

Rationale

All children have the right to feel safe and know that they will be attended to with due care when in need of first aid. It is a part of the teacher's duty of care to provide first aid to students in need. St. Mary's provides First Aid training to all staff and ensures that teachers are aware of the limits to the aid that they may provide. First Aid training includes a first aid response to anaphylaxis in accordance with the school's anaphylaxis management plan and as required by the Education and Training Reform Act 2006 (Vic) (see Anaphylaxis Policy).

Staff have a positive or proactive (duty of care) to protect a student from reasonably foreseeable harm while on duty. At all times when administering first aid, it should be done within the limits of competency and skills and with reasonable care. When there is a serious injury or illness, the staff are obliged to carry out appropriate first aid but not diagnose or treat the person. This is the competency of medical practitioners or medical emergency personnel.

The St. Mary's First Aid Policy outlines the processes for the competent and timely administration of first aid to children.

Implementation

Staff Training

All staff at St. Mary's receive Level 2 First Aid Certificate training every three years. All staff complete Cardio Pulmonary Resuscitation (CPR) and Asthma Treatment qualifications annually. All staff to be trained in Anaphylaxis qualifications annually, with a refresher facilitated by a trained staff member also annually. A register of staff training will be kept and updated each year. 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, allergies and anaphylaxis medication will also be given at that time or as required. All staff are made aware of students with specific medical conditions.

Facilities and Supplies

Two Sick Bays are available for use for the treatment of first aid: the office sick bay and an additional staff room sick bay for use during lunch and recess times. A comprehensive supply of basic first aid materials will be stored in both Sick Bays. When students are in the sick bay they must be supervised at all times. First aid kits should contain items recommended in the Victorian Government's School Policy and Advisory Guide and are appropriately marked and readily accessible. The kits are to be regularly inspected and kept adequately stocked by a designated staff member. The delegated staff member is allocated responsibility for the overall organisation of all first aid, sick-bay supervision and the maintenance of the first aid kit/sick bays. Special First aid excursion kits are taken by all groups that leave the school on excursions and camps. All children, especially those with a documented asthma management plan, will have access to Ventolin and a spacer at all times. Each classroom is stocked with a basic First Aid Kit.

Camps and Excursions

All school camps will have first aid trained staff members in attendance at all times. A comprehensive first aid kit will accompany all camps and excursions, along with a mobile phone. Teachers organising the excursion are responsible for taking the kits with them. Children with specific asthma or anaphylaxis plans need to have their plans and medications taken on the excursion by the teacher responsible for the excursion. 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, as well as kept at school.

Injury Management & Response

Managing Minor Injuries

Minor injuries that occur on the playground during lunch or recess time will be treated by a staff members on duty. Staff on playground duty carry a bum bag with basic first aid supplies for the treatment of injuries and wear a fluoro coloured vest for easy identification by students. Minor injuries that occur in the classroom (e.g. injuries requiring a band aid) will be treated by the classroom teacher, or otherwise referred to the office sick bay for treatment by administration staff.

A register of any injury referred to the staff room or office sick bays is to be recorded on the sick bay register and a copy sent home to parents, recording the following:

- Name of student
- time of injury
- nature of injury
- known cause
- Name of staff member who provided first aid

Blood Spills

Any blood is treated by the school as infectious. Staff assisting a bleeding person must first put on disposable gloves. Arms or other body parts that have been in contact with blood should be washed with soap and water. Open cuts or weeping sores on hands or lower arms should always be covered. Staff members with such cuts or sores should not treat students at all.

Managing Serious Injuries

Serious injuries that occur during class time will be referred to the administration staff. Serious injuries that occur on the playground during recess or lunch time will be referred to the staff room, in order to receive first aid in the staff room sick bay. All staff are expected to readily assist when required if a child presents to the staffroom for treatment.

Parents/guardians need to be informed as soon as possible if there is an emergency concerning their child and must be informed of any first aid treatment dispensed. Any injuries to a child's head, neck or back must be reported to their parents/guardian and to the Principal/Deputy Principal.

When a serious accident occurs, the principal is to contact and report the matter to Catholic Education Melbourne and the school's insurers as soon as possible.

Serious Injuries - Ambulance

The school reserves the right to call an ambulance in the event of a serious injury. All teachers 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. If a member of staff suspects a severe injury – Extreme blood loss, head trauma, protruding bone, unconsciousness or a deterioration in consciousness then an ambulance is to be called immediately

Illness Management & Response

In the interest of the health and wellbeing of all students and staff, parents are requested not to send their child to school if they are sick. Parents/Guardians of sick children will be contacted to take the children home. Illnesses that occur during class time will be referred to the administration staff. Illnesses that occur on the playground during recess or lunch time will be referred to the staff room. For further details on the management of specific medical conditions, see Appendix 1.

Medical Management Plans

Students with medication requirements must have a written, medical management plan. The plan, prepared by the doctor and parents and guardians, should include: brief relevant information concerning the medical condition of the student that will be of assistance to the school in its care of the student; the type of treatment and the frequency of administering treatment while at school; what action to take if the student's health deteriorates; and the name, address and telephone numbers for emergency doctor and emergency family contact. This includes students at risk of an anaphylactic reaction, and with other serious medical conditions.

Parents have an obligation to inform the school of any medical conditions. At the commencement of each year, requests for updated first aid information will be sent home including requests for any asthma, allergies and anaphylaxis management plans, high priority medical forms. Up to date management plans and any related medications, such as epipens must be provided upon request.

Reminders to parents of the policies and practices used by the school to manage first aid, illnesses and medications will be included annually in the school newsletter.

Medical plans and relevant medications are stored in the sick bay, clearly labelled with photo identification and colour coded. Visual information of students with anaphylaxis and asthma are also displayed in each room in the school. All Casual Relief Teachers are informed of students with asthma or anaphylaxis, as part of their induction and in the CRT handbook.

Medication and Administration

Medications will only be dispensed to children by the school if written permission is provided to the school office, clearly detailing dates, times and dosage and signed by the parents. No medication including headache tablets will be administered to children without the express written permission of parents or guardians. When necessary, the parents and guardians may be requested to obtain written directions from the doctor as to the medication needs of the student while at school. Medication must be provided by parents/guardians in a safe, secure container (e.g. an envelope containing loose tablets is not considered to be a safe and secure container). The original foil pack or part thereof, or the original dispensing container, should be considered to be more secure and reliable as to its contents). The prescription medicine should be that which has been prescribed for the child (and not for another member of the family). It should not be out of date and the amount to be dispensed needs to be in accord with directions on the container.

All medications will be administered by office staff only. Analgesics should only be given with the permission of parents and guardians and will be issued by office staff who will maintain a record to monitor student intake. Such permission must be written and is stored in the first aid room.

Medicines, tablets, topical applications, appliances, etc. will be kept in a designated and securely locked area in the office and placed in a locked container or cupboard.

At the beginning of each school year, the parents and guardians will be notified as to procedures that will be followed. Parents of new enrolments receive details about medicine, first aid and emergency procedures as part of the enrolment information package.

Infectious Diseases

Parents will be informed by email if there is an outbreak of infectious diseases. In the event of an infectious disease outbreak, unvaccinated children and children whose immunisation status is unknown, may be excluded from attending school until the risk of infection has passed. Under the Public Health and Wellbeing Regulations 2009 (Vic), the school has obligations to ensure that a student infected with, or who has been in contact with a person infected with, specific infectious diseases, does not attend the school for the period specified in the Regulations.

It is a requirement that a parent or guardian inform the principal if their child is infected with certain diseases or has been in contact with an infected person. Parents and guardians will be reminded from time-to-time through the newsletter of the need for exclusion of certain sick children and the need to inform school authorities concerning the disease.

Examples of infectious diseases that lead to exclusion include: Chickenpox, Conjunctivitis, Diphtheria, Giardiasis (diarrhoea), Hepatitis, Impetigo, Leprosy, Measles, Meningitis Bacteria, Meningococcal infection, Mumps, Pediculosis (head lice), Pertussis (whooping cough), Poliomyelitis, Salmonella Shigella, Ringworm, Rotavirus, Rubella, Scabies, Shigella (diarrhoea), Streptococcal infection, Tuberculosis, Typhoid Fever and Paratyphoid

Furthermore, under the Regulations, the Department of Health may direct the Principal to ensure that a child enrolled at the school who is not immunised against a vaccine-preventable disease, not attend the school until the department directs that such attendance can be resumed.

Additionally, if the Principal believes, on reasonable grounds that a student is suffering from Pertussis, Poliomyelitis, Measles, Mumps, Rubella or Meningococcal C, they must inform the parent or guardian of the child and the Secretary of the Department of Health & Human Services within 24 hours of reaching that belief. The Disability Discrimination Act 1992 (Cth), Section 48 dealing with infectious disease states that it does not render it unlawful for a person to discriminate against another person on the ground of the other person's disability if it is 'an infectious disease; and such discrimination is reasonably necessary to protect public health'

Personal Hygiene

St. Mary's Primary school supports students to manage their own personal hygiene routines and actively encourages students to undertake regular:

- hand washing, particularly after using the toilet
- face washing, especially after eating
- blowing and wiping their noses using tissues available in all classrooms
- menstruation management for those who need reassurance, verbal support or assistance
- Body odour management, particularly for senior students, encouraging them to keep a deodorant in their school bags

St. Mary's School provides handwash soap in student toilet areas and classrooms, to assist with the prevention and control of infection. Soap is preferred over alcohol-based hand sanitisers. Where appropriate, the school may choose to use a Hygiene Care and Learning Plan to maximise opportunities for individual students to manage hygiene tasks.

Open Wounds

Any student with moist skin lesions, or with abrasions that are weeping or discharging and cannot be covered, should, as a precaution, remain away from school until the wound has healed or can be covered.

Head Lice (Pediculosis) Control

The school will take appropriate steps to prevent the occurrence of head lice infestation among their students and to respond to such infestations if they occur. Parents and guardians will be made aware of their responsibility to regularly check their own children for infestation. If head lice are found, parents and guardians should immediately seek treatment and notify the principal.

School Entry Immunisation Status Certificate

Under the Public Health and Wellbeing Act 2008 (Vic.), St. Mary's is required to request, collect and record information on the immunisation status of any new students prior to enrolment. Parents and guardians are obliged to provide to the school, prior to the child's commencement, an immunisation status certificate in respect of each vaccine-preventable disease. The school's enrolment form clearly states the requirement for parents to provide an immunisation status certificate for each child. The school collects and records the immunisation status of each student, which is retrieved in the event of any outbreak. Every currently enrolled student's immunisation records must be kept up to date. The parents of children who have not been immunised must still provide a certificate. Parents will automatically receive a history statement from the Australian Childhood Immunisation Register (ACIR) when their child turns five years old however these can be requested from the ACIR at any time.

Related Policies

The following St. Mary's School policies provide further related information:
Anaphylaxis Policy; Asthma Policy; Allergies Policy; Sunsmart Policy

Evaluation

This policy will be reviewed annually in alignment with current Health and Education Department advice.