Monday, 22 July 2013

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Principal's Report
I often receive letters and emails acknowledging the work and contributions of our students to a range of areas and events. In particular, I often receive letters regarding the assistance our students provide in coaching, refereeing/umpiring and organisation for sporting events run at primary schools. I thought I would reproduce one such letter in this newsletter to highlight just how much great work our students do in supporting other schools and the fantastic manner in which they represent the school.

Dear Mr South
Late last term, our K-2 teachers held the Infants Sports Carnival. Some Year 9 students from Grafton High School assisted on the day, to support the teachers in running the carnival. The Year 9 Grafton HS students were a great asset to the carnival and behaved in a mature and responsible manner. The Westlawn teachers greatly appreciated their assistance. Could you please pass on to the students, our appreciation for their assistance on the day. Thank you for allowing them to assist us.

Regards
Narelle Twigg – Principal Westlawn Public School

Students Contacting Parents Directly
I would again like to remind parents/carers and students that students who are ill must not contact parents directly and bypass the front office. The school has a duty of care to students and so we must be aware of any health issues as they arise. Students should report to the school clinic at the front office if they are unwell. The office staff can then contact parents appropriately. Similarly, if a child is to leave school early for some reason then parents should supply a note for the student to arrange this in the morning, or if it is unexpected and sudden, then they should make contact through the front office and then have their child signed out of the school. Parents/carers can assist the school by helping to ensure that their children adhere to this process.

Parent Teacher Evening
Student reports were handed out last week and so we are holding our mid-course parent-teacher evening this Tuesday, 23rd July, from 3:45 – 6:00pm in D-Block, for years 7 – 12. To relieve congestion, we will be ‘spread out’ across a greater number of classrooms and there will be chairs set up for parents to sit inside the classroom while they wait for teachers to become available. Appointments are not necessary.

Year 11 – 2014 Subject Selection Evening
Grafton and South Grafton High Schools will be holding a combined subject selection information evening for year 10 students who intend continuing on to year 11 in 2014. The evening will be held from 6:00 pm, finishing at approximately 7:30 pm, on Wednesday 24th July at the Grafton Community and Function Centre. The subject selection options and process will be outlined to students and parents. Representatives will be on hand from TAFE, universities and from each school faculty area, to help answer any questions.

P&C Meeting
A reminder that the next P&C meeting is being held next Thursday 25th July from 7:00pm in the school staff common room.

Aboriginal Parent Group Meeting
Parents and carers of our Aboriginal students are invited to our first parent group meeting next Thursday 25th July, from 3:00 pm in the staff common room. The group will be looking at various projects within the school to involve parent/carer participation in the school and the acknowledgement of our local Aboriginal cultural heritage.

IMPORTANT:
Update of Student Medical Details:
During Terms 3 and 4 we will be updating our medical records systems to ensure we have the most up-to-date information on your child’s health. Included in this newsletter you will find the new forms that you will need to fill out and return to us by the end of this term. If you are returning the forms by mail to the school, please address it to Attention - Medical Forms. Otherwise, you can drop them off at the front office when you are next at school. The new forms help us collect your child’s important medical information, and the introduction of new systems will mean we’ll be able to better manage the daily and emergency health needs of your child. We appreciate your support as we start collecting the information, and if you have any questions please contact the school.
H. Student medical details and health conditions

It is essential you inform the school before your child is enrolled if he or she has any medical conditions. This must include any known allergies. You should also contact the school as soon as you are aware of any newly diagnosed allergies/other medical conditions or changes to an existing condition. This will assist the school to support the safety and wellbeing of your child and allow planning to occur to determine the best way to meet the individual health and support needs of your child. This is important information for your child’s safe participation at the school.

Note: Where the words ‘your child’ are used, they should be taken as a reference to the student seeking enrolment.

Student’s Medicare number

Doctor’s name/medical centre

Doctor’s address (eg 1 High Street, Sydney, NSW, 2000)

Doctor’s phone number (work)

Please provide the name, address and phone number of any other doctor or medical specialist who may currently be treating your child for any allergy or other medical condition you may list when completing Section H. Attach an additional page if required.

If your child has a documented plan to support any health or medical needs from a previous school or organisation (eg preschool, occasional care, etc) please provide it to the school as an attachment to this form.

ALLERGIES – THESE CAN INCLUDE ALLERGIES TO INSECT STINGS, DRUGS, LATEX, FOOD (EG NUTS, EGGS, PEANUTS) OR OTHER.

If your child has an allergy, please specify in the box below. For this allergy, answer the 11 questions that follow (where applicable). If there is insufficient space, please attach additional pages clearly marked ‘Section H’.

For any additional allergies your child has, please answer each of the 11 questions (where applicable) on a separate page for each allergy. Attach this additional information (clearly marked “Section H”) to the back of this form.

Allergy / Medical Condition

Doctor’s Name

Address

Telephone

Allergy to:

1. Has a doctor diagnosed this allergy?  □ Yes  □ No

2. Is this a severe allergy (anaphylaxis)?  □ Yes  □ No

Anaphylaxis is a severe, potentially life-threatening, allergic reaction.

3. Has your child been hospitalised with a severe allergic reaction (anaphylaxis) or any other allergy?  □ Yes  □ No

4. If yes, which hospital?

5. Does your child have an ASCIA Action Plan for Anaphylaxis?  □ Yes  □ No

6. If yes, is this plan attached?  □ Yes  □ No

7. Has your child been prescribed an adrenaline autoinjector (ie EpiPen®/Anapen®)?  □ Yes  □ No

If your child has been prescribed an adrenaline autoinjector, you will need to provide the school with one (and renew prior to expiry date).
8. What is the expiry date of the adrenaline autoinjector that will be provided to the school? □ □ □ □ □ □ 
   month year
   If not known at the time of completing this form, the school will require this information on enrolment.

9. Does your child have an ASCIA Action Plan for Allergic Reactions? □ Yes □ No

10. If yes, is this plan attached? □ Yes □ No
   Each time your child is prescribed a new adrenaline autoinjector the doctor should issue an updated ASCIA Action Plan
   for Anaphylaxis. It is important that a copy of any updated plan is provided to the school.

11. Please list any other medication prescribed for this allergy.

   The school will require further details in relation to prescribed medication on enrolment.
   Parents of children who require their child to be administered prescribed medication at school must complete
   a written request. The school can provide you with a copy of a request form. Information is also available on the
   Department’s website.

MEDICAL CONDITIONS OTHER THAN ALLERGIES AND ANAPHYLAXIS (EG ASTHMA, SEVERE ASThma, DIABETES, EPILEPSY)

Please identify and provide details below of any other medical condition for which your child is being treated. (If more than one
condition or insufficient space, please attach additional pages and include answers to all 7 questions that follow).

Medical condition:

1. Has a doctor diagnosed this condition? □ Yes □ No

2. Has your child been hospitalised with this condition? □ Yes □ No

3. If yes, which hospital?

4. Does your child have a documented action plan from a doctor (eg asthma action plan)? □ Yes □ No

5. If yes, is this plan attached? □ Yes □ No

6. Is your child taking prescribed medication for this condition? □ Yes □ No

7. If yes, what is the prescribed medication?

   The school will require further details in relation to prescribed medication on enrolment.
   Parents of children who require their child to be administered prescribed medication at school must complete
   a written request. The school can provide you with a copy of a request form. Information is also available on the
   Department’s website.
UPDATE OF STUDENT DETAILS

DATE- ___________________ DATE OF CHANGE- ___________________

STUDENT NAME - ___________________ YEAR- _______ ON TRAC- _______

Complete sections where the students detail have changed. This form contains 2 pages – please sign on page 2.

SECTION A: NEW INFORMATION

Address- ____________________________________________________________

Email - ____________________________________________________________

Phone - ______________________________ Work – _________________________

Mobile- Name ___________________________________ Number – _____________

Mobile- Name ___________________________________ Number - _____________

SECTION B: EMERGENCY CONTACTS-(OTHER THAN PARENTS/CARERS)

NAME: ___________________________ NUMBER: _______________________

Relationship to student: _______________ MOBILE: ______________________

NAME: ___________________________ NUMBER: _______________________

Relationship to student: _______________ MOBILE: ______________________

SECTION C: SCHOOL REPORTS

If duplicate copies of school reports are required for additional parent/carers not living with this student please complete the section below.

Name:________________________________ Relationship:_______________________

Address:______________________________________________________________

Suburb __________________________ State __________ Postcode:_________________

SECTION D: NEWSLETTER- IF YOU DO NOT WISH TO ACCESS THE SCHOOL NEWSLETTER FROM THE SCHOOL WEBSITE, www.grafton-h.schools.nsw.edu.au PLEASE INDICATE BELOW –

[ ] I would like the GHS newsletter emailed to me

______________________________________________________@

______________________________________________________@

[ ] I would like my son/daughter to bring the newsletter home from school each week.

*Additional copies are available from the front office.