

# Review your enrolment policies

A suggestion for implementing the strategy  
'Review your policies and procedures' from  
the Guide: [Asthma and learning](#)

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## **Includes:**

- Ask for medical information
- Create a safe environment
- Identify learners with asthma
- Ease anxiety
- School asthma checklist
- Useful resources

Inclusive Education

From

Guide: [Asthma and learning](#)

Strategy: [Review your policies and procedures](#)

Suggestion: [Review your enrolment policies](#)

Date

20 May 2024

Link

[inclusive.tki.org.nz/guides/asthma-and-learning/review-your-enrolment-policies](https://inclusive.tki.org.nz/guides/asthma-and-learning/review-your-enrolment-policies)

## Ask for medical information

The image displays two enrolment forms. The left form is the 'RONGOTAI COLLEGE ENROLMENT FORM' and the right is the 'Enrolment Agreement Form'. Both forms have callouts highlighting specific sections related to medical information.

**Left Form: RONGOTAI COLLEGE ENROLMENT FORM**

- Section: COMPLETE THIS SECTION ONLY IF STUDENT IS LIVING WITH A CAREGIVER**
  - Full Name of Caregiver/Guardian (Mr/Ms/Ms/Ms): \_\_\_\_\_
  - Address: \_\_\_\_\_
  - Relationship to student: \_\_\_\_\_
  - Occupation: \_\_\_\_\_
  - Place of Employment: \_\_\_\_\_
  - Telephone Home: \_\_\_\_\_
  - Work: \_\_\_\_\_
  - Mobile: \_\_\_\_\_
  - E-mail: \_\_\_\_\_
- Section: FOR STUDENTS WHO WERE NOT ACQUAINTED**
  - Date of arrival in NZ: \_\_\_\_\_
  - Passport No: \_\_\_\_\_
  - or Permanent Residence No: \_\_\_\_\_
  - or Residence Visa No: \_\_\_\_\_
- Section: STUDENT INFORMATION**
  - Name of Doctor/Health Centre: \_\_\_\_\_
  - Are there any health problems, disabilities, or allergies? \_\_\_\_\_
  - Gifted and Talented: Has the student been involved with any programmes? \_\_\_\_\_
  - Area of special abilities: \_\_\_\_\_
  - Enrolment? \_\_\_\_\_
  - Accelerated? \_\_\_\_\_
  - Leadership? \_\_\_\_\_
  - Options Codes (for Year 11, 12 and 13 students) (to be filled in at interview with Deputy): \_\_\_\_\_
- Section: I agree that my child will observe the rules, pay the required charges and wear the uniform, as determined by the Board of Trustees of Rongotai College.**
  - I have understood the conditions of enrolment and agree that I have given or my present school has supplied may be used by Rongotai College for educational and other purposes, or passed on to other schools or relevant agencies.
  - I have agreed that my child's name appears in a school photograph, it may be used in official school publications/websites.
- Section: Signed**
  - Student/Parent: \_\_\_\_\_
  - Parent/Guardian: \_\_\_\_\_

**Right Form: Enrolment Agreement Form**

- Section: Medicine**
  - Category (i) Medicines**
    - A category (i) medicine is a non-prescription preparation (such as antacid tablets, antiseptic liquid, insect bite repellent) that is not ingested, used for the first aid treatment of minor injuries and provided by the service and kept in the first aid cabinet.
    - Note: The service must provide specific information about the category (i) preparations that will be used.
    - Do you approve category (i) medicines to be used on your child? \_\_\_\_\_
    - Names of specific category (i) medicines that can be used on my child, provided by service: \_\_\_\_\_
  - Category (ii) Medicines**
    - A category (ii) medicine is a prescription preparation (such as antibiotics, cough syrup, etc.) that is ingested, used for the first aid treatment of minor injuries and provided by the service and kept in the first aid cabinet.
    - I acknowledge that written authority must be provided by a medical professional for the use of a category (ii) medicine in a school setting.
    - Do you approve category (ii) medicines to be used on your child? \_\_\_\_\_
    - Names of specific category (ii) medicines that can be used on my child, provided by service: \_\_\_\_\_
  - Category (iii) Medicines**
    - A category (iii) medicine is a prescription preparation (such as insulin, inhalers, etc.) that is ingested, used for the first aid treatment of minor injuries and provided by the service and kept in the first aid cabinet.
    - I acknowledge that written authority must be provided by a medical professional for the use of a category (iii) medicine in a school setting.
    - Do you approve category (iii) medicines to be used on your child? \_\_\_\_\_
    - Names of specific category (iii) medicines that can be used on my child, provided by service: \_\_\_\_\_
- Section: Parent/Guardian Signature**
  - Parent/Guardian Signature: \_\_\_\_\_
- Section: For staff: Individual health plan agreement**
  - For staff: Individual health plan agreement: \_\_\_\_\_
- Section: Name of medicine**
  - Name of medicine: \_\_\_\_\_
  - Method and dose of medicine: \_\_\_\_\_
  - When does the medicine need to be taken: \_\_\_\_\_
- Section: Parent/Guardian Signature**
  - Parent/Guardian Signature: \_\_\_\_\_

Source:

Ministry of Education

[View full image \(820 KB\)](#)

At the time of enrolment identify children and young people with asthma. Review and update medical information annually.

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## Create a safe environment

Include the following information as part of your initial enrolment:

- ✓ a written asthma action plan from the child or young person's healthcare professional
- ✓ a list of asthma triggers
- ✓ specific symptoms to look out for
- ✓ treatment plans for an asthma attack
- ✓ a list of all prescribed asthma medication, doses, and how they should be used
- ✓ written consent from parents to administer medication as required.

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## Identify learners with asthma

Supplementary questions added to a standard medical form, with annual updates can result in effective identification and support for learners with asthma.

### Questions to ask:

- Does your child have coughing, wheezing, chest tightness, or trouble breathing when playing or exercising?
- Has your child been prescribed asthma medication by their healthcare professional in the past 12 months?
- How many times in the last 12 months did your child go to the doctor or healthcare professional for an urgent visit because of breathing problems?
- Has your child been admitted to hospital because of breathing problems in the last 12 months?
- Have you ever been told by a doctor or healthcare professional that your child has asthma?

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## Ease anxiety

Support families, whānau, and learners during the enrolment process by:

- ✓ following up on a child's or young person's enrolment information
- ✓ contacting parents proactively, organising a meeting to discuss their child's individual health needs
- ✓ highlighting health and safety policies and procedures related to asthma management.

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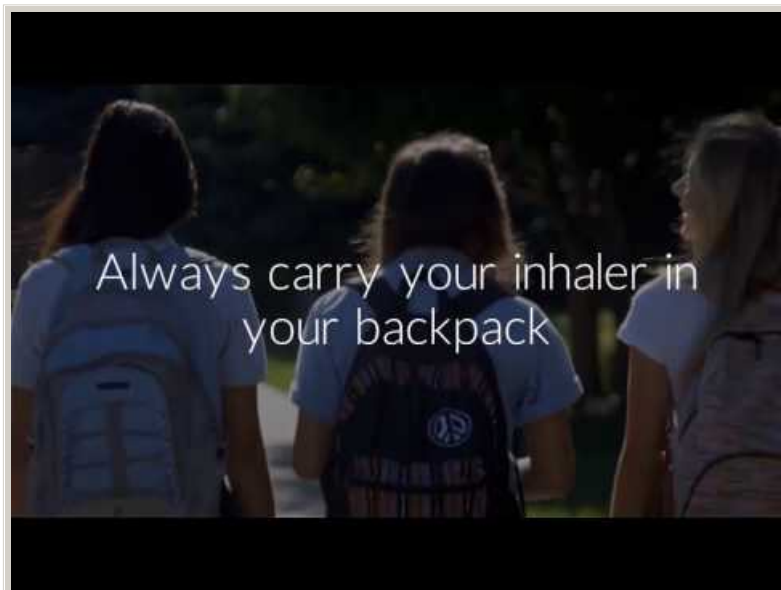
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## School asthma checklist

Use the [school asthma checklist](#) as part of your enrolment process to help reduce the risk of asthma related illness at school.



Video hosted on Youtube <http://youtu.be/qqGpV7xC5jQ>

No captions or transcript

Source:

[Asthma FoundationNZ](#)

<https://www.youtube.com/watch?v=qqGpV7xC5jQ>

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## Useful resources



### School asthma checklist

A free downloadable pdf.

Publisher: Asthma + Respiratory Foundation, NZ

[Download](#) PDF

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