

FIRST AID POLICY



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.
- All injured persons must be provided with immediate and adequate treatment of injury and illness.
- The school's obligations include provision of asthma kits, an EpiPen®/Anapen®, a first aid room, major first aid kits, portable first aid kits and include the management of blood spills and syringe disposal.
- Teachers and principals must be familiar with the school's first aid procedures and observe their duty of care to children by providing first aid treatment within the limits of their skill, expertise, training and responsibilities.
- Schools must ensure there is always a first aid officer who can assist an injured or ill person and has current qualifications covering all the school's first aid requirements.
- School nurses employed by schools must follow the school's first aid policy.

Purpose

- To ensure children's first aid needs are met at school and on approved school activities.
- To ensure the school responds appropriately to emergency medical situations.
- To ensure Tarneit Rise Primary School staff observe their duty of care by providing first aid treatment within the limits of their skill, expertise, training and responsibilities.
- To ensure the school complies with legislation and Department of Education and Training (DET) policy and guidelines.

Definitions

The goal of first aid is not to diagnose or treat the condition.

First aid involves emergency treatment and support to preserve life through clearing and maintaining open airways, restoring breathing or circulation, monitoring wellbeing until the person recovers or is transferred into the care of ambulance paramedic, doctor or nurse, protecting a person, particularly if they are unconscious, preventing a condition worsening and promoting recovery.

Implementation

- The wellbeing of children is this school's highest priority.
- The principal and all staff members have an obligation to be familiar with the school's first aid procedures and observe their duty of care to students by providing first aid treatment within the limits of their skill, expertise, training and responsibilities.
- All staff will be briefed on general organisational matters at the start of the school year and as part of the induction process for new staff members.
- First aid requirements for students with identified health care needs will be explained in the Student Health Support Plan or Anaphylaxis Management Plan.
- The school will support first aid by:
 - ensuring the school's first aid needs are met
 - providing:
 - asthma kits

- first aid rooms
 - major first aid kits
 - portable first aid kits
 - managing:
 - blood spills and bleeding students
 - syringe disposal/injuries.
- The First Aid Coordinator will undertake a range of responsibilities including:
 - taking a lead role in supporting teachers and the principal/assistant principal in health support planning
 - having knowledge of:
 - all children with a support or management plan
 - the first aid response noted in the plans ensuring that children's emergency contact details are up to date
 - ensuring all medications supplied by the children are within their use-by date
 - working with staff to conduct regular:
 - reviews of management strategies
 - risk assessments
 - developing strategies to raise awareness in the school community about health and safety issues

Note: To display a photo of a student and to describe their health care needs requires consent from parents/carers.

- The principal will ensure there is always a first aid officer who can assist an injured or ill person and has current qualifications covering all the school's first aid requirements.
- Where possible, first aid will only be provided by staff who have been designated as the first aid providers. However, in an emergency, other staff may be required to help within their level of competence.
- The principal will ensure sufficient staff are trained in first aid under the provisions of the Occupational Health & Safety Act 2004 and the DET's First Aid Policy and maintain a register of trained staff.
- Please refer to the attached OH&S Minimum First Aid Facilities schedule.
- Training includes basic first aid knowledge and where required additional first aid modules such as asthma management, administration of the EpiPen™ or specific training for excursions and other educational programs or activities.
- Training requirements for the school, camps and excursions are assessed according to the potential hazards in the environment and the nature of the activities being undertaken.
- The principal will ensure relevant staff receive additional training to meet children's health needs. (Please refer to the Register of Staff Trained in First Aid.)
- The principal will determine who has overall responsibility for the first aid room and its contents.
- Facilities for first aid will allow for:
 - precautions against infection
 - reassurance and comfort, with a safe level of privacy; dignity; comfort and independence.
 - employee and volunteer health, safety and welfare
 - associated record keeping in accordance with privacy and confidentiality
 - short-term supervision and the ability to summon further assistance if required.

- The level of supervision required in the first aid room varies depending on the case. For example, supervision should be required for a student who has had a blow to the head and is feeling dizzy but may not be required for a student with a slight headache, who needs a lie down.
- Staff members who practise first aid should have their position descriptions updated to reflect this extra responsibility. They must receive:
 - basic first aid training
 - and where required, additional first aid modules to cover:
 - the health needs of students attending the school, such as asthma management, administration of the EpiPen; or
 - excursions, specific educational programs or activities.
- If a child feels unwell, the designated first aid officer will assess the signs and symptoms e.g. fever, pallor, skin clammy and act accordingly including declaring the situation a medical emergency.
- If a child has a minor injury such as a bump or bruise, an icepack (not applied directly to the skin) may be appropriate. This is not appropriate if the bump causes a nose-bleed.
- For more serious injuries e.g. causing loss of consciousness even briefly, a less than alert state, suspicion of a fracture or spinal injury, damage to eyes/ears, penetration of the skin or deep open wounds, an ambulance will be called.
- In treating a blood spill or open wound the first aid officer will follow the procedures described in the school's Bleeding Children/ Blood Spills Policy.
- In a medical emergency, staff will take action without waiting for the parent/carer including calling 000.
- Once action has been taken, the parent/carer or the child's emergency contact and Security Services will be notified.
- Staff providing first aid may assess that an emergency response is not required, but medical advice is needed. In these circumstances, the school will ask the parents/carers or emergency contact person to collect the child and recommend that advice is sought from a medical practitioner.

Example: This response would apply if a child receives a blow to the head but there are no signs of concussion or the child reports persistent aches and pains.
- The school may also contact NURSE-ON-CALL (on 1300 60 60 24) in an emergency. NURSE-ON-CALL provides immediate, expert health advice from a registered nurse and is available 24 hours a day, 7 days a week from any land line in Victoria for the cost of a local call.
- Upon the principal's discretion and provided alternative supervision for remaining children can be arranged, a staff member may accompany a child transported by emergency services when one or more of the following applies:
 - a parent/carer or emergency contact person cannot do so
 - the age or development of the child justifies it
 - the child chooses to be accompanied
- On the rare occasion when a school staff member has to transport a child to emergency care (such as when an ambulance is not available), at least two adults should accompany the child to ensure the driver is not distracted and the child can be constantly supervised.
- Parents/carers of ill children will be contacted to take them home and must sign the child out in.
- Parents/carers of all children receiving first aid treatment will receive a form detailing injury and treatment given.
- Please refer also to the school's Care Arrangements for Ill Children Policy, Duty of Care Policy, the Bleeding Students/Blood Spills Policy, Emergency & Incident

Reporting Policy, Health Care Needs Policy, specific policies such as the Asthma Management Policy and the Child Safe Standards.

Evaluation

- This policy will be reviewed as part of the school’s three-year review cycle or if guidelines change (latest DET update mid-August 2017).

<u>Ratification Date</u>	<u>Review Date</u>	<u>Policy Number</u>	<u>Version Number</u>	<u>Date Produced</u>
May 2019	2021	33	2	September 2017

References:

www.education.vic.gov.au/school/principals/spag/health/pages/firstaid.aspx
www.education.vic.gov.au/school/principals/spag/health/pages/firstaidneeds.aspx

Site Characteristics	Minimum First Aid Requirements	
Less than 50 employees (and children)	1 first aid officer (minimum level 2 trained)	1 first aid kit
50 - 199 employees (and children)	2 first aid officers (minimum level 2 trained)	4 first aid kits
200 - 399 employees (and children)	4 first aid officers (minimum level 2 trained)	6 first aid kits
400 - 599 employees (and children)	6 first aid officers (minimum level 2 trained)	8 first aid kits
600 - 799 employees (and children)	9 first aid officers (minimum level 2 trained)	10 first aid kits and a first aid room with bed and stretcher
800 - 999 employees (and children)	12 first aid officers (minimum level 2 trained)	12 first aid kits (including specific “type of incident” treatment) and a first aid room with bed and stretcher
>1000 employees (and children)	16 first aid officers (minimum level 2 trained)	14 first aid kits (including specific “type of incident” treatment) and a first aid room with bed and stretcher
Where access is limited to medical and ambulance services (e.g. remote workplaces, school field excursions etc.)	2 additional first aid officers for every category (minimum level 2 trained)	2 additional first aid kits for every category