

## Administration of First Aid

(Quality Area 2 – Children’s health and safety)

*Yarriambiack Shire Council encourages a working environment which promotes gender equality and models non-violent and respectful relationships.*

### 1 Objective

This policy will provide guidelines for the administration of first aid at Yarriambiack Shire Council.

### 2 Policy Statement and Scope

#### VALUES

Yarriambiack Shire Council is committed to:

- providing a safe and health environment for all children, early childhood educators, staff and other attending the service
- providing a clear set of guidelines in relation to the administration of first aid at the service
- ensuring that the service has the capacity to deliver current approved first aid, as required.

#### SCOPE

This policy applies to the approved provider, persons with management or control, nominated supervisor, persons in day-to-day charge, early childhood teachers, educators, other staff, students, volunteers, parents/guardians, children and others attending the programs and activities of Yarriambiack Shire Council, including during offsite excursions and activities.

### 3 Responsibility

RESPONSIBILITIES	Approved provider and persons with management	Nominated supervisor and persons in day-to-day	Early childhood teacher, educators and all other staff	Nominated first aid officer	Parents/guardians	Contractors, volunteers and students
<b>R</b> indicates legislation requirement, and should not be deleted						
Ensuring that every reasonable precaution is taken to protect children, staff and others at the service from harm and hazards that are likely to cause injury ( <a href="#">National Law: Section 167</a> )	<b>R</b>	<b>R</b>	√			

Assessing the first aid requirements for the service ( <i>refer to Attachment 3</i> ). A first aid risk assessment can assist with this process ( <i>refer to Attachment 4</i> )	R	√		√		
Ensuring that at least one early childhood teacher [ECT]/educator with current approved first aid qualifications ( <i>refer to Definitions</i> ) is in attendance and immediately available at all times that children are being educated and cared for by the service ( <i>Regulation 136</i> ). This can be the same person who has anaphylaxis management training and emergency asthma management training	R	√				
Ensuring first aid requirements are met when transporting children as part of the education and care service, and must be met in each vehicle ( <i>Regulation 136</i> )	R	√	√			
Ensuring that the prescribed educator-to-child ratios are met at all times ( <i>refer to Supervision of Children Policy</i> )	R	√	√			
Appointing a staff member or nominated supervisor to be the nominated first aid officer. This is a legislative requirement where there are 10 or more employees but is also considered best practice where there are fewer than 10 employees <i>Occupational Health and Safety Act 2004</i> .	R	√				
Advising parent/guardian that a list of first aid and other health products used by the service is available for their information, and that first aid kits can be inspected on request	√	√	√	√		
Providing and maintaining an appropriate number of up-to-date, easily recognisable, readily accessible, suitably equipped first aid kits ( <i>refer to Attachment 3</i> ), with in-date products that meet Australian Standards ( <i>refer to Definitions</i> ). The appropriate number of kits will depend on the number of children in the service, the number of rooms and their proximity to each other, and distances from outdoor spaces to the nearest kit ( <i>Regulation 89</i> )	R	√		√		
Ensuring procedures are developed for the regular monitoring of all first aid kits are suitably equipped ( <i>Regulations 89</i> )	R	√		√		
Ensuring defibrillators are maintained and regularly tested and serviced, including cyclical replacement of pads and batteries as per manufacturer specifications	√	√		√		
Ensuring a risk assessment is conducted prior to an excursion to identify risks to health, safety, or wellbeing and specifying how these risks will be managed and minimised ( <i>Regulations 100, 101, 102B, 102C</i> ). Refer to <i>Excursions and Service Events Policy and Road Safety and Safe Transport Policy</i>	R	√	√			
Providing and maintaining a portable first aid kit that can be taken offsite for excursions and other activities ( <i>Regulation 89</i> ) ( <i>refer to Attachment 3</i> )	R	√	√	√		

Ensuring that the Ambulance Victoria AV How to Call Card ( <i>refer to Sources</i> ) is displayed near all telephones or in a visible location.	√	√	√			
Ensuring that first aid training details, and renewal dates are recorded on each staff member's record ( <i>Regulation 146, 147</i> )	<b>R</b>	√				
Ensuring safety signs showing the location of first aid kits are clearly displayed ( <i>Regulation 89</i> ) ( <i>refer to Attachment 3</i> )	<b>R</b>	√		√		
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	<b>R</b>	√				
Ensuring that parents are notified within 24 hours if their child is involved in an incident, injury, trauma or illness at the service and recording details on the Incident, Injury, Trauma and Illness Record ( <i>refer to Definitions</i> )	<b>R</b>	√	√			
Notifying DE within 24 hours of a serious incident ( <i>refer to Definitions</i> ) occurring at the service	<b>R</b>	√				
Ensuring that staff are offered support and debriefing following a serious incident requiring the administration of first aid ( <i>refer to Incident, Injury, Trauma and Illness Policy</i> )	√	√				
Ensuring a resuscitation flow chart ( <i>refer to Definitions</i> ) is displayed in a prominent position in the indoor and outdoor environments of the service ( <i>refer to Attachment 1</i> )	√	√		√		
Keeping up to date with any changes in procedures for administration of first aid and ensuring that all educators are informed of these changes	√	√				
Implementing appropriate first aid procedures when necessary ( <i>refer to Attachment 1 &amp; 2</i> )		√	√	√		
Maintaining current approved first aid qualifications, and qualifications in anaphylaxis management and emergency asthma management, as required		<b>R</b>	<b>R</b>	<b>R</b>		
Practicing CPR and administration of an auto-injector at least annually (in accordance with other service policies)		<b>R</b>	<b>R</b>	<b>R</b>		
Ensuring that all children are adequately supervised ( <i>refer to the Supervision of Children Policy</i> ) while providing first aid and comfort for a child involved in an incident or suffering trauma ( <i>refer to Attachment 2</i> )	<b>R</b>	√	√			
Ensuring that the details of any incident requiring the administration of first aid are recorded on the Incident, Injury, Trauma and Illness Record ( <i>refer to Definitions</i> ) no later than 24 hours after the occurrence ( <i>refer to Incident, Injury, Trauma and Illness Policy</i> )	<b>R</b>	√	√			

Ensuring the parents/guardians reads and signs the Incident, Injury, Trauma and Illness Record		√	√			
Notifying the approved provider or nominated supervisor six months prior to the expiration of their first aid, asthma or anaphylaxis accredited training			√	√		
Ensuring all out of date first aid kit contents are disposed of safely. The safest way to dispose of unused/out of date medicines is through the Return Unwanted Medicines (RUM) scheme which is run by a government funded organisation called The National Return & Disposal of Unwanted Medicines Limited: <a href="https://returnmed.com.au/">https://returnmed.com.au/</a>	√	√	√	√		
Providing the required information on the service's medication record ( <i>refer to Definitions</i> ) when child requires administration of medication ( <i>refer to Administration of Medication Policy</i> )						<b>R</b>
Notifying the service of any medical conditions or specific medical treatment required for their child. Where necessary, in consultation with staff, develop appropriate medical management plans and risk minimisation plans (e.g. asthma, anaphylaxis). Providing any required medication. ( <i>refer to Asthma Policy and Anaphylaxis Policy</i> )						<b>R</b>
Providing written consent (via the enrolment record) for service staff to administer first aid and call an ambulance, if required						<b>R</b>
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						√

## 4 Procedures

- Basic Life Support Flow Chart Procedure – refer to Attachment 1
- First Aid Responder's Role – refer to Attachment 2

## 5 References

### SOURCES

- Ambulance Victoria: [www.ambulance.vic.gov.au](http://www.ambulance.vic.gov.au)
- Australian Children's Education and Care Quality Authority (ACECQA): [www.acecqa.gov.au](http://www.acecqa.gov.au)
- Australian Red Cross: [www.redcross.org.au](http://www.redcross.org.au)
- St John Ambulance Australia (Vic): [www.stjohnvic.com.au](http://www.stjohnvic.com.au)
- First aid in the workplace: [www.worksafe.vic.gov.au](http://www.worksafe.vic.gov.au)

### RELATED POLICIES

- Administration of Medication
- Anaphylaxis and Allergic Reactions
- Asthma
- Child Safe Environment and Wellbeing

- Dealing with Infectious Diseases
- Dealing with Medical Conditions
- Diabetes
- Emergency and Evacuation
- Epilepsy and Seizures
- Excursions and Service Events
- Incident, Injury, Trauma and Illness
- Occupation Health and Safety
- Road Safety and Safe Transport
- Staffing

## 6 Definitions

Approved first aid qualification	The list of approved first aid qualifications and anaphylaxis management and emergency asthma management training published on the ACECQA website: <a href="http://www.acecqa.gov.au">www.acecqa.gov.au</a>
First Aid	The provision of initial care in response to an illness or injury. It generally consists of a series of techniques to preserve life, protect a person (particularly if unconscious), prevent a condition worsening and promote recovery. First aid training should be delivered by approved first aid providers, and a list is published on the ACECQA website: <a href="http://www.acecqa.gov.au">www.acecqa.gov.au</a>
First aid kit	<i>The Compliance Code: First aid in the workplace</i> , developed by WorkSafe Victoria, lists the minimum requirements for a first aid kit ( <i>refer to Attachment 3</i> ). <i>The Compliance Code: First aid in the workplace</i> is available at: <a href="http://www.worksafe.vic.gov.au">www.worksafe.vic.gov.au</a> .
Resuscitation flowchart	Outlines the six steps involved in resuscitation: danger, response, airways, breathing, compression and defibrillation. The Australian Resuscitation Council provides flowcharts for the resuscitation of adults and children free of charge at: <a href="https://resus.org.au/guidelines/flowcharts-3/">https://resus.org.au/guidelines/flowcharts-3/</a>

## 7 Policy Review

In order to assess whether the values and purposes of the policy have been achieved, the approved provider will:

- regularly check staff files to ensure details of approved first aid qualifications have been recorded and are current
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- review the first aid procedures following an incident to determine their effectiveness
- regularly seek feedback from the nominated first aid officer and everyone affected by the policy regarding its effectiveness
- keep the policy up to date with current legislation, research, policy and best practice
- consider the advice of relevant bodies or organisations such as Australian Red Cross and St John Ambulance when reviewing this policy
- revise the policy and procedures as part of the service's policy review cycle, or as required

- notifying all stakeholders affected by this policy at least 14 days before making any significant changes to this policy or its procedures, unless a lesser period is necessary due to risk (*Regulation 172 (2)*)

## 8 Legislative Context

### BACKGROUND

First aid can save lives and prevent minor injuries or illnesses from becoming major ones. The capacity to provide prompt basic first aid is particularly important in the context of an early childhood service where staff have a duty of care and obligation to assist children who are injured, become ill or require support with administration of medication.

Legislation that governs the operation of approved children’s services is based on the health, safety and welfare of children, and requires that children are protected from hazards and harm. The *Education and Care Services National Regulations 2011* states that an approved provider must ensure 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. Under the *Education and Care Services National Law Act 2010*, the *Australian Children’s Education and Care Quality Authority* (ACECQA) are required to publish lists of approved first aid qualifications. These lists are available at: [www.acecqa.gov.au](http://www.acecqa.gov.au). As a demonstration of duty of care and best practice ELAA recommends all educators have current approved first aid qualifications.



It is also a requirement that employers have appropriate first aid arrangements in place, including first aid training, first aid kits and first aid facilities, to meet their obligations under the *Occupational Health and Safety Act 2004*. WorkSafe Victoria has developed a *Compliance Code First aid in the workplace* (*refer to Sources*) that provides guidance on how these obligations can be met.

### LEGISLATION AND STANDARDS

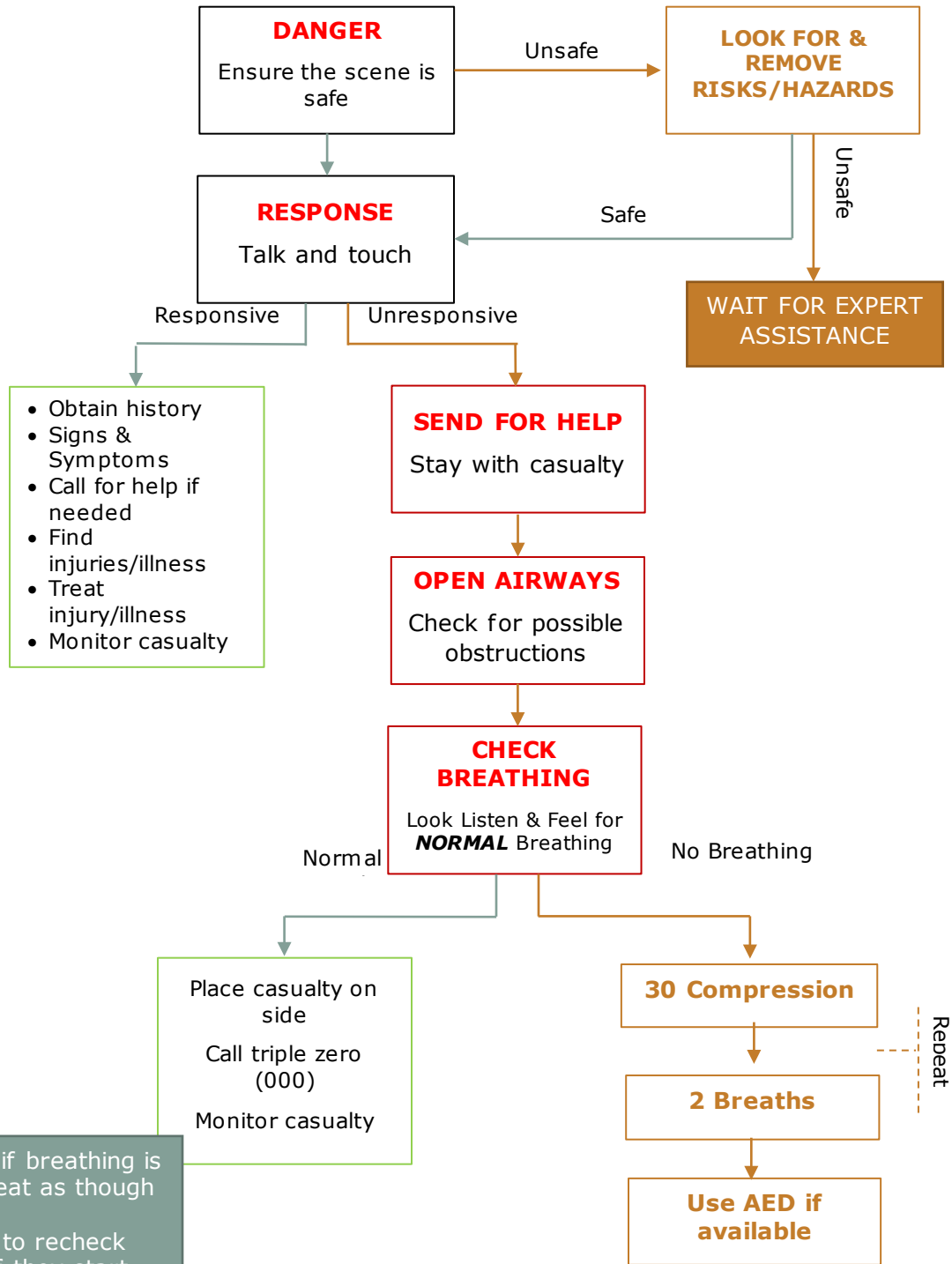
Relevant legislation and standards include but are not limited to:

- Child and Wellbeing Safety Act 2005 (Vic) (Part 2: Principles for Children)
- Education and Care Services National Law Act 2010
- Education and Care Services National Regulations 2011
- National Quality Standard, Quality Area 2: Children’s Health and Safety
- Occupational Health and Safety Act 2004

## 9 CEO Approved Policy

Adopted:	CEO Approved Date	CEO Name	CEO Signature
Reviewed:	14/08/2023	Tammy Smith	
	16/01/2025	Tammy Smith	

**10 Attachment 1 – Basic Life support Flow Chart**



- If unsure if breathing is normal treat as though it is not
- Only stop to recheck casualty if they start breathing **NORMALLY**
- If possible, change first aiders every 1 to 2 mins to reduce fatigue
- Send or go for help as soon as possible.

## 11 Attachment 2 – First Aid Responder’s Role

The following circumstances are examples of, but not limited to when first aid is required until assistance from a qualified health professional becomes available:

- Life threatening injury or illness
- Choking /blocked airway
- Anaphylactic reaction to an allergen, e.g. nuts, eggs
- Bleeding
- Bone fracture
- Convulsions and/or high temperature
- Injury to head, eye or back
- Asthma attack
- Excess vomiting or diarrhoea presenting a risk of dehydration
- Loss of consciousness
- Burns, which includes sunburn
- Poisoning from hazardous chemicals, plants, substances, and
- Bites from spiders, insects or snakes

In a medical emergency Educators/First Aid Responder needs to:

- Attend immediately to an injured/ill child or individual and implement appropriate first aid management.
- Assess if there is a need for an ambulance to attend and call 000 for attendance or advise a co-worker to make the call.
- Identify any risks in the immediate area and minimise/eliminate these.
- Implement any medical condition action plans that are required if a child with a diagnosed medical condition is involved.
- Monitor the child’s/individual’s condition and maintain appropriate first aid support if required until further assistance is available from qualified health professionals.
- Ensure that arrangements are made to remove the child/individual as soon as possible in the interests of the health, safety and wellbeing of that child and others.
- Notify as soon as practicable the parents/guardians of a child involved in a serious medical emergency or accident.
- Document as soon as practicable the incident details on the Incident, Injury, Trauma and Illness Record as per the *Incident, Injury, Trauma and Illness Policy*
- Notify DE within 24 hours of a serious incident (*refer to Definitions*) occurring at the service
- In the case of a serious accident/injury of an adult, as far as practicable, the scene of the accidents should not be touched as it may need to be inspected by an inspector from WorkSafe
- Notify WorkSafe if a serious workplace injury has occurred as soon as practicably possible and in writing within 48 hours of the accident occurring.
- In the event of an asthma attack, (if the service spacer was used) the used spacer must be provided to the family and a new spacer to be purchased for the service as soon as possible.
- In the event of anaphylaxis, the used adrenaline autoinjectors to be given to the ambulance officer attending the scene, with the date and time it was used.