

# *First Aid Policy*

## Avondale Primary School



### 1. INTRODUCTION

The school has procedures for supporting student health for students with identified health and will provide a basic first aid response as set out in the procedure below to ill or injured students due to **unforeseen circumstances** and requiring **emergency** assistance.

These procedures are communicated to all staff at the beginning of each year.

Student medical information is available to all staff and those students with serious ongoing medical conditions are identified by student medical information sheets including photos on display in the sickbay, on the first aid bags, in the staffroom and in CRT classroom information books.

### 2. IMPLEMENTATION

#### **First Aid Officers**

Consistent with the Department's First Aid Policy and Procedures, the 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 are recorded in the First Aid Administration folder. Level 2 trained staff are listed in the sickbay and on the OHS First Aid noticeboard in the staffroom.

**First Aid Officer Duties** The First Aid Officers undertake a coordinating role maintaining standard medical service provision, student medical records and parent notifications. 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.
- 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

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, an attempt will be made to contact the parents/guardians before calling for medical attention except in an extreme emergency.

In the cases of basic treatment at school for minor injuries such as grazes and minor knocks requiring application of icepacks for minimal duration, parents will not be contacted. All students visiting sickbay however, regardless of illness or injury will be recorded in the sickbay log.

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 requiring the student to be picked up by a parent or an ambulance called will be recorded on the Department's injury management system on CASES21.

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A record of first aid treatment (sickbay log) will be kept in the sick bay and information recorded for all students treated in the sick bay. In the case of a minor injury or knock to the head where the child remains at school a slip will be filled in and sent with the student for notification to the teacher, indicating date and time of attendance in the sick bay, the treatment given and the circumstances regarding the injury. The parent/guardian will be contacted by phone and provided with all the known information relating to the injury, treatment and condition of the child.

It is the policy of the school that all injuries to the head regardless of severity are reported to parents/emergency contacts by phone as soon as practicable.

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 basic first aid supplies will be available for staff on yard duty in the yard duty bags. These kits will contain:

- a pair of single use plastic gloves
- gauze and band-aids
- record book & pen
- First Aid passes
- Generic junior & adult epipen
- Asthma inhaler & disposable spacer

Basic first aid kits are also located throughout the school for quick access should the need arise including the portable classroom area and adjacent classroom building, canteen and gymnasium.

### **Blood spills equipment & procedure**

Equipment to deal with blood spills is kept in the locked cupboard in the sickbay and the correct procedures for cleaning of such spills are displayed on the wall as per OHS and DET requirements.

### **Care Arrangements for Ill Students**

All staff at Avondale Primary School will observe their duty of care to students by providing first aid treatment within the limits of their skill, expertise, training and responsibilities.

**Avondale** Primary School will ensure that sufficient staff are trained in first aid under the provisions of the *Occupational Health & Safety Act 2004* and the Department's First Aid and Infection Control advice, see: [Department resources](#). 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.

Any students in the sickbay will be supervised by a staff member at all times

Staff will communicate students' health problems to their parents/carers as necessary.

### **General Care Arrangements**

If a student feels unwell they will be sent to the sick bay where staff will:

- assess a range of signs and symptoms
- take action based on the signs and symptoms
- treat minor injuries only. For more serious injuries a level 2 first aid trained staff member will provide assistance.
- immediately seek emergency assistance where necessary. All teachers have the responsibility and 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.
- contact parents to obtain permission to administer medications provided by parents according to indicated dosages.
- contact parents/carers to request that they take their children home where necessary.

Any student with injuries involving blood must have the wound covered at all times. If blood has been spilt on clothing, students will be provided spare clothing items if possible or parents contacted to arrange a change of clothes.

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### 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. This plan is displayed in the sickbay and excursion first aid kits. 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 the steps outlined below should be taken immediately.

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

##### **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.  
Contact Parent/Guardian or emergency contact as soon as possible.

#### First Aid Kit Contents

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

- an up-to-date first aid book – examples include:
  - First aid: Responding to Emergencies, Australian Red Cross
  - Australian First Aid, St John Ambulance Australia (current edition)
  - Staying Alive, St John Ambulance Australia, (current edition)
- wound cleaning equipment
  - gauze swabs: 7.5 cm x 7.5 cm divided into small individual packets of five
  - sterile saline ampoules: 15 ml and 12 x 30 ml
  - disposable towels for cleaning dirt from skin surrounding a wound

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- wound dressing equipment
  - sterile, non-adhesive dressings, 5 cm x 5 cm, 10 cm x 10 cm for larger wounds
  - combine pads: 10 cm x 10 cm for bleeding wounds
  - non-allergenic plain adhesive strips, without antiseptic on the dressing, for smaller cuts and grazes
  - 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
  - sterile eye pads, individually packed
- bandages
  - triangular bandages, for slings, pads for bleeding or attaching dressings, splints, etc
  - conforming bandages: 2.5 cm, 5 cm, 7.5 cm and 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 used at Avondale Primary School
  - any sun screen, with a sun protection factor of approximately 15+
  - single use sterile saline ampoules for the irrigation of eyes
  - creams and lotions are not used at Avondale Primary in the first aid treatment of wounds or burns
  - asthma equipment (reliever inhalers (in date) and one off disposable spacers are part all major portable kits, camping kits, sports kits, etc)
  - alcohol wipes

### Other equipment includes:

- single use gloves – these are essential for all kits and are 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
- disposable hand towels
- ice gel packs, kept in the refrigerator, for sprains, strains and bruises and disposable ice packs for portable kits
- adhesive sanitary pads, as a backup for personal supplies
- blanket and sheet, including a thermal accident blanket for portable kits
- germicidal soap and nail brush for hand-cleaning only
- 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
- ice cream containers, buckets or emesis bags for vomit.

### Emergency Telephone Numbers displayed in main office, OHS noticeboard and sickbay

This policy will be reviewed annually, in line with DET expectations and guidelines.