




H008	First Aid Policy
Purpose	To regulate first aid in cases of sickness and accidents.
Authority	Occupational Safety and Health Act 1984 Occupational Safety and Health Regulations 1996 (s3.12.) School Education Act 1999 (s63(1))
Policy	To ensure that plans and procedures are developed and implemented so first aid can be administered in the event of injury / illness.
Delegation	Principal
Related Policies	Proc005 Crisis Management I002 Camp & Excursions R002 Student Supervision
Date approved	June 2010, July 2012, Aug 2015, Aug 2018
Next Review Due	August 2021
Review Authority	Management
Keywords	First aid; Senior First Aid Certificate; injury

Authorised by:	
ESG Chairman	D Swarts
Date:	August 2018



First aid involves knowing what to do, as well as knowing what not to do.

All staff members are encouraged to acquire the appropriate First Aid certification in their first year of employment, and to update this as required.

The principal is responsible to ensure sufficient staff members are present on campus or school activities as well as sufficient staff members have the appropriate qualifications.

In order to provide first aid, adequate facilities and materials are to be in order. Plans and procedures are to be developed and implemented, based on an assessment of:

- Likely hazards at school or during a school-initiated activity
- The risk of injury as a result of those hazards
- The size and layout of the school or school activity
- The distance to the nearest medical or ambulance service
- The number of people at school or taking part in the school organised activity.

Suitable first aid facilities and equipment are to be available wherever a school organised activity is taking place.

A member of staff and an alternate are to be in charge of first aid and provided with the relevant training.

All significant accidents and incidents are to be investigated and hazards eliminated where this is feasible. All serious accidents, incidents or injuries are to be reported to the Principal as soon as possible. If an injury was caused by existing hazards, this is to be reported to the Principal and removed, repaired, or isolated immediately.

Staff members are to report all significant student injuries to parents or guardians and keep records of such occurrences. (See Appendix 2.)

Significant injuries to others than students (staff, volunteers, visitors) should also be reported (appendix 3).

The person in charge of first aid is to have the appropriate First Aid level of training. For camps or excursions, depending on risks such as distance to the nearest ambulance, further training may be needed.¹

The person in charge of first aid is responsible for:

- providing first aid within his or her level of training

¹ The St John's Remote Area First Aid course is designed for people travelling or working in remote areas. This course is recommended for surveyors, geologists, exploration teams, teachers, scout leaders and four-wheel drive enthusiasts. This course meets the National Training requirement Unit THHGHSIIA and aligns to the National Guideline Standards for First Aid Unit B.

<http://www.stjohnambulance.com.au/>

Prerequisites:

A current St John Ambulance Senior First Aid qualification or equivalent

Qualification:

A nationally recognised statement of attainment is issued to successful participants. The qualification is valid for three years.

- making sure first aid supplies are adequately stocked, up to date and readily available
- making sure the first aid room equipment is maintained
- ensuring written reports are made of every significant injury occurring at school or on an excursion and recorded in a log (see Appendix 2).

Suitably stocked first aid kits are to be available and their locations known to all relevant staff. (For the contents of first aid kits, see Appendix 1).

All staff members are to be familiar with procedures for a medical emergency and be ready to lend assistance in order to prevent or reduce harm (see Crisis Management Policy).

If attending staff are in doubt about what to do, professional medical advice must be obtained.

Professional medical advice can include but is not limited to an ill or injured person's regular doctor or advice from Health Direct on 1800 022 222.

Students are not to have access to medical first aid supplies.

To reduce the risk of infection staff are required, where possible, to follow standard precautions when dealing with body fluids (see Appendix 4).

Appendices:

Appendix 1 - Suggested contents for a first aid kit

Appendix 2 - Incident Report Forms - Students and Staff

Appendix 3 - Suggested equipment for first aid room

Appendix 4 - Precautions for dealing with blood or body fluids



Appendix 1

Suggested contents for a first aid kit

All items should be contained in a suitably labelled dustproof metal or plastic box with a list of contents.

The contents must be checked by a responsible person (a trained first aid person or a contracted supplier) at least 1 time annually.

**Recommended as a minimum:
(As an example, from St John)**

Medium Risk Workplace Kit (Portable)

Product Code: #1229

Dimensions: 400mm x 220mm x 200mm

Recommended for high risk workplaces with less than 25 employees, or medium to low risk workplaces with 25-100 people.





Appendix 2

Incident Report Forms

Incident Report Form – Students

(INSERT LETTERHEAD OF SCHOOL HERE)

SCHOOL: _____

Date and time of accident: _____ Location: _____

Name of person/s injured/ involved in the accident/incident: _____

Name of person attending to the accident/incident: _____

Details including cause of the accident/incident: _____

Nature of the injuries: _____

Action taken and treatment involved: _____

Name of witness(es) to the accident/incident: _____

Parent Advised: Yes / No By whom: _____

SIGNATURE: _____

Date: _____

FORWARD REPORT TO YOUR PRINCIPAL

Follow up required: _____

Principal Signature:

_____ Date: _____

Follow up action taken by: _____

Signature:

_____ Date: _____

NB: A copy of this report is to be placed in the injured student's file, and a further copy is to be sent to FRSA Administration for insurance purposes.



FREE REFORMED SCHOOL ASSOCIATION

My heart I offer to You Lord - promptly and sincerely

Incident / Accident Report Form – Staff

School / Department: _____

Date and time of accident: _____ Location: _____

Name of person injured in the accident/incident: _____

Details including cause of the accident/incident:

Action taken, and treatment involved:

Who did you report the occurrence to?

If you didn't report the occurrence immediately, please state reason:

Name of witness(es) to the accident/incident:

Signature (injured staff): _____

Date: _____

Follow up required:

Manager / Principal Signature: _____

Date: _____

Follow up action taken by: _____

Signature: _____

Date: _____

THIS REPORT IS TO BE FORWARDED TO FRSA ADMINISTRATION



Appendix 3

Suggested equipment for first aid room

The room should have adequate ventilation, lighting, easy access to toilets and include the following:

- First aid manual
- First aid kit with approved contents (refer to Appendix 1)
- Sink and wash-basin with hot and cold-water supply
- Work-bench or dressing trolley
- Storage cupboard for medicaments, dressings, utensils and linen
- Soiled dressings container
- Plastic bags
- Electric power points and means of boiling water
- Couch with blankets and pillows
- Two upright chairs
- Movable screen
- Telephone and list of emergency numbers
- Portable stretcher
- Disposable towels and sheets
- Bleach or Milton
- Chlorhexidine 5%
- Flashlight
- Disposable gloves
- Clear safety glasses
- Thermometer
- Paper cups
- Plastic splints (1 packet)
- Log for keeping records.



Appendix 4

Standard precautions for Infection Control

The National Health and Medical Research Council (NHMRC) has developed Guidelines for the Prevention and Control of Infection in Healthcare (2010). Although the Guidelines are comprehensive and directed at clinical care situations, they provide useful guidance and recommended action on dealing with situations that arise in the provision of first aid.

The Standard precautions address nine areas that should be considered in dealing with blood, body fluids, mucous membranes and non-intact skin. They are:

- hand hygiene, before and after every episode of patient contact;
- the use of personal protective equipment;
- the safe use and disposal of sharps;
- routine environmental cleaning;
- reprocessing of reusable medical equipment and instruments;
- respiratory hygiene and cough etiquette;
- aseptic non-touch technique;
- waste management; and
- appropriate handling of linen.

To minimise the risk of acquiring blood-borne viruses and other infections, the standard procedures are as follows:

1. Cover any open wounds, cuts or abrasions with non-porous waterproof dressings. Wash blood or bodily fluids off skin surfaces using soap and water, then dry with a paper towel.
2. Wash hands thoroughly with soap and water (and then dry with a paper towel) after:
 - any contact with blood or bodily fluids;
 - any procedure involving first aid;
 - the handling of contaminated materials; or
 - the cleaning of blood and body fluids from any surfaces and before eating, drinking or smoking.

It is recommended the following precautions, washing and cleaning are undertaken in relation to first aid provision and the cleaning of facilities:

- An alcohol-based hand rub is used when hand-washing facilities are limited or unavailable, but every effort must be made to wash hands as soon as practicable.
- Wear water impermeable gloves wherever there is a potential risk of exposure to blood, other bodily fluids/substances, contaminated materials or when performing first aid on a bleeding casualty, and wash hands with soap and water immediately after removing the gloves.
- Wear safety glasses if there is a risk of being splashed in the eye by blood or bodily fluids/substances.
- If blood splashes onto a broken skin surface or mucous membrane, wash the area with soap and water, report the matter to the principal or line manager and seek medical attention.
- Standard cleaning equipment including; detergent and water, mop and bucket and water impermeable gloves must be available for cleaning up spills. All re-useable equipment is to be thoroughly cleaned and dried following use.
- Spots, drops or small spills of bodily fluids or blood can be cleaned up by wiping the area with paper towelling and then cleaning with warm water and detergent, using a disposable cloth. Wipe the area with a paper towel and allow the surface to dry. Water impermeable gloves are to be worn when cleaning up spills.

- If the soiled surface is porous and difficult to clean or where there is a likelihood of bare skin contacting the contaminated surface, a solution of 0.5 per cent sodium hypochlorite must be applied after cleaning. This may be achieved by soaking a paper towel in the sodium hypochlorite solution and leaving it in place for 10 minutes. A number of household bleaches contain sodium hypochlorite and can be diluted to the required strength. Water impermeable gloves must be worn.
- Seal soiled cloths, paper towels, gloves and dressings in a strong plastic bag before disposal into the domestic garbage.
- Seal items of clothing contaminated with blood or body fluids, as soon as practicable, in a strong plastic bag until they can be laundered.
- Encourage students and adults to perform their own first aid, if they are capable to do so. Depending upon the severity of the injury and the age of the injured person, supervision and/or assistance during this procedure may be necessary.
- Sterilize any equipment (such as tweezers) after use.

Sourced from the Department of Education / Policies / Guidelines for First Aid in the Workplace (2016)

These guidelines are to be implemented by staff.