



# First Aid Guidelines

## Introduction

St Thomas the Apostle Primary School is committed to providing an effective system of first aid management to respond immediately and protect the health, safety and welfare of all school community members including students, parents, staff members, contractors & visitors.

To achieve this where practical, all staff members, as well as, nominated 'non-teaching' staff members will hold current First Aid accreditation:

- » Apply First Aid (Level 2) - HLTF301B
- » First Aid Management of Anaphylaxis - 22099VIC
- » Emergency Management of Asthma - 21886VIC

## Scope

These guidelines apply to all St Thomas the Apostle staff members and contractors whilst performing duties on behalf of the school.

## First Aid

First Aid and its administration is a vital part of the Pastoral Care that is required to be undertaken by the school. It is defined as providing assistance in the case of an accident or sudden illness when a medical practitioner is not available.

To fulfil the school's 'duty of care' St Thomas the Apostle Primary School will aim to:

- » Provide a facility for use in the administration of the First Aid
- » Provide guidelines for use in the administration of First Aid procedures
- » Communicate with parents/guardians where First Aid has been administered

In the case of serious injury or illness, no member of staff is required to treat or diagnose the condition of the injured person / student other than to carrying out appropriate First Aid within the bounds of their knowledge & training. Diagnosis is the responsibility of suitably trained individuals such as ambulance officers or medical practitioners who may be called to the scene.

**Those administering First Aid are to act only within the bounds of their training & knowledge.**

## School Responsibility

The 'duty of care' owed to students & others will be met by:

- » Ensuring, as far as is reasonably possible, that Health & Safety provisions are considered in all activities involving students;
- » Ensuring, as far as is reasonably possible, that staff members & non-teaching staff are qualified and available to assist with the administration of First Aid;
- » Ensuring that staff members, non-teaching staff, casual relief teachers and other relevant individuals are aware of students with identified anaphylaxis & the school's anaphylaxis policy & management plan;
- » Providing appropriate instruction & training to all staff members, non-teaching staff, casual relief teachers in anaphylaxis management bi-annually;
- » Regularly communicating to staff members, non-teaching staff, casual relief teachers and other relevant individuals, strategies for the prevention of anaphylactic, allergic events & emergency response requirements.



- » Documenting First Aid applied by staff members & non-teaching staff in the school's injury register;
- » Communicating with parents/guardians of any First Aid administered to their child, particularly that resulting in 'time-out'.
- » Providing a facility whereby First Aid can be administered both in the class and from a central location;
- » Providing qualified staff members & First Aid facilities on all excursions, camps, sporting events and other 'off-site' activities.

**Staff Member & Non-Teaching Staff are responsible for:**

- » Where required, maintaining current First Aid accreditation;
- » Where required administer First Aid within the bounds of their training & knowledge;
- » Participate in training and updates for specific treatment options including, anaphylaxis & asthma management bi-annually;
- » Maintain an up-to-date knowledge & understanding of the location and content of Anaphylaxis Management Plans for students under their care, as well as how to administer EPIPEN auto-injectors;

It should be noted that a teacher's duty is greater than that of the ordinary citizen in that a teacher is obliged to assist an injured student, while the ordinary citizen may choose to do nothing.

**Procedures & Responsibility for First Aid Personnel**

St Thomas the Apostle Primary School maintains First Aid facilities and an appropriate number of staff members, non-teaching staff, casual relief teachers with current First Aid accreditation to ensure effective administration where required.

The following consideration for the administration of First Aid will be implemented with all requirements communicated to staff members, non-teaching staff, casual relief teachers, students, contractors, visitors & other relevant individuals.

- » Injured or sick students should report to the First Aid Room (where possible);
- » A staff member will be rostered on duty in the First Aid Room during recess & lunchtime;
- » First Aid Room supervision will be the responsibility of the Leadership Team & Administrative Staff during class time;
- » At the end of the recess and lunch break, it is the responsibility of the assigned staff member in the First Aid Room to arrange for the continued care of the sick or injured children if they are unable to return to class;
- » If a student is sent home during recess or lunch time it is the responsibility of the staff member assigned First Aid duty to advise members of the Leadership Team Administrative Staff so that contact can be made with the appropriate class teacher;
- » Parents / guardians are informed of any First Aid treatment, either in writing or if more urgent, by phone or in person.
- » Staff members are to monitor First Aid Room supplies and report items that require replenishment to a member of the Leadership Team as soon as practical.



- » Sick or injured students must be supervised at all times, until First Aid is no longer required, or the sick or injured student is to be taken into the care of parents, guardians or medical personnel;
- » During class time a student should only remain in the First Aid Room when the nature of the injury/illness prevents them from taking part in normal class activities. Where this occurs they are to be monitored by a member of the Leadership Team of Administrative Staff;
- » During recess and lunch breaks students should only remain in the First Aid Room when the nature of the injury/illness prevents them from taking part in the remainder of the playtime.

Medication prescribed for a student by a doctor will only be administered by staff members in accordance with the School's Medication Procedure. Parents & guardians must make contact with the class teacher and complete the school's Medical Authorisation Form (also available from the office). It is preferred that this form is completed in consultation with the treating medical practitioner.

It is also preferable that parents or guardians come to the school to administer the medication themselves. All medication will be stored in the school First Aid Room.

When the First Aid requirements are beyond the level of training of the attending staff member, non-teaching staff member or casual relief teacher, a member of the leadership Team is to be notified and the parents or guardian contacted immediately.

### **Injury Notification**

When a student sustains an injury deemed to be more serious in nature the staff member or non-teaching staff member responsible for the treatment, must notify a member of the Leadership Team and the students' parents or guardian by phone. Where a casual relief teacher has been treating an injured student they must make immediate contact with a member of the Leadership Team to enable them to contact the student's parent or guardian where required.

Parents & guardians must be notified when their child sustains the following:

- » Blood noses
- » Any head injury
- » Sprains
- » Vomiting
- » Injuries that may require further attention.

In instances where a student is unable to resume normal school activities as a result of injury or illness then the student's parents or guardian must be contacted via phone, with the view of taking the student home. If parents cannot be notified then the emergency contact is to be informed.

### **Serious Injuries**

In the event of a serious accident or incident to a student at school the attending staff members primary 'duty of care' remains with the injured student at all times.

- » The attending staff member should remain with the student and either communicate with the front office by phone or by sending a message.
- » An immediate decision must be made as to whether or not an ambulance is required before contacting the parents or guardians.
- » For guidance on when an ambulance may be required (refer Requesting Emergency Services Section).



- » Where an injured student is required to travel by ambulance to hospital, and in the absence of a parent or guardian, a staff member familiar to the student will travel with them from the site for medical treatment.
- » At all times during treatment, infection control measures must be implemented eg.. gloves to be worn, isolate children if required. (Refer to the School's Blood Spills Guidelines)
- » All First Aid treatment is to be recorded in the school's Injury Register in accordance with legal requirements and Education Department guidelines. The school's insurer will be contacted and relevant notification forms completed in the event of a serious injury.
- » In the event of broken bones, loss of consciousness and lacerations, requiring stitches a representative of the school must contact Worksafe immediately on 132 360. (Refer to Notifiable Injuries Section)

### Requesting Emergency Services

In the event of a serious injury or situation where immediate medical treatment may be required an ambulance should be called without hesitation.

Events where an Ambulance may be called include:

- » An unconscious person – When a student or teacher does not wake or respond when shaken.
- » Breathing difficulty – especially if the student or teacher is unable to speak more than a few words, has blue lips or mouth.
- » Abdominal pain – that is severe and undiagnosed.
- » Haemorrhages – major uncontrolled bleeding.
- » Bleeding – that does not stop after at least 10 minutes of continuous pressure.
- » Burns – which are bigger than the size of a hand and/or cause severe pain that is not relieved with simple painkillers, or if the person has difficulty breathing.
- » Choking – especially if the student or teacher is unable to talk, cry or breathe.
- » Convulsions or fitting – or if they have no history of convulsions (for example epilepsy or brain injury).
- » Drowning, near drowning, or a diving accident.
- » Heart attack (suspected) – pain in the chest, especially if it is crushing or similar to indigestion and lasts more than five minutes. The pain may spread to arms and jaw.
- » Stroke (possible) – especially if the person experiences numbness, loss of function of hand, arm or leg, slurred speech, facial droop or severe abrupt headache.
- » Pain (severe) after a fall or injury – when the person is unable to sit up, stand or walk.
- » Diabetes – if the person is not fully awake or not behaving normally.
- » Allergic reaction – especially if the student or staff has difficulty breathing or loss of consciousness.



- » Electrical shock – of any kind.

### **Notifiable Injuries (Fatalities, Serious Injuries or Incidents)**

It is the school's legal responsibility to report fatalities, serious injuries or incidents which expose staff, students, contractors, visitors or any member of the school community to risks of Health & Safety to Worksafe immediately (132 360).

Worksafe must be notified of serious injuries to staff members, students, contractors, visitors or any member of the school community that occur on the school site or as a result of a school activity immediately. These include:

- » Death
- » Serious injury
  - Medical treatment within 48 hours of exposure to a substance
  - Immediate treatment as an inpatient in a hospital
  - Amputation
  - Serious head injuries
  - Serious eye injuries
  - Separation of skin from underlying tissue
  - Electric shock
  - Spinal injury
  - Loss of body function (broken bones)
  - Serious lacerations

Written notification must be provided to Worksafe within 48 hours by completing its [Incident Notification Form](#).

The school will also ensure that any site associated with a Notifiable Incident is preserved & cordoned off until an inspector arrives or as otherwise directed by Worksafe.

### **Medical Management Plans**

A register of children who suffer from conditions such as anaphylaxis, asthma, epilepsy or allergies is maintained with an accompanying Management Plan for each child. (Refer to the school's Anaphylaxis Management Policy & Guidelines).

Members of the Leadership Team will ensure that an Anaphylaxis Management Plan for each student diagnosed with anaphylaxis or allergies, is developed in consultation with the student's parents or guardians and their attending medical practitioner.

A Communication Plan will be developed to ensure that all staff members, non-teaching staff & casual relief teachers are aware of every student with anaphylaxis and severe allergies. All staff members & non-teaching staff and ensure that they understand the requirements of the individual Management Plans of each of the students under their care.



Members of the Leadership Team will ensure that Anaphylaxis Management Plans are current and displayed at various locations throughout the School for the sole purpose of informing all staff members of the allergy & to assist in an emergency response.

Members of the Leadership Team will ensure that care and diligence applies at other times while the student is under the care or supervision of the school in the following settings:

- » School excursions
- » School camps
- » School yard
- » Special event days conducted or organised by the school
- » Sport days.

St Thomas the Apostle Primary School maintains First Aid Kits containing the following as a minimum:

Number	Content	Use/Function	Check
1	Basic first aid notes	Guidance Information	
2	Disposable gloves	Infection control	
3	Resuscitation mask	Infection control	
4	Individually wrapped sterile adhesive dressings	Wound dressing	
5	Sterile eye pads (packet)	Emergency eye cover	
6	Sterile covering for serious wounds	Bleeding control, cover wound	
7	Triangular bandages	Slings, support, padding	
8	Safety pins	Secure bandage/sling	
9	Small sterile unmedicated wound dressings	Minor wound dressing	
10	Medium sterile unmedicated wound dressings	Moderate wound dressing	
11	Large sterile unmedicated wound dressings	Major wound dressing	
12	Non-allergenic tape	Secure dressings/equipment	
13	Rubber thread or crepe bandage	Secure dressings/equipment	
14	Scissors	Cutting dressing/clothing	
15	Tweezers	Remove foreign bodies, e.g. splinters	
16	Sterile saline solution	Cleaning wounds, emergency eye wash	
18	Plastic bags	Waste disposal	