



**FREMANTLE LANGUAGE
DEVELOPMENT CENTRE**

STUDENT HEALTH CARE POLICY AND PROCEDURES

FREMANTLE LANGUAGE DEVELOPMENT CENTRE STUDENT HEALTH CARE POLICY AND PROCEDURES

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1. POLICY STATEMENT

The Department of Education promotes student health, supports student health care needs, and identifies and minimises health risks within the context of the schools' resources, and the assistance available from specialist services.

2. POLICY RULES

Principals, in accordance with the *Student Health Care Procedures*:

- obtain information from parents about their child's health care needs;
- respond to the health care needs of students;
- develop plans for medical emergencies; and
- develop and implement school procedures and practices to manage specific health issues.

3. LEGISLATION AND POLICIES

3a. Relevant Legislation or Authority

- Age of Majority Act 1972 (WA)
- Children and Community Services Act 2004 (WA)
- Disability Discrimination Act 1992 (Cth)
- Disability Standards for Education 2005
- Equal Opportunity Act 1984 (WA)
- Health Act 1911 (WA)
- Poisons Act 1964 (WA)
- Poisons Regulations Act 1965 (WA)
- Privacy Act 1988 (Cth)
- Public Sector Management Act 1994 (WA)
- School Education Act 1999 (WA)
- School Education Regulations 2000 (WA)
- State Records Act 2000 (WA)

3b. Relevant Policies, Department of Education, WA

- Duty of Care for Students
- Emergency and Critical Incident Management
- Enrolment Policy and Procedures

- Excursions Policy and Procedures
- Occupational Safety and Health
- Records Management
- Risk and Business Continuity Management

3c. Other Documents

- Guidelines for First Aid in Department Workplaces
- Guide to Educational Programs Other than Full-time Attendance Flowchart
- Memorandum of Understanding between the Department of Education and the Department of Health for the delivery of School Health Services
- Records Management Manual for School, College and Campus Records
- Working with Youth: A Legal Resource for Community Based Health Workers

4. PROCEDURES

4a. Identifying Student Health Care Needs

At enrolment, the FLDC

- provides and requires parents to complete the *Student Health Care Summary* form; and
- requests parents to provide a record of their child's immunisation history.

Department of Education Guidance

If parents do not provide immunisation records, the enrolment can proceed but parents should be advised that during an outbreak of a vaccine preventable disease such as measles, their child may be excluded until 14 days after the onset of the rash in the last case occurring at the school. School Administration will be coordinated by public health staff.

4b. Managing Student Health Care

For students with identified specific health care needs, the FLDC

- requests parents to complete one or more of the Department's standardised *Student Health Care Plans* or provide an alternative plan from their child's medical practitioner;
- implements and updates the student health care plans at least once a year;
- ensures updated copies of Student Health Care Plans are visible in each classroom, the First Aid room, teacher common areas (e.g. Staffroom) and Teacher Relief files; and
- arrange the training necessary to enable staff to support student health care.

Department of Education Guidance

Resources available to schools include those available through Schools Resourcing and the Schools of Special Educational Need. Community/school health nurses can provide advice on complex health care plans. The following Guidelines to support the health care planning process are available on the [Student Health Care](#) website

- *Guidelines – Managing Health Care for Students with High Risk Health Conditions*

- *Guidelines – Specialist Services. (Schools of Special Educational Need, School Health Services delivered by school nurses and Disability Services and Support)*
- *Guidelines – Flow Chart for Student Health Care Planning Process*
- *Guidelines – A Whole School Approach to Managing Anaphylaxis*

4c. Managing Student Health Care when Students are off-site

The FLDC recognises that students who require health care support may be at increased risk when engaged in off-site activities such as excursions and camps. As part of the FLDC Excursion Policy and Procedures, student health care plans are to be reviewed within the context of the particular activity. Arrangements for adequate supervision and medical care form part of the FLDC Excursion Package.

4d. Parent Cooperation/Partnerships

The FLDC recognises the importance of a parents' role in the health of their child. The FLDC encourages parents to work in partnership with the FLDC and cooperate by providing the necessary health information and/or medication required for their child.

Parents who do not cooperate or fail to provide relevant medical information on their child, are to be contacted in writing, by phone and/or in person to ensure the safety of the student

Department of Education Guidance

If parents do not respond, principals may:

- *in the case of students of sufficient maturity (independent minor), be able to deal directly with the student who can make his/her own health care decisions;*
- *seek agreement from the parent to liaise directly with the student's medical practitioner;*
- *if the school becomes aware that a student has a complex and/or or potentially life threatening condition, seek advice from the Regional Education Office, school/community health nurse and/or Legal Services;*
- *refer the matter to the Department for Child Protection and Family Support as a case of medical neglect.*

4e. Student Health Related Absences from School

The FLDC recognises that some students have chronic health conditions that may affect their attendance at school. In this case, the FLDC works collaboratively with the child's family to ensure the best educational outcome for their child.

If however, a parent insists that his/her child can attend school and the FLDC Principal believes that the child is not well enough to attend, the parents must provide a medical certificate to confirm the child is fit to attend school.

Department of Education Guidance

Information about supporting students who are absent for extended periods due to ill health can be sought from the School of Special Educational Needs: Medical and Mental Health. Refer to Guidelines - Specialist Health Services.

4f. Managing Student Health Care Records

The FLDC maintains student records in accordance with the Department's *Records Management Policy*. This includes

- uploading information from the Student Health Care Summary and health care plans into the Medical Details section of the School Information System, unless the parent specifies that the information is not to be shared;

- retaining signed, hard copies of all documentation including immunisation records on the student's school file;
- reviewing all student health care records annually and/or when the student's health needs change; and
- managing the confidentiality of student health care information.

Department of Education Guidance on Confidentiality

Students health information is confidential but Principals may share student health care information if:

- *parents or students who are independent minors provide consent;*
- *there is an imminent threat to the student, for example, potential suicide;*
- *there is a specific agreement in place for sharing health information, for example, there is agreement that the Department will provide the Department of Health with student immunisation data (class lists and student immunisation status) to support school based immunisation programs. Refer to Guidelines for Recording and Managing Immunisation Data on SIS 2012; and/or*
- *there is a legislative capacity or requirement to share the information, for example, mandatory reporting of child sexual abuse.*

4g. Medical Emergencies

In the case of a medical emergency, the First Aid Officer under the guidance of the FLDC Principal will

- provide appropriate medical treatment for the student;
- make appropriate transport arrangements if required;
- inform the students' parents as soon as possible of actions taken;
- promptly record all actions taken in the appropriate accident/incident record form;
- for complex/severe emergencies complete an online incident notification report; and
- arrange a review of the event, and debriefing and support the staff/students as required.

In the absence of the FLDC Principal, staff will ensure that the FLDC Principal is fully informed of all medical emergencies on return.

TRANSPORTING STUDENTS IN A MEDICAL EMERGENCY

Should a student require transportation to an appropriate medical facility, the FLDC staff will

- call for an ambulance by dialling 000
- if an ambulance is not available in a reasonable timeframe, the FLDC staff will seek advice from the ambulance service. If the ambulance service agrees, transport in a private vehicle, in which 2 staff members (one to drive and the other to monitor the student) will transport the student to the nearest medical facility.

Department of Education Guidance

Parent Consent

The absence of parental consent does not prevent a principal seeking medical attention in an emergency.

Students who frequently require an emergency response

To assist in providing an overview of key health information to ambulance or hospital staff, principals may use the Emergency Response Plan for a Student with Special Needs for students with health conditions which frequently require an emergency response form.

Meeting the Cost of the Ambulance Service

The Student Health Care Summary which is completed by all parents at enrolment indicates that parents are expected to meet the cost of an ambulance in an emergency.

Department of Education Guidance (cont.)

Cancellation of an ambulance call out by parents

In an emergency, a school may call an ambulance for a student at risk, but when parents are contacted, they may request cancellation of the ambulance and advise that they will transport the student. The school has a duty of care for the student and arrangements for transport by ambulance should proceed. An ambulance should not be cancelled until parents arrive and the student is handed into their care.

Role of community health nurses in transporting students

School Health Service staff (for example, community health nurses) are not permitted in accordance with a Department of Health directive, to transport students in a private or government vehicle. They may accompany a student in a vehicle driven by a Department of Education staff member in order to manage and monitor the health of the student.

5. ADMINISTRATION OF MEDICATION

The FLDC recognises that students may require medication during school hours. If a student requires medication to be administered by staff during school hours, parents will be asked to

- complete an *Administration of Medication* form, specifying the medication to be delivered, the time it is to be delivered, requirements for storage, and the start and end dates for the medication;
- provide sufficient medication in a timely manner to the school. If the FLDC staff agree, medication may be given to the class teacher for administration;
- advise staff in a timely manner if the medication dosage changes or ceases before the end date. Changes must be given in writing.

Parents will be required to complete the *Administration of Medication* form at the beginning of each year, if their child is on long term medication.

All student medication at the FLDC is stored in a locked drawer/cabinet unless the medication requires refrigeration. When administering medication, the FLDC staff will

- ensure that 2 staff members administer and sign for the medication at all times;
- maintain a record of all medication administered to each student using an individual administration of medication record sheet. One record sheet per medication, per student;
- ensure the medication is stored appropriately away from students.

6. MANAGING SPECIFIC HEALTH ISSUES

6a. Student Immunisation

At the FLDC, parents are asked to provide evidence of their child's immunisation status on enrolment. It is preferred that parents provide the *Australian Childhood Immunisation Register (ACIR) History Statement* whenever possible. Parents who choose to be a 'conscientious objector', must provide evidence that this has been recorded with Medicare for their child.

Each student's immunisation records are entered into the School Information System according to the Department's *Guidelines for Recording and Managing Immunisation Data*. The immunisation status of enrolled students is reviewed at least once per year by Administration Staff. Parents of students with a status other than

- *Up to Date*,
- *No-Medical*, and
- *No-Objector*

will be asked to provide additional evidence that their child has had all the necessary immunisations, to show their immunisation status is *Up to Date*.

It should be noted that students do not obtain an immunisation status of *Fully Complete* until their immunisations have been completed in High School.

6b. Prevention of Infection

The FLDC recognises the importance of effective procedures and practices in the prevention of Infection. At the FLDC, students are encouraged to follow procedure and practices that promote effective hygiene, to help reduce the spread of infection. This includes, but is not limited to

- health lessons are used to teach hygiene practices such as effective handwashing, nose blowing and the prevention of spreading germs (eg. hygienic disposal of tissues);
- in the classroom the 'Breathe, Cough, Blow Program' is practiced regularly;
- the use of visual signs to support handwashing in the toilets and the wet areas;
- supervision by staff to ensure there is effective learning and practice;
- the provision of hand sanitiser in each classroom;
- the provision of soap in toilets and wet areas
- visual supports for appropriate toileting as required;
- the changing of hand towel and tea towels regularly to be washed by staff;
- plastic toys, dolls clothes and play equipment are washed regularly by staff; and
- students are discouraged from sharing their food and drinks bottles.

6c. Communicable Disease Management

If a student or staff member has been identified as having a communicable disease, the FLDC Administration staff will liaise with the Administration staff of the co-located schools so that action can be taken in accordance with the Department of Health advice in the management of the disease. This advice can be found in the School Health Nurse File in the main school office at Willagee.

If the communicable disease is **notifiable**, the FLDC staff, in consultation with co-located Administration staff will

- report the matter to the local Public Health Unit and seek further advice before taking any further action; and
- act in accordance with the advice provided by local Department of Health staff.

If the communicable disease is **not notifiable** but is **contagious**, the FLDC staff will

- request that the parent keep their child home for the required exclusion period or until their symptoms have improved; and
- send a general class note home to advise other parents in the class about the identified infection.

At enrolment,

Department of Education Guidance Communicable Disease Guidelines

The Department of Health's Communicable Disease Guidelines provide information regarding the incubation and exclusion criteria for communicable diseases, and advice on which diseases are notifiable and must be reported to the Department of Health. Refer to the Department of Health Public/Population Health Units' contact details.

6d. Anaphylaxis

It is recognised at the FLDC that some students have serious allergies that can cause a life threatening Anaphylaxis. Every effort is made to provide these students with the appropriate support to prevent any risk of allergic reaction at both a whole school and classroom level.

At the FLDC, the following actions are taken to ensure the safety of an identified anaphylactic student

- staff supervising an anaphylactic student are encouraged to complete the Department approved Anaphylaxis training;
- the parent is asked to complete the appropriate health care plan for their child and provide a completed Australian Society of Clinical Immunology and Allergy (ASCI) emergency action plan that has been signed by their child's medical practitioner;
- the parent is asked to provide an EpiPen and any additional medications in case of an emergency. These are kept in the FLDC school office or in a locked drawer/cabinet at the FLDC offsite locations;
- the FLDC also maintains an in-date supply of an EpiPen in their first aid supplies at all three school locations. This forms part of the First Aid Kit that is taken on school excursions;
- emergency action plans for identified students are clearly displayed in the classroom, medical room, teacher common areas (eg. staff room) and the teacher relief file.
- emergency response by FLDC staff is in accordance to the individual child's Anaphylactic Action Plan as prescribed by their medical practitioner.

It is a whole school policy that the FLDC is a NUT-FREE school. To ensure the NUT-FREE Policy is consistent across all shared sites, the Fremantle LDC Administration liaises with the Administration staff of the co-located schools.

Parents are advised about the NUT-FREE Policy at enrolment, on the school website and in the newsletter.

Department of Education Guidance

Legislation

- *Legislation is now in place to provide explicit protection for staff who administer an AAI without parent permission in an anaphylaxis emergency.*
- *Poisons Regulations have been amended to enable adrenaline AAIs to be purchased by the school and supplied in first aid kits for use in an anaphylaxis emergency.*

6e. Head Lice

The FLDC in consultation with parents and staff have developed an agreement with regards to the management of a head lice infestation. If a student is identified as having head lice by a staff member

- the student may remain at school for the duration of the day;
- the students' parents will be contacted by phone or in writing in the communication book to advise them of the infestation and that their child cannot return to school without evidence that the child has received the appropriate treatment;

- a head lice notification letter will go home to all students in the students' class to advise of the outbreak and help reduce the spread of infestation.

Department of Education Guidance

The principal may authorise a member of staff to examine the head of any student to ascertain whether head lice are present. If head lice are found, students may be given tasks which do not involve close group work but do not necessarily need to be excluded from school. However, the principal has discretion under the School Education Act 1999 to require that a student does not attend or participate in an educational program until parents confirm that a recommended treatment is being undertaken and all head lice have been removed.

For further information refer to the Department's Head Lice Best Practice Guidelines.

6f. Sun Care

The FLDC recognises the importance of teaching students about sun care. At the FLDC, students are taught about appropriate sun care in all weather conditions as part of the school Health Program.

All students are encouraged to wear the approved school uniform to school each day and the FLDC has a 'No Hat, No Play Policy' during all activities outside. In the case of extreme temperature, students are encouraged to play out of the sun to prevent heat exhaustion.

The FLDC provides students with access to shaded areas and 50+ sunscreen during extended activities outside (e.g. athletics carnival).

Department of Education Guidance

- *Schools are not closed during periods of prolonged high temperature.*
 - *Parents may keep their child at home and provide an explanation of absence to the school.*
 - *Parents may also withdraw students from the school program in negotiation with school staff.*
- For further information, refer to the Department's Sun Care Best Practice Guidelines.*

6g. Healthy Eating Habits

The FLDC is a registered 'Crunch & Sip' school to encourage healthy eating habits in children. 'Crunch & Sip' is a set time of the day where the class sit together to eat fruit/vegetables and drink water.

The **objectives** of 'Crunch & Sip' is to:

- increase awareness of the importance of eating vegetables and fruit and drinking water
- give students and teachers an opportunity to eat vegetables and fruit during an allocated Crunch & Sip break in the classroom
- encourage students and teachers to drink water throughout the day in the classroom
- encourage parents to provide students with fruit or vegetables every day
- develop strategies to help students who don't have regular access to fruit and vegetables

Each student is encouraged to bring at least one piece of fruit/vegetable and a bottle of water to school each day to participate in 'Crunch and Sip'.

