



STUDENT HEALTH AND FIRST AID POLICY

PURPOSE:

At any one time, a student can have a health condition or care need that could impact on their attendance and participation within school. This can require short or long-term first aid planning, supervision for safety, routine health and personal care support and occasionally complex medical care needs.

Eaglehawk Secondary College has a responsibility to provide equitable access to education and respond to diverse student needs, including health care needs. This policy has been developed to assist supporting student health within a school environment in a pro-active manner.

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GUIDELINES

Generally, schools are unable to provide for ill and recuperating students. Teachers require students to have relatively stable health and clear care plans. For example, teachers can generally safely supervise a child with a chronic health condition such as asthma or diabetes where the individual's health is relatively stable and predictable and care recommendations have been documented and agreed to by the school.

If, however, a student has recently contracted an illness, is infectious and/or needs rest and recuperation, his or her care generally should be the responsibility of the family.

The school principal will ensure that families understand and follow the school's health support procedures.

- At the initial meeting with families, prior to acceptance of enrolment, the principal or their nominees should specifically ask whether a child or student has any individual emergency or routine health and personal care support needs, such as: predictable emergency first aid associated with, for example, anaphylaxis (severe, life threatening allergy), seizure management or diabetes, routine supervision for health care safety, such as supervision of medication, personal care including assistance with personal hygiene, continence care, eating and drinking, transfers and positioning, and use of health related equipment.
- Parents/carers are primarily responsible for the health and wellbeing of their children.
- The school principal will ensure that allocation of staff duties anticipates predictable short and long-term health support needs of children and students in their care.
- First Aid support in the school will be provided in response to unpredictable illness or injury.

PROGRAM

- Eaglehawk Secondary College has procedures for supporting students with identified health needs (**see Appendix A**) and will provide a basic first aid response to ill or injured students due to unforeseen circumstances (**see Appendix B**) and requiring emergency assistance.
- The first-aider will seek emergency assistance in situations where his or her training is not sufficient to keep the student safe. First aid trained staff should not have to wait for parent or guardian approval to take this emergency action. Delays could compromise safety. The first-aider should, however, notify the child's or student's emergency contact person as a matter of priority to inform him or her of the action taken. School procedures should ensure parents/carers are aware of, and accept, this policy with its associated obligation for payment by families for ambulance and other emergency services. The school recommends that all students have personal accident insurance and ambulance cover.
- It is the principal's responsibility to:
 - alert families to the need for health care plans if children or students need individual support
 - develop, monitor and review the school's health support procedures
 - manage health support planning
 - involve relevant teachers in health support planning
 - manage confidentiality
 - ensure staff training requirements are fulfilled
 - ensure delegated staff responsibilities reflect duty statements

- ensure facility standards are met
 - be aware of health care services which visit the school
 - manage archives of documented information
- If there is an indication that individual health care may be needed by a student, the parent/carer should be asked to provide a health care plan, written by a relevant health professional. The care plan should document recommended emergency and routine health and personal care support for the child or student. Information about medical conditions (such as asthma, epilepsy and incontinence) must be provided by a doctor or, in some cases, a clinical nurse consultant working under the direction of a doctor. A therapist (for example, a physiotherapist or a speech pathologist) will usually document information about therapeutic such as transfers and positioning, and mealtime assistance.
 - Some students will have a health care need identified after enrolment. The same steps should be followed. An interim health support plan might be needed.
 - It is the responsibility of parents/carers to:
 - provide relevant health care information to the school
 - liaise with health professionals to provide care plans which create minimum disruption to learning programs
 - assist children or students for whom they are responsible to self manage, as much as is safe and practical, their health and personal care needs

(See Appendix A: Management of Students with Health Care Needs)

- It is the responsibility of School First Aiders to:
 - administer first aid for unpredictable illness or injury
 - coordinate provision of first aid, including monitoring of equipment and facilities
 - administer additional individual first aid support as negotiated (for example, administration of adrenalin via Epi-Pen for anaphylaxis)
- The school will have a number of teachers and educational support staff trained in first aid able to treat unpredictable illness or injury.
- One member of staff will be delegated the task of coordinating first aid procedures and maintaining and securing the contents of the school's first aid kit. A relief staff member will be nominated in the event of the absence of the first aid coordinator. Other staff with first aid qualifications will be identified and available to assist.
- NURSE-ON-CALL (on 1300 60 60 24) can also be contacted in an emergency. NURSE-ON-CALL provides immediate, expert health advice from a registered nurse and is available 24 hours a day, 7 days a week from any landline in Victoria for the cost of a local call.

(See Appendix B: First Aid Care Procedures)

Staff Training

- The school will have a number of teachers and educational support staff trained in first aid able to treat unpredictable illness or injury. **(See Appendix C: List of First Aid Qualified Staff at the School)**
- All staff with a duty of care for students will be trained to assess and manage an asthma emergency and complete the one-hour Asthma Education session at least every three years - this can be face-to-face or online. Those staff with a direct student wellbeing responsibility such as nurses, PE/sport teachers, first aid and camp organisers have completed the Emergency Asthma Management (EAM) course at least every three years
- All staff must undertake appropriate diabetes and epilepsy education. This includes general education for all school staff and specific training for staff closely involved with students with diabetes and epilepsy.
- Staff will be educated accordingly to the individual health needs of the students within their duty of care

LINKS AND APPENDICES (including processes related to this policy)

- Links which are connected with this policy are:

<http://www.eduweb.vic.gov.au/edulibrary/public/schadmin/environment/4-5.pdf>

<http://www.education.vic.gov.au/hr/ohs/health/firstaid.htm>

<http://www.education.vic.gov.au/hr/ohs/hazards/Firstaid.htm>

<https://www.eduweb.vic.gov.au/edulibrary/Schools/Forms/General%20School%20Forms/student%20health%20support%20plan%20template-frm-v1.0-may%202008.doc>

<http://www.education.vic.gov.au/healthwellbeing/health/anaphylaxis.htm>

<https://www.eduweb.vic.gov.au/edulibrary/Schools/Forms/General%20School%20Forms/medication%20authority%20form-frm-v1.0-may%202008.doc>

<https://www.eduweb.vic.gov.au/edulibrary/Schools/Forms/General%20School%20Forms/medication%20administration%20log-tmp-v1.0-may%202008.doc>

<https://www.eduweb.vic.gov.au/edulibrary/Schools/Forms/General%20School%20Forms/general%20medical%20advice%20form-frm-v1.0-may%202008.doc>

<http://www.asthma.org.au/Default.aspx?tabid=102>

Appendices which are connected with this policy are:

- Appendix A: Managing Students with Special Health Needs

- Appendix B: First Aid Care Procedures
- Appendix C: List of First Aiders at Eaglehawk Secondary College

EVALUATION

- This policy will be reviewed annually or more often if necessary due to changes in regulations or circumstances.

Appendix A

Managing Students with Special Health Needs

Any information provided to the school on the enrolment form or separately, will be taken into account when planning the care of a student. Where students have a health care need identified after enrolment, the same steps will be followed.

When a need is identified

- Parents/carers are required to provide accurate information about a student's routine health and personal care support needs, and emergency care needs, for example:
 - predictable emergency first aid associated with an allergic reaction, seizure management, anaphylaxis, or diabetes
 - routine supervision for health care safety, such as supervision of medication
 - personal care, including assistance with personal hygiene, continence care, eating and drinking, transfers and positioning, and use of health-related equipment
- Parents/carers and students will be informed when their information is being collected, about how their personal information will be used, and to whom it might be disclosed. For example, to school nurses, who will require access to relevant student information in order to provide appropriate services.
- Medical advice is required from the student's medical/health practitioner if there is an indication that a student has a health care need. The medical advice received must provide relevant information about the student's medical condition and document recommended emergency and routine health and personal care support for the student. Ideally medical advice should be sought via the completion of a relevant Medical Advice Form.
- For any student requiring medication while at school, the school must receive written directions ideally from the student's medical/health practitioner. This can be done via the completion of a Medication Authority Form or ASCIA Action Plan for anaphylaxis and allergies or School Asthma Action Plan for asthma (see Victorian Government Schools Reference Guide 4.5.3.1).
- Information about the student's health condition as well as medication to be stored and supervised at school should be loaded in Cases21 Database, and the Student Management Database (Xuno)
 - The development of a Student Health Support Plan (accessed <http://www.education.vic.gov.au/school/principals/spag/health/Pages/supportplanning.aspx>) will occur as required after the school has received the appropriate medical advice from the student's medical/health practitioner. If there is a time delay between receiving this advice and in the development of a Student Health Support Plan, the school may decide to put in place an interim support plan outlining an agreed interim strategy, e.g. call an ambulance immediately.

- All children attending camps or excursions 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 to be taken on camps and excursions, as well as kept at school.

The planning process

The student's medical/health practitioner provides a medical advice form that:

- guides the planning
- details:
 - the student's medical condition
 - medication required at school
 - recommended emergency and routine health and personal care support for the student.
- The principal (or nominee) discusses the development of a Student Health Support Plan with the student, student's parents/carers and other relevant school staff. This Support Plan should be guided by the medical advice received by the student's medical/health practitioner.

Notes:

1. 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.

2. Questions to consider:

- *Is it necessary to provide the support during the school day?*
- *How can the recommended support be provided in the simplest manner, with minimal interruption to the education and care program?*
- *Who should provide the support?*
- *Is this support complex and/or invasive?*
- *Is there staff training required?*
- *Are there any facilities issues that need to be addressed?*
- *How can the support be provided in a way that respects dignity, privacy, comfort and safety and enhances learning?*
- *Are there any care and learning plans that should be completed for students with personal care support?*

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
 - if there is a change in support
 - at least annually.
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- At the commencement of each year, requests for updated first aid information will be sent home including requests for any asthma, diabetes and anaphylaxis 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.

Appendix B

First Aid Care Procedures

Introduction

- The school has procedures for supporting student health for students with identified health needs (see Appendix A) and will provide a basic first aid response as set out in the procedure below to ill or injured students due to unforeseen circumstances and requiring emergency assistance.
- These procedures have been communicated to all staff and are available for reference from the school office.
- Parents of ill children will be contacted to take the children home.
- 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.
- All teachers have the authority to call an ambulance immediately in an emergency. If the situation and time permit, a teacher may confer with others before deciding on an appropriate course of action.

First Aid Officers

- A sufficient number of staff (including at least 1 administration staff member) to be trained to a level 2 first Aid certificate, and with up to date CPR qualifications.
- Consistent with the Department's First Aid Policy and Procedures, the school has allocated the following staff members as its First Aid Officers:

Mrs Danielle Snowdon (First Aid Coordinator)

- The First Aid Officers have the following first aid qualifications:

○ Name	○ Level 1 st Aid	○ Date Qualified
○ Danielle Snowdon	○ Level 2	○ August 2016
○ Christine Gilmore	○ Level 2	○ February 2017
○ Ian Berry	○ Level 2	○ January 2016
○ Sarena Bear	○ Level 2	○ August 2016

First Aid Officer Duties

- Providing first aid services commensurate with competency and training. This may include all or some of emergency life support including response to life threatening conditions which may occur in the school (e.g. cardiac arrest or respiratory difficulties associated with asthma), management of severe bleeding, basic wound care, fractures, soft tissue injury.
- Recording all first aid treatment. A copy of treatment provided shall be forwarded with the patient where further assistance is sought. The first aider should respect the confidential nature of any information given.
- Providing input on first aid requirements for excursions and camps.
- The First Aid Officer/s will be available at the school during normal working hours and at other times when authorised Department programs are being conducted.
- Where possible, only staff with first aid qualifications will provide first aid. However, in an emergency other staff may be required to help within their level of competency
- All school camps will have at least one Level 2 first aid trained staff member at all times.

First Aid Coordinator Duties

- The First Aid Coordinator is required to undertake a coordinating role maintaining standard medical service provision, student medical records and parent notifications.
- Their specific duties include:
 - Participating in the risk management process within the school as part of the school's OHS team. This may include contributing to risk management solutions and providing feedback on injury reports and first aid register data to identify persistent or serious hazards.
 - Providing first aid emergency awareness training for staff including emergency notification processes, a list of responsible officers and provision of emergency phone numbers.
 - Maintaining first aid room and first aid kit

Other First Aid duties in conjunction with the School Nurse

- Take a role in supporting teachers and principals in health support planning
- Have knowledge of:
 - all students with a support or management plan
 - the first aid response noted in the plans
- ensure that student's emergency contact details are up to date
- ensure all medications supplied by the student are within their use-by date

- work with staff to conduct regular:
 - reviews of management strategies
 - risk assessments
 - develop strategies to raise awareness in the school community about health and safety issues.

Procedures for Medical Treatment

- In the event of a student requiring medical attention, an attempt will be made to contact the parents/guardians before calling for medical attention except in an extreme emergency.
- In serious cases, parents/guardians will always be informed as quickly as possible of their child's condition and of the actions taken by the school.
- A Record of First Aid Treatment will be kept in the General Office and information recorded for all students treated in the Sick Bay.
- 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 a teacher considers the injury to be greater than "minor" will be reported on Department of Education Accident/Injury form LE375, and entered onto CASES21.
- No medication including headache tablets will be administered to students without the express written permission of parents and guardians

First Aid Room

- The first aid room will have a comprehensive supply of basic first aid materials, stored in a locked cupboard.
- The first aid room should allow for short-term supervision and the ability to summon further assistance if required.

The level of supervision required by the allocated first Aid officer, in the first aid room varies depending on the case. For example, supervision:

- should be required for a student who has had a blow to the head and is feeling dizzy
 - may not be required for a student with a slight headache, who needs a lie down
- Students resting in sick bay are not to be accompanied by another student unless authorized by Principal Team

First Aid Kits (located in the school Sick Bay, for camps and excursions, as well as one in each community and school building)

- First aid kits will be available for all groups that leave the school on excursions. The content of these kits will be dependent on the nature of the activities, the number of students and staff, and the location of the excursion.
- First Aid Kits will be checked and restocked as necessary:
 - As soon as possible after the item was used (by the staff member that used the item)
 - Prior to camp/ excursion (by staff member taking kit), and
 - Every term by the First Aid Coordinator/ School Nurse
- A comprehensive first aid kit will accompany all camps, along with a mobile phone and EpiPen.
- All children, especially those with a documented asthma management plan, will have access to Ventolin and a spacer at all times.

First Aid Kit Contents

Consistent with the Department's First Aid Policy and Procedures the school will maintain a First Aid Kit that should include the following items:

Asthma Equipment

- Asthma puffer and disposable spacers
- Asthma instructions

Wound cleaning and dressing equipment

- gauze swabs: 100 of 7.5 cm x 7.5 cm divided into small individual packets of five
- sterile saline ampoules: 12 x 15 ml and 12 x 30 ml
- disposable towels for cleaning dirt from skin surrounding a wound
- wound dressing equipment
- bandages

Other equipment includes:

- single use gloves
- blood spill kits
- vomit spill kits

- one pair of scissors (medium size)
- disposable splinter probes and a sharps container for waste
- disposable tweezers
- disposable hand towels
- two gel packs, kept in the refrigerator, for sprains, strains and bruises or disposable ice packs for portable kits
- adhesive sanitary pads, as a backup for personal supplies
- additional 7.5 m conforming bandages and safety pins to attach splints
- blanket and sheet, including a thermal accident blanket for portable kits
- germicidal soap and nail brush for hand-cleaning only
- one box of paper tissues
- paper towel for wiping up blood spills in conjunction with blood spill kit
- single use plastic rubbish bags that can be sealed, for used swabs and a separate waste disposal bin suitable for taking biohazard waste (note: Biohazard waste should be burnt and there are several companies that will handle bulk biohazard waste)
- ice cream containers or emesis bags for vomit.

Head injuries

It is the policy of the school that all injuries to the head are reported to Principal Team Member (via Xuno) and that parents/emergency contacts are contacted regarding the injury.

Assessment and First Aid Treatment of an Asthma attack

- If a student develops signs of what appears to be an asthma attack, appropriate care must be given immediately

Assessing the severity of an asthma attack

- Asthma attacks can be:
 - **Mild** - this may involve coughing, a soft wheeze, minor difficulty in breathing and no difficulty speaking in sentences
 - **Moderate** - this may involve a persistent cough, loud wheeze, obvious difficulty in breathing and ability to speak only in short sentences
 - **Severe** - the student is often very distressed and anxious, gasping for breath, unable to speak more than a few words, pale and sweaty and may have blue lips.

- Regardless of whether an attack of asthma has been assessed as mild, moderate or severe, Asthma First Aid (as detailed below) must commence immediately. The danger in any asthma situation is delay. Delay may increase the severity of the attack and ultimately risk the student's life.
- All students judged to be having a severe asthma attack require emergency medical assistance, (dial 000)
- Call an ambulance (dial 000), notify the student's emergency contact and follow the '*4 Step Asthma First Aid Plan*' while waiting for the ambulance to arrive. When calling the ambulance state clearly that a student is having 'breathing difficulties.' The ambulance service will give priority to a person suffering extreme shortness of breath.

Asthma First Aid

- If the student has an Asthma Action Plan, follow the first aid procedure immediately. If not, Asthma Action Plan is available in the steps outlined below should be taken immediately.

The 4 Step Asthma First Aid Plan

Step 1

Sit the student down in as quiet an atmosphere as possible. Breathing is easier sitting rather than lying down. Be calm and reassuring. Do not leave the student alone.

Step 2

Without delay give 4 separate puffs of a blue reliever medication (*Airomir, Asmol, Epaq or Ventolin*). The medication is best given one puff at a time via a spacer device. i.e.

- Shake puffer
- Put 1 puff into spacer
- Take 4 breaths from spacer
- Repeat until 4 puffs have been taken

If a spacer device is not available, simply use the puffer on its own. Ask the person to take 4 breaths from the spacer after each puff of medication.

Step 3

Wait 4 minutes. If there is little or no improvement repeat steps 2 and 3.

Step 4

If there is still little or no improvement; call an ambulance immediately (dial 000). State clearly that a student is having 'breathing difficulties.'

Continuously repeat steps 2 and 3 while waiting for the ambulance.

Managing Open Wounds and Blood Spills

Teachers, staff and principals must be familiar with the school's first aid procedures related to blood spills and bleeding students.

All students with injuries involving blood must have the wound covered at all times

Treating bleeding students

- Avoid contact with the blood while: comforting the student moving them to safety if required.
- Put on single-use gloves.
- Flush the wound using warm water.
- Pat dry the wound and apply a waterproof occlusive dressing ensuring the wound is covered completely
- If bleeding continues, apply additional pressure using either a hand or firm bandage.

Managing blood spills

Blood spills should be treated as if the blood is potentially infectious and should be covered with a waterproof occlusive dressing at all times.

1. Put on single-use gloves and avoid direct contact with blood or other body fluids.
2. Use paper towels to mop up the spill. Dispose of the paper towels in an appropriate biohazard container.
3. Wash the area with warm water and detergent, then rinse and dry the area. Note: Take care not to splash.
4. Remove gloves and place them in an appropriate biohazard container, which should be a part of the school first aid kit.
5. Wash hands in warm soapy water and rinse thoroughly before pat-drying.
6. If re-usable items were used such as scissors or single-use tweezers, and they are contaminated with blood or other body substances, they should be disposed of in a sharps or biohazard container. If they are not contaminated, they should be washed and dried.

Emergency Telephone Numbers

Poisons Information Service	13 11 26
Ambulance	000

Appendix C

First Aid Qualified Staff at School

The following staff are first Aid trained at Eaglehawk Secondary College:

<input type="radio"/> Name	<input type="radio"/> Level 1 st Aid	<input type="radio"/> Date Qualified
<input type="radio"/> Ian Berry	<input type="radio"/> Level 2	<input type="radio"/> January 2016
<input type="radio"/> Danielle Snowdon	<input type="radio"/> Level 2	<input type="radio"/> August 2016
<input type="radio"/> Christine Gilmore	<input type="radio"/> Level 2	<input type="radio"/> February 2017
<input type="radio"/> Sarena Bear	<input type="radio"/> Level 2	<input type="radio"/> August 2016