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Roles and Responsibilities	
First Aid Procedures	
Summary	



1. Summary

- 1.1 This policy outlines requirements and processes to promote and protect the health, safety and wellbeing of children.
- 1.2 It includes supervision and training requirements and procedures if a child is unwell, injured or is involved in a medical emergency or incident at the service. It should be read together with the <u>ELC and SAC Medical Conditions and Administration of Medication Policy</u>. Together, these policies address planned and unplanned first aid and medical treatment.
- 1.3 This policy is based on the following principles:
 - The health, safety and wellbeing of children is a paramount consideration for CECG services. Services will take every reasonable precaution to protect the children from harm and ensure that they are well equipped to administer first aid in the event of injury or illness.
 - Educators and staff must be able to undertake their roles effectively. This includes regular training to ensure their qualifications are approved and up-to-date, ensuring access to suitably equipped first aid kits, and ensuring adequate supervision.
 - First aid capable employees must be present at all times that children are being cared for at the service.
 - Clear roles ensure that management, educators and staff are aware of their responsibilities in relation to the administration of first aid, notifications and reporting.

2. First Aid

- 2.1 All CECG ELC and SAC employees who work with children must obtain first aid qualifications, anaphylaxis management training and emergency asthma management training and renew them every three years.
- 2.2 All CECG ELC and SAC employees who work with children must undertake refresher training in CPR should be undertaken annually.
- 2.3 Each employee must ensure their First Aid training remains current. Records of all staff member's first aid training must be kept by the ELC and SAC.
- 2.4 A list of approved First Aid Qualifications can be found at http://www.acecqa.gov.au/Qualifications.aspx.
- 2.5 At least one employee with current First Aid qualification, anaphylaxis management training, and emergency asthma management training must be on the premises at all times. One person may hold one or more qualifications.
- 2.6 All services must have an adequate number of suitably equipped first aid kits which meet Australian Standards. These kits must be checked regularly (e.g. once per term) to ensure that the contents are replenished, with no expired products.
- 2.7 First aid kits must be easily recognisable and readily accessible to adults. Services should ensure that the location of all first aid kits is discussed with all new employees at induction, and the locations of first aid kits are clearly labelled. In line with the <u>ELC and SAC Excursion and Events</u> <u>Policy</u>, portable first aid kits must be taken on all excursions.



3. Procedures

3.1 Responding to incidents, injury, illness, or trauma involves at least the following steps. These steps may occur in order listed or simultaneously, particularly for more serious incidents. For example,

Stage of Process	Actor and Action
Immediate Action	Take any immediate action necessary to reduce the risk of harm to the child(ren). Contact emergency services immediately on 000 for medical, fire, or police emergencies.
Assess Seriousness	Assess whether the incident, injury, trauma or illness is minor, moderate, or major. This determines (among other things) who employees will notify and when that will occur.

Minor

Rest as required. Parent notification optional. Student may return to class/play ground when ready.

Provide first aid. Notify parents as soon as practical. Request pickup unless student can be adequately cared for. Monitor comfort and condition until pickup, or staff determine student is ready to return to class/playground.

Moderate

Serious Provide first aid. Contact emergency services if required. Inform parents immediately and require pickup.

Provide constant supervision.

Manage	Take action necessary to ensure the safety and comfort of the child and other children being cared for. For example provide additional first aid; refer to and implement a student's medical care plan; move injured or ill child(ren) to a private area; provide rest; comfort the child(ren) involved and other children in the service.
Notify	 Notify the parents/carers of the child affected: immediately for serious injury or illness, before pickup for moderate injury or illness or by the end of the day minor injury or illness. Notify other parties if necessary or advisable for risk mitigation and communication, including: Families of other children in the service (e.g. infectious disease; emergency services attendance; emergency practice drill)
Record	Complete <u>an Incident, injury, trauma and illness record</u> , including signature by parents/authorised person.
Report	Report any Serious Incident to CECA, via the NQAITS Portal, and the CECG ELC team, within 24 hours. Report Prescribed Incidents within 7 days (see <u>ELC and SAC Incident Reporting Fact Sheet</u>).



Review and Support	Nominated Supervisor should follow up with family and staff to enquire about after-effects. Employees should be offered the opportunity to debrief or seek free professional counselling through CatholicCare following a medical emergency.
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Transport and supervision for medical care

- 3.2 If a child is transported to hospital by ambulance, a suitably qualified employee must remain with the child until a parent, carer or other emergency contact arrives.
- 3.3 This employee should ensure that they take the student's medical record with them, and provide this to the hospital upon arrival.
- 3.4 Unless explicitly instructed by emergency services, an employee should not use their own vehicle to transport a student to hospital.
- 3.5 If required to transport a student to hospital, an additional staff member must also accompany the student.
- 3.6 Ambulance costs may be coverable by lodging a claim with Catholic Church Insurances. If a parent would like to pursue this, they should contact CECG ELC team.

4. Roles and Responsibilities

4.1 Nominated Supervisor will investigate the cause of any incident, injury or illness and take appropriate action to mitigate the risk of future incidents.

Position	Responsibilities	
	 implement the Incident, injury, trauma and illness policy and procedures 	
	 ensure that at least one educator, staff member or nominated supervisor who holds a current approved first aid qualification and has undertaken current approved anaphylaxis management and emergency asthma management training is in attendance at all times and immediately available in an emergency 	
Nominated	 notify the regulatory authority of a serious incident online using the NQAITS - SI01 Notification of Serious Incident record 	
Supervisor	 investigate the cause of any incident, injury or illness and take appropriate action to remove the cause if required contact emergency services in the first instance then notify parents/guardians immediately after an incident, injury, trauma or medical emergency, or as soon as is practicable ensure each child's enrolment record includes authorisation by a parent or person named in the record, for the approved provider, nominated supervisor or educator to seek medical treatment for the child from a registered medical practitioner, hospital or ambulance service and, if required, transportation by an ambulance service. 	



	 record information as soon as possible, and within 24 hours after the incident, injury, trauma or illness
	 seek further medical attention if required after the incident, injury, trauma or illness
Educators	 ensure that two people are present any time medication is administered to children
Educators	 be aware of children with allergies and their attendance days, and apply this knowledge when attending to any incidents, injury, trauma or illness
	 complete an Incident, Injury, Trauma and Illness Record
	 keep Incident, Injury, Trauma and Illness Records confidential and store until the child is 25 years old.
	 provide authorisation in the child's enrolment form for the approved provider, nominated supervisor or an educator to seek medical treatment for the child from a registered medical practitioner, hospital or ambulance service and, if required, transportation by an ambulance service
	 notify the service upon enrolment of any specific health care needs of the child, including any medical conditions and allergies and any medical management plans that need to be followed
	 ensure any medical management plans at the service are kept up-to- date
Families	 collect the child as soon as possible when notified of an incident, injury, trauma or illness
Fairmes	 notify the service of any infectious disease or illness that has been identified when the child has been absent from the service, that may impact the health and wellbeing of other children, educators, staff or others attending the service
	• be contactable, either directly or through emergency contacts listed on the enrolment form, in the event of an incident requiring medical attention
	 notify educators or staff if there has been a change in the condition of the child's health, or of recent accidents or incidents that may impact the child's care
	 notify educators or staff when the child is ill and will be absent from their regular program.

5. Definitions

5.1 **Minor injury/illness**: No or only minor first aid (e.g. band-aid) seems to be required and the student does not present significant discomfort or pain. Examples might include minor falls or collisions or minor nausea.



- 5.2 Moderate injury/illness: First aid is required within the ELC/SAC's capacity to provide and the student presents moderate discomfort or pain. Medical assessment may be necessary. Examples might include falls or injuries with scrapes or bruises but no significant bleeding or suspected fractures, <u>any</u> collision to the head, nausea or serious headache, or a significant but manageable asthma attack.
- 5.3 **Serious injury/illness**: Medical care is required (or suspected to be necessary) and the event involves harm or significant risk of harm to the child(ren), or significant discomfort to the unwell child. Examples might include suspected fractures or broken bones, vomiting, suspected concussion, injuries involving bleeding, anaphylaxis, or life-threatening asthma attack.

5.4 Serious Incident:

- the death of a child—
 - \circ ~ while that child is being educated and cared for by an education and care service; or
 - following an incident occurring while that child was being educated and cared for by an education and care service.
- any incident involving serious injury or trauma to a child occurring while that child is being educated and cared for by an education and care service—
 - which a reasonable person would consider required urgent medical attention from a registered medical practitioner; or
 - for which the child attended, or ought reasonably to have attended, a hospital.

Example— A broken limb.

 any incident involving serious illness of a child occurring while that child is being educated and cared for by an education and care service for which the child attended, or ought reasonably to have attended, a hospital.

Example— Severe asthma attack, seizure or anaphylaxis reaction.

- any emergency for which emergency services attended;
- any circumstance where a child being educated and cared for by an education and care service—
 - $\circ \quad$ appears to be missing or cannot be accounted for; or
 - appears to have been taken or removed from the education and care service premises in a manner that contravenes these Regulations; or
 - is mistakenly locked in or locked out of the education and care service premises or any part of the premises.

6. Related Documents and Legislation

- 6.1 Related CECG Documents:
 - ELC and SAC Medical Conditions and Administration of Medication Policy
 - Incident, injury, trauma and illness record
 - <u>ELC and SAC Incident Reporting Fact Sheet</u>



6.2 Related legislation or Standards

• Approved First Aid Qualifications http://www.acecqa.gov.au/Qualifications.aspx

7. Contact

7.1 For support or further questions relating to this policy, contact the CECG Early Learning Team.