

CARE FOR ILL STUDENTS 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.

AIMS

- administer first aid to children when in need in a competent and timely manner.
- communicate children's health problems to parents when considered necessary.
- provide supplies and facilities to cater for the administering of first aid.
- maintain a sufficient number of staff members trained with a level 2 first aid certificate.

IMPLEMENTATION

- A sufficient number of staff (including at least 1 administration staff member) to be trained to a level 2 first aid certificate, and with up-to-date CPR qualifications.
- A first aid area will be available for use at all times. A comprehensive supply of basic first aid materials will also be available.
- A supply of medication for teachers will be available in the principal's office at all times.
- All injuries or illnesses that occur during class time are the major responsibility of that classroom teacher with support from neighboring teacher.
- A confidential up-to-date register will be located in the administration office listing all injuries or illnesses experienced by children that required first aid.
- All staff will be provided with basic first aid management skills, including blood spills, and a supply of protective disposable gloves will be available for use by staff.
- **No medication including headache tablets will be administered to children without the express permission of parents or guardians.**
- Any injuries to a child's head, face, neck or back must be reported to parents/guardian.
- Any student who is collected from school by parents/guardians as a result of an injury, or who is administered treatment by a doctor/hospital or ambulance officer as a result of an injury, or has an injury to the head, face, neck or back, or where a teacher considers the injury to be greater than "minor" will be reported on Department of Education Accident/Injury form LE375, and entered onto CASES.
- Parents of ill children will be contacted to take the children home.
- All teachers have the authority to call an ambulance immediately in an emergency if first to the scene. If the situation and time permit, a teacher may confer with others before deciding on an appropriate course of action.
- All school camps will have at least 1 Level 2 first aid trained staff member at all times.

- A comprehensive first aid kit will accompany all camps, along with a mobile phone.
- All children attending camps or excursions will have provided a signed medical form providing medical detail and giving teachers permission to contact a doctor or ambulance should instances arise where their child requires treatment. Copies of the signed medical forms to be taken on camps and excursions.
- All children, especially those with a documented anaphylaxis management plan, will have access to their prescribed medications at all times.

ANAPHALYXIS

In the case of any child known to be anaphylactic and in need of first aid the following will be applied:

- In the case of mild to moderate allergic reactions such as swelling of lips face, tingling mouth etc.
 - Stay with the child and call for help
 - Locate adrenaline auto injector
 - Phone family / emergency contacts
- In the case of a more severe allergic reaction (anaphylaxis) such as difficulty breathing, swelling tongue, persistent dizziness or collapsing
 - Lay person flat
 - If unconscious lay in recovery position, if breathing is difficult allow them to sit
 - Administer epipen or auto injector
 - Phone Ambulance 000
 - Phone family/emergency contact
 - Administer further adrenalin doses if required after 5 minutes

See Toolangi Primary School Anaphylaxis for more detail.

This policy to be revised during the life of the Schools Strategic Plan; 2013 - 2017

Reference: <http://www.education.vic.gov.au/school/principals/spag/health/Pages/supportplanning.aspx>