First Aid Policy

Policy Statement

As highlighted in the School Accountability and Improvement Framework, an essential goal for all schools is promoting student engagement in learning and their wellbeing. At any one time, a student can have a health condition or care need that could impact on their attendance and participation within school. This can require short or long-term first aid planning, supervision for safety, routine health and personal care support and occasionally complex medical care needs.

Victorian Government schools have a responsibility to provide equitable access to education and respond to diverse student needs, including health care needs. Schools need to make local decisions and create innovative solutions to meet the needs of all students.

Rationale

The Department acknowledges that early intervention is critical, especially in relation to a student with an identified health care need. It is essential that upon enrolment or when a health care need is identified, the school has clear plans and processes in place to support the student’s health care.

School staff (administrators, canteen staff, casual relief staff and volunteers) have a duty of care to a student to take reasonable care to avoid risk of injury that are reasonably foreseeable. A teacher’s duty of care is greater than that of an ordinary citizen in that a teacher is obliged to assist an injured student.

First Aid is an important aspect when creating a safe environment where children are secure and able to feel confident.

CHPS is responsible for providing adequate first aid facilities and sufficient trained staff. Teachers and trained first aid personnel are required to provide first aid to students, staff, parents/guardians and visitors.

Implementation

1. The school will ensure that all teachers are trained to be qualified to Level 2 First Aid.
2. Regular training in emergency first aid, asthma and allergy treatment will be undertaken by all staff as per Department regulations and school needs as required.
3. First Aid Coordinators are responsible for:
   - ensuring that first aid cabinets and kits are maintained and fully stocked –See Appendix
   - ensuring that anaphylactic plans, asthma plans and all other required medications and plans are kept current.
   - participating in the risk management process with the OHS team
4. All medications need to be registered at the office and are to be administered in the sick bay.
5. A member of staff will be identified as the Occupational Health and Safety Officer.
6. Yard duty teachers will carry basic emergency first aid materials with them at all times as per Department regulations as well as a two-way radio and sick bay passes.
7. The sick bay room will be monitored whilst occupied.
8. An Injury Report Form will be completed when a child has been sent to the sick bay due to an injury.

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11. If first aid treatment is given in the sick bay, a note will be sent home to inform parents/guardians of the treatment received. If a child has a knock to the head then parents will be telephoned.

12. Parents/Guardians will provide the school with full medical details of the students, including telephone numbers of at least two emergency contacts. Parents/Guardians should ensure that accurate information is on record in the office to facilitate emergency contact.

13. At the commencement of each year, requests for updated first aid information will be sent home including requests for any asthma management plans, high priority medical forms, and reminders to parents/guardians of the policies and practices used by the school to manage first aid, illnesses and medications throughout the year.

14. An Asthma/Allergy Management Plan will be completed for all children identified as suffering from asthma or an allergy in consultation with parents and their Medical Practitioner.

15. The Asthma/Allergy Plans will be housed in the first aid room and class teachers will keep a copy on hand in their classroom. There will also be copies placed in the CRT booklet.

16. The school is an accredited Asthma Friendly School and staff have professional development to maintain this annually.

17. General organisational matters relating to first aid will be communicated to staff at the beginning of each year. Revisions of recommended procedures for administering asthma medication will also be given at that time.

18. All children, especially those with a documented asthma/allergy management plan, will have access to their prescribed medications at all times, under staff supervision.

19. In the case of severe injury, illness or medical condition, an ambulance will be called and then parents contacted immediately. When parents/guardians are not contactable, all emergency contact numbers will be called until direct contact is made.

20. All staff have the authority to call an ambulance immediately in an emergency. If the situation and time permit, a teacher may confer with others before deciding on an appropriate course of action.

21. The Camp and Excursion policies contain further specific information in relation to First Aid.

22. Children who are ill during class time may be sent to the sick bay as long as administration staff are notified and supervision can be arranged. If the child needs to go home the administration or office staff will call the parent if the teacher is unable to do so.

23. Any children with injuries involving blood must have the wounds covered at all times.

24. A comprehensive first aid kit will accompany all excursions and camps, along with a mobile phone.

25. Although first aid cabinets normally will only be accessed by those staff with designated first aid responsibilities, all staff must be aware of their location in case of an emergency.

26. The cabinets should be easily recognisable and should not be locked. Any medications such as paracetamol and those supplied by parents/guardians should be stored separately in a locked cupboard or drawer in the First Aid room.

27. Sharps Procedure/Auto injecting devices.

Procedures for the safe disposal of discarded needles and syringes are as follows:

- Use gloves
- Do not try to recap the needle
- Place the disposal container on the ground next to the syringe.
- Pick up the syringe with an implement such as tongs as far from the needle end as possible.
- Place the syringe needlepoint down in the disposal container.
- Remove gloves and wash hands.
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References:
Under the provisions of the Occupational Health and Safety Act 2004 as well as the Disability Discrimination Act 1992, this includes supporting and responding to the health care needs of students.

Appendix
Student Health Guidelines Department of Education.

Review As part of school’s cyclic process

First Aid Kit Contents

Consistent with the Department’s First Aid Policy and Procedures the school will maintain a First Aid Kit that includes the following items:

- an up-to-date first aid book – examples include:
  o First aid: Responding to Emergencies, Australian Red Cross
  o Australian First Aid, St John Ambulance Australia (current edition)
  o Staying Alive, St John Ambulance Australia, (current edition)

- wound cleaning equipment
  o gauze swabs: 100 of 7.5 cm x 7.5 cm divided into small individual packets of five
  o sterile saline ampoules: 12 x 15 ml and 12 x 30 ml
  o disposable towels for cleaning dirt from skin surrounding a wound

- wound dressing equipment
  o sterile, non-adhesive dressings, individually packed: eight 5 cm x 5 cm, four 7.5 m x 7.5 m, four 10 cm x 10 cm for larger wounds
  o combine pads: twelve 10 cm x 10 cm for bleeding wounds
  o non-allergic plain adhesive strips, without antiseptic on the dressing, for smaller cuts and grazes
  o steri-strips for holding deep cuts together in preparation for stitching
  o non-allergic paper type tape, width 2.5 cm – 5 cm, for attaching dressings
  o conforming bandages for attaching dressings in the absence of tape or in the case of extremely sensitive skin
  o six sterile eye pads, individually packed

- bandages
  o four triangular bandages, for slings, pads for bleeding or attaching dressings, splints, etc
  o conforming bandages: two of 2.5 cm, two of 5 cm, six of 7.5 cm and two of 10 cm – these may be used to hold dressings in place or for support in the case of soft tissue injuries

- lotions and ointments
  o cuts and abrasions should be cleaned initially under running water followed by deeper and more serious wounds being cleaned with sterile saline prior to dressing. Antiseptics are not recommended
  o any sun screen, with a sun protection factor of approximately 15+
  o single use sterile saline ampoules for the irrigation of eyes
  o creams and lotions, other than those in aqueous or gel form, are not recommended in the first aid treatment of wounds or burns
  o asthma equipment (which should be in all major portable kits, camping kits, sports kits, etc)
  o blue reliever puffer (e.g. Ventolin) that is in date
  o spacer device
  o alcohol wipes
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Other equipment includes:

- single use gloves – these are essential for all kits and should be available for teachers to carry with them, particularly while on yard duty
- blood spill kits
- vomit spill kits
- one medicine measure for use with prescribed medications
- disposable cups
- one pair of scissors (medium size)
- disposable splinter probes and a sharps container for waste
- disposable tweezers
- one teaspoon
- disposable hand towels
- pen-like torch, to measure eye-pupil reaction
- two gel packs, kept in the refrigerator, for sprains, strains and bruises or disposable ice packs for portable kits
- adhesive sanitary pads, as a backup for personal supplies
- flexible ‘sam’ splints for fractured limbs (in case of ambulance delay)
- additional 7.5 m conforming bandages and safety pins to attach splints
- blanket and sheet, including a thermal accident blanket for portable kits
- germicidal soap and nail brush for hand-cleaning only
- one box of paper tissues
- paper towel for wiping up blood spills in conjunction with blood spill kit
- single use plastic rubbish bags that can be sealed, for used swabs and a separate waste disposal bin suitable for taking biohazard waste (note: Biohazard waste should be burnt and there are several companies that will handle bulk biohazard waste)
- ice cream containers or emesis bags for vomit.

Emergency Telephone Numbers

Poisons Information Service 13 11 26
Ambulance 000 or 112 (if needed)