



## Administration of First Aid Policy

### NQS

QA2	2.1.1	Each child's health needs are supported.
	2.1.4	Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines.
	2.3.2	Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury.

### National Regulations

Regs	89	First Aid Kits.
	136	First Aid Qualifications.
	161	Authorisations to be kept in Enrolment Record.
	245	Person Taken to hold approved First Aid Qualification.
	246	Anaphylaxis Training.
	247	Asthma Management Training.

### EYLF

LO3	Children are happy, healthy, safe and connected to others.
	Educators promote continuity of children's personal health and hygiene by sharing ownership of routines and schedules with children, families and the community
	Educators discuss health and safety issues with children and involve them in developing guidelines to keep the environment safe for all

### Aim

The kindergarten and all educators have a duty of care to follow guidelines to promote the health and wellbeing of each child. In relation to first aid, this means that:

- A child should not be denied first aid assistance. This should be provided in line with the training of staff.
- Where a child has a known, predictable first aid need, planning should occur to ensure reasonable, fair and safe access to assistance when needed.

# Obligations

## Duty of Care

It is the responsibility of the Director to:

- Obtain an Individual *First Aid Action Plan* completed by a medical practitioner.
- Complete a *Health Support Plan* with the family.
- Ensure that the relevant staff members are involved in *Health Support Planning*.
- Manage confidentiality.
- Ensure staff-training requirements are fulfilled and up-to-date.
- Ensure delegated staff responsibilities reflect duty of care and job specifications.
- Emergency procedures are given priority over routine duties.
- Ensure *First Aid Record* keeping, facilities and equipment standards are met.

## Occupational Health and Safety

All employees must take reasonable care to protect their own health and safety and that of others on the worksite. In providing *First Aid* to children they must therefore:

- Become familiar with policies and procedures that guide work performance.
- Follow instructions related to health and safety.
- Accept responsibility for safe working conditions including informing the *Nominated Supervisor* if their health is a risk factor to others.
- Safeguard the privacy of health information, using privacy principles use equipment provided for health and safety purposes.
- Assist with the maintenance of clean and safe equipment and premises.
- Apply standard precautions against transmission of infections.
- Perform tasks in line with training received.

Where there is more than one worker at the worksite, it is prudent for one member of staff to be delegated the task of coordinating *First Aid* procedures, supervising the first aid facility and maintaining and securing the contents of the centre's *First Aid Kit*. A relief staff member should be nominated in the event of the absence of the *First Aid Coordinator*. Other staff with *First Aid* qualifications should be identified and available to assist the coordinator if required.

## Parent(s)/Guardian(s) Responsibilities

Parent(s)/guardian(s) are primarily responsible for the health and wellbeing of their children by:

- Ensuring staff members have up-to-date individual first aid requirements for their children.
- Liaising with the doctor to ensure that first aid plans are manageable within the kindergarten.
- Provision of a *Health Support Plan* that should identify how first aid is provided in an emergency.

## Responsibilities of Educators

An educator has a duty of care to children by:

- Providing basic *First Aid* and good hygiene practice.
- Familiar with the *Individual Health Support Plan*.
- Developing learning programs which accommodate *Health Support Plans*.

- Taking a collective responsibility for *First Aid* facilities and the completion of *Incident Reports*.
- Advise parent(s)/guardian(s) to seek medical advice regarding head injuries.

### **Obligations to Seek Emergency Assistance**

- An educator should not hesitate to call an ambulance if there is a health and safety concern. This is in accordance with signed consent (to seek ambulance assistance) provided by parent(s)/guardian(s) on enrolment form at the time enrolment.
- When a child is being transported by ambulance, a worker should remain with the child until the parent(s)/guardian(s) or emergency contact arrives.
- The emergency contact person nominated for a child or student must be notified as soon as possible if emergency services have been contacted.
- Sometimes the emergency contact person will question whether an ambulance is warranted. The *First Aider* must ensure he or she has acted in line with his/her training. If the training requires calling an ambulance, then the emergency contact person for the child can be advised to discuss the matter directly with the ambulance service.
- If the person administering *First Aid* decides that an ambulance is not needed, but it would be advisable for the child to see a doctor, then the child's emergency contact person should be informed as soon as possible. Sometimes the *First Aider* will assess that referral to a medical practitioner is advisable and the parent(s)/guardian(s) or emergency contact cannot be reached. If the *First Aider's* assessment is that waiting for the parent(s)/guardian(s) or contact person to arrive could jeopardise safety, staff should arrange for an ambulance to transport the child to the nearest hospital casualty department (rather than to the local medical practitioner).
- Despite the obligation of an employee to administer *First Aid* there is a possibility that common law action could be brought against a staff member and/or the employer. The injured party would have to prove that the employee in question acted in a negligent manner. If the matter proceeds to trial, a court would take into account factors such as:
  - The age of the child.
  - The child's individual capabilities, including intellectual and physical impairment.
  - Circumstances surrounding the incident.
  - The existence of a documented and agreed individual *Health Support Plan*.
  - The extent of the initial injury or illness that required emergency care.
- If an educator can show that she/he acted in accordance with their duty of care and occupational health, safety and welfare obligations when assisting a child a court would be hard-pressed to find negligence unless the treatment was so negligent that it actually worsened the child's health position.

### **Obligations to Inform a Parent, Guardian or Emergency Contact Person**

- Educators have an obligation to ensure parent(s)/guardian(s) are informed about *First Aid* provided to their children.
- Parent(s)/guardian(s) should always be informed when there has been a head injury or staff members have provided *First Aid* asthma medication.

- Where children or students are known to have a potential *First Aid* requirement (for example, for diabetes, seizures, asthma, and anaphylaxis), staff and families can negotiate the nature and timing of informing parent(s)/guardian(s) of *First Aid* interventions.
- An ambulance must always be called if staff members are concerned about their capacity to provide adequate emergency assistance.

## **Sources**

DETE, *First Aid in education and children's services, 2010.*

## **Review**

This policy will be reviewed on a 3 yearly basis by the kindergarten staff and the Governing Council.