



---

# St Patrick's Catholic School

## Student Illness and Injury Policy

---



<b>Date</b>	<b>2013</b>
<b>Version No</b>	<b>0</b>
<b>Responsible Person</b>	<b>Rodney Linhart</b>
<b>Approved By</b>	<b>Rodney Linhart</b>
<b>Review Date</b>	<b>2017</b>
<b>Related Documents</b>	<b>Appendix 1 – Infectious Diseases Table</b>



# Student Illness and Injury Policy

## **RATIONALE**

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.

## **AIMS**

- To administer first aid, and provide adequate treatment for children when in need, in a competent and timely manner.
- To minimize or eradicate injuries to students whilst in school.
- To communicate children's health problems to parents when appropriate.
- To provide supplies and facilities to cater for the administering of first aid.
- To maintain a sufficient number of first aid and CPR trained staff.

## **IMPLEMENTATION**

### **FIRST AID**

- All teaching and administrative staff will be trained in basic first aid procedures and in up-to-date CPR qualifications including a component of CPR for children.
- All student injuries or illnesses that occur will be referred to the office. Office staff will administer first aid. In the event that office staff are unable to administer first aid, other staff members with appropriate first aid qualifications will attend to the illness or injury.
- The school will set aside an annual budget for first aid equipment, training and related teacher release.
- A comprehensive supply of first aid equipment will be stored in the first aid cupboard in the staffroom. Ice packs are stored in the staffroom.
- First aid supplies will be ordered and maintained through the school office and via the staff member responsible for first aid.
- Sick or injured children waiting to be collected by a parent/carer will be supervised by office staff and the Principal.
- An up-to-date register of all injuries will be kept in the office.
- Parents of ill or injured children will be contacted if the child needs further medical attention or is too unwell to stay at school.
- All teachers have the authority to call an ambulance in the event of an emergency. If the situation and time permit, teachers may confer with office staff or the Principal before deciding on the appropriate course of action.
- Serious student injuries will be reported to CCI Insurance and the school's senior consultant from the Catholic Education Office.
- A comprehensive first aid kit will accompany all excursions, along with a mobile phone.



- All children attending the school will have provided the school office with a signed medical form providing medical details and giving staff permission to contact a doctor or ambulance should instances arise where their child requires treatment (at school or whilst on excursion).
- All students, especially those with documented asthma management plans, have access to Ventolin or similar relief medication and spacers at all times. These will be kept in the first aid cupboard.
- Students with documented allergies will have in place an Anaphylaxis Plan and it will be documented as to where their EpiPen is kept at school.
- At the commencement of each year, requests for updated first aid/medical information will be sent home including requests for any asthma management, high priority forms and allergies.

## **EVALUATION**

This policy will be reviewed as part of the school's three year cycle.

## **APPENDIX 1 –**

Infectious Diseases Table (DoE) – (see attached)



## Infectious Diseases

## Appendix 1

The following diseases are presently deemed to be infectious, contagious or potentially harmful to the health of other people in a school. The minimum periods that a sufferer should not attend school are indicated. These recommended periods are a guide which may be modified in individual cases. Further advice can be obtained from the Director of Public Health.

Chicken Pox	Should not attend for 5 days after the first eruption appears (scabs remaining after this time are not an indication of a need for continued exclusion)
Conjunctivitis	Should not attend until eye discharge stops
Diarrhoea	Should not attend until condition stops
Diphtheria	Should not attend until medical certificate of recovery issued after at least 2 negative throat swabs
Glandular Fever	May attend school
Hepatitis A	Should not attend until medical certificate of recovery
Hepatitis B	May attend school
Hepatitis C	May attend school
HIV	May attend school
School Sores	Should not attend until sores on exposed surfaces have been treated and are covered with a dressing
Leprosy	Should not attend until health authority authorises return
Measles	Should not attend for at least 5 days from appearance of rash
Meningitis (Bacterial)	Should not attend until well
Meningococcal Infection	Should not attend until well
Mumps	Should not attend for at least 9 days after onset of symptoms
Pediculosis (Lice)	Should not attend until day after treatment has started
Poliomyelitis	Should not attend for at least 14 days from onset and readmit on medical certificate of recovery
Ringworm	Should not attend until day after treatment has started
Rubella (German Measles)	Should not attend until fully recovered or for at least 4 days after the onset of rash
Scabies	Should not attend until day after treatment has started
Streptococcal Infection (including Scarlet Fever)	Should not attend for 24 hours after antibiotic treatment and the student feels well
Trachoma	Should not attend until day after treatment has started
Tuberculosis	Should not attend until production of medical certificate
Typhoid and Paratyphoid Fever	Should not attend until production of medical certificate
Whooping Cough	Should not attend for 5 days after starting antibiotic treatment.

