the above medication.
- I request *Jolimont Primary School* to administer the above drugs for my child.

Signed: _____
(Signature of Parent/Guardian)

Date: _____

