



# First Aid Policy 2024 – 2026

GEELONG  
HIGH SCHOOL

## POLICY REVIEW AND APPROVAL

This Policy has been reviewed and endorsed by the Principal:	April 2024
This Policies next review and endorsement is due in two years:	2026



## HELP FOR NON-ENGLISH SPEAKERS

If you need help to understand the information in this policy, please contact Geelong High School on 03 5225 4100 or [geelong.hs@education.vic.gov.au](mailto:geelong.hs@education.vic.gov.au).

## PURPOSE

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

## Rationale

Ensuring a healthy and safe school environment is a top priority. The school has procedures for supporting the health and safety of all students, including those with identified health needs, staff, parents, volunteers, independent workers and visitors. It will provide a basic first aid response to ill or injured students as set out in the procedure below. Parents/carers should be aware that the goal of first aid is not to diagnose or treat a condition.

## Aims:

- To ensure that any student, staff member, parent, volunteer or independent worker who may be injured while at school or on a school related activity, will receive first aid administered in a competent and timely manner.
- To communicate student's health concerns to parents when considered necessary.
- To provide and maintain supplies, kits and personal protective equipment necessary for the administering of first aid at school and on school related activities.
- To maintain a sufficient number of staff members trained to Level 2 First Aid Certificate.

## Implementation:

### Assistant Principal (Wellbeing)

#### Duties will include:

- Will provide oversight of First aid – policy and operation in conjunction with the Student Wellbeing Team and as Chair of the O H & S committee
- Completion of Worksafe reports
- Communicate with parents as appropriate where students have sustained a serious injury
- Review and/or lead the review of the school's First Aid Policies and procedures in the light of any serious incident

### Occupational Health and Safety Manager

Their specific duties include:

- Contributing to the risk management process within the school as part of the school's OHS team. This may include contributing to risk management solutions and providing feedback on injury reports and first aid register data to identify persistent or serious hazards.
- Providing first aid emergency awareness training for staff including emergency notification processes, a list of responsible officers and provision of emergency phone numbers.

## **First Aid Officers**

Consistent with the Department's First Aid Policy and Procedures, Geelong High School will designate staff member/s as First Aid Officer/s. The names and details of First Aid Officers, including their level of first aid and first aid expiry dates, will be provided as soon as they are known. This information will be entered in the Staff Register and remain current. A list of qualified staff will be displayed in the Staff room and the Administrative office.

- The responsible designated First Aid Officer will be determined annually and paid the appropriate First Aid Allowance. The minimum requirement for this person is a current Level 2 First Aid Certificate
- 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.
- Staff- teaching and Education Support Staff, will be regularly offered professional development to obtain, upgrade and update first aid qualifications.
- All staff will be provided with basic first aid management skills (Level 1), including blood spills and a supply of protective disposable gloves will be available.
- A First Aid Room / Sick Bay will be available for use at all times and the First Aid Officer is required to undertake a monthly check of all supplies and first aid kits.
- All injuries or illnesses that occur will be referred to a First Aid Officer, who will manage the incident. Serious injuries (including any head injuries) and any incidents requiring an ambulance, will be reported to the AP Wellbeing
- The First Aid Officer/s will be available at the school during normal working hours and at other times when authorised Department programs are being conducted.
- 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.

## **Principal**

- Has responsibility for ensuring that appropriate policies and procedures are in place and that a safe work environment is maintained at the school
- Will be informed promptly of any injuries requiring an ambulance.
- Will contact Emergency Management in the event of serious incidents (e.g. ambulance required)
- Will sign off on the completed "CASES21 Incident Notification Form"

## **Teaching Staff**

- All staff are expected to render assistance if they see an injury/incident. Teaching staff on Yard duty have a responsibility to be vigilant and to render assistance as required in the event of an injury. They should send for assistance to the Admin Office (send a reliable student) and notify the nearest staff member. The teacher who renders the primary care (ideally a qualified First-Aider) must complete the Cases21 Incident Notification Form. Names of any witnesses should be collected and a statement obtained

## **COMPASS**

- Students with specific health issues will be identified discreetly (with symbols/flag) on Compass "Dashboard" and in more detail on Compass "Personal"

## **FIRST AID KITS**

**First aid kits are located in the Administration Office, Sick Bay, the PE Staff Office in the gymnasium, the General Staff Room, Staff Office in the CA Love Hall**  
**Contents – See Attachment A**

## **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 in the Asthma Management Policy should be taken immediately.

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

If the student has an Anaphylaxis Plan, follow the first aid procedure immediately. If no, Anaphylaxis Action Plan is available the steps outlined in the Anaphylaxis Management Policy should be taken immediately.

## **Procedures for Medical Treatment**

- In the event of a student requiring medical attention, an attempt will be made to contact the parents/guardians before calling for medical attention except in an extreme emergency such as a head injury (see attachment B, Head Injury protocol, below).
- In serious cases, parents/guardians will always be informed as quickly as possible of their child's condition and of the actions taken by the school.
- All student accidents and injuries will be recorded on the Department's injury management system on CASES21.
- All injuries requiring immediate treatment by a doctor/ambulance will be reported to the Incident Support & Operations Centre (ISOC [formerly Security & Emergency Management]) 1800 126 126, and Worksafe
- All staff accidents and injuries will be recorded on eduSafe
- In the following circumstances a "CASES21 Incident Notification Form", must be completed, .(This is normally done by the teacher who rendered primary assistance but may also be the First-Aid Officer)
  - the injury requires treatment by a doctor, hospital or ambulance officer
  - a serious injury to the student's head, face, neck or back
  - fracture, dislocation, strain/sprain, laceration/cut, burn/scald, crushing/amputation, bruise/knock, dental injury
  - any other injury the staff member considers to be greater than "minor"

This CASES21 Incident Notification Form will be submitted to the Principal for signature and entered on CASES 21

A copy will be provided to parents on request.

It is the policy of the school that all injuries to the head are reported to the Assistant Principal Wellbeing and that parents/emergency contacts are contacted regarding the injury.

All injuries to the head should be treated seriously. Any student or staff member who sustains a head injury must be taken to sick-bay for assessment and monitoring (ref. Head Injury Protocol, Attachment B)

- Where applicable suitably qualified first aid staff will attend any minor injury, while more serious injuries requiring parent notification or needing treatment by a doctor, require a First Aid Officer or a Level 2 trained staff member to administer first aid.
- A school mobile phone is to be carried by the attending First Aid Officer.
- As per Medication Policy, no medication (including headache tablets), will be administered to students without the express written permission of parents or guardians. Medications to be supplied by the parent / guardian.
- As per the Blood Spills Policy, any injury involving blood must have the wound covered at all times (without applying direct pressure to the skull, in the case of head injuries).
- A confidential up-to-date register of all injuries or illness that required first aid to be maintained in the Administrative office.

- Parents who collect students from school for any reason (other than emergency), must sign them out in a register maintained in the Administration office.
- All school camps will have at least 1 Level 1 First Aid trained staff member at all times.
- An appropriate First Aid kit and a mobile phone and, when required, a Location Beacon will accompany all camps, excursions and sporting activities.
- All students attending camps or excursions will have provided a signed medical form before departure, providing medical detail and giving teachers permission to contact a doctor or ambulance should instances arise where their child requires treatment. Medical Information is to be taken on camps and excursions, as well as kept at school. Teachers taking their class on a local activity should carry a mobile phone to contact the school in an emergency.
- All teachers have the authority to call an ambulance immediately **in an emergency**. (If the situation and time permit, a teacher or ESS may confer with others before deciding on an appropriate course of action). The Administration Office **MUST** be notified if an ambulance is called. The staff member is to remain with the student until a parent / guardian or ambulance arrives and may be required to accompany the student in an ambulance.
- All children, especially those with a documented asthma management plan, will have access to Ventolin at all times. Supplies of asthma medication will be in Sick Bay and First Aid kits.
- At the commencement of each year, requests for updated confidential information including medical details will be sent home.
- Each year the designated First Aid Officer will provide the House Leaders, Wellbeing Leader with a list of all students with medical conditions. For confidentiality this information is to be kept in locked cabinets in the relevant offices.
- The First Aid Officer will enter the appropriate flag on Compass if the student has a serious medical condition.
- Information regarding students with life threatening illnesses will be distributed to all staff and photos displayed in the Staff room and Administrative office, (mindful of any privacy request of the parent ).
- It is recommended that all students have personal accident insurance and ambulance cover.

**Note:**

**The Principal** or his nominee must be notified of all emergency situations. They will be responsible for contacting the Incident Support & Operations Centre (ISOC [formerly Security & Emergency Management]) 1800 126 126, and Worksafe when required.

**Basis of Discretion:**

This policy should be read in conjunction with the OH&S, Blood Spills, Accidents & Incidents Reporting, Asthma Management, Anaphylaxis Management, Camps & Excursions, Sick Bay and Administration of Medication Policies.

**Evaluation:**

This policy should be reviewed by Student Management and Administrative staff as part of the school's three-year cycle.

## ATTACHMENT A

### First Aid Kit Contents

Consistent with the Department's First Aid Policy and Procedures the school will maintain a First Aid Kit(s) that includes the following items:

- an up-to-date first aid book – examples include:
  - First aid: Responding to Emergencies, Australian Red Cross
  - Australian First Aid, St John Ambulance Australia (current edition)
  - Staying Alive, St John Ambulance Australia, (current edition)
- wound cleaning equipment
  - gauze swabs: 100 of 7.5 cm x 7.5 cm divided into small individual packets of five
  - sterile saline ampoules: 12 x 15 ml and 12 x 30 ml
  - disposable towels for cleaning dirt from skin surrounding a wound
- wound dressing equipment
  - sterile, non-adhesive dressings, individually packed: eight 5 cm x 5 cm, four 7.5 m x 7.5 m, four 10 cm x 10 cm for larger wounds
  - combine pads: twelve 10 cm x 10 cm for bleeding wounds
  - non-allergenic plain adhesive strips, without antiseptic on the dressing, for smaller cuts and grazes
  - steri-strips for holding deep cuts together in preparation for stitching
  - non-allergenic paper type tape, width 2.5 cm–5 cm, for attaching dressings
  - conforming bandages for attaching dressings in the absence of tape or in the case of extremely sensitive skin
  - six sterile eye pads, individually packed
- bandages
  - four triangular bandages, for slings, pads for bleeding or attaching dressings, splints, etc
  - conforming bandages: two of 2.5 cm, two of 5 cm, six of 7.5 cm and two of 10 cm – these may be used to hold dressings in place or for support in the case of soft tissue injuries
- lotions and ointments
  - cuts and abrasions should be cleaned initially under running water followed by deeper and more serious wounds being cleaned with sterile saline prior to dressing. Antiseptics are not recommended
  - any sun screen, with a sun protection factor of approximately 15+
  - single use sterile saline ampoules for the irrigation of eyes
  - creams and lotions, other than those in aqueous or gel form, are not recommended in the first aid treatment of wounds or burns
- asthma equipment (which should be in all major portable kits, camping kits, sports kits, etc)
  - blue reliever puffer (e.g. Ventolin) that is in date
  - spacer device
  - alcohol wipes

Other equipment includes:

- single use gloves – these are essential for all kits and should be available for teachers to carry with them, particularly while on yard duty
- blood spill kits
- vomit spill kits
- one medicine measure for use with prescribed medications
- disposable cups
- one pair of scissors (medium size)
- disposable splinter probes and a sharps container for waste
- disposable tweezers
- one teaspoon

- disposable hand towels
- pen-like torch, to measure eye-pupil reaction
- two gel packs, kept in the refrigerator, for sprains, strains and bruises or disposable ice packs for portable kits
- adhesive sanitary pads, as a backup for personal supplies
- flexible 'sam' splints for fractured limbs (in case of ambulance delay)
- additional 7.5 m conforming bandages and safety pins to attach splints
- blanket and sheet, including a thermal accident blanket for portable kits
- germicidal soap and nail brush for hand-cleaning only
- one box of paper tissues
- paper towel for wiping up blood spills in conjunction with blood spill kit
- single use plastic rubbish bags that can be sealed, for used swabs and a separate waste disposal bin suitable for taking biohazard waste (note: Biohazard waste should be burnt and there are several companies that will handle bulk biohazard waste)
- ice cream containers or emesis bags for vomit.

## ATTACHMENT B

### HEAD INJURY PROTOCOL

- Treat all head injuries as potentially serious (ref. head Injury Signs & Symptoms below) as they often don't appear as serious as they are
- Ensure students (or staff) who sustain a head injury are accompanied to the sick bay for assessment and monitoring

### Head Injury Signs and Symptoms

#### Complex Injury

- Blood or fluid escaping from nose or ears
- Pupils become unequal in size
- Blurred vision

#### Moderate Injury

- Headache
- Loss of memory
- Confusion
- Altered response to commands and touch
- Wound(s) to the scalp or face
- Nausea
- Vomiting
- Dizziness

#### Head Injury Treatment

1. Follow DRSABCD (Danger, Response, Send (for help), Airway, Breathing Circulation, Defibrillation)
2. Treatment varies for conscious or unconscious casualties:

##### *Conscious*

- Place in comfortable position with head/shoulders slightly raised

##### *Unconscious*

- Place in recovery position
- Clear & open airway, apply chin lift if facial injuries, monitor breathing

3. Support head and neck in neutral alignment during movement, avoid twisting, due to risk of spinal injury
4. Control bleeding without applying direct pressure to skull
5. If blood or fluid comes from the ear, lie the casualty on the injured side if possible and allow fluid to drain onto sterile dressing
6. Call 000 for ambulance (all teachers are authorised to call an ambulance in an **emergency**)
7. Call parent/carer, advise seeking a medical assessment
8. Report head injury incident to AP - Wellbeing

A casualty with a head injury may vomit, so be ready to turn them onto their side and clear airway quickly. Support their head and neck through this process. You will need an assistant to do this.

## A Few Dos and Don'ts for Head Injury First Aid

# Do's & Don'ts for Head Injuries



- ✓ Be extra cautious if you suspect a head injury
- ✓ Stabilise the head and neck
- ✓ Seek medical help for any type of head injury
- ✓ Get medical assistance if the casualty vomits more than once
- ✗ Move the casualty unless they are in immediate danger
- ✗ Place pressure on the head
- ✗ Pack the ears or nose with any dressings
- ✗ Remove objects sticking out of a head wound



Reference: stjohovic