



St Paul's College

First Aid and Medical Emergency Policy

St Paul's College takes a zero-tolerance approach to child abuse and is fully committed to ensuring that its strategies, policies, procedures and practices meet all Child Safety Standards as specified in Ministerial Order No. 870 (2015)

1. Purpose of this Policy

To ensure that St Paul's College meets the first aid and medical emergency needs of students at school or on approved school activities.

2. Definition of First Aid

First aid involves emergency treatment and support to preserve life through:

- clearing and maintaining open airways
- restoring breathing or circulation
- monitoring wellbeing until the person recovers or is transferred into the care of ambulance, paramedic, doctor or nurse
- protecting a person, particularly if they are unconscious
- preventing a condition worsening
- promoting recovery.

Schools are required to administer first aid to a student if an injury, sudden illness or medical emergency occurs at school or during a school activity.

The goal of First Aid is not to diagnose or treat the condition.

Schools must:

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- provide first aid facilities to allow for provision of basic first aid care as well as first aid treatment such as minor cuts, scratches, bruising and injury
- ensure sufficient staff trained in first aid under the provisions of the Occupational Health & Safety Act 2004 and are always available to assist an ill or injured person. See: St Paul's College First Aid policy – Infection Prevention and Control
- maintain at least one major first aid kit located in the sick bay
- maintain portable first aid kits for excursions and yard duty
- in the case of a medical emergency, schools must immediately contact emergency medical services (call 000) and be familiar with the school's emergency procedures
- Staff may also contact **NURSE-ON-CALL (1300 606 024)** in an emergency for immediate, expert advice from a registered nurse – 24 hours a day, 7 days a week

Please note: First aid for anaphylaxis and asthma are provided in **St Paul's College Anaphylaxis and Asthma policies**.

3. First Aid Procedures

- Where a student is feeling unwell

Unwell students should not attend school. If a child feels unwell at school, staff should contact the student's family (ensure emergency contact details are up to date) and/or seek medical assistance.

- Where there is a medical emergency

Staff should take emergency action without waiting for parent/guardian consent. Delays in these circumstances could compromise safety. Staff should:

- immediately contact emergency medical services (call 000)
- apply first aid until assistance arrives
- notify parents/carers once action has been taken
- notify VMCH

4. Applying first aid

If necessary, apply basic first aid with DRSABCD:

- **Danger** – always check for any danger to you, any bystanders, and then the injured student. Staff should not put themselves in danger when assisting an injured or sick student
- **Response** – check if the student is conscious by seeing if they will respond when you talk to them, touch their hand or squeeze their shoulder
- **Send for help** – call 000
- **Airway** – check the student's airway is clear and that they are breathing

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- Breathing - check for breathing (look for chest movements, listen for air coming through the student's mouth or nose or feel for breathing by placing a hand on the lower part of the student's chest)
- CPR – if the student is unconscious and not breathing, apply CPR (cardiopulmonary resuscitation)
- Defibrillator – if the student is unconscious and not breathing, apply an automated external defibrillator (AED) if one is available. Some AEDs are not suitable for children so ensure the device is checked for suitability.

Important note: staff should only apply first aid in line with their skills and level of training.

5. Where there is a head injury and suspected concussion

Following a head injury or knock to the head, children and adolescents may be more susceptible to concussion and take longer to recover.

RED FLAGS – Call an ambulance

If there is concern after a head injury, including whether ANY of the following signs are observed or complaints are reported, first aid should be administered AND an ambulance should be called for urgent medical assessment:

- neck pain or tenderness
- double vision
- weakness or tingling/burning in arms or legs
- severe or increasing headache
- seizure or convulsion
- loss of consciousness
- deteriorating conscious state
- vomiting
- increasingly restless, agitated or combative

OBSERVABLE SIGNS – take appropriate action

If there are NO RED FLAGS but signs and symptoms that suggest concussion:

- the student should be immediately removed from play/sport and not engage in further activity (e.g. returning to a sporting game)
- the school must advise the parent or carer to collect the student and recommend a medical assessment, even if the symptoms resolve.
- See: DET [Concussion Recognition Tool 5](#)

6. Making contact with parents and carers

Whenever there is a suspected concussion, parents/carers should always be contacted and the following actions taken:

- If concussion IS suspected:
 - the school must contact the parent or carer and ask the parent or carer to collect the student from school and recommend a medical assessment, even if the symptoms resolve.
- If concussion ISN'T suspected:
 - the parent or carer should be contacted and informed of the injury
 - If, after being informed of this process the parent or carer wish to collect the student from school, they may do so.

Following identified concussion incidents, schools may need to make reasonable adjustments as guided by the student's treating team, including:

- return to learning and return to sport plans
- modifying school programs to include more regular breaks, rests and increased time to complete tasks

7. Where there is an identified health need

First aid requirements for students with identified health care needs should be explained in the Student Health Support Plan, Anaphylaxis Management Plan or Asthma Care Plan. [See St Paul's College Health Care Needs Policy](#)

To display a photo of a student and a description of their health care needs in a staff area, consent is required from parents/carers and/or the student, if they are at secondary school age.

8. Not-for-resuscitation order

When students have a Not-For-Resuscitation order (NFR) as part of their palliative care to manage a deteriorating and life-threatening condition, the first aid response should include:

- documentation in the Student Health Support Plan
- immediate call for an ambulance.

It is not the role of the school and school staff to make a decision about medical prognosis or to determine whether the point of the Not-For-Resuscitation order has been reached.

9. Accompanying student to hospital

At the principal's discretion, a staff member may accompany a student transported by emergency services when one or more of the following applies:

- a parent/carer or emergency contact person cannot do so

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- the age or developmental needs of the student justifies this
- alternative supervision for remaining students can be arranged

10. Accompanying Student in Private Vehicle

On the rare occasion when a school staff member has to transport a student to emergency care (such as when an ambulance is not available), at least two adults should accompany the student to ensure that:

- the driver is not distracted
- the student can be constantly supervised

11. Medication

Schools should not:

- store or administer analgesics such as aspirin and paracetamol as a standard first aid strategy as they can mask signs and symptoms of serious illness or injury
- allow a student to take their first dose of a new medication at school in case of an allergic reaction. This should be done under the supervision of the family or health practitioner.
- allow use of medication by anyone other than the prescribed student.

Note: Only in a life-threatening emergency could this requirement be varied. For example, if a student is having an asthma attack and their own blue reliever puffer is not readily available, one should be obtained and given without delay.

See: [St Paul's College Medication Policy](#)

12. Use of Ice Packs

When using an icepack to treat a minor injury such as a bump or bruise do not apply directly to skin and remove if pain or discomfort occurs and use a cold compress (towel or cloth rinsed in cold water) as an alternative.

When an injury causes a nose bleed then an ice pack should not be used - instead a cold compress may be used.

13. Other Injuries

In the following circumstances an icepack and/or cold compress should not be used and medical help should be sought - **usually by calling an ambulance**:

- loss of consciousness, even if only briefly
- a less than alert conscious state

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- suspicion of a fracture
- suspicion of a spinal injury
- damage to eyes or ears
- penetration of the skin
- deep open wounds

14. Staff and Training

Principals and school staff must:

- be familiar with the school's first aid procedures
- observe their duty of care to students by providing first aid treatment within the limits of their skill, expertise, training and responsibilities
- nominate staff to be first aid officer/s (dependent on the number of employees/students)
- ensure there is always a nurse or first aid officer who:
 - can assist an ill or injured person
 - has current qualifications covering all the school's first aid requirements

Principals must ensure relevant staff receive additional training to meet student health needs (which may include training for anaphylaxis, asthma or diabetes management).

15. Training

The need for first aid varies at each school. **Staff who practise first aid should have their position description updated to reflect this extra responsibility.**

Staff nominated to be First Aid Officers must have completed:

- a recognised first aid training course that meets the requirements of Provide First Aid and Cardiopulmonary Resuscitation (CPR)
- basic First Aid training must be completed every three years, while a refresher course in CPR must be completed annually

Where required, additional first aid modules may need to be completed by school staff to cover:

- the health needs of students attending the school, such as asthma management, administration of the EpiPen; or
- excursions, specific educational programs or activities

For information on how to identify first aid needs, see: DET [First Aid Risk Assessment](#)

16. First aid Kits

Schools must:

- maintain at least one major first aid kit located in the sick bay
- maintain portable first aid kits for excursions or yard duty
- store any medications separately from the first aid kit including any prescribed or non-prescribed medication provided by a student's parent/carer.

Schools are responsible for determining what items should be included in their first aid kit based on the needs of their school community. For a checklist recommending what should be included in a standard school first aid kit, as well as a portable first aid kit, use the DET [First Aid Kit Contents checklist](#).

17. Kit Contents

First aid kit contents should meet the first aid requirements of individual schools. The contents depend on:

- the number of students and staff
- nature of the activities being undertaken
- location of excursions and the activities to be undertaken.

Ambulance Victoria recommends portable first aid kits should include:

- a first aid manual of a smaller size specialised, if possible, to the activities being undertaken, such as:
 - Emergency First Aid: A Quick Guide (St John Ambulance)
 - First aid Notes, available from Australian Red Cross
- a copy of the DET [Concussion Recognition Tool 5](#)
- two pairs of single use nitrile gloves
- sterile saline sachets or ampoules for irrigating eyes and minor wounds
- gauze and band aids
- a resuscitation face mask
- if possible, a device to call for assistance such as mobile phone, cordless phone, or two-way radio.

18. First Aid Rooms

For the minimum requirements for a first aid room see [St Paul's College: First Aid Room Checklist](#)

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19. Related St Paul's College Policies

- Anaphylaxis policies
- Asthma & Asthma Emergency plan
- Critical Incident Management plan
- Diabetes
- Emergency Care Response plan
- Epilepsy
- First Aid policies
- Health Care Needs policy
- Immunisation/Exclusion procedures
- Medical Assistance Complex Care
- Medication policy

20. Other Resources

- [Australian Red Cross](#) - First Aid Handbook
- Australian Sports Commission: [Parents and teachers - Concussion in Sport](#)
- [First Aid in the Workplace - \(Worksafe Victoria\)](#)
- [St John Ambulance Australia](#) for Australian First Aid
- [Survival Emergency Solutions](#) for Survival Emergency First Aid Kit

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