First Aid:

First Aid Officer: Leanda Hudson is our school’s designated first aid officer. Leanda, along with a number of other staff members, are trained in First Aid administration (Level 2 qualifications). Leanda’s hours are generally between 10.45am and 2.30pm. We are very grateful to all of our families who pay the annual School Council First Aid charge, without which we would not be able to fund a first aid officer.

Sickbay attendance: The class or yard duty teacher usually sends a child for first aid. The student is observed, rested and for a minor injury, treated, prior to returning to class. It is important to note that when treating a scratch or cut, we are only allowed to use water. No antiseptic product is used. If in the opinion of the first aid officer, that the student is sick or injured, a parent will be contacted and asked to make arrangements for him/her to be taken home or to see a doctor. If a student has bumped their head, even though it may not seem to have been a significant bump, the parent will still be contacted by phone advising them of the injury. Each time a student attends sickbay, a written record is taken with a copy given to the child to take home.

For more minor incidents, teachers (both in class and in the yard) have access to first aid bags with cleaning pads and band aides. Please note that when this occurs, there won’t be an accompanying note home. Notes are only provided when a child has attended the sickbay.

Calling an ambulance: If a student is seriously injured, then an ambulance will be called. Parents will obviously be contacted as quickly as possible too. If an ambulance is called and the parents don’t have ambulance cover, then the cost of the ambulance will be a parent responsibility. The school is not liable for ambulance expense.

Medication administration:

If your child needs to take medication during school time, written parent authority is required. You need to send the medication with clear instructions on the Medication Authority form which can be downloaded from the GK website (Notices tab). Forms are also available from the office. No medication will be given without clear, written instructions.

Head lice:

They’re nasty little critters! Regrettably, no matter the care taken by parents, some children are prone to getting head lice. If this happens, don’t despair! Do let us know though if you have found head lice in your child’s hair. By doing this, Leanda can then undertake head lice inspections in your child’s class. This is the only way to keep head lice in check. We are discrete in the management of head lice and with regular checks following notifications from parents, we can keep the incidence of head lice at GK to a minimum. At school, upon positive identification of head lice, parents will be contacted and advised to treat their child. A child can return to school the next day providing treatment has been commenced. Parents need to have signed a written authority in order for their child’s hair to be checked. PLEASE GET INTO THE HABIT OF CHECKING YOUR CHILD’S HAIR ON A REGULAR BASIS. With a bit of luck, you may catch a live lice before it lays its eggs. Eggs are the difficult part as they take a lot of removing. To minimise the risk, longer hair must be tied back.

Accident / injury insurance:

The school does not have accident / injury insurance. Parents may wish to take out their own insurance through a private insurance provider.

Other reminders ...

- If your child has a medical problem, then make sure we know about it. When conditions change, then please update us.
- Parent contact details MUST BE KEPT UP TO DATE. If we need to contact you urgently, we need to know the phone numbers are current. Please notify the office if your contact details (including address) change.
- Water bottles (clearly named) should be brought to school every day. Children can have these in their classrooms during the day. It is important for children to stay hydrated regardless of the weather. Please make sure that bottles are washed and dried out regularly.
- We don’t apply sunscreen however students can bring their own and keep it in their bag for ready access. All students must wear a GK wide brimmed hat from September to April.
Allergies:

At GK, we have a number of students who are anaphylactic which means that they have severe allergies that can be life threatening. Anaphylaxis is a rapidly progressive allergic reaction which creates a medical emergency. Typical foods that some children are allergic to are nuts, eggs, kiwi fruit, pineapple, sesame seeds and shellfish. GK has a comprehensive Anaphylaxis policy which aims to minimise the risk as well as educate everyone in their individual and collective responsibilities. Letters are sent home to those classes in which there is a child who is anaphylactic. Sharing of food is strongly discouraged and teachers will advise parents prior to doing a food related activity in class. Parents wishing to provide a birthday treat must first talk to their child’s class teacher. Don’t forget that special treats can be non-food items e.g. stickers.

Student welfare support:

Shirley Borg is the school’s Student Welfare Officer who oversees a range of programs that provide support and assistance to students and families as may be required.

Accessing external providers (Education Department personnel): Where appropriate, schools are able to access some professional support in situations where families require advice regarding student progress, counselling (social or emotional issues), academic or speech and language assessments. Our school has an Education Department appointed psychologist who visits each Thursday and a speech pathologist who also visits most weeks. This is a limited service and waiting lists apply. We would like to have greater access to these visiting personnel but regrettably, our school’s allocation is managed by the Department. There is a referral process and in the first instance, Shirley coordinates the referral of any student to our visiting psychologist or speech pathologist. No student can be referred without the prior knowledge and written permission of a parent. A referral usually occurs following discussions between the parent, class teacher and Shirley.

Accessing external providers (private personnel): We are also able to provide advice to parents who wish to access private health professionals from our recommended list of providers who work particularly well with young children. e.g.: Psychologists, Speech Pathologists, Educational Audiologists, Behavioural Optometrists, Occupational Therapists, Family and Individual Counselling, Paediatricians. Banyule and Nillumbik Councils and the Royal Children’s Hospital also provide some support services to families. Parents in need of advice are welcome to contact Shirley.

Program for Students with Disabilities (PSD):

Students with a specific recognised disability (e.g. intellectual, physical, emotional) may be eligible to apply for funding under the guidelines of the Education Department’s Program for Students with Disabilities. Funding is extremely difficult to obtain given key criteria that have to be met. Students who do meet the criteria are provided with extra funding support depending on their level of disability. Funding generally goes towards the employment of an Integration Aide who works in the classroom to support the student’s learning. Regular student support group meetings (involving a parent) are held throughout the year to monitor the ongoing learning needs and outcomes of each student on the PSD program. All PSD students have an individual learning plan according to their specific needs.

Learning Intervention:

Targeted learning intervention, particularly in Literacy, is provided across the school. From one year to another, the area of greatest need is identified through key assessment data that highlights particular student needs. At GK, we run a BOOST program where small groups are formed and students receive explicit instruction on a regular basis. Depending on need, intervention can be for a term, semester or longer. Parents are informed if their child is going to be included in the BOOST program which usually operates in the classroom. The intervention teacher works closely with the class teacher who ultimately is responsible for the ongoing learning of each student. Learning Improvement Plans are developed for each child participating in the BOOST program. Learning Improvement Plans are also developed for other students who are deemed to be achieving at a lower than expected level but not in the BOOST program.

It is important to note that where a class teacher has particular concerns about a student’s learning progress, then it is expected that parents will be contacted to discuss the situation.

Likewise, parents who have particular concerns about their child’s progress are also encouraged to make arrangements to meet and discuss concerns with the class teacher. Parents are reminded though to arrange a suitable meeting time in advance. Please do not expect to catch a teacher directly before or after school without prior notice as teachers do have other commitments (e.g. planning, yard duty, meetings etc.).

Every child’s learning progress is unique. Not everyone makes the same expected progress. Importantly though, the stronger the home / school link then the greater the outcomes that can be expected. Where parents support their child’s learning and help out by consistently implementing teacher suggestions for improvement, then the child will ultimately benefit.