



# Melbourne Archdiocese Catholic Schools Student Health Support Plan and Guidelines



## Instructions

This plan outlines how the school will support the student's medical, health care and wellbeing needs, based on documented relevant Medical Management Plan completed and endorsed by the student's treating medical/health practitioner. **The Student Health Support Plan** is informed by a condition specific or generic medical management plan (e.g. **Epilepsy Management Plan, Asthma Management Plan, Diabetes Management Plan**) that must be completed for each student with an identified medical or health care need. Students with Anaphylaxis must have an Individual Anaphylaxis Management Plan in accord with the Anaphylaxis Policy. A Student Health Support Plan is **not** required for students with anaphylaxis and in some circumstances, the student will have a formally diagnosed condition e.g, ADHD that is associated with prescribed medication, but may not require active management of health needs and support needs are documented in a Behaviour Support Plan or Personalised Learning Plan.

For any student with an identified health, mobility or personal care need, the appropriate Medical Management Plan must be completed by the relevant Medical/Health Practitioner and attached to this plan. If the student takes medication during school hours for their condition, the [Medication Authority Form](#) must also be completed and updated as required by a registered Medical/Health Practitioner and provided to the school by the authorised parent/guardian/carer/ and attached to this plan. Refer to Medical Management Policy and Medical Management Procedures for more information.

Refer also to [Victorian Government Health Care Needs Resources](#).

This plan enacts the authorised medical advice provided in the student's Medical Management Plan and is to be completed by the Program Support Group (inclusive of the principal / nominee, parent / guardian / carer and, where appropriate, the student).

Student details			
Student name			
Date of birth			
Year level			
Class			
School name and address			
School principal			E number:
Contact details	Telephone Email		
Date of development of this Plan		Proposed date for review of Plan (min requirement is annual)	
Medical / Health Practitioner details			
Medical / health practitioner name			
URL (if relevant)			

Address			
Telephone		Email	
<b>Parent / guardian / carer contact details</b>			
Name		Name	
Relationship		Relationship	
Home phone		Home phone	
Work phone		Work phone	
Mobile		Mobile	
Address		Address	

### How the school will support the student's health needs

**Student health condition / medical diagnosis/es:**

Does the student have needs that could affect the management of their health condition at school?	Describe functional impact for the student
<input type="checkbox"/> Cognitive	
<input type="checkbox"/> Communication	
<input type="checkbox"/> Sensory seeking	
<input type="checkbox"/> Vision	
<input type="checkbox"/> Hearing	
<input type="checkbox"/> Learning or behavioural needs	
Does the student have mobility needs?	<input type="checkbox"/> No <input type="checkbox"/> Yes (provide details)
<b>Is there a need for additional support related to the wellbeing of the student?</b> (e.g., psychological wellbeing, interrupted attendance, learning in other settings such as hospital and CAMHS programs, deteriorating health, supervision for eating disorder, grief and loss issues, palliative care)	<input type="checkbox"/> No <input type="checkbox"/> Yes (provide details)
<b>Is there a need for additional support with daily living tasks?</b> (e.g., assistance with personal hygiene, continence care, oral eating and drinking, transfers and positioning, nose-	<input type="checkbox"/> No <input type="checkbox"/> Yes (provide details)

### How the school will support the student's health needs

blowing, handwashing, menstruation management)	
<b>Attendance requirements</b> e.g., select subjects, flexible attendance, hospital education, Virtual School, dual placement special school	<input type="checkbox"/> No <input type="checkbox"/> Yes (provide details)
<b>Does the student require a PLP?</b> What specific factors need to be addressed e.g., personalised care and support, independence, mobility, communication, etc.	<input type="checkbox"/> No <input type="checkbox"/> Yes (provide details)
<u>Consent</u> to share information with relevant health professionals.	<input type="checkbox"/> No <input type="checkbox"/> Yes (provide details)

**Below are some questions that may need to be considered when detailing the support that will be provided for the student's health care needs. These questions should be used as a guide only. More specific questions may be referenced in the table below**

### Overall support

What needs to be considered?	How will the school support the student's health needs?	Person / role responsible for ensuring the support
Support during the school day	<i>For example, some medication can be taken at home and not be brought to the school.</i>	
How can the recommended support be provided in the simplest manner, with minimal interruption to the education and care program?	<i>For example, students using nebulisers can often learn to use puffers and spacers at school.</i>	
Who should provide the support? Are additional or specialised training arrangements required e.g. Diabetes Victoria, Epilepsy Foundation, RCH Complex Care.	<i>For example, the principal should conduct a risk assessment for staff and ask: Does the support fit with assigned staff duties, the scope of their position, and basic first aid training (see First Aid Policy) Ensure that staff directly involved and available to provide the care and support undertake the agreed additional training. Ensure that there are contingency provisions in place (if staff are on leave)</i>	

### First aid

Does the medical/health information highlight any individual first aid requirements for the student, other than basic first aid?	<i>Discuss and agree on the individual first aid plan with the parent/carer. Ensure that there are sufficient staff trained in basic first aid (see First Aid Policy)</i>	
--	---	--

## First aid

*Ensure that all relevant school staff are informed about the first aid response for the student.*

## Complex medical needs

Does the student have a complex medical care need?

*Is specific training required by relevant school staff to meet the student's complex medical care need?*

*The Schoolcare Program enables students with ongoing complex medical needs to have their health care requirements met safely at school. This program is available to students who would be unable to attend school without the procedure being performed by appropriately trained staff. Following the referral process, RCH nurses will attend your school and provide specialist training to nominated school staff.*

*Further information about the Schoolcare Program may be found in the Schoolcare Referral form at: [Schoolcare Referral Form](#)*

## Personal care

Does the medical/health information highlight a predictable need for additional support with daily living tasks?

*Detail how the school will support the student's personal care needs, for example in relation to nose blowing, washing hands, continence plan, toileting care (including menstrual health management and other aspects of personal hygiene)*

*Document specific plans as appropriate.*

## Routine supervision for health-related safety

Does the student require medication to be administered and/or stored at the School?

*Refer to Administration of Medication to Students Procedures on medication management.*

*Ensure that a medication log or equivalent official medications register is completed by the person administering the taking of the medication.*

Are there any facilities issues that need to be addressed?

*Ensure the school's first aid room/sick bay and its contents provide the minimum requirements and discuss whether other requirements can be facilitated in this room to meet the student's health care needs.*

*Ensure the school provides necessary reasonable adjustments to assist a student who requires a wheelchair or other technical support. Discuss requirements and possible modifications with the parent/carer/student or system contracted allied health provider.*

### Other considerations

Are there other considerations relevant for this health support plan?

*For example, in relation to behaviour, such as special permission to leave group activities as needed; planned, supportive peer environment.*

*For example, in relation to the environment, such as minimising risks such as allergens or other risk factors.*

*For example, in relation to communication, is there a need to formally outline the communication channels between the school, family and health/medical practitioner?*

*Accommodation in curriculum design and delivery and in assessment for a student in transition between home, hospital and school; for a student's attendance (full-time, part-time or episodically).*

## Agreement / Signatures

This **Student Health Support Plan** has been developed with my knowledge and input based upon health advice received from the student's medical practitioner.

### Parent / guardian / carer

Name of parent / guardian / carer or Mature minor\*

Signature

Date

### Principal

Name of principal

Signature

Date

*\*Please note: Mature minor (refer page 73 of [Privacy Compliance Manual](#)) is a student who is capable of making their own decisions on a range of issues, before they reach eighteen years of age.*

### Individuals to receive copies of this Student Health Support Plan:

1. Student/Parent/Carer
2. **Add as required**

**Please note:** Student Health Support Plans should be reviewed in line with the requirements set out in the Medical Management Policy

**Privacy Statement:** The school collects personal information so as the school can plan and support the health care needs of the student. Without the provision of this information the quality of the health support provided may be affected. The information may be disclosed to relevant school staff and appropriate medical personnel, including those engaged in providing health support as well as emergency personnel, where appropriate, or where authorised or required by another law. You can request access to the personal information that we hold about you/your child and to request that it be corrected. Please contact the school directly. [Privacy Policy](#)

<b>Approval authority</b>	Director, Learning and Regional Services
<b>Approval date</b>	17 August 2023
<b>Next review</b>	Feb 2026
<b>Publication details</b>	CEVN

## Guidance Advice for Students with Health Management Needs

**Complex Medical Needs:** This guidance advice provides additional information for schools seeking to understand the functional impact of the student's health needs and document an appropriate plan for support.

### **Is specialised medical training required by relevant school staff to administer any complex medical procedures?**

What is the relevant medical body or professional required to provide training?

Does the treating hospital provide training or is there another organisation?

How often does the training need to occur?

Does the medical advice form nominate a contact that can assist with training for complex medical care?

How will the procedure be recorded including completion of the first aid log or individual student logs/records?

*For complex medical needs, where the treating hospital does not supply training, the school can complete a referral to RCH Schoolcare program e.g. (e.g. gastrostomy or other tube feeding, postural drainage, routine oxygen, tracheostomy care, catheter/stoma management).*

*The medical management plan and Student Health Support plan should be developed and must be in place prior to the child commencing attendance noting that in some cases, there may be an interim Medical Management Plan and Student Health Support Plan if the school is awaiting relevant medical or other information at the time the child commences attendance, and it would not be reasonable to delay a child's attendance in the circumstances. The Medical Management Plan and Student Health Support Plan must be kept in the enrolment record for that child.*

### **Is the student required to take medication?**

Is medication required to be taken at school?

Can the student self-administer the medication? e.g. use a nebuliser

Is training required to administer medication? e.g. Epilepsy/Diabetes Emergency Medication

How will the administration of medication be recorded including completion of the medication administration log?

*Ensure that written advice is received from the student's medical/health practitioner for appropriate storage and administration of the medication – via the MACS Medication Authority Form.*

*Administration of Medication to Students Procedures*

*Ensure that there are contingency provisions in place (whilst awaiting the staff member to receive training), to facilitate the student's attendance at school.*

*A plan for taking medication on camp or excursions, will be required.*

*Ensure that a medication log or equivalent official medications register is completed by the person administering the taking of the medication.*

### **Are there Medication and equipment storage requirements?**

Is temperature a consideration for storage?

Does the medication need to be regularly checked for supply & 'use by date'?

In an emergency, e.g. fire evacuation, is a plan to access medication necessary?

Are there special requirements for disposal of materials? e.g. injections, strips, blood

*Arrangements for storage of medication on excursions and camps needs to be considered e.g. ensuring the storage temperature, secure storage.*

**Complex Medical Needs:** This guidance advice provides additional information for schools seeking to understand the functional impact of the student's health needs and document an appropriate plan for support.

**Are there any facilities that need to be audited?**

Can the student access the facilities required?  
Is an environmental audit required?  
Are facilities such as two-way locking doors, ramps, rails, lift, tap and door modifications required?  
Do current facilities comply with disability standards? e.g. gradient of ramps, lift capacity etc.

*Ensure the school's first aid room/sick bay and its contents provide the minimum requirements and discuss whether other requirements can be facilitated in this room to meet the student's health care needs.*

**Is planning with/for the Ambulance Service required?**

Is a First Aid [emergency management plan](#) in place? Where is the emergency management plan located? How is the emergency plan enacted?  
Is the student registered with the Ambulance Service? (If so, this needs to be reviewed every two years)  
Is there a preferred hospital in the case of an emergency?  
How will medical emergencies be documented?  
Is a Personal Emergency Evacuation Plan (PEEP) form required?

*For example, ambulance access to the site; identifying who will call and meet the ambulance; whether the child/student will be accompanied and if so, who will do this – and how will they communicate?*  
*For example, other post-incident management including reviewing plans and procedures and possible staff support and counselling.*  
*Ensure that emergency contact details are up to date.*

**Personal Care Needs**

**Does the student require specialised equipment and / or support for toileting?**

How will the dignity and privacy of the student be protected?  
What OHS implications are there for this student?  
What OHS implications are there for staff and/or students?  
Is a care and learning [plan](#) for toileting or hygiene required/appropriate?  
Is additional equipment such as a change table, hoist, special toilet seat etc. required?  
Is transfer training required to support toileting?  
What level of staffing is required for the personal care activity to be conducted safely? e.g. instruct, model or monitor

*Applications for therapy and specialised furniture or equipment items valued over \$300 can be made via the CECV Therapy and Equipment program. CECV Therapy and Equipment Guidelines are published annually on CEVN.*  
*Specialised equipment must be endorsed by a qualified provider e.g. SCOPE and accompanied by a commercial quotation. Refer to the CECV Therapy and Equipment Guidelines or contact the Learning Consultant Chronic Health/ Physical Disability at the region for support.*  
*Where approved, CECV providers will train staff in the manual handling, transfers, use of equipment and OHS requirements (hygiene).*  
*Parent provides all items used by the student e.g. nappies, testing strips, spare clothes, sharps container.*  
*School supplies items for OHS for staff safety e.g. disposable gloves, bins, masks.*  
*Consider dignity and Child Safety when assisting with washing & drying a student.*



<p>What bathroom amenities are required? Is item positioning relevant? e.g. well placed soap dispenser, mirror, disposal systems, facilities for washing and changing clothing if required.</p> <p>Is there adequate storage &amp; security of aids and equipment for the student? e.g. shelf, cupboard</p> <p>Can the student independently wash &amp; dry after a soiling incident?</p> <p>Are there special requirements for the disposal of items? e.g. nappies, soiled clothes, blood</p>	<p><i>Consider OHS and training requirements for LSOs who are physically assisting with personal care, mobility, transfers etc.</i></p>
<p><b>Does the student require support and/or equipment for eating and drinking?</b></p> <p>How will the dignity and privacy of the student be protected?</p> <p>What OHS implications are there for the student? e.g. choking</p> <p>Are there any OHS implications for staff and/or students?</p> <p>Can the student independently access their food and drink or do they require support? e.g. open lunch-box, feed themselves, require feeding, require drink bottle to be held, PEG feeding, choking mitigation,</p> <p>Does the student require specialised equipment?</p> <p>Is training required for staff? e.g. PEG feeding, choking plan/procedures</p>	<p><i>If a detailed plan is required, use the hyperlink below to access a template to devise the 'Eating/Drinking Plan' <a href="#">Eating/Drinking Management Plan</a></i></p> <p><i>Note also students with eating disorder that may require supervision during and post eating.</i></p>
<p><b>Does the student require support for dressing?</b></p> <p>How will the dignity and privacy of the student be protected?</p> <p>What OHS implications are there for staff and students?</p> <p>Can the student independently remove clothing and dress themselves? e.g. PE program, sport carnival, swimming program on camp etc.</p> <p>Can the student remove and put on a brace or AFO?</p>	<p><i>If a detailed plan is required, use the hyperlink below to access a template to devise the 'Dressing Plan'.</i></p>

## Wellbeing

### Where services are approved and provided by a visiting nurse, physiotherapist, or other health worker, have access arrangements been agreed to?

Has due diligence been completed? Refer CECV Guidelines for NDIS and External Providers.

Are protocols for the review of access arrangements documented and agreed to?

*Detail who the worker is, the contact staff member and how, when and where they will provide support.*

*Ensure that the school provides a facility which enables the provision of the health service.*

### Are there other considerations relevant for this health support plan?

Is there a need for planned support for siblings/peers?

Do family circumstances impact on the planning?

Does behaviour or awareness need to be taken into consideration?

*For example, in relation to behaviour, such as special permission to leave group activities as needed; planned, supportive peer environment, supervision.*

### Are there environmental accommodations required to minimise risks?

Is a quiet or rest place required during the school day?

Is a risk assessment required at school, excursion venue, camp, a worksite or TAFE?

Are special requirements needed for lockdowns and evacuations?

Can the school minimise risks? e.g. exposure to allergens

Are specific night time routines required? e.g. CPAP

*Note: For camps and excursions, use the hyperlink below, for the 'Camp & Excursion Risk assessment tool' Risk Assessment Tool*

*For example, in relation to the environment, such as minimising risks such as allergens or other risk factors.*

### Are there subject requirements?

Are there any equipment items, materials or activities in a particular subject that would impact safety for the student or others? e.g. swimming, fumes, proximity to soil (Cystic Fibrosis), knives, power tools

*Are alternatives available e.g. a student with a known allergen to chlorine may not be able to attend the local pool?*