



First Aid Policy

Purpose

At any one time, a student can have a health condition or care need that could impact on their attendance and participation within school. This can require short or long-term first aid planning, supervision for safety, routine health and personal care support and occasionally complex medical care needs. Sydney Road Community School (SRCS) has a responsibility to provide equitable access to education and respond to diverse student needs, including health care needs.

This policy has been developed to assist supporting student health within a school environment in a proactive manner.

Scope

Sydney Road Community School comprises the main campus in Sydney Road Brunswick, the Brunswick Learning Space in Albion Street Brunswick and the Coburg Teaching Unit in Urquart Street Coburg

First aid for anaphylaxis and asthma are provided for in our school's:

- [Anaphylaxis Policy](#)
- [Asthma Policy](#)

This policy does not include information on first aid requirements for COVID-19. Our school follows the Department's operational guidance for first aid management relating to COVID-19.

POLICY

From time to time Sydney Road Community School staff might need to administer first aid to students at school or school activities.

Parents/carers should be aware that the goal of first aid is not to diagnose or treat a condition.

Guidelines

Overview

- All teachers and Principals must be familiar with the school's first aid procedures.
- All teachers and Principals must observe their duty of care to students by providing first aid treatment within the limits of their skill, expertise, training and responsibilities. (This means when at school or during approved school activities.)

The provision of first aid is a procedure of Sydney Road Community School in providing a safe and healthy workplace for staff, students and visitors. To achieve this, the school undertakes the following measures:

- allocation of appropriate support to the provision of First Aid
- provision of first aid to injured/ill staff members, students and visitors by a qualified person, but not beyond that for which the First Aid Officer is qualified and competent
- seeing that first aid is administered as soon as reasonably possible following an injury or illness and in accordance with the training undertaken by a qualified First Aid Officer
- reducing wherever possible the severity of the injury/illness by providing appropriate first aid treatment
- appropriately recording accidents/incidents and maintaining appropriate statistics on accidents/incidents for each campus and at a national level
- appropriately investigating accidents/incidents subsequent to them occurring; informing and educating staff, students and visitors of their responsibility in relation to first aid
- regularly reviewing the first aid policy and procedures.



Sydney Road Community School aspires to ensure that all staff, students, contractors and visitors act responsibly and comply with statutory requirements and all safety policies, standards and guidelines.

IMPLEMENTATION

Staffing

The principal will ensure that Sydney Road Community School has sufficient staff with the appropriate levels of first aid training to meet the first aid needs of the school community.

Sydney Road Community School's trained first aid officers are:

Staff member	Date qualified	Date due for update
De'Ann Tierney	31/3/2021	31/3/2024
Duane Detering	05/05/2021	05/05/2024
Paul Shelton	05/03/2021	05/03/2024
Shelly Willoughby	05/05/2021	05/05/2024
Ellen Hewitt	09/12/2021	09/12/2024
Nick Purer	16/09/2021	16/09/2024
Mani Soni	16/09/2021	16/09/2024
Ben Kowski	25/07/2019	25/07/2022

First aid kits

Sydney Road Community School will maintain:

- A major first aid kit which will be stored in the first aid cupboard at each campus.
- 5 additional portable first aid kits at main campus which may be used for excursions, camps, or yard duty. The portable first aid kits will be stored in the first aid cupboard, the art room store room, the science room, the portable kitchen, the church, the office
- 5 "bum bags" at main campus for use on yard duty etc,

De'Ann Tierney will be responsible for maintaining all first aid kits.

Care for ill students

Students who are unwell should not attend school.

If a student becomes unwell during the school day they may be directed to a Contact Teacher who will seek a first aid officer or wellbeing staff member to monitor the student. Depending on the nature of their symptoms, staff may contact parents/carers or an emergency contact person to ask them to collect the student.

First aid management

If there is a situation or incident which occurs at school or a school activity which requires first aid to be administered to a student:

- Staff who have been trained in first aid will administer first aid in accordance with their training. In an emergency situation, other staff may assist in the administration of first aid within their level of competence.
- In a medical emergency, staff may take emergency action and do not need to obtain parent/carer consent to do so. Staff may contact Triple Zero "000" for emergency medical services at any time.



- Staff may also contact NURSE-ON-CALL (on 1300 60 60 24) in an emergency. NURSE-ON-CALL provides immediate, expert health advice from a registered nurse and is available 24 hours a day, 7 days a week.
- If first aid is administered for a minor injury or condition, Sydney Road Community School will notify parents/carers by phone and follow up with an email or text.
- If first aid is administered for a serious injury or condition, or in an emergency situation, school staff will attempt to contact parents/carers or emergency contacts as soon as reasonably practical.
- If staff providing first aid determine that an emergency response is not required but that medical advice is needed, school staff will ask parents/carers, or an emergency contact person, to collect the student and recommend that advice is sought from a medical practitioner.
- Whenever first aid treatment has been administered to a student Sydney Road Community School will:
 - record the provision of care on eduSafe Plus. If the care is provided following a recorded incident, the details are recorded through the eduSafe Plus Incident form. For all other presentations, the eduSafe Plus Sick Bay form is used.
 - if care was provided in response to a medical emergency or reportable incident, follow the Department's [Reporting and Managing School Incidents Policy](#), including reporting the incident to the Department's Incident Support and Operations Centre on 1800 126 126 where required to under that policy.

In accordance with guidance from the Department of Education and Training, analgesics, including paracetamol and aspirin, will not be stored at school or provided as a standard first aid treatment. This is because they can mask signs of serious illness or injury. For further information refer to the Department's Policy and Advisory Library: [Medication](#)

Note: Where possible, first aid should 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.

Communication

This policy will be communicated to our school community in the following ways:

- Available publicly on our school's website
- Included in staff induction processes and staff training
- Discussed at staff briefings/meetings as required
- Reminders in our school newsletter
- Hard copy available from school administration upon request

Further information and resources

This policy should be read in conjunction with the following Department policies and guidelines:

- [First aid for Students and Staff](#)
- [Health Care Needs](#)
- [Infectious Diseases](#)
- [Blood Spills and Open Wounds](#)
- [Medication](#)
- [Syringe Disposals and Injuries](#)

Standards

This First Aid policy and procedure has been developed to meet the following statutory requirements:
Victoria: Occupational Health and Safety Act 1985 Code of Practice First Aid in the Workplace (1995)

Related Policy Documents

[Asthma Policy](#)

[Anaphylaxis policy](#)

[Health care needs policy](#)

[Administration of Medication policy](#)

[Duty of care and supervision policy](#)



Approval and Review Details

Date Implemented	2014
Author/s	Clea Westenberg
Approved By	<i>Ralph Gotlib Principal</i>
Review Date	This policy was last updated in March 2022 and is scheduled for review in March 2025.
Responsible for Review	Dawn Hinrichsen on behalf of First aid coordinator and School Improvement Team



Appendix

1. Definitions

1.1 Executive Staff:

The term "Executive Staff" includes all members of the Executive Team as defined in the relevant University Delegations.

1.2 First Aid:

First aid is the initial care of the ill or injured. The main aim of first aid is the provision of emergency treatment for persons suffering illness or injury at work.

1.3 First Aid Officer:

A First Aid Officer is a person holding a current first aid qualification as specified in the relevant state/territory standard. A first aid officer at ACU is appointed to the role of First Aid Officer by the University.

1.4 Incident:

For the purpose of this policy incident shall refer to an "event" which may not necessarily result in an injury, but has the potential to result in an injury.

1.5 Injury:

Essentially an injury in the context of this policy will mean one that arises out of, or in the course of employment. [N.B. Consistent with the definition of "injury" as outlined in the Workplace Rehabilitation Policy/Procedures, the term "injury" shall be defined in accordance with the definition that applies in the state/territory jurisdiction in which the staff member's "normal" place of employment is situated allowing for jurisdictional variances].

1.6 Nominated Supervisor:

A nominated supervisor is a member of staff who is formally assigned the responsibility of supervising one or more staff or a group of staff. At Australian Catholic University, a nominated supervisor may be the head of either an organisational unit or a functional unit.

2. Roles and Responsibilities

For effective first aid to occur it is necessary for all parties to have an understanding of their role and responsibilities within the overall first aid process.

2.1 The school:

Sydney Road Community School has a duty of care to ensure the health and safety of staff, students and visitors.

2.2 First Aid Officer:

The First Aid Officer is responsible for:

- maintaining a current first aid qualification;
- administering first aid in accordance with her/his training;
- being available to deliver first aid treatment during working hours;
- advising Properties and Facilities of required first aid stock for first aid kits (outsourcing of this function is the responsibility of Properties and Facilities Management);
- following the required first aid recording process;
- ensuring that all appropriate forms are completed (Appendix 1 - First Aid Accident/Incident Report);
- maintaining and respecting privacy and observing confidentiality in all cases; and,
- observing safe working practices in infection control.

On no occasion will the First Aid Officer administer first aid assistance beyond that for which they are qualified and have maintained competency. A First Aid Officer must inform the local Facilities Manager, of periods when they will not be able to perform first aid duties in their role as a First Aid Officer.

2.3 Properties and Facilities:

Properties and Facilities has responsibility for:

- advising the Principal/First Aid Officer of the provisions required in relation to first aid, and associated resource requirements for the school;
- advising the school community of the current First Aid officers;
- arranging appropriate training for first aid officers as required by legislation;
- advising admin of the appointment of certified First Aid Officers;
- informing contractors on the provision of first aid
- investigating and reporting an accident/incident which is reported by a First Aid Officer;
- advising the Principal/First Aid Officer of the need or otherwise for an allocation of an appropriate facility to be designated as a first aid room, and where provided overseeing its operation;
- ensuring appropriate signage of a first aid room in accordance with relevant Australian Standards for Safety Signs within the Occupational Environment;
- maintenance and allocation of appropriate first aid equipment;
- ensuring appropriate access for emergency vehicles onto the campus;
- ensuring switchboard/reception staff are informed on how to respond in the case of a first aid emergency;
- ensuring contracted security staff have the required current first aid qualification and are fully informed and knowledgeable about the campus first aid and emergency procedures ;
- maintaining the Register of Injuries and ensuring that a copy of each accident/incident report is forwarded to admin

3. Appointment of First Aid Officers

The appropriate number of trained and appointed first aid officers is informed by the specific factors outlined below;

- size and layout of the school;
- the number, distribution and needs of staff;
- nature and hazards of the work;
- statistical information on accidents, illnesses or incidents; and,
- distance of the campus to the nearest available and appropriate medical service or work health service.

4. Training

Sydney Road Community School shall ensure staff assigned to the role of First Aid Officer are trained as required in each state/territory standard. Properties and Facilities shall bear the cost of such training as deemed reasonable for the campus.

First Aid Officers will be provided with appropriate time from their normal duties to enable them to undertake required first aid training. First Aid Officers must advise their nominated supervisor of training dates and requirements.

First Aid training will be conducted through the engagement of an appropriate training provider.

5. First Aid Kit

The school will ensure the provisions of first aid kits in accordance with each state/territory standard and the risk management assessment undertaken at the campus level.



Portable first aid kits must also be available for use in off campus activities of the University, and shall be monitored and maintained by Properties and Facilities.

First Aid kits do not contain medication or pharmaceutical drugs.

6. First Aid Room

The provision of a first aid room shall be in accordance with the relevant state/territory standard and campus risk assessment. The first aid officer is responsible for equipping and maintaining the room.

The first aid room shall be positioned close to motor vehicle access, and be signed in accordance with the Australian Standard Safety Signs for the Occupational Environment.

In all cases a notice shall be attached to outside and inside the door of a first aid room which clearly lists the following:

- the name, telephone, room location of the local Facilities Manager;
- the name, telephone, room location of all first aid officers;
- the contact number of security;
- the emergency contact number for the campus; and,
- an after hours emergency contact number.

7. Recording of Accidents/Incidents

Any work related accident, illness, work injury or incident occurring on the school premises and requiring the administration of first aid must be recorded on a First Aid Accident/Incident Report form (see Appendix 1).

A Register of Injuries must be kept for at least five years after the date of the last entry made in it. Properties and Facilities shall maintain the Register of Injuries.

8. Indemnification

Members of staff who hold a current first aid qualification and who are assigned by the University as a First Aid officer and who render first aid assistance during the course of their first aid duties as empowered by this policy shall be indemnified by the University in respect of legal actions taken against them, provided such assistance or lack of assistance is not proven to be the result of willful negligence.

9. After Hours First Aid

Properties and Facilities must ensure that the allocated security officers are appropriately trained in first aid and knowledgeable of the University first aid procedures.

10. Infectious Disease and First Aid

The University has an obligation to implement practices, which minimize the risk of workplace transmission of infectious diseases. (see Appendix 3)

11. Ambulance Use

An ambulance service is to be requested via the campus switchboard, or local Facilities Manager/Security. In the event that an ambulance is required, staff must dial '9' to arrange for one. If they are unable to reach the campus switchboard, or local Facilities Manager/Security, they are authorised to dial "000" to reach the relevant emergency service. The process for requesting an ambulance during an emergency is outlined in the University's Critical Incident Management Policy.

12. Review

The University will develop a process for reviewing the effectiveness of this policy. Where applicable, the review will take account of necessary changes to other relevant University policies and procedures. Any staff member or student wishing to suggest improvements to the First Aid Policy is invited to forward her/his suggestions to the Chair, National WH&S Strategic Management Committee.

13. Further Assistance

Any staff member or student who requires assistance in understanding the First Aid Policy should first consult their nominated supervisor. Should further advice be needed, they should contact the local Facilities Manager responsible for the campus.

14. Appendix 1

Please refer to [Appendix 1: ACCIDENT AND INCIDENT REPORT](#)

15. Appendix 2

Please refer to [Appendix 2: WORKPLACE ACCIDENT/INCIDENT INVESTIGATION FORM](#)

16. Appendix 3

Procedures for Recommended Safe Control of Infectious Diseases

This appendix provides guidance concerning first aid practices, which should be used to manage infection control. Not all components of these appendices are applicable in the case of ACU, however, the information is provided to inform people in relation to such practices as:

- standard precautions;
- hygiene;
- management of blood or body substance;
- spillage;
- waste management;
- sharps;
- cleaning, disinfecting and sterilising; and
- management of blood or body substance exposures and skin penetrating injuries.

1. Standard Precautions

Standard precautions are work practices which assume that all blood and body substances are potentially infectious. Standard precautions which should be used as a first line approach to infection include:

- good hygiene practices;
- use of personal protective equipment; and,
- appropriate handling and disposal of sharps and other contaminated or infectious waste.

2. Hygiene

Hand washing is an important measure in preventing the transmission of infection. Adequate hand washing facilities should be provided at the workplace. Hands should be washed using soap and water before and after contact with an ill or injured person. They should also be washed before and after contact with blood, body substances or contaminated items and after removal of protective gloves. An alcoholic chlorhexidine hand wash (available from pharmacies) or equivalent should be used in emergency or field situations, where hand washing facilities are limited or not available. Waterproof dressings should be provided to allow first aid personnel to cover cuts or abrasions. This reduces the risk of an injured person's blood or body substances coming into contact with a first aid person's broken skin. First aid personnel who have skin problems, such as dermatitis, and who are exposed to blood and body substances, should seek medical advice regarding the risk of infection. First aid personnel and workers should not eat, drink or smoke when working in an area where blood or body substances may be present.

3. Management of a Blood or Body Substance Spillage

Spills should be attended to as soon as possible. Protective gloves should be worn. Absorbent material, such as paper towels should be used to absorb the bulk of the blood or body substance. These contaminated materials should then be disposed of in a leak proof, sealed waste bag. After



this, the area should be cleaned with warm water and detergent and then disinfected. A suitable disinfectant is a freshly prepared 1:10 dilution (1 part disinfectant to 10 parts water). Mops and buckets should be rinsed with warm water and detergent and stored dry. After cleaning the contaminated area and cleaning equipment, reusable (where used) gloves and other protective clothing should be removed and disinfected. Hands should be washed after items have been disinfected and gloves have been removed. If a spill occurs on carpet, as much of the spill should be mopped up as possible and the area then cleaned with a detergent. Where there is significant spillage, arrangements should be made to have the carpet shampooed with an industrial carpet cleaner. Large spills, such as may occur after a road accident, may be safely hosed down with water, by workers wearing protective clothing. A "spills kit" should be available where there is a risk of blood or body substance spills. A "spills kit" could contain:

- PVC, household rubber or disposable latex gloves;
- cleaning agents;
- disposable absorbent material; and
- a leak proof bag.

4. Management of Blood or Body Substance Exposures and Skin Penetrating Injuries

Procedures should be in place for the management of blood and body substance exposures, and skin penetrating injuries. Procedures should address:

4.1 First aid treatment where exposure to blood or body substance has occurred

If a worker has an exposure to blood or body substances, the following action should be taken:

- a. wash away the blood or body substance with soap and water. If water is not available, then use a 60-90% alcohol based hand rinse or foam;
- b. if the eyes are contaminated, rinse eyes while open with tap water or saline; and
- c. if blood gets into the mouth, spit it out and then repeatedly rinse with water.

4.2 Follow up action where exposure to blood and body substance has occurred

The worker should be referred for medical assessment, particularly where there has been a significant exposure or a skin penetrating injury. The doctor can then assess the degree of exposure, and arrange blood tests and immunisation where appropriate. Access to professional counselling should also be available, where appropriate.

4.3 Accident reporting, recording and investigation of exposure to blood or body substances

Reports of all exposures should be documented and kept at the workplace.

4.4 Confidentiality

Records relating to a worker's blood or body substance exposure and subsequent treatment should be kept confidential.

5. Waste Management

Contaminated waste should be placed in a leak proof bag or container and sealed. The bag or container should not be overfilled. All waste should be handled with care to avoid contact with blood and body substances. Gloves should be worn when handling contaminated waste bags and containers. Where significant amounts of first aid waste are generated, contaminated items should be placed in clinical waste bags. These are yellow coloured plastic bags, which display the international biohazard sign (available from medical suppliers). Waste disposal should comply with state or local government requirements.

6. Sharps

Sharps are a major cause of accidents involving potential exposure to biological hazards such as hepatitis B and C virus, and HIV. Where there is a risk of finding discarded sharps, tongs or a similar item should be available to pick up sharp items safely. The person who uses a sharp should be responsible for its safe disposal. Sharps should be handled with care. They should not be bent, broken or resheathed as these unsafe practices are common causes of sharps injuries. Sharps should be disposed of in a puncture resistant sharps container. Sharps containers should be located as close as possible to the area where sharps are used. Disposal of sharps containers should be in accordance with local government requirements. Further information concerning sharps containers can be found in:

- Australian Standard AS 4031 - *Non-reusable Containers for the Collection of Sharp Medical Items used in Health Care Areas*, or;
- Australian Standard AS/NZS 4261 - *Reusable Containers for the Collection of Sharp items used in Human and Animal Medical Applications*.

7. Cleaning, Disinfecting and Sterilising

Properties and Facilities must have in place procedures for cleaning the first aid room and, if required, relevant equipment. Sterilising of equipment is not required with the use and disposal of single use stock only. Such equipment must be disposed of appropriately in required baggage/containers.

8. First aid room

The first aid room should be kept clean. Floors, bench tops and other surfaces should be regularly cleaned with warm water and detergent. A hand basin and adequate supplies of hand soap and disposable paper towels should be provided. Cloth towels may be used but a fresh towel (or portion of towel if a roller towel is used) should be used each time. There should also be a secured designated waste receptacle for waste that is contaminated by blood and body substances.

8.1 First aid equipment

Where possible, single use disposable sterile items, such as disposable splinter forceps, should be used to minimise the risk of cross infection. Disposable items, used for first aid, should not be reused. Non-disposable items should be processed after each use. There are three levels of processing equipment. The choice of method depends on what the equipment is to be used for.

- a. If the equipment is to have contact only with intact skin, then it requires cleaning, for example bandage shears. However, if this equipment is contaminated with blood, then it should be cleaned and disinfected.
- b. If the equipment is to have contact with intact mucous membranes, such as eyes and mouth, then it requires cleaning and disinfection, for example a thermometer. Items that become contaminated with blood and body substances should also be cleaned and disinfected. Examples are contaminated kidney dishes and liquid containers.
- c. Equipment that is reusable and which comes into contact with broken skin, penetrates the skin, or has contact with normally sterile body tissue, should be cleaned and sterilised. Examples are reusable splinter forceps where these come into contact with wounds or are used to penetrate skin.

8.2 Cleaning

Cleaning is the removal of dirt, stains or impurities and the reduction of the number of germs from a surface. Thorough cleaning of all items should commence as soon as practicable after use. Gloves should be worn during cleaning and care should be taken to avoid eye splashes. Gross dirt, stains or impurities should be wiped off, and the remaining cleaned off with warm water and detergent. After cleaning, items should be rinsed in clean water and stored dry.

8.3 Disinfection

Disinfection is the cleansing of items so as to destroy or prevent growth of disease carrying micro-organisms. Disinfection can be achieved by boiling or by chemical means. All items should be cleaned prior to disinfection.



8.4 Boiling

To disinfect an item by boiling, the item should be immersed in visibly boiling water for a minimum of five minutes after the water returns to the boil. If another instrument is then added to the load, timing starts anew from this time. Instruments should be removed without contaminating them and placed on a clean, disinfected surface to cool down.

8.5 Chemical Disinfection

Chemical disinfection can be carried out using a range of chemicals, such as household bleach, chlorhexidine and alcohols. The incorrect use of some chemicals may be hazardous and chemical safety should be observed. Some hazardous disinfectants are inappropriate in the first aid setting, for example, glutaraldehyde. No disinfectant kills germs immediately and items to be disinfected should be fully immersed in the disinfecting solution for the recommended soaking time. Disinfectants should be dated when opened and discarded after a period of time, according to the manufacturer's recommendations. Normally, chemical disinfection is carried out by appropriately qualified personnel.

8.6 Sterilisation

Sterilisation is the complete destruction of all germs. The only practical means of achieving sterilisation, in the first aid setting, is by using an autoclave. Sterilising is a very involved process and therefore it is more practical for first aid personnel to stock single use, disposable, sterile items wherever possible.

8.7 Storage of first aid equipment

All items should be stored to maintain the level of processing to which they have been subjected. Items should not be stored in disinfectant solutions, as this may encourage bacterial growth. Dry, sterile, packaged instruments should be stored in a clean, dry environment.

8.8 Ultraviolet light units

Ultraviolet light units are not usually capable of sterilising or disinfecting instruments and should not be used for this purpose. Further information concerning this section can be found in:

- Australian Standard AS 4187 - *Code of Practice for Cleaning, Disinfecting and Sterilising Reusable Medical and Surgical Instruments and Equipment, and Maintenance of Associated Environments in Health Care Facilities.*