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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.
- Schools must provide first aid facilities and ensure sufficient staff trained in first aid under the provisions of the Occupational Health & Safety Act 2004 and DET's First Aid and Infection Control advice.
- 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.
- The need for first aid varies at each school.
- 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. 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 Mackellar Primary School staff observe their duty of care to children by providing first aid treatment within the limits of their skill, expertise, training and responsibilities.
- To ensure the school complies with legislation and DET policy and guidelines.

Definition

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
- protect a person, particularly if they are unconscious
- prevent a condition worsening
- promote recovery.

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

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.
- 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

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 present 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 within the limits of their skill, expertise, training and responsibilities.
- 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.
- The Principal will ensure relevant staff receive additional training to meet identified health needs of children. First aid requirements for students with identified health care needs should be explained in the Health Support Plan or Anaphylaxis Management Plan. To display a photo of a child and a description of their health care needs in a staff area, consent is required from parents/carers.
- The Principal will determine who has overall responsibility for the first aid room, its contents and the first aid kits. Please refer to the role of the First Aid Coordinator below.
- 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 who practice first aid will have their position descriptions updated to reflect this extra responsibility. Staff must receive basic first aid training and where required, additional first aid modules to cover the health needs of children attending the school, such as asthma management, administration of the EpiPen™ or excursions, specific educational programs or activities.
 - Please note: all staff will receive training in the use of an EpiPen™ as part of anaphylaxis training and also training in asthma management.
- 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
- Parents/carers of ill children will be contacted to take children home and must sign the child out in accordance with the school's *Collection of Children Policy*.
- Parents/carers of all children receiving first aid treatment will receive a form detailing injury and treatment given.

<u>Assessing First Aid Requirements</u>

• In determining the first aid and training requirements for the school, the Principal will identify potential causes of injury and illness, check the environment for any potential hazards, review any incident, injury and 'near miss' data available, consider the nature of activities undertaken, consult

- with staff and obtain specialist or external advice, if required.
- 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 also consider:
- how many staff need to be trained
- what first aid competencies and training is required
- what are the responsibilities and duties of individual teachers
- whether first aid duties may be shared across several members of staff.
- For the number of first aid kits required, please refer to the attached OHS Minimum First Aid Facilities schedule.

Specific Situations

- If a child feels unwell, the designated first aid officer will assess the signs and symptoms e.g. fev 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 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, suspic
 of a fracture or spinal injury, damage to eyes/ears, penetration of the skin or deep open wounds,
 ambulance will be called.
- If an icepack is used to treat a minor injury such as a bump or bruise, the pack will not be applied directly to the skin and will be removed if pain or discomfort occurs. A cold compress (wet towel or cloth) will be used as an alternative.
- When an injury causes a nose bleed then an ice pack should not be used; instead a cold compress may be applied.
- In the following circumstances an icepack/cold compress should not be used and medical help should be sought (usually by calling an ambulance):
- loss of consciousness, even if only briefly
- a less than alert conscious state
- suspicion of a fracture
- suspicion of a spinal injury
- damage to eyes or ears
- penetration of the skin
- deep open wounds.
- 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 an ambulance on 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 student receives a blow to the head but there are no signs of concussion or the student 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.

First Aid Coordinator

- The First Aid Coordinator (or school nurse if employed) will undertake a range of responsibilities including:
- taking a lead role in supporting teachers and the 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 child's emergency contact details are up to date
- ensuring all medications supplied by the student are within their use-by date

- working with staff to conduct regular reviews of management strategies, risk assessments and develop strategies to raise awareness in the school community about health and safety issues.
- Please refer also to the school's Duty of Care Policy, the Accident Recording & Reporting Policy, the Anaphylaxis Management Policy, the Asthma Management Policy and other specific condition policies, the Medical Emergencies Policy, the Health Care Needs Policy and the Bleeding Children/Blood Spills Policy.

Evaluation

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

This update was ratified by School Council on June 2016

 $\underline{www.education.vic.gov.au/school/principals/spag/health/pages/firstaid.aspx}$ www.education.vic.gov.au/school/principals/spag/health/pages/firstaidneeds.aspx $\underline{www.education.vic.gov.au/school/principals/spag/health/Pages/emergency.aspx}$

| Site Characteristics | Minimum First Aid Requirements | |
|--|--|---|
| Less than 50 employees (and students) | 1 first aid officer (minimum level 2 trained) | 1 first aid kit |
| 50 - 199 employees (and students) | 2 first aid officers (minimum level 2 trained) | 4 first aid kits |
| 200 - 399 employees (and students) | 4 first aid officers (minimum level 2 trained) | 6 first aid kits |
| 400 - 599 employees (and students) | 6 first aid officers (minimum level 2 trained) | 8 first aid kits |
| 600 - 799 employees (and students) | 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 students) | 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 students) | 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 |