



**KNOWLEDGE IS THE ULTIMATE SOLUTION**

## **Student Welfare & Wellbeing Policy**

**Western Grammar School**  
**15 Cannery Road, Plumpton NSW 2770**

## **1 Statement of Purpose:**

Western Grammar School (WGS) is constantly developing and implementing policies, procedures and programs for the welfare, safety and wellbeing of students. It is not only the legislative requirement, it is part of WGS mission to provide safe, supportive and healthy educational environment to the students of Western Grammar to achieve the primary objectives WGS. Therefore, along with student welfare and wellbeing policy (SWWP) following policies and procedures are being implemented for the welfare, safety and wellbeing of WGS students.

- Child Safe Policy
- Work Health and Safety Policy
- Anti-Bullying Policy
- Pastoral Care Policy
- Emergency Evacuation Policy
- Complain and Grievances Policy
- Student and Staff Code of Conduct

Administration and governing body of WGS understands the importance of safety and welfare of the students. Safety and welfare are directly related to the physical, spiritual and psychological health of the students. This policy caters the need of above-mentioned issues and cover following areas:

- Welfare & Wellbeing Policy
- First Aid Policy
- Asthma Policy
- Medication Policy
- Anaphylaxis
- Equal opportunities
- Security
- Peer support

## **2 Welfare and Wellbeing:**

### **2.1 Rationale:**

The WGS endeavours to promote a healthy, supportive and secure environment for all students and to raise awareness of what makes students resilient, to develop strategies, to reduce vulnerabilities, to build student & school connectedness and to increase coping skills.

### **2.2 Aims:**

- The school is a positive environment in which all teachers assume responsibility for student welfare, endeavouring to provide successful experiences for all students where children feel safe and secure in a supportive environment and develop stronger a sense of belonging and wellbeing.
- Children develop positive social behaviours and problem-solving skills.

- Staff are confident, skilled and proactive in the management of student welfare issues.
- Communication processes and protocols are clear and well known to ensure the effectiveness of student welfare support.

### **2.3 Implementation:**

- Student Welfare is a shared responsibility between our school, home and the community.
- The school will appoint staff members who will co-ordinate student welfare across the school.
- The school will adopt a proactive and strategic stance with issues of student welfare, rather than operating in a consistently reactive mode.
- The school will implement welfare support structures and programs which prioritise and address the identified needs of individual students or the school as a whole and that help implement the aims of the policy.
- The school will endeavour to implement and maintain programmes such as: -
  - Peer Support
  - Buddies
  - Student Awards
  - Drug Education
  - Committing to a whole school program to develop resilience, social skills, conflict resolution and problem solving eg: - ‘You Can Do It,’ Mind Matters.
  - Anti-bullying programme
  - Programme for the Gifted and Talented
- The school will provide the following support structures: -
  - Monitoring of and responding to, protracted student absences
  - Trauma Management plan
  - Protocol for Mandatory Reporting
  - Student Support Groups for students in need

The school will also access outside services to provide support for students and staff which include: -

- Psychologist for psychological and academic assessment
  - Mentors – providing support for ‘at risk’ students
  - Social Workers to provide services such as counselling, social skills and anger management programs
  - Youth agencies
  - Local parent support groups
  - School Nurse
- The school will endeavour to cater for: -

- students identified with specific welfare issues by creating support groups, developing appropriate individual programmes including goals, monitoring performance and behaviour and providing ongoing support.
- Longitudinal data will be collected regarding frequency and types of welfare issues, so as to measure the success or otherwise of school-based strategies and approaches.
- Our school will comply with all privacy issues in accordance with current legislation and departmental requirements – see separate Privacy policy.

This policy will be reviewed as the need arises.

### **3 First Aid Policy:**

#### **3.1 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.

#### **3.2 Aims:**

- To administer first aid to children when in need and in a competent and timely manner.
- To communicate children's health problems to parents when considered necessary.
- To provide supplies and facilities to cater for the administering of first aid.
- To maintain a sufficient number of staff members trained with a level 2 first aid certificate.

#### **3.3 Implementation:**

- A sufficient number of staff (including at least 1 administration staff member) to be trained with a first aid certificate, and with up-to-date CPR qualifications.
- A first aid room will be available for use at all times. A comprehensive supply of basic first aid materials will be stored in a locked cupboard in the first aid room.
- Supervision of the first aid room rests with the First Aid Officer. All injuries or illnesses that occur will be referred to the First Aid Officer. Staff on duty or Administration staff, who will manage the incident.
- First aid will form part of the duties of the front office. A confidential up-to-date register located in the first aid room will be kept of all injuries or illnesses experienced by children that require first aid.
- If a student's illness or injury requires further medical assistance or warrants early dismissal from the School, the First Aid officer/School Nurse should notify the front office or Principal and call the parents.

- Any children with injuries involving blood must have the wound covered all times.
- No medication including headache tablets will be administered to children without the express written permission of parents or guardians.
- 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.
- 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 the School's Accident/Injury form.
- 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.
- The Principal and the secretary have the authority to call an ambulance immediately in an emergency.
- All school camps will have at least 1 Level 2 first aid trained staff member at all times.
- A comprehensive first aid kit will accompany all camps with a mobile phone.
- 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.
- All children, especially those with a documented asthma management plan, will have access to Ventolin and a spacer.
- A member of staff is to be responsible for the purchase and maintenance of first aid supplies, first aid kits, ice packs and the general upkeep of the first aid room.
- At the commencement of each year, requests for updated first aid information will be sent home including requests for any asthma 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.
- Records must be safely stored for 30 years, or in the case of the Operations Branch Casualty Report Forms, for 5 years.
- All accidents should be reported to the Business Manager and the Building Manager (Chairperson of Occupational Health & Safety).
- General organisational matters relating to first aid will be communicated to staff at the beginning of each year. Revisions of recommended procedures for administering asthma medication will also be given at that time.
- It is recommended that all students have personal accident insurance and ambulance cover.

## **4 Asthma Policy:**

### **4.1 Rationale:**

- Asthma affects up to one in four primary aged children, one in seven teenagers and one in ten adults. It is important therefore for all staff members to be aware of asthma, its symptoms and triggers, and the management of asthma in a school environment.

### **4.2 Aims:**

- To manage asthma and asthma sufferers as effectively and efficiently as possible at school.

### **4.3 Implementation:**

- Asthma attacks involve the narrowing of airways making it difficult to breathe. Symptoms commonly include difficulty breathing, wheezy breathing, dry and irritating cough, tightness in the chest and difficulty speaking.
- Children and adults with mild asthma rarely require medication, however severe asthma sufferers may require daily or additional medication (particularly after exercise).
- Professional development will be provided for all staff on the nature, prevention and treatment of asthma attacks. Such information will also be displayed on the staffroom wall.
- All students with asthma must have an up to date (annual) written Asthma Management Plan consistent with NSW requirements completed by their doctor/paediatrician. Appropriate asthma plan proformas are available at [www.asthma.org.au](http://www.asthma.org.au)
- Asthma plans will be attached to the student's record for reference.
- Parents/guardians are responsible for ensuring their children have an adequate supply of appropriate asthma medication (including a spacer/ventilator) with them at school at all times.
- All devices used for the delivery of asthma medication will be cleaned appropriately after each use.
- Care must be provided immediately for any student who develops signs of an asthma attack.
- Children suffering asthma attacks should be treated in accordance with their asthma plan.

## **5 Medication Policy.**

### **5.1 Rationale:**

Parents often ask staff members to administer medication to their children while at school. It is important that these requests are managed in a manner that is appropriate, ensures the safety of students, and fulfils the duty of care of staff.

### **5.2 Aims:**

To ensure the medications are administered appropriately to students in our care.

### **5.3 Implementation:**

- Students who are unwell should not attend school.
- The office staff members are responsible for administering prescribed medications to children subject to the consent of parents.
- Non-prescribed oral medications (e.g.: headache tablets) will not be administered by school staff.
- All parent requests for the office staff to administer prescribed medications to their child must be in writing on the form provided and must be supported by specific written instruction from the medical practitioner or pharmacist including the name of the student, dosage and time to be administered (original medications bottle or container should provide this information).
- All student medications must be in the original containers, must be labelled, must have the quantity of tablets confirmed and documented, and must be stored in the office first aid cabinet.
- Classroom teachers will be informed by the office staff of prescribed medications for students in their charge, and classroom teachers will release students at prescribed times so that they may visit the school office and receive their medications from the office staff.
- All completed Medication Request Forms and details relating to students, their prescribed medication, dosage quantities and times of administering will be kept in the Medication folder.
- Students involved in school camps or excursions will be discreetly administered prescribed medications by the 'Teacher in Charge' in a manner consistent with the above procedures. Completed pages will be returned to the official medications register on return of the excursion to school.
- Parents/carers of students that may require injections are required to meet with the Principal to discuss the matter.

## Medication Authorisation

Date: \_\_\_\_\_

Term: \_\_\_\_\_

Student's full name: \_\_\_\_\_ Class: \_\_\_\_\_

Mother's full name: \_\_\_\_\_ Contact number: \_\_\_\_\_

Father's full name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Medical condition:

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Medication Required:

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Dosage with quality and frequency:

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Usage instructions:

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Parent/Guardians Full name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_

Staff member's full name: \_\_\_\_\_ Date: \_\_\_\_\_

Staff member's signature: \_\_\_\_\_

Medical certificate attached:



## 6 Anaphylaxis Policy:

### 6.1 Background:

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. The most common allergens in school aged children are peanuts, eggs, tree nuts (e.g. cashews), cow's milk, fish and shellfish, wheat, soy, sesame and certain insect stings (particularly bee stings).

The key to prevention of anaphylaxis in schools is knowledge of the student who has been diagnosed as at risk, awareness of allergens, and prevention of exposure to those allergens. Partnerships between the school and parents/guardians are important in helping the student avoid exposure.

Adrenaline given through an adrenaline autoinjector (such as an EpiPen<sup>®</sup> or Anapen<sup>®</sup>) into the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

*Western Grammar School is a Nut Aware school and it acknowledges that due to food processing practices, it is difficult to eliminate nuts or nut products entirely. Nevertheless, effort will be taken by the College to minimise the exposure of allergens to students.*

### 6.2 Purpose:

- provide, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis can participate equally in all aspects of the student's schooling.
- raise awareness about anaphylaxis and the school's anaphylaxis management policy/guidelines in the school community.
- engage with parents/guardians of each student at risk of anaphylaxis in assessing risks and developing risk minimisation strategies for the student.
- ensure that staff have knowledge about allergies, anaphylaxis and the school's guidelines and procedures in responding to an anaphylactic reaction.

### 6.3 Management:

- It is the responsibility of the parent/guardian to notify the school and canteen that their child is at risk of an anaphylactic reaction either at the time of enrolment, or if the student is enrolled, as soon after diagnosis as possible.
- If written information provided by the parent confirms that their child has been assessed as being at risk of anaphylaxis, **an individual health care plan will be formulated by the principal/school nurse in consultation with the parent and staff.** The individual health care plan will incorporate an emergency response plan and a plan for the avoidance of known allergens, based on advice from the student's parent and medical practitioner.
- The plan will be reviewed annually, as and when the student's medical condition changes or after the student suffers an anaphylactic reaction at school. The plan should outline:
  - information about the student's diagnosis.
  - strategies that the school should take to minimise risk (and the person responsible for implementing these).

- the location of the student's medication; and
  - emergency contact details and an emergency response plan signed by the student's doctor.
- WGS will educate the students about anaphylaxis and encourage the exclusion of all nuts and nut products.
- Staff are provided with relevant and regular training annually.
- The auto-injectors provided by parents will be stored in the front office for easy access. The auto-injectors are stored with the student's emergency response plan, any other medication, and a recent photograph of the student. The school nurse will regularly check the expiry date on auto-injectors and give parents notice when the student's auto-injector is due to expire.
- In an emergency the first aid procedures and the student's emergency response plan will be followed.

#### **6.4 Role of School Nurse in Consultation with Principal or Principal's Delegate:**

The school nurse will;

- seek information from parents about allergies that affect their child as part of health information at enrolment or as part of regular health updates.
- where the information from the parent indicates that their child has allergies, provide a copy of the Medical Alert form to the parents for completion in consultation with their child's medical practitioner.
- determine whether the information provided by the parent on the Medical Alert form indicates the need for further discussion with the parents. If the form indicates the student has an allergy/s or has either been hospitalised or prescribed an EpiPen, a meeting should be organised with the parents.
- meet with parents and seek written permission to contact the medical practitioner and to share information about the student's condition with staff.
- provide staff with information about the individual student's severe allergy as agreed with the parent.
- assess potential exposure to allergens in the student's routine and identify issues to be addressed in implementing an emergency response plan. Consider:
  - routine classroom activities, including lessons in other locations around the school.
  - non-routine classroom activities.
  - non-routine school activities.
  - before school, recess, lunchtime, other break or play times.
  - sport or other programmed out of school activities; and
  - excursions, including overnight excursions and school camps.

- develop an individual health care plan in consultation with relevant staff, the parent and student to incorporate:
  - strategies for avoiding the student's exposure to allergens.
  - medical information provided by the child's medical practitioner; and
  - emergency contacts.
- develop an implementation strategy that addresses the training needs of staff and communication strategies for relevant aspects of the individual health care plan, including with other parents and students.
- review the individual health care plan annually at a specified time (e.g. beginning of the school year) and at any other time where there are changes in:
  - the student's health needs;
  - staff, particularly class teacher, year/faculty coordinator or adviser or any staff member who has a specific role in the plan;
  - other factors that affect the plan, for example, when an allergic reaction or anaphylactic event occurs.

***Note: Severe allergic reactions or anaphylaxis can occur when there is no history of known allergies. This situation should be treated like any other emergency. An ambulance should be called and first aid provided until expert help arrives.***

## **6.5 Promotion:**

The policy will be promoted by:

- Parents and caregivers being informed via the newsletter, school app and information evening.
- Staff being informed and provided with training opportunities.
- Students being informed via teachers, signs and assemblies.

## **7 Equal Opportunities Policy.**

### **7.1 Purpose:**

The School is committed to providing an environment in which all members of the school community will have the right to equality of opportunity, regardless of gender, religion, race or disability.

### **7.2 Guidelines:**

The school will promote an awareness of the educational needs of both boys and girls. All members of the School Community will have equal access to all programs, facilities and appropriate positions of responsibility. Positive self-esteem will be developed in all students.

The school's programs will be culturally and gender inclusive and maximise the potential of all students. An environment, which is free of harassment and discrimination, will be fostered. Support will be provided to the students against any form of discrimination.

### **7.3 Implementation:**

The Principal or Principal's Delegate will be responsible for ensuring that educational programs do not discriminate against any individual or group or hinder opportunities for equal access to programs.

The Principal or Principal's Delegate will be responsible for Curriculum programs that foster self-esteem amongst all students.

The Principal or Principal's Delegate will be responsible for establishing internal complaints procedures for allegations of discrimination and support for those persons involved.

All staff will be responsible for the implementation of the policy and for fostering healthy working relationships between staff and students.

The Principal and Senior Executive Staff will support affirmative action plans.

## **8 Security Policy.**

### **8.1 Rationale:**

The safe keeping of the school buildings and assets against misuse, theft and damage is the responsibility of The Contributor Society (TCS), the Western Grammar School Board and all staff members.

### **8.2 Aims:**

- To provide a secure and safe environment that adequately protects the buildings and assets of the school.
- To provide a balance between adequate security measures and reasonable access for authorised personnel to move freely about the school.

### **8.3 Implementation:**

- The Operation Manager (OM) will be the only person in possession of security keys for access to school building outside normal school hours.
- Any staff members or visitors wishing to gain access to the school outside normal school hours must negotiate access with the OM subject to approval of the Principal or Principal's Delegate.
- The Operation Manager and Assistant Principal will ensure the following:
  - switch on the surveillance cameras to maintain surveillance of the school outside school hours.
  - classroom doors and storeroom doors remain closed when not in use.
  - students and visitors are not to remain in rooms without staff supervision.
  - windows are closed, air-conditioners and lights are turned off and blinds are drawn at the end of the school day.
- All school assets will be engraved or identified as school property. An annual stock take will determine the location and condition of each recorded asset.

- Staff members may borrow specific school assets for the purpose of completing school work at home, but must complete an entry in the borrowing book located in the school office, including a declaration that any costs resulting from loss or damage that is not covered by Western Grammar insurance, will be borne by the borrower.
- Any problems detected on the surveillance cameras will be reported immediately to the Principal or Principal's delegate who will immediately take the necessary steps. All instances of criminal activity including vandalism, arson, theft and burglary are to be reported to the police as soon as detected.

## 9 Peer Support Policy:

As part of the Personal Development, Health and Physical Education Programme, Western Grammar School have Peer Support Policy for the students and staff members. Through Peer Support, the students establish a supportive community network within the school. As such, students feel less isolated and alone.

Peer Support gives students an opportunity to relate with their peers in a way that is effective, comfortable and which promotes self-esteem. Through befriending and supporting other students, Peer Support enables young people to contribute to their school and other students.

### Aims and Implementation of Peer Support:

- To develop friendships between students.
- To enhance and develop self-awareness, self-esteem and communication skills in group leaders and group members.
- To develop trust and allow sharing of feelings and ideas.
- To develop responsibility within each student.
- To develop a sense of community within the school.
- To enable new students and Kindergarten students to integrate easily and feel more comfortable in the new school environment.
- To give senior students an opportunity to take a leadership role in the school and have a sense that they are contributing.
- The senior students are teamed with the junior students and they work together to complete various tasks. Students also evaluate their groups at the end and have meetings with their class teachers to discuss new ideas, strategies and improvements for next year.

Approval Date: 11/03/2023 Review date: 2028

Secretary's Signature:  Chairman's Signature: 