

# Holy Family Primary School GOWRIE



## FIRST AID

### Policy





# First Aid Policy

## Related Policies

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CE Medical Welfare of Students Policy  
CE Management of Infectious Diseases in Schools Policy  
HF Dispensing of Medication Policy  
HF Asthma Policy

## Purpose

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This policy is to outline the standards for the provision of First Aid and Health procedures at Holy Family Primary School. It has been developed using the ACT Department of Education and Training Health & Safety Policies (First Aid and Administration of Prescribed Medication and Injections to Students) and the Policy & Procedures issued by the Catholic Education Office, Archdiocese of Canberra and Goulburn.

## Policy

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In every instance, first aid/emergency assistance is a means of supporting student and staff health and safety while awaiting professional medical assistance.

School staff should not be involved in the general management of medical conditions unless a special arrangement is made by written agreement between staff, parents and the student's doctor and ratified by the Principal.

First Aid Officers should have First Aid qualifications from approved agencies. They must maintain their current qualifications in order to continue appointment.

## Definitions

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**First Aid:** A system for the emergency treatment of illness and injury. It includes emergency treatment, dispensing of medicines, dressing of minor injuries, maintenance of records and ensuring correct hygiene procedures are followed in the school.

**First Aid Officers:** Staff who have been appointed on the basis of their qualifications and availability to perform the duties of a First Aid Officer.

**Parents:** Includes guardians and legal guardians.

**Resuscitation masks:** One-way mouth pieces suitable for mouth-to-mouth resuscitation.

**Sharps:** Objects or devices that have cut rigid corners, edges, points or protuberances capable of cutting or penetrating the skin.

## Procedures

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### **Recording of Information**

The Medical/Emergency information must be completed and signed by a parent at the time of enrolment. This information is updated throughout the year as required. Parents are also required to complete and sign the medical treatment permission section of the student enrolment form this includes the student's medical details and a parent's permission for the student to receive emergency treatment or analgesics. While the information on these forms must be treated as confidential, the forms must be readily available for consultation by First Aid Officers and relevant staff members as appropriate and to medical and para-medical staff in the event of an accident or an emergency.

### **Record of Treatment**

A record is kept of treatments administered to students and staff. Information should include name of person requiring treatment, class, treatment and signature of the officer administering first aid.

Where prescribed, medication is administered on a regular basis by the Front Office Staff who will record information detailing name of person requiring treatment, class, time of treatment and signature

### **Responsibilities of First Aid Officers**

Primary First Aid Officers are the Front Office staff.

First Aid Officers are responsible for the initial care of ill or injured students/staff by rendering first aid treatment in accordance with their approved training.

A First Aid Officer attending to a casualty must remain with the casualty until no further treatment or assistance is required, or until the casualty is handed over to ambulance or other medical personnel (based on the assumption that there is no personal risk to the First Aid Officer).

First Aid Officers must recognise their limitations and only administer or carry out duties that have been included in their training.

First Aid Officers should display photographs and medical condition of children with potentially life-threatening symptoms in prominent positions in the staff room and sick bay. A copy is also provided for the classroom roll.

Portable first aid kits are provided and maintained by the First Aid staff for use on excursions and/or school activities. They are kept in the first aid room and are readily

accessible in case of emergency and the location signed so as to be clearly visible to all concerned.

'Bum bags' are provided to staff for use on playground duty for cuts and scratches. Two EpiPens are provided for duty on either side of the school oval. The teacher on duty is required to collect an EpiPen if on duty on the oval.

The Front Office staff notifies the Principal/ Assistant Principal and then contacts the child's parents when the First Aid Officer believes the situation warrants it, e.g. a break or strain, severe cut or abrasion, vomiting, migraines and/or head injury.

### **Medication**

With the exception of the administration of bronchodilator inhalers in the emergency treatment of an asthma attack or suspected asthma attack, no medication is to be administered to students without the written permission of parents (see below for emergency treatment of an asthma attack). All medications other than asthma puffers are to be kept in the Front Office.

Parents should be regularly informed of the school's policy in regard to the administration of medication.

Appropriate equipment for administration of medicine, eg. medication measures should be supplied by parents. Teachers are to take the relevant student's medication on excursions and are responsible for obtaining the medication and signing it in and out at the Front Office.

### **Provision of Analgesics**

Analgesics cannot be administered to children unless sent into school with an authorisation note from a parent. The school does not hold children's analgesics.

### **Administration of Prescribed Medication and Injections to Students**

First Aid staff have a duty of care to administer first aid to students in their care. The following lists staff responsibilities in relation to handling requests from parents who seek assistance for their children in the administration of prescribed medication.

Where a school accepts responsibility for the administration of prescribed medication such as Ritalin and injections by First Aid staff to students, written agreement must be obtained between the school Principal and the relevant staff and parents.

The following forms must be completed and returned to the school prior to the administration of medication:

Letter of explanation re forms to parents:

- Request & Notification by parent/guardian for the administration of medication during School hours.

- Deed of Indemnity.
- Notification of change to medication.

First aid staff should retain the original authorisations and keep a copy on the student's file. Schools must keep a record of all cases where medication has been administered to students

Staff involved in administering Ritalin or similar drugs need to be informed by the parents of what to do if a dose is missed. First Aid staff should contact parents if a child's medication is missed or administered much later than the recommended time.

Parents should be discouraged from providing non-prescribed medication (eg. cough medicine) at school, unless on doctor's advice. The First Aid staff will administer prescribed medication (ie antibiotics) at the written request of parents stating dosage and time to be taken. Medication must be received in original packaging.

Supervision is to be arranged where a student self-administers medication.

No medication (except asthma puffers and EpiPens) is to be kept in the classroom or bag areas.

### **Specific Medical Conditions**

Parents with students with a specific medical condition are required to fill in:

- Medical Information Form.
- Deed of Indemnity.
- Action Plan for specific condition as required.
- Plus the form specific to the condition.

Forms are kept in the Front Office.

A Medical Class Alert, stating the students in that class with special medical needs and their requirements, is to be kept in the classroom in a readily accessible location- usually the class Roll.

A Medical Noticeboard in the Staffroom is to identify those students with medical conditions of a life-threatening nature, their particulars and a current photo.

### **Asthma**

All school staff should be aware of the information available from the Asthma Foundation on the management of asthma in schools (available from Front Office).

Children with asthma are to be allowed to have their asthma puffers with them.

The parent of all students with asthma need to fill out the necessary forms plus an Asthma Action Plan.

### **Emergency Treatment of an Asthma Attack**

If a student should suddenly collapse at school and/or has difficulty in breathing, as with all medical emergencies, professional help should be sought immediately. Whether or not the student is known to have pre-existing asthma or other health problems, a bronchodilator inhaler device ('puffer') should be administered by First Aid staff while awaiting medical assistance. This treatment could be lifesaving and the Department of Health (Department of Thoracic Medicine, Canberra Hospital) advises that bronchodilator inhalers are safe and are accepted as first line therapy to be used in the emergency procedures for asthma.

### **Allergens and Anaphylaxis**

All school staff should be made aware of the information to hand on allergens and Anaphylaxis (including the use of an EpiPen) held at the Front Office. *(See Appendix 8)*

Parents of a child who is at risk to suffering an anaphylactic reaction are required to fill out the appropriate forms including an Emergency Action Plan.

Staff will use First Aid procedures for those who have not previously suffered an anaphylactic reaction, and therefore do not have an individualised plan.

EpiPens for the child's use are to be stored in the child's classroom clearly marked with the student's name.

EpiPens are kept at the Front Office and are held in pouches for use on playground duty. These EpiPens are to be taken out on duty on the West and East Oval.

Students who are at risk of suffering from anaphylactic reactions will be identified via photocard on the bumbags containing the EpiPens

### **Epilepsy**

All school staff should be made aware of the information to hand on Epilepsy held at the Front Office.

The appropriate forms are to be filled out by the parent including an Epilepsy Action Plan.

### **Diabetes**

All school staff should be aware of the information available from the Diabetes Foundation on the management of asthma in schools available from the Front Office.

*Care Plan for Students with Diabetes Attending Archdiocesan Schools* is to be completed by the student's parents, sighted by appropriate staff members and filed appropriately with relevant student records.

### **Positive Antibody Status Persons**

The First Aid staff will follow the guidelines written by the Catholic Education Office of the Archdiocese of Canberra and Goulburn in relation to students or staff with possible antibody status.

### **Exclusion Periods for Specific Disease Conditions**

The First Aid staff will follow the guidelines written by the Catholic Education Office of the Archdiocese of Canberra and Goulburn in relation to exclusion periods for children who have been ill and should not return to school until they have fully recovered. Children who contract head lice should be excluded from school until all live lice have been removed with medication. Parents will be informed in writing that there is head lice in their child's year level and provided with information how to treat it.

## **Health and Safety Procedures**

### **Universal Precautions**

Universal precautions constitute a series of strategies and actions designed to minimise the risk of transmission of infectious agents (blood borne and non-blood borne), which are spread by contact. (Source: Universal Blood and Body Fluid Precautions, Centres of Disease Control, Atlanta, Georgia, USA, 1987). These precautions recognise the premise that all blood and body substances, including, tissue, of all patients are potentially infectious. Therefore, where staff have contact with blood or body fluids, the following precautions must be applied in all situations:

All human blood or other body fluids and tissues should be considered as potentially infectious. Gloves must be worn whenever there is a likelihood of contact with blood or body fluids, when handling anything contaminated with blood or body fluids and when handling and cleaning first aid equipment.

Hands must be washed with soap and running water before and after administration of first aid.

Soiled equipment should be soaked in a bleach solution for 30 minutes (freshly prepared one part in ten) then rinsed, or washed in cold water and detergent and then boiled for ten minutes.

There do not appear to be any documented cases of HIV infection from mouth-to-mouth resuscitation. However, as a precaution, a resuscitation mask could be used where practicable.

### **Disposal of First Aid Waste**

First aid waste should be in a plastic bag, tied securely, then placed inside a second plastic bag, which should also be tied securely and then disposed of with domestic waste.

## **Blood Spills – Patients**

Those providing first aid for patients who are bleeding should follow the following procedures:

Equipment:

- Disposable surgical gloves
- Disposable towels
- Disposable plastic bags

Procedure:

- Wear surgical gloves
- Cover any cuts or abrasions on First Aid Officer's arms or hands with dressing
- Clean and disinfect wound
- Dress wound
- Remove gloves and dispose of accordingly
- Wash hands with soap and running water

## **Blood Spills – Cleaning and Removal of**

Equipment:

- Rubber gloves
- Absorbent material, such as paper towels, cloth or sawdust
- Household bleach
- Hot water and detergent
- Plastic bags
- Water

Procedure:

- Wear rubber gloves.
- Using absorbent material, mop up the bulk of the blood or body fluids.
- Place waste materials in a plastic bag, tie securely, and then place inside a second plastic bag, which should also be tied securely.
- Clean contaminated surfaces by covering for 30 minutes with paper towels, which have been soaked in the solution of 1:4 bleach to water. Remove and place in double plastic bags. Wash the wet areas with water and household detergent and dry them thoroughly.
- Arrange for safe disposal of all waste materials.

- Wash gloves and hands with soap and running water.
- Soak any utensils used in bleach solution for 30 minutes then rinse.
- Care should be taken during cleaning to avoid splashing.

Contaminated clothing:

- Contaminated clothing should be removed and stored in a plastic bag for student to take home. No student is to wear clothing with blood on it while in the classroom or in contact with other students. Spare clothing can be obtained from the Front Office.

### **Blood Spills – from sporting, playground or classroom activities**

Teachers must ensure that:

- A student who is bleeding leaves the activity area until the bleeding has stopped, all body parts contaminated by blood are cleaned and the wound securely covered with bandages or dressing. Where appropriate bystanders in the immediate vicinity are removed from the area until the area is cleaned.
- All contaminated equipment is replaced and contaminated surfaces cleaned prior to the game or activity recommencing.
- Contaminated clothes are changed for clean ones once the wound has been treated.
- Disposable surgical gloves are worn by all those assisting with the blood spill.
- If bleeding cannot be controlled and the wound securely covered, the student must not continue in the activity.

### **Exposure – to blood or body fluids**

If a member of staff or a student has an exposure to blood or body fluids, the following action should be taken:

Immediately:

- Wash away the blood or body fluid with soap and running water.
- If the eyes are contaminated, rinse eyes while open with tap water or saline.
- If the blood gets into the mouth, spit it out and then repeatedly rinse with running water.

What to do next:

- After carrying out the appropriate first aid measures outlined above, the incident should be reported to the Principal.

In the case of a **staff member**, they should be referred immediately to a doctor or a hospital for risk assessment and, if necessary, appropriate testing, treatment and skilled counseling given.

In the case of a **student**, the Principal should ensure the parents are advised to immediately contact a doctor or a hospital for risk assessment of the student and, if necessary, appropriate testing, treatment and skilled counseling should be given.

### **Disposal of Needles/Syringes and other Sharps used in First Aid Procedures**

The following procedures apply to the use of needles, syringes and other sharps used in emergency first aid procedures:

#### Equipment:

- Disposable surgical gloves
- Sharps disposal container (available from TOTALCARE)
- Tongs
- Disposable plastic bags
- Bleach/disinfectant/detergent

#### Procedure:

- Ensure that sharps container is open.
- Put gloves on both hands.
- **DO NOT TRY TO RECAP THE NEEDLE.**
- Pick up the syringe and/or needle as far from the needle end as possible (use tongs if appropriate – depending upon medical procedure performed).
- Place into sharps container, needle first.
- Close sharps container.
- Sterilise tongs by soaking in bleach solution for 30 minutes then rinse in cold water and detergent and boil for 10 minutes.
- Remove gloves by turning inside out.
- Place gloves in a plastic bag, tie securely, then place inside a second plastic bag that should also be tied securely.
- Wash hands thoroughly with soap and running water, even if the gloves appear to be intact.
- Care should be taken during cleaning to avoid splashing.

## References

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Nil

## Forms

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Nil

Approved by:	Holy Family School Board
Implementation Date:	
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School Contact Officer:	Anne-Marie Marek