

## 1. Purpose

The purpose of this policy is to provide an understanding of the procedures and responsibilities associated with providing first aid at My College. It ensures that prompt and effective first aid is available to all students, staff, and visitors in the event of injury or illness during school hours and school-sanctioned activities. The policy also provides guidance for the safe handling of medical information and medication, upholding the College's duty of care and commitment to child safety and wellbeing.

## 2. Scope

This policy applies to all students, staff, visitors and volunteers on College premises. It also applies to school-related activities, excursions, camps and sports events. It includes First aid personnel, including the School Nurse and any staff member responsible for administering medications or responding to medical incidents.

## 3. Policy Statement

My College is committed to providing a safe and healthy learning environment. In accordance with our legal and ethical obligations, the College will:

- Maintain a fully equipped First Aid Room and adequate first aid kits across the campus
- Appoint and train qualified First Aid Officers, ensuring staff hold current and relevant certifications (e.g., CPR, anaphylaxis, asthma management)
- Ensure compliance with Ministerial Order 706 and other relevant health and safety legislation
- Protect the privacy of students and staff by securely managing personal medical information
- Communicate first aid procedures and responsibilities clearly to staff, students, and parents
- Implement a structured reporting and escalation process for medical incidents using the Traffic Light System
- Ensure emergency medical responses, including ambulance services, are activated as needed and communicated to parents/guardians

## 4. Implementation

### 4.1 Duty of Care

#### School

My College has a legal and moral responsibility to protect the safety and wellbeing of students. This includes ensuring appropriate first aid is provided and that procedures for safe administration of medication are in place. The school retains overall responsibility under its duty of care, even when staff assist in administering medication.

- Staff must be trained and supported in their roles.

- They must have access to advice and assistance.
- Responsibilities must be clearly outlined to prevent mismanagement.

### Teaching Staff

Teachers have a heightened legal duty of care to supervise students, prevent foreseeable harm, and respond appropriately to injuries within their training. They are responsible for escalating medical concerns and administering first aid or medication only when qualified to do so.

### Non-Teaching Staff

Non-teaching staff may support first aid efforts under the guidance of the school, though they do not hold the same legal duty of care as teachers. Their role includes assisting in supervision and referring medical concerns to trained staff or the First Aid Officer.

### First Aid Officer(s)/ School Nurse

These staff members provide immediate medical assistance, maintain and restock supplies, manage student health records, and communicate with families and leadership regarding health-related concerns. They oversee the implementation of care plans, conduct risk assessments and staff briefings, and ensure that all first aid procedures and reporting systems are followed accurately.

### Limits to Duty of Care

In the event of a serious illness or injury, staff are not expected to diagnose or treat medical conditions outside the scope of first aid. Diagnosis and further treatment fall under the responsibility of medical practitioners or ambulance services.

## **4.2 Staff Training**

To ensure effective first aid response across the College, all staff members are expected to undertake and maintain the following training and compliance requirements:

- Advanced first aid training for staff involved in high-risk activities (e.g., sports teachers, school nurses, and food technology teachers).
- General first aid training for all staff.
- Twice yearly first aid briefings to reinforce protocols and updates.
- Induction Program for all staff including casual staff, CRTs, and new staff members.
- Compliance with Ministerial Order 706 and the College's Anaphylaxis Management Policy.
- Regular review and updating of all required training to remain compliant and current

All staff are further required to:

- Complete ASCIA Anaphylaxis and Auto-injector Device training (every 2 years)
- HLTAID009 Provide CPR (annually)
- HLTAID011 or HLTAID012 First Aid (every 3 years)
- Asthma Australia module (every 3 years)

## **4.3 First Aid Procedures**

### **4.3.1 First Aid room protocols & arrangements for ill students**

#### First Aid Room Access and Operations

The First Aid room is located in the main administration building of the school. First Aid is staffed between 7.45 am – 4.30 pm on weekdays during the school term. In the event a student requires First Aid attention:

- Student should be sent to the First Aid Room with a First Aid Pass.
- Send another student with the unwell or injured student.

- The First Aid room is for short term care only. The School Nurse/First Aid Officer(s) will endeavor to send students back to class or call parents/guardians/ambulance should further treatment be required.
- If a child is unwell at the beginning of the day, he/she should not be sent to school.
- Parents who collect children from the First Aid room should report to the front office prior to leaving the school and ensure the student has been signed out.
- If the child has an episode of vomiting whilst at the College, the parents/guardians are required to collect them from the College upon a phone call request from the School Nurse/First Aid officer(s).

a) Infectious Disease Management

- A student who has been infected with, or been in contact with, a person diagnosed with an infectious disease or condition listed in the DH School Exclusion Table (See Appendix).
- These diseases include, but are not limited to, ringworm, chickenpox (varicella), conjunctivitis, hand, foot and mouth disease, impetigo (school sores), diarrheal illness, gastroenteritis, and influenza.
- Students suspected of having a contagious disease will be monitored in the First Aid Room. Parents or guardians will be contacted and asked to collect the student for further assessment and treatment by a healthcare practitioner, if deemed necessary.
- Students infected with a contagious disease will not be permitted to return to school until a medical clearance letter is provided to the school by a medical practitioner.
- Parents/Guardians of students who have been diagnosed with a contagious disease by a healthcare practitioner should inform the school of the diagnosis as soon as practicable to help prevent an outbreak. The School Nurse or College First Aid Officer(s) will take the necessary measures as outlined in the school's reporting system (See Appendix 1).

b) Head Lice Protocol

Parents/Guardians of a student who has been infected with head lice must sign and follow the treatment advice outlined in the Head Lice Treatment Acknowledgement Form at the time of notification.

c) Head Injuries Notification

Parents/Guardians will be notified of any head-related injuries as per the Traffic Light System.

d) Ambulance Costs & Recommendations

The cost of an Ambulance hospital transfer is the responsibility of the parents/guardians. The College takes no financial responsibility if and when an Ambulance is deemed necessary by any one of its staff including off-site and overseas travel mercy flight. Parents/Guardians are encouraged to take private Ambulance membership via 'Ambulance Victoria' and/or overseas travel medical insurance.

e) Classroom Procedures

Each classroom is equipped with a Classroom Emergency Kit placed in a designated 'First Aid' area, clearly marked for easy access. These kits contain:

- Bandages, Normal Saline, Alcohol wipes, Cotton wools, Vomit Bags, Vomit Powder
- Small Disposable Bags, Gloves, Antiseptic wipes

Additionally, a red folder in each room holds:

- A current classroom list of students at medical risk
- Relevant care and management plans
- Emergency procedures

Teachers are expected to respond to minor ailments within the classroom setting using these resources. If the condition escalates or appears more serious, students must be referred to the First Aid Room.

These procedures apply to all staff, including casual relief teachers (CRTs), and ensure continuity of care across all classrooms.

f) Yard Duty Procedures

Staff on yard duty must carry First Aid yard duty bags, which include:

- Band-Aids, antiseptic spray, gauze, gloves
- CPR mask, notebook, pen, sick bay passes

Yard Duty Bags located around the campus also contain:

- Anaphylaxis and Asthma Kits
- A list of students with relevant medical conditions

Staff must immediately attend to minor injuries and refer serious or uncertain conditions to the First Aid Room. Any first aid administered must be reported and documented appropriately. Staff must be familiar with students who have allergies or asthma as listed in the Student List of Medical Conditions.

In the case of an emergency, staff should use mobile phones to request for assistance from other staff members or escalate situations to emergency services as required.

Emergency medication, including adrenaline auto-injectors and Ventolin, must be readily available during all yard duties.

These kits are managed by the School Nurse and checked daily and after each use. Staff are expected to return them promptly for restocking.

Staff on yard duty must carry yard duty bags with basic first aid items and have access to asthma and anaphylaxis kits. They are responsible for immediate response and referral to the First Aid Room when escalation is needed.

g) Off-campus / Excursion Procedures

Teachers planning excursions must coordinate with the School Nurse/First Aid Officer(s) to ensure all medical requirements are met. This includes:

- Booking and collecting First Aid Kits from the First Aid Room in advance.
- Providing updated class lists of attending students.
- Ensuring all attending students' medical action and management plans (e.g., asthma, anaphylaxis) are collected and included.
- Ensuring individual emergency medication is included for each student as per their action plans.
- Carrying general use adrenaline auto-injectors even if no students are known to be at risk.
- Receiving training or a refresher on administering EpiPens, Ventolin via spacer, and using the defibrillator.
- Signing documentation to confirm training and receipt of kits.
- Ensuring at least one attending staff member is certified in first aid.
- School Nurse/First Aid Officer must conduct a risk assessment for the excursion and debrief all attending staff on medical responsibilities and emergency procedures.

These steps ensure student safety is prioritised during all school outings.

#### **4.3.2 Emergency Kits**

Asthma and Anaphylaxis Emergency Kits Locations (See Appendix 1):

- First Aid Room in the Front Office
- Staff Room in Building C
- Yard Duty Bags in Building C
- Yard Duty Bags in the Front Office
- Excursion Bags in the Front Office

### Anaphylaxis Emergency Kit

Anaphylaxis Emergency Kits contain the following items:

- Adrenaline Auto-injectors for general use (1 x junior and 1 x adult)
- First Aid instructions on conducting First Aid Anaphylaxis
- Medication Log Record
- A notepad and pen
- A current list of students with Anaphylaxis

All Emergency Anaphylaxis Kits will be reviewed on a monthly basis, with lists being updated as required.

In the event that this kit is used, it is the responsibility of the staff member initiating this emergency treatment to notify the School Nurse/First Aid Officer(s) so that the Auto-injector can be replaced as soon as practically possible.

For further information about the management of Anaphylaxis in the School, refer to the Anaphylaxis Policy.

### Asthma Emergency Kit

Asthma Emergency Kits will be reviewed monthly and contain the following:

- Reliever medication
- 2 x small volume spacer devices
- First Aid instructions on Asthma First Aid
- Medication Log Record
- A current list of students with Asthma

In the event that this kit is used, it is the responsibility of the staff member initiating this emergency treatment to notify the School Nurse/First Aid Officer so that the spacer can be replaced as soon as practically possible.

For further information about the management of Asthma in the School, refer to the College's Asthma Management Policy.

Please Note:

- All spacers are single use only. It is essential to have at least two spacers in each kit and that spacers are replaced each time they are used.

### Classroom Emergency Kits

Every classroom will have an emergency kit containing basic first aid essentials, including:

- Bandages
- Normal Saline
- Alcohol wipes
- Cotton wools
- Vomit Bags
- Vomit Powder
- Small Disposable Bags
- Gloves
- Antiseptic wipes

Each classroom kit will be placed in a clearly designated 'First Aid' area and accompanied by a red folder containing:

- A current list of students at medical risk
- Relevant care/management plans
- School emergency procedures

These resources support all staff, including casuals and CRTs, in responding to medical situations.

#### 4.3.3 Medical Records & Documentation

- At enrolment, parents/guardians are required to provide up-to-date medical information including any chronic illnesses, allergies, asthma, anaphylaxis, or other health conditions. At the commencement of each year, requests for updated first aid information are sent home.
- It is expected that the parent/guardian will provide My College with appropriate documentation including action plans, management plans and specific instructions from specialists and/or medical practitioners. This is a mandatory requirement.
- All students' medical information is entered and stored on the Student's Database by the School Nurse/ First Aid Officer(s).
- Health support plans are created in collaboration with parents/guardians and reviewed annually or whenever there is a change in the student's condition or treatment requirements.
- Incidents involving first aid treatment are documented using the First Aid Attendance Slip with copies distributed to the parent (white), teacher (yellow), and retained by First Aid (blue).
- Records are kept in line with the school's reporting system and privacy obligations.
- Staff are kept informed of students at risk through updated class medical alerts and care plans provided regularly.
- Any changes to a student's medical status must be communicated promptly by the parent/guardian to the school to ensure continued safety and proper care.
- Documentation may also be required for excursions and off-site activities, with action plans and emergency medication included in the first aid kits as necessary.

#### 4.3.4 Reporting Injuries

##### a) Classroom

- Minor ailments should first be assessed by the classroom teacher.
- Teachers should allow the student to rest in class if suitable and monitor for changes.
- If symptoms worsen or if there's any doubt about the student's condition, they must be referred to the First Aid Room.
- The staff member is responsible for informing the parents/guardians of if treatment was administered within the classroom using the school's communication system.

##### b) First Aid Room

- Injuries treated in the First Aid Room follow the College's Traffic Light System (Green, Yellow, Orange, Red) (See Appendix 2) which categorises the response based on the nature and severity of the incident.
- Each level of the system includes specific protocols for documentation, parental notification, and escalation:

Green Level	Minor injuries (e.g., small cuts, superficial bruises) requiring minimal treatment. No follow-up required. Parents notified via SMS with general details; slips are sent home.
Yellow Level	Minor to moderate injuries (e.g., deeper cuts, minor head injuries). Follow-up required. Ongoing monitoring may be advised. Parents notified via SMS and given a detailed slip.
Orange Level	Moderate injuries or medical incidents requiring isolation, administration of medication, or early dismissal (e.g., gastro symptoms, nosebleeds, asthma episode). Medical review required. Medical clearance may be needed before returning to school.
Red Level	Severe or life-threatening incidents (e.g., anaphylaxis, unconsciousness, major trauma). Emergency services contacted. Full documentation including ambulance reports must be completed and added to the student's file.

- All incidents are logged in the First Aid Reporting Booklet with carbon copies: white (parent), yellow (teacher), and blue (First Aid office).
- An incident report must also be completed for severe cases and submitted to the Principal.

Reporting Model will be based on:

1. First Aid Response to an injury. This will be colour coded to Green, Yellow, Orange and Red, similar to the concept of a Traffic Light System.
2. The severity of the injury will determine the First Aid Response.
3. The First Aid Response will determine the Reporting Procedure.
4. Each category will have its own Reporting Procedure including:
  - Who to notify the injury to
  - Escalation Process
  - Documentation (written and/or verbal)

**Please Note:** The colour coding system signifies the category of reporting and documentation, which is dependent on the nature of the response or treatment administered—not the severity of the incident.

This structured response ensures accountability, accurate documentation, and timely parent engagement.

Incident form/report must include the following information:

- Date, time and place of incident/accident
- Cause of incident/accident
- Names and addresses of people injured and any witnesses
- Nature of the injuries
- Subsequent action and treatment involved
- Signature of the teacher or staff member completing the Incident/Injury Report form
- Incident/Injury Report form is then given to the Principal

## 5.Roles & Responsibilities

The Principal is responsible for:

- All staff to be anaphylaxis and asthma trained
- Maintaining a register of all staff and
- First Aid Officer(s) to be regularly trained
- Conducting a First Aid Risk Assessment
- Ensuring that at least one staff member on site at school is first aid trained
- Ensuring that at least one staff member attending excursions is first aid trained

The School Nurse/ First Aid Officer is also responsible for:

- Providing staff with current class lists with medical and at risk alerts.
- Advising staff of specific medical alerts prior to excursions and sporting events.
- The safe keeping and or administration of medicines relevant to the treatment of specific conditions and as advised by parents or guardians.
- The safe keeping and maintenance of Anaphylaxis medication, Anaphylaxis Emergency Kits, Anaphylaxis action plans and management plans for students at risk of Anaphylaxis.
- The safe keeping and maintenance of Asthma Emergency Kits, Asthma Care Plans and individual health support plans, in addition to action plans and health support plans of students with differing medical conditions.
- Initiating or maintaining contact with parents/guardians in regard to specific student injuries or illnesses, as required.
- Liaising with Ambulance Victoria, the Royal Children’s Hospital and other medical practitioners as required.

- Providing staff with up-to-date training as required on specific treatments; e.g. Asthma, allergic reactions and anaphylaxis.
- Where it is deemed appropriate the first aid room must refer student injuries to parents/guardians by phone call and/or sick bay visit record.
- Minimising the risk of the spread of infection by following Infection Control Guidelines.
- Reporting any considered high level hazard to the Principal and OHS Officer.

## 6. Related Policies, Resources & Legislation

Anaphylaxis Policy Medication Policy Duty of Care Policy Royal Children’s Hospital Handbook	Ministerial Order 706 Privacy Act DoE – School Policy and Advisory Guide: First Aid DoE – First Aid for Students and Staff Policy
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## 7. Communications

This policy will be made available on the school’s website. Staff and parents will be provided with regular messages, updates and briefings regarding protocols.

## 8. Policy Review

Approved by: Principal and School Board, April 2025  
Next review: April 2027