

ST BRENDAN'S SCHOOL DUNNSTOWN



MEDICATION & FIRST AID POLICY

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Bungaree Parish Schools



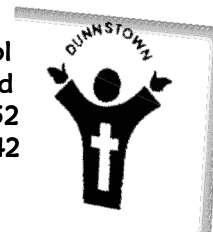
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St Brendan's School
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DUNNSTOWN 3352



MEDICATION AND FIRST AID POLICY

RATIONALE:

At the Bungaree Parish Schools, we believe that 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 or prescribed medication. Whilst accepting this responsibility, the school also recognises the importance of confidentiality and the limitations as to what is reasonable for the school to apply with regard to health maintenance and first aid of children at the Bungaree Parish Schools.

SCRIPTURAL CONTEXT:

*They brought to him all who were sick...and he cured them.
Matthew 4:24*

POLICY STATEMENT:

First Aid and prescribed medication will be administered to members of school community as needed, following basic procedures and guidelines.

POLICY GUIDELINES:

GUIDELINE INDICATORS:

<p>To provide supplies and facilities to cater for the administering of first aid.</p>	<p>The school will maintain a register of students with medical conditions, including individual management plans. (Appendix 1 & 2)</p> <p>A comprehensive supply of basic first aid materials will be stored in a locked cupboard in the first aid room.</p> <p>First aid kits will also be available in the staff room and administration offices.</p> <p>A supply of medication for teachers will be available in a locked filing cabinet drawer in the Administration Office.</p> <p>Two Staff members must be present when medication is to be administered. Eg: Administered by a Teacher witnessed by Administration Staff or Principal.</p> <p>Supervision of the first aid room (staff kitchen) will form part of the daily yard duty roster. Any children in</p>
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<p>To administer first aid to children when in need in a competent and timely manner.</p>	<p>the first aid room (staff kitchen) will be supervised by a staff member at all times.</p> <p>All injuries or illnesses that occur during class time will be referred to the administration staff who will manage the incident, all injuries or illnesses that occur during recess or lunch breaks, will be referred to the teacher on duty in the first aid room(staff kitchen). Any children with injuries involving blood must have the wound covered at all times.</p>
<p>To administer medication to students with ongoing requirements</p>	<p>Two Staff members must be present when medication is to be administered. Eg: Administered by a Teacher witnessed by Administration Staff or Principal.</p> <p>No medication including headache tablets will be administered to children without the express written permission of parents or guardians.</p> <p>Medication must be sent to school in the original container clearly showing for whom the medication was dispensed and other relevant details as provided by the pharmacist</p> <p>It is the parent/guardian/care giver's responsibility to ensure that sufficient and in-date supplies of the prescribed medication is available at the school for appropriate administering by school staff.</p> <p>It is the parent/guardian/care giver's responsibility to advise the school in writing of any changes to the student's condition or prescribed medication</p>
<p>To communicate children's health problems to parents when considered necessary.</p>	<p>An up-to-date log book, located in the first aid room (staff kitchen), will be kept of all injuries or medical condition experienced by children that require first aid.</p> <p>When ongoing medication is given by staff member, each administered dose will be recorded in 'Medications book' (eg Ventolin). (Appendix 3)</p> <p>Two Staff members must be present when medication is to be administered. Eg: Administered by a Teacher witnessed by Administration Staff or Principal.</p> <p>Parents of all children who receive first aid will receive a completed form indicating the nature of the injury, any treatment given, and the name of the teacher providing the first aid. 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. (Appendix 4)</p>

<p>To maintain a sufficient number of staff members trained with a Level 2 First Aid certificate.</p>	<p>Incidents which result in Hospitalisation including fractures and broken bones will be reported to Work Safe by the Principal or Deputy Principal in the absence of the Principal. All staff will be provided with basic first aid management skills, including blood spills, and a supply of protective disposable gloves will be available for use by staff.</p> <p>Minor injuries only will be treated by staff members on duty, while 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.</p> <p>All staff are expected to be familiar with guidelines for treating Asthma attacks, Anaphylaxis treatment and Diabetes requirements.</p> <p>A sufficient number of staff (including at least 1 administration staff member) to be trained to a level 2 first aid certificate with current CPR qualifications. The number trained must allow for having qualified staff members on campus when school excursions/camps require qualified staff to attend the camp.</p> <p>A register of qualified and trained Level 2 First Aid staff will be maintained. Date of each qualification to be entered in register.</p> <p>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 in the Accident log book. (C.C.I. book kept in the office.) The book needs to be countersigned by the Principal or the Deputy Principal in the absence of the Principal.</p>
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REFLECTIVE MATERIALS

School Vision and Mission Statements

School Pastoral Care Policy

School Occupational, Health & Safety Policy

APPENDIX 1

Student Medication Form to be completed by the Parent/Guardian

This form should be completed if you wish the staff of the Bungaree Parish Schools to administer medication to your child while they are at school.

Student Name _____

Parent/Guardian/Care Giver Name _____

Contact Phone Number _____

Doctor's Name _____

Doctor's Phone Number _____

Medical/Health Condition _____

Medication as prescribed for the Medical/Health condition: _____

Medication Name: _____

Dosage: _____

Time/s required to be administered: _____

- *This form is valid for the current school year only*
- *Medication must be sent to school in the original container clearly showing for whom the medication was dispensed and other relevant details as provided by the pharmacist*
- *It is the parent/guardian/care giver's responsibility to ensure that sufficient and in-date supplies of the prescribed medication is available at the school for appropriate administering by school staff*
- *It is the parent/guardian/care giver's responsibility to advise the school in writing of any changes to the student's condition or prescribed medication*
- *The school staff will record medication as given on the 'Student Medication Record' which will be made available to parents for verification should the need arise*

In signing this form I/we fully understand and accept the conditions as outlined above and in accordance with the Bungaree Parish Schools "*Medication and First Aid*" Policy.

Signed: _____

Date: _____

(To be completed and sent to Office for filing)

APPENDIX 2

Medical/Health School Notification Form

This form is to be completed if your child has a medical/health condition that the school should know in order to ensure that his/her needs may be met whilst enrolled at the Bungaree Parish Schools. (This form is valid for the current year only)

Student Name _____

Parent/Guardian/Care Giver Name _____

Contact Phone Number _____

Doctor's Name _____

Doctor's Phone Number _____

Medical/Health Condition:

Medication Plan:

Maintenance program:

In the event of an emergency

***** If possible please attach supporting documentation that may have been made available by your doctor or specialist.***

Attached

In signing this form I/we acknowledge that it is our responsibility to inform the school in writing of any changes to either the medical/health condition or medication plan.

Signed _____

Date _____

(To be completed and sent to Office for filing)

APPENDIX 3

Student Medication Record Class Level Teacher..... Record
beginning date.....

Name of Student				
Day, Date & Time	Medication Administered	Dose Administered	Administered by:	Checked By:

Completed forms to be sent to the office for filing

APPENDIX 4

First Aid Report Sheet

Date	Student Name	Injury/Complaint	First Aid Administered	Administered By	Parent Contacted? Note/Phone/Word

Completed sheet to be sent to the office for filing

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<p>To administer first aid to children when in need in a competent and timely manner.</p>	<p>All injuries or illnesses that occur during class time will be referred to the administration staff who will manage the incident alongside the class room teacher if necessary, all injuries or illnesses that occur during recess or lunch breaks, will be referred to the teacher on yard duty. Any children with injuries involving blood must have the wound covered at all times.</p>
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