



ADMINISTRATION OF FIRST AID

2020

**THE—
AFTER
SCHOOL
KLUB—**

ADMINISTRATION OF FIRST AID POLICY 2020

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of serious incident
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
88	Infectious diseases
89	First aid kits
97	Emergency and evacuation procedures
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
174	Prescribed information to be notified to Regulatory Authority
176	Time to notify certain information to Regulatory Authority

Purpose

TASK has a duty of care to provide and protect the health and safety of children, families, educators, and visitors of the Service. First aid is the emergency aid or treatment given to persons suffering illness or injury following an accident and prior to obtaining professional medical services if required.

Strategies

When an accident happens:

When an accident, injury or illness occurs, requiring staff to administer first aid, a staff member with current first aid qualifications must be the one to administer the treatment.

Staff will:

- Assess the situation for any further danger to themselves or others.
- Other staff are to clear children away from the accident site and continue with the normal routine.
- No medications will be used on the child unless they are prescribed for that child.
- If first aid is administered, an Incident, Injury and Trauma or Illness report is to be filled out by the staff member present at the time of the accident and the staff member who treated the child/adult
- The parent is to sight and sign the form and receive a copy within 24 hours of the incident injury or trauma (if they request one). If contact is not possible on the day of the accident, Responsible Person must contact parents by phone or in person as soon as possible the next day.
- A copy of the form is to be put in the child's file in Dropbox under Health and Medical folder

- The National Regulations require that an incident, injury, trauma and illness record be kept, and that the record be accurate and remain confidentially stored until the child is 25 years old (**National Regulation 183(2)(b)**).
- Continue to monitor the child's condition. If the child's condition deteriorates, then the Responsible Person is to assess the situation and if necessary call an ambulance, the parents or other emergency contacts nominated in the enrolment form. If either of these staff members are unavailable, then another member of staff is to do this and TASK Central and the Responsible Person is to be notified as soon as possible.
- If a child requires hospitalisation, the Nominated Supervisor or Responsible Person is to contact the regulatory authority, the NSW Early Childhood Education and Care Directorate via NQA ITS Portal within 24 hours of notification.
- A small first aid kit is to be kept in an evacuation pack, which is used in the evacuation of the service, e.g. fire, bomb threat, etc.
- In case of a death of a child in care, the Nominated Supervisor must immediately give notice of the fact to:
 - The parent of the child.
 - The Police.
 - The regulatory authority, the NSW Early Childhood Education and Care Directorate within 24 hours.
 - The Approved Provider of the service.

The National Law requires the Regulatory Authority to be notified of any serious incident at an Approved Service. A serious incident includes (National Regulation 12):

- The death of a child while attending a service, or following an incident while attending a service.
- Any incident involving injury, trauma or illness of a child where medical attention was sought, or should have been sought ('Medical attention' includes a visit to a registered medical practitioner or attendance at a hospital).
- An incident at the service premises where the attendance of emergency services was sought, or should have been sought ('Emergency services' might include ambulance, fire brigade, police and state emergency services).
- Appears to be missing or cannot be accounted for.
- Appears to have been taken or removed from the service premises in a way that breaches the National Regulations.
- Is mistakenly locked in or locked out of any part of the service premises.

A serious incident should be documented as an incident, injury, trauma and illness record as soon as possible and within 24 hours of the incident.

WHEN IN DOUBT, CALL AN AMBULANCE

Self-Administration of Medication

Children who self-medicate must be over preschool age (**National Regulation 90(2)**). Parents must give permission to the service for the service to allow the child to self-medicate and this will be kept in the child's file.

Responsibilities of the Approved Provider

- Approved Providers must ensure that there is provision for first aid equipment in the workplace **(WHS Regulation 42)**.
- Approved Providers must ensure that each worker has access to the equipment **(WHS Regulation 42)**.
- Ensuring that every reasonable precaution is taken to protect children at the service from harm and hazards that are likely to cause injury.
- Ensuring that at least one educator with current approved first aid qualifications is in attendance and immediately available at all times that children are being educated and cared for by the service. This can be the same person who has CPR, anaphylaxis management training and emergency asthma management training, which is also required under the Regulations **(National Regulation 136)**.
- Appointing a Responsible Person as the nominated first aid officer.
- Providing and maintaining an appropriate number of up-to-date, fully-equipped first aid kits that in accordance with the Safe Work NSW Code of Practice.
- Providing and maintaining a portable first aid kit that can be taken offsite for excursions and other activities.
- Ensuring that first aid training details are recorded on each staff member's record.
- Ensuring there is an induction process for all new staff, casual and relief staff, that includes providing information on the location of first aid kits and specific first aid requirements.
- Keeping up to date with any changes in procedures for administration of first aid and ensuring that all educators are informed of these changes.

Responsibilities of the Nominated Supervisor

- Ensuring that all required staff have attained an approved first aid qualification, including CPR, anaphylaxis management training and emergency asthma management training.
- Ensuring a portable first aid kit is taken on all excursions and other offsite activities.
- Support staff when dealing with a serious incident and/or trauma.
- Provide and maintain an appropriate number of up-to-date, fully-equipped first aid kits that meet Australian Standards.
- Dispose of out-of-date materials and supplies appropriately.

Responsibilities of the Educators

- Implementing appropriate first aid procedures when necessary.
- Maintaining current approved first aid qualifications, and qualifications in CPR, anaphylaxis management and emergency asthma management, as required.
- Practicing CPR and administration of an auto-injection device at least annually. CPR should be done refreshed annually as part of the certification process.
- Ensuring that all children are adequately supervised while providing first aid and comfort is given to a child involved in an incident or suffering trauma.
- Ensuring that the details of any incident requiring the administration of first aid are recorded on the incident, injury, trauma and illness record.
- onths prior to the expiration of your first aid, asthma or anaphylaxis accredited training.

Responsibilities of the Families

- Providing the required information for the service’s medication record.
- Providing written consent (via the enrolment record) for service staff to administer first aid and call an ambulance, if required (**National Regulation 161(2)(a)**).
- Being contactable, either directly or through emergency contacts listed on the child’s enrolment record, in the event of an incident requiring the administration of first aid.



Example of First Aid Contents

First aid requirements will vary from one service to the next, depending on the nature of the work, the type of hazards, the workplace size and location, as well as the number of people at the workplace. These factors must be taken into account when deciding what first aid arrangements need to be provided.

Examples of what MAY be in a First AID kit

Kit Contents		
Item	Quantity	Check
Instructions for providing first aid – including Cardio-Pulmonary Resuscitation (CPR) flow chart	1	
Note book and pen	1	
Resuscitation face mask or face shield	1	
Disposable nitrile examination gloves	5 Pairs	

Gauze pieces 7.5 x 7.5 cm, sterile (3 per pack)	5 Pairs	
Saline (15 ml)	8	
Wound cleaning wipe (single 1% Cetrimide BP)	10	
Adhesive dressing strips – plastic or fabric (packet of 50)	1	
Splinter probes (single use, disposable)	10	
Tweezers/forceps	1	
Antiseptic liquid/spray (50 ml)	1	
Non-adherent wound dressing/pad 5 x 5 cm (small)	6	
Non-adherent wound dressing/pad 7.5 x 10 cm (medium)	3	
Non-adherent wound dressing/pad 10 x 10 cm (large)	1	
Conforming cotton bandage, 5 cm width	3	
Conforming cotton bandage, 7.5 cm width	3	
Crepe bandage 10 cm (for serious bleeding and pressure application)	1	
Scissors	1	
Non-stretch, hypoallergenic adhesive tape – 2.5 cm wide roll	1	
Safety pins (packet of 6)	1	
BPC wound dressings No. 14, medium	1	
BPC wound dressings No. 15, large	1	
Dressing – Combine Pad 9 x 20 cm	1	
Plastic bags - clip seal	1	
Triangular bandage (calico or cotton minimum width 90 cm)	2	
Emergency rescue blanket (for shock or hypothermia)	1	
Eye pad (single use)	4	
Access to 20 minutes of clean running water or (if this is not available) hydro gel (3.5 gm sachets)	5	
Instant ice pack (e.g. for treatment of soft tissue injuries and some stings).	1	