

# Spring Gully Primary School

## First Aid & Procedures

### POLICY

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#### PURPOSE

To ensure the school community understands our school's approach to first aid for students.

#### SCOPE

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

- *Anaphylaxis Policy*
- *Asthma Policy*

#### POLICY

From time to time Spring Gully Primary 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.

#### Staffing

The Principal will ensure that Spring Gully Primary School has sufficient staff with the appropriate levels of first aid training to meet the first aid needs of the school community. All staff will participate in annual CPR training (HLTAID001 Provide cardiopulmonary resuscitation).

A ratio of staff, determined by the Principal/Assistant Principal, will undertake a higher level of first aid training every 3 years (HLTAID002 Provide basic emergency life support and HLTAID003 Provide first aid).

Spring Gully Primary School's trained first aid officers are:

- Francis Trezise (trained 2018)
- Brett Parkes (trained 2018)
- Wendy Sloane (trained 2018)
- Michael Smith (trained 2018)
- Jane Rodda (trained 2018)
- Kate Murphy (trained 2018)
- Rohan Daenke (trained 2018)

The names and details of staff who have undertaken additional first aid training, including each staff member's first aid training expiry date, will be on display in Sick Bay and in Staff Room.

## First Aid Officer

Consistent with the Department's First Aid Policy and Procedures, the school will allocate staff member/s as First Aid Officer. The First Aid Officer works with the Assistant Principal to ensure all directives of this policy are followed.

Wendy Sloane is currently the nominated First Aid Officer at Spring Gully Primary School.

## First Aid Leader Duties

The First Aid Officer is required to undertake a coordinating role maintaining standard medical service provision, student medical records and parent notifications.

Their specific duties include:

- Providing first aid emergency awareness for staff, in collaboration with the Assistant Principal.
- Maintaining the first aid room (sick bay) and first aid kits.
- Maintain and manage all student medical information.
- Oversee management of school and student epipens and school asthma medication.
- Providing first aid services commensurate with competency and training. This may include all or some of emergency life support including response to life threatening conditions which may occur in the school (e.g. cardiac arrest or respiratory difficulties associated with asthma), management of severe bleeding, basic wound care, fractures, soft tissue injury.
- Facilitating the recording of all first aid treatment on Compass. A copy of treatment provided shall be forwarded with the patient on all occasions, with the exception of minor abrasions. The first aider should respect the confidential nature of any information given.
- Providing input on first aid requirements for excursions and camps.
- Undertaking training and certification requirements and procedures as deemed by DET in relation to CPR, anaphylaxis and asthma.
- As the nominated Anaphylaxis Verifier, along with the Assistant Principal, undertake required training and provide training for staff.

Where possible, only staff with first aid qualifications will provide first aid. However, in an emergency other **staff may be required to help within their level of competency.**

## First Aid Kits

Spring Gully Primary School will maintain:

- A major first aid kit which will be stored in the Sick Bay.
  - 8 portable first aid kits are available to be used for excursions and camps, stored in the Sick Bay. Each classroom teacher has a basic portable first aid kit for yard duty, kept in classrooms.
- Portable first aid kits available for staff on yard duty will contain:
  - a pair of single use plastic gloves
  - band-aids
  - student cards identifying students with significant medical conditions, i.e. anaphylaxis
  - tissues
  - jelly beans

## 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 the Sick Bay and monitored by staff. 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.
- All minor and major incidences relating student illness and/or injury will be recorded on Compass. Parents/carers can access this information at any time.
- If first aid is administered for a minor injury or condition, Spring Gully Primary School will notify parents/carers via Compass. An alert to parents/carer’s Compass account, with details of the incident, is immediately triggered when the incident is recorded in Compass.
- 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 via phone 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 Spring Gully Primary School will:
  - record the incident on Compass
  - if first aid was administered in a medical emergency, report the incident to the Department’s Security Services Unit on 03 9859 6266.

In accordance with guidance from the Department of Education and Training, analgesics, including paracetamol and aspirin, will not be provided as a standard first aid treatments. This is because they can mask signs of serious illness or injury.

## Medication

**No medication, including headache medication, will be administered to children without the written permission of parents/guardians. Written permission must be accompanied by a signature. Verbal permission can not be accepted.**

- Medication is stored in the sickbay cupboard in a clearly labelled student tub. Medication requiring refrigeration will be clearly labelled and stored in the staffroom fridge.
- When medication is provided to students, a record of this is made using the 'Administer Medication' template in Chroincal (Compass).
- Parents will receive an email notification via Compass once the 'Administer Medication' template is submitted. The 'Administer Medication' template records the following details against the individual student's Compass profile:
  - medication details
  - dosage administered
  - time administered
  - staff member administering the medication
  - parent contacted (a tick box available to indicate 'yes')
- Parents can access all medication entries at any time by logging into their child's Compass profile.
- A parent will be called in cases where medication is required 'from time to time' (and the required documentation is in place). For example, hay fever medication when the pollen count is high on a particular day or pain medication when the student requires this to manage pain that presents under certain circumstances. Parents will be called **before** the medication is administered.
- For students who require medication on a daily/regular basis, phone calls will not be made unless deemed necessary.
- The school is not permitted to store or administer painkillers such as aspirin and paracetamol as a standard first aid strategy as they can mask signs and symptoms of serious illness or injury

## FURTHER INFORMATION AND RESOURCES

- SGPS Anaphylaxis Policy
- SGPS Asthma Policy
- SGPS Care Arrangements for Ill Students Policy

## APPENDIX I

Provides specific information about how to respond in the cases relating to asthma, anaphylaxis and diabetes

## REVIEW CYCLE

This policy was last updated in August 2019

# APPENDIX I – ANAPHYLAXIS, ASTHMA AND DIABETES

## Assessment and First Aid Treatment of an Asthma Attack

If a student develops signs of what appears to be an asthma attack, appropriate care must be given immediately.

### Assessing the severity of an asthma attack

Asthma attacks can be:

- **Mild** - this may involve coughing, a soft wheeze, minor difficulty in breathing and no difficulty speaking in sentences
- **Moderate** - this may involve a persistent cough, loud wheeze, obvious difficulty in breathing and ability to speak only in short sentences
- **Severe** - the student is often very distressed and anxious, gasping for breath, unable to speak more than a few words, pale and sweaty and may have blue lips.

All students judged to be having a severe asthma attack require emergency medical assistance.

Call an ambulance (dial 000), notify the student's emergency contact and follow the '*4 Step Asthma First Aid Plan*' while waiting for the ambulance to arrive. When calling the ambulance state clearly that a student is having 'breathing difficulties.' The ambulance service will give priority to a person suffering extreme shortness of breath. Regardless of whether an attack of asthma has been assessed as mild, moderate or severe, Asthma First Aid (as detailed below) must commence immediately. The danger in any asthma situation is delay. Delay may increase the severity of the attack and ultimately risk the student's life.

### Asthma First Aid

If the student has an Asthma Action Plan, follow the first aid procedure immediately. If no Asthma Action Plan is available the steps outlined below should then be taken immediately.

#### ***The 4 Step Asthma First Aid Plan (displayed in Sick Bay and classrooms):***

##### **Step 1**

Sit the student down in as quiet an atmosphere as possible. Breathing is easier sitting rather than lying down. Be calm and reassuring. Do not leave the student alone.

##### **Step 2**

Without delay give 4 separate puffs of a blue reliever medication (*Ventolin*). The medication is best given one puff at a time via a spacer device. If a spacer device is not available, simply use the puffer on its own. Ask the person to take 4 breaths from the spacer after each puff of medication.

##### **Step 3**

Wait 4 minutes. If there is little or no improvement repeat steps 2 and 3.

#### **Step 4**

If there is still little or no improvement; call an ambulance immediately (dial 000). State clearly that a student is having 'breathing difficulties.'

Continuously repeat steps 2 and 3 while waiting for the ambulance.

Refer to the Asthma Policy for further information.

### **Assessment and First Aid Treatment of Anaphylaxis**

What is anaphylaxis?

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. Although allergic reactions are common in children, severe life threatening allergic reactions are uncommon and deaths are rare. However, deaths have occurred and anaphylaxis is therefore regarded as a medical emergency that requires a rapid response.

Signs and symptoms

The symptoms of a mild to moderate allergic reaction can include:

- swelling of the lips, face and eyes
- hives or welts
- abdominal pain and/or vomiting.

Symptoms of anaphylaxis (a severe allergic reaction) can include:

- difficulty breathing or noisy breathing
- swelling of the tongue
- swelling/tightness in the throat
- difficulty talking and/or a hoarse voice
- wheezing or persistent coughing
- loss of consciousness and/or collapse
- young children may appear pale and floppy.

Symptoms usually develop within 10 minutes to one hour of exposure to an allergen but can appear within a few minutes.

Refer to the Anaphylaxis Policy for further information.

#### **Individual Anaphylaxis Management Plans**

Every student who has been diagnosed as at risk of anaphylaxis will have an individual Anaphylaxis Management Plan, (**see Care Arrangements for Ill Students Policy**).

**Epipens**

The school will maintain three general use epipens (1x jnr & 2x reg) in addition to prescribed epipens provided by parents/guardians for diagnosed anaphylactic students. A minimum of one 'school epipen' will remain on the school premises at all times.

School epipens are renewed every 12 months or when the epipen has expired (whichever occurs first).

Parents/guardians of students who require an epipen are responsible for ensuring the school has an individually prescribed epipen for their child. The epipen must be in date and meet all anaphylaxis requirements as a condition of that student attending school.

### **Individual Diabetes Action Plans**

Every student who has been diagnosed with diabetes will have an individual Diabetes School Action Plan, (**see Care Arrangements for Ill Students Policy**). This plan clearly details how to support students diagnosed with diabetes.

Diabetes School Action Plans are revised every 12 months or as required and are certified by a medical practitioner and the parent of the student.