FIRST AID POLICY

PURPOSE OF THIS POLICY

This policy outlines our commitment to student health and well being, it is not First Aid instructions or procedures.

First aid incorporates basic life support and comprises emergency procedures aimed at recognising and maintaining open airways, and restoring breathing and/or circulation.

First aid is the initial care of the injured or sick. The provision of first aid to injured or sick children will be undertaken by staff in attendance and supported by staff trained in first aid. It is recognised that first aid should:

• preserve life
• protect the unconscious
• prevent injury or illness from becoming worse
• promote recovery

Emphasis must also be placed on prevention of injuries and illness in the first instance by encouraging responsibility and safe practices amongst all students and staff from prep to grade 6.

OVERVIEW

At Watsonia Heights Primary School all staff are familiar with the school’s first aid procedures. All staff will always endeavour to observe their duty of care to students by providing first aid treatment within the limits of their skill, expertise, training and responsibilities.

Watsonia Heights Primary School supports first aid by:

• Ensuring the school’s first aid needs are met
• Providing:
  o asthma kits
  o first aid room
  o major first aid kit
  o portable first aid kits
• Managing:
  o blood spills and bleeding students
o syringe disposal/injuries.

**FIRST AID TRAINING**

All staff at Watsonia Heights Primary School who practice first aid should have their position descriptions updated to reflect this extra responsibility. All staff receive:

- Level 2 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.

**FIRST AID OFFICERS**

Consistent with the Department’s First Aid Policy and Procedures, Watsonia Heights Primary School will allocate staff member/s as First Aid Officer/s. The names and details of First Aid Officers, including their level of first aid and first aid expiry dates, will be provided as soon as they are known.

The First Aid Officer/s is required to undertake a coordinating role maintaining standard medical service provision, student medical records and parent notifications.

There is to be a minimum of 4 First Aid Officers trained, as per DEECD First Aid Risk Assessment Guidelines. The names of the First Aid Officers are to be included on the “First Aid Summary Sheet” to be displayed in the First Aid Room and Staff Room (see Appendix 1)

Their specific duties include:

- Participating in the risk management process within the school as part of the school’s OHS team. This may include contributing to risk management solutions and providing feedback on injury reports and first aid register data to identify persistent or serious hazards.
- Providing first aid emergency awareness training for staff including emergency notification processes, a list of responsible officers and provision of emergency phone numbers.
- Coordinating first aid duty rosters and maintaining first aid room and first aid kits.
- Providing first aid services commensurate with competency and training. This may include all or some of emergency life support including response to life threatening conditions which may occur in the school (e.g. cardiac arrest or respiratory difficulties associated with asthma), management of severe bleeding, basic wound care, fractures, soft tissue injury.
• Recording all first aid treatment. A copy of treatment provided shall be forwarded with the patient where further assistance is sought. The first aider should respect the confidential nature of any information given.

• Providing input on first aid requirements for excursions and camps.

• Updates all medical records of students with existing medical conditions (ie. asthma, epilepsy, diabetes). Forms will be sent home to families at the beginning of each year and meetings scheduled (with the Principal) where necessary.

• Provision and maintenance of first aid facilities, equipment and information in accordance with DEECD First Aid Guidelines. The first aid room provisions include 2 generic Adrenaline Autoinjection Devices, Ventolin and a generic Blood Glucose Monitor.

• Implement the use of standard precautions to prevent transmission of infection due to exposure to blood, body fluids and the environment.

Staff responsible for administering medication must be given guidelines in accordance with any relevant health care plan for that student, and maintain medication record.

The First Aid Officer/s will be available at the school during normal working hours and at other times when authorised Department programs are being conducted.

Where possible, only staff with first aid qualifications will provide first aid. However, in an emergency other staff may be required to help within their level of competency.

**PROcedures For Medical Treatment**

In the event of a student requiring medical attention at Watsonia Heights Primary School, an attempt will be made to contact the parents/guardians before calling for medical attention **except in an extreme emergency**.

In serious cases, parents/guardians will always be informed as quickly as possible of their child’s condition and of the actions taken by the school.

All accidents and injuries will be recorded on the Department’s injury management system on CASES21.

A Record of First Aid Treatment will be kept in the Sick Bay, this will have information for all students treated in the Sick Bay. An information slip will be filled in and sent home with the student indicating date and time of attendance in the Sick Bay, the treatment given and the person administering the first aid.

It is the policy of the school that all injuries to the head are reported to Principal Team Member in charge of First Aid and that parents/emergency contacts are contacted regarding the injury.
It is essential that parents/carer notify the school in writing of any medical conditions pertaining to their child.

It is the parent/carer responsibility to ensure that the school office has current emergency contact names and numbers.

First aid kits will be available for all groups that leave the school on excursions. The content of these kits will be dependent on the nature of the activities, the number of students and staff, and the location of the excursion.

Portable first aid kits will be available for staff on yard duty. These kits will contain:

- a pair of single use plastic gloves
- a bottle of sterile eye solution
- gauze and band-aids
- record book & pen
- emergency cards for at risk students (i.e. anaphylactic)

**ASSESSMENT AND FIRST AID TREATMENT OF AN ASTHMA ATTACK**

If a student develops signs of what appears to be an asthma attack, appropriate care must be given immediately.

**Assessing the severity of an asthma attack**

Asthma attacks can be:

- **Mild** - this may involve coughing, a soft wheeze, minor difficulty in breathing and no difficulty speaking in sentences
- **Moderate** - this may involve a persistent cough, loud wheeze, obvious difficulty in breathing and ability to speak only in short sentences
- **Severe** - the student is often very distressed and anxious, gasping for breath, unable to speak more than a few words, pale and sweaty and may have blue lips.

All students judged to be having a severe asthma attack require emergency medical assistance.

Call an ambulance (dial 000), notify the student’s emergency contact and follow the ‘4 Step Asthma First Aid Plan’ while waiting for the ambulance to arrive. When calling the ambulance state clearly that a student is having ‘breathing difficulties.’ The ambulance service will give priority to a person suffering extreme shortness of breath. Regardless of whether an attack of asthma has been assessed as mild, moderate or severe, Asthma
First Aid (as detailed below) must commence immediately. The danger in any asthma situation is delay. Delay may increase the severity of the attack and ultimately risk the student’s life.

**Asthma First Aid**

If the student has an Asthma Action Plan, follow the first aid procedure immediately. If no, Asthma Action Plan is available in the steps outlined below should be taken immediately.

**The 4 Step Asthma First Aid Plan (displayed in Sick Bay and classrooms):**

**Step 1** Sit the student down in as quiet an atmosphere as possible. Breathing is easier sitting rather than lying down. Be calm and reassuring. Do not leave the student alone.

**Step 2**

Without delay give 4 separate puffs of a blue reliever medication (Airomir, Asmol, Epaq or Ventolin). The medication is best given one puff at a time via a spacer device. If a spacer device is not available, simply use the puffer on its own. Ask the person to take 4 breaths from the spacer after each puff of medication.

**Step 3**

Wait 4 minutes. If there is little or no improvement repeat steps 2 and 3.

**Step 4**

If there is still little or no improvement; call an ambulance immediately (dial 000). State clearly that a student is having ’breathing difficulties.’ Continuously repeat steps 2 and 3 while waiting for the ambulance.

**FIRST AID KIT CONTENTS**

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

- an up-to-date first aid book
- wound cleaning equipment
  - gauze swabs: 100 of 7.5 cm x 7.5 cm divided into small individual packets of five
  - sterile saline ampoules: 12 x 15 ml and 12 x 30 ml
  - disposable towels for cleaning dirt from skin surrounding a wound
- wound dressing equipment
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

○ combine pads: twelve 10 cm x 10 cm for bleeding wounds

○ non-allergenic plain adhesive strips, without antiseptic on the dressing, for smaller cuts and grazes

○ steri-strips for holding deep cuts together in preparation for stitching

○ non-allergenic paper type tape, width 2.5 cm–5 cm, for attaching dressings

○ conforming bandages for attaching dressings in the absence of tape or in the case of extremely sensitive skin

○ six sterile eye pads, individually packed

- bandages

○ four triangular bandages, for slings, pads for bleeding or attaching dressings, splints, etc

○ 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

○ 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

○ any sun screen, with a sun protection factor of approximately 15+

○ single use sterile saline ampoules for the irrigation of eyes

○ creams and lotions, other than those in aqueous or gel form, are not recommended in the first aid treatment of wounds or burns

○ asthma equipment (which should be in all major portable kits, camping kits, sports kits, etc)

○ blue reliever puffer (e.g. Ventolin) that is in date

○ spacer device

○ alcohol wipes

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**

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<tr>
<td>Poisons Information Service</td>
<td>13 11 26</td>
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<tr>
<td>Ambulance</td>
<td>000</td>
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<tr>
<td>NURSE-ON-CALL</td>
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**EVALUATION**

This policy will be reviewed as part of the school’s three year review cycle.

This policy was last ratified by School Council on ...............
Appendix 1. First Aid Summary Sheet

*This sheet should be displayed near first aid kits, in first aid room/sick bay and on notice boards*

**General**

LOCATION ADDRESS: _____________________________________________

NEAREST CROSS STREET: __________________________________________

LOCATION OF FIRST AID ROOM: ___________________________________

**Victorian Poisons Information Line**
Available 24 hours a day, 7 days a week on 13 11 26 or call 000 in an event of an Emergency

**First Aid Officers** – *Completed Provide First Aid (HLTAID003)*

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**Warden/Incident Controllers**

Name: _______________________________ Work location: _______________________________

Name: _______________________________ Work location: _______________________________

Name: _______________________________ Work location: _______________________________

**Evacuation Assembly Point** (at least 200 metres away from work area)

**Nearest Medical Centre**

Telephone: _____________________________________________

Address: _____________________________________________

**Nearest Hospital**

Telephone: _____________________________________________

Address: _____________________________________________

**Emergency and Security Services Unit**
Available 24 hours a day, 7 days a week on 03 9589 6266