




## First Aid and Medication Policy

POLICY DATES: JOHN CALVIN SCHOOL FIRST AID AND MEDICATION POLICY			
Formulated			
Implemented		Reviewed	
Next Review Due			
POLICY AUTHORISATION			
Principal	Daniel Coote	Signature	



# John Calvin School

## FIRST AID/MEDICATION POLICY

### RATIONALE

1.1 To provide immediate care for the protection of children's health and safety.

### PURPOSE

- 2.1 To provide emergency first aid management of injuries and illness.
- 2.2 To establish management plans for students with specific medical conditions.

### GUIDELINES

- 3.1 In accordance with Department of Education and Early Childhood D regulations, every endeavour should be made to have staff with current qualifications in Level 1 First Aid.
- 3.2 Every effort will also be made to ensure that staff participating on school camps and excursions has levels of First Aid training appropriate to activities and programs being undertaken.
- 3.3 In the case of serious injury or illness, the First Aider is not required to diagnose or treat the condition apart from carrying out the appropriate First Aid procedures. Diagnosis and treatment is the responsibility of the ambulance officer or medical practitioner called to the scene.
- 3.4 Designated staff will make every effort to ensure that medications are taken, no responsibility will be accepted for missed doses.
- 3.5 When a student is on intermittent medications (e.g. for allergy or asthma) an appropriate management plan must be completed, with the assistance of the child's doctor. It will then be kept in the First Aid Register located in a locked cupboard in the First Aid room. This must be signed by the parent/guardian and doctor and updated if any changes should occur, or at least every year.
- 3.6 It is the responsibility of the First Aid Coordinator to ensure that there are adequate supplies of the medication at the school and to regularly check the expiry dates. The Coordinator will notify parents/guardian of the medication expiry date.
- 3.7 The parent/guardian will be notified immediately if any intermittent medication is needed to be given in an emergency situation.

## IMPLEMENTATION

- 4.1 The school will have regularly maintained first aid kits containing the recommended first aid supplies in accordance with the Occupational Health and Safety Requirements.
- 4.2 In any cases of injury, illness the teacher will (where possible) refer the student to a First Aid Officer, (via internal memo form) who will administer first aid within the limits of their skills and expertise.

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- 4.3 As a general health precaution, accepted hygiene practices must be employed at school. Disposable gloves should be used and hands and nails thoroughly washed before and after treatment.
- 4.4 Parents will be informed of children's attendance at the First Aid room by email or phone call. (moderate to serious cases only).
- 4.5 If the child sustains any trauma, injury to the eye or head, the parent will be notified by telephone as soon as practicable.
- 4.6 Should the student require an ambulance the parent/guardian/emergency contact will be notified as quickly as possible. If such contact is unavailable then the student will be accompanied by a First aid officer or responsible adult as designated by The Principal.
- 4.7 First Aid Officers need to check and refer to students Individual Management Plans before providing treatment.
- 4.8 All medications will be sent to the office and administered by a First Aid officer or designated adult. The administration time and other relevant details being recorded in the Medications note section in Rollmarker.
- 4.9 All medications that are brought to the school must be accompanied by a Medication Authorisation form signed and dated by the parent/guardian and must include the following information:-

- the student's name and class
- the name of the medication
- the dosage, the time it is to be given, and the length of treatment course
- preferred storage conditions ( for example some medication must be refrigerated)

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- 4.10 The camp/excursion leader will designate a participating staff member to collect, store and administer medication to those children whose parents have supplied such medication. A person will also be responsible for the first aid kit.
- 4.11 In severe cases of illness or injury the child's parents will be contacted. If the parent/guardian is unable to be contacted the school will contact the emergency contact as notified by the parents. In exceptional circumstances the teacher- in- charge will make the decision on the course of action to be taken.
- 4.12 All staff are to familiarise themselves with medical and asthma management plans and medical conditions of children in their class and year level at the beginning of the year. Specialist teachers are to ensure they are familiar with the medical and asthma management plans and medical conditions of children they may teach at the beginning of the year.
- 4.13 Any medication other than a reliever asthma puffer will be kept in a cabinet in the First Aid Room in a locked cabinet. Individual children are not permitted to have medication, other than a reliever puffer, with them during school time.
- 4.14 Physical Education teachers will have a bum bag with an asthma reliever medication. It will also contain a copy of the Asthma First Aid Steps.
- 4.15 The First Aid Room will also have reliever medication and a large volume spacer.
- 4.16 School Physical Education
- All students with asthma shall be encouraged to participate in sporting activities.
  - Students with severe asthma or those who have experienced a recent flare up, may be exempt from sporting activities for the required period of time provided written notification is received.
  - Students with diagnosed long term medical and asthma conditions can be covered by an annual letter from parents/guardians and or a doctor with their management plans exempting them from certain activities as their condition requires.

- Staff responsible for Physical Education will know and understand the steps involved in managing exercise induced asthma, including pre-medicating, warming up and the treatment of an acute asthma attack.
- Children in Grade 3-10 with asthma will be encouraged to self-medicate before P.E. lessons.
- Children in Grades 3-10 with asthma will be encouraged to take their medication with them to all P.E. classes.

## **EVALUATION**

5.1 Parent, student and staff feedback.

5.2 Regular updating of policy according to Department of Education and Early Childhood guidelines.

5.3 The annual report will outline and analyse the data entered into the accident register folder and passed on to relevant committees.