



ADMINISTRATION OF FIRST AID

Current	November 2018
Next Review	September 2019
Regulation(s)	R. 136
National Quality Standard(s)	Element 2.1.4: Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines. Element 2.3.3: Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
Relevant DoE Policy and link	Student Health in NSW Public Schools Student Health in NSW Public Schools: A summary and consolidation of policy PD/2004/0034/V01 -
Relevant School Procedure	
DoE Preschool Handbook January 2016	Preschool Handbook : Well Being: p.27-33, Staffing, page 59 https://schoolsequella.det.nsw.edu.au/file/caddbee8-92ca-422b-a9df-cffdd34d5ccf/1/preschool-handbook.pdf
Key Resources	ACECQA First aid qualification information and checker First Aid (Health and Safety Directorate - intranet) First Aid Procedures 2016 (Health and Safety Directorate - intranet)

Staff Responsibilities

Moama Public Aboriginal Preschool staff are responsible for helping children who have health support needs while attending the preschool. This may include giving them prescribed medications, first aid (including emergency care), temporary care when they are sick, performing health care procedures and developing individual health care plans if required.

Student Health in NSW Public Schools: Moama Public School Preschool is aware that a Summary and Consolidation of Policy 2005 sets out the health requirements for schools and is relevant to young children attending Department of Education preschools. To help implement the policy, detailed information on a wide range of child health issues and their management can be found on the Department's website at;

www.schools.nsw.edu.au/studentsupport/studenthealth/index.php

Moama Public Aboriginal Preschool will ensure:

- ➔ At all times while children are present in the preschool there will be immediately available in an emergency;
 - One or more educators has an approved first aid qualification, and
 - All educators have undertaken approved anaphylaxis training, and
 - All educators have undertaken approved emergency asthma training need to be .

- ➔ All Moama Public Aboriginal Preschool educators and all departmental staff, including temporary and casual staff have completed the following DoE mandatory training offered to:
 - Australian Society of Clinical Immunology and Allergy (ASCIA) anaphylaxis e-training
 - e-Emergency care
 - CPR training

- ➔ Moama Public Aboriginal Preschool educators are aware that and required to do the face-to- face training
 - When a child with Anaphylaxis is enrolled in the preschool.

Infection control

When children attend preschool their exposure to infectious conditions may increase simply because they have age-characteristic behaviours that help spread infection. They may also be exposed to other children who are contagious without recognisable symptoms. Therefore, educators will guide and support the children to develop good hygiene habits such as handwashing. Educators will use detergent or soap and water when doing basic cleaning such as wiping table surfaces and/or toys, and wearing gloves when required to reduce the risk of spreading infection amongst children, staff and visitors.

- ➔ Education and Care Services National Regulations highlight the need to minimise health risks for young children by using appropriate health and hygiene practices.

- ➔ Educators are aware Regulation 77 (2) The nominated supervisor of an education and care service must implement, and ensure that all staff members of, and volunteers at, the service implement;
 - (a) adequate health and hygiene practices.

Preventing Infection / Illnesses

- Moama Public Aboriginal preschool will use colour-coded cleaning cloths for different areas and cleaning uses (blue in the kitchen and meal preparations, red in the bathroom and Green for arts, crafts, paints and glues) and ensure all staff are aware of the code.
- educators will ensure tissues, face cloths or cloth towels are not used for more than one child
- educators will use tissues when wiping a child's nose
- after wiping a child's nose, educators will wash their hands thoroughly with soap and warm water, or use an alcohol-based hand rub
- educators will dispose of gloves, paper towels and tissues immediately after use into a container with a disposable lining
- educators will ensure children do not share sheets and pillowcases, cloth towels or other personal items
- educators will ensure hand basins are not used for food and drink preparation or rinsing soiled clothing
- educators will be careful with all bodily fluids, secretions and excreta
- educators will use disposable gloves at all times when dealing with bodily fluids, secretions or excreta
- educators will display hygiene procedures in bathrooms, staffroom and toilet areas.

➔ Element 2.1.4 Educators will take steps to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines.

Handwashing

Moama Public Aboriginal Preschool educators are aware that handwashing, including drying hands, is one of the most effective ways of preventing the spread of infection. Handwashing will occur:

- before and after giving first aid
- before and after giving medication
- after wiping a child's nose

➔ Avoid the risk of cross infection by ensuring cloth hand towels hang without overlapping.

➔ Guidance for schools on managing infection control is in the Department's Infection Control Policy PD/2005/0257 VO1 and the Infection Control Policy Guidelines at: <https://detwww.det.nsw.edu.au/media/downloads/directoratesaz/workhealthsafety/swl/proc/infectioncontrolprocedures.pdf>

➔ Standard precautions for infection control are found in Appendix 2.1 Useful references Staying Healthy: Preventing infectious diseases in early childhood education and care services, 5th edition National Health and Medical Research Council, 2013

Supporting Health Care Needs

→ While parents have primary responsibility for managing their children's health, educators need to work with parents to support their children's health care needs while they are at preschool. This may involve giving medication, performing health care procedures or developing an individual health care plan. An individual health care plan is required for any child who is diagnosed with severe asthma, type 1 diabetes, epilepsy or anaphylaxis, is at risk of an emergency reaction or requires health care procedures.

NOTE: *staff in local education services offices are available to support the development of individual health care plans especially when a child has an emergency care need such as anaphylaxis or another complex health care need.*

→ Information about developing individual health care plans is available at:

www.schools.nsw.edu.au/studentsupport/studenthealth/individualstud/devimpindhplan/index.php

→ If a child enrolled at the preschool has a specific health care need, allergy or other medical condition parents must be provided with a copy of the Department's student health policy.

→ When a preschool child with an individual health care plan transitions to Kindergarten, staff will give parents a copy of the current plan and encourage them to discuss it with the school at enrolment. This will help teachers plan for the child's health care needs in the new setting.

Giving Medication

All school staff follow the Department's Student Health in NSW Public Schools policy for administering medication to children. The policy states that the school (including the preschool) must assist with administering prescribed medication during school hours, if parents or other carers cannot reasonably do so.

→ Preschool staff who volunteer and are trained can give prescribed medication to children in nonemergency situations.

→ In general, schools and preschools, do not give medication which has not been specifically requested by a medical practitioner for an individual child for a specific condition. In some cases, the medical practitioner may prescribe an over-the-counter medication. If so, staff will follow the same procedures as for 'prescribed medications.

→ Parents must complete and sign a Request for Administering Prescribed Medication form, available at www.schools.nsw.edu.au/studentsupport/studenthealth/individualstud/formletters/index.php

ADMINISTRATION OF MEDICATION PROCEDURES

The following procedures apply to giving medication:

- On arrival, parents give the child's medication to a staff member for safe storage
- All non-emergency medication is to be stored in a locked cupboard or locked container in the refrigerator, out of reach of children
- Medication must be in its original packaging with a pharmacy label which states;
 - the child's name
 - dosage instructions
 - current use-by date.

Medication without the above mentioned labelling must not be given.

- When a staff member administers medication to a child;
 - the staff member records this
 - and another member of staff verifies that the medication was administered as prescribed.

The record must include;

- the name of the medication
- the date
- time
- dosage given
- the names and signatures of staff members who gave and checked the medication.

This information must be made available to parents for verification.

- Permission forms to give medication for a prolonged period must be reviewed and updated when there is a change to the medication dosage or frequency.
- Administration of prescribed medication can form part of an individual health care plan
- Parents are encouraged to advise if a child is on medication, even when it is not given at the preschool
- All medication forms are to be kept in the school until the child reaches the age of 25 years.

Emergency Medication

There may be times when emergency medication needs to be given to children in the preschool. This will be documented in the individual health care plan (particularly for conditions such as anaphylaxis) If an emergency occurs, that has not been documented in the emergency response section of the individual health care plan, preschool staff will provide a general emergency response which may involve calling an ambulance.

TIP: Have a photo of the child in an obvious appropriate space (for example, staffroom and/or kitchen) and include medical details and emergency procedures.

The Education and Care Services National Regulations set out procedures for giving medication.

It states that medication is not to be given without the consent of parents. For further information see regulations 92 – 96.

Anaphylaxis

All preschool staff will be aware of children with allergies and consider ways to reduce their exposure to known allergens. Anaphylaxis is a severe life-threatening allergic reaction and needs to be regarded as a medical emergency. In most cases, anaphylactic reactions can be prevented with precautions to avoid the known allergen, however, when anaphylaxis occurs an emergency response is required.

- Parents need to advise the school if their child is diagnosed with an allergy and is at risk of anaphylaxis.

- The implementation of Anaphylaxis Procedures for Schools 2012 is mandatory for NSW government schools and preschools. These include information on the management of severe reactions at preschool as well as the development of individual health care and emergency response plans.

- The Department of Education requires all staff to undertake Anaphylaxis training. Both the online and face-to-face courses are approved by ACECQA.

- Children and their parents will not always be aware that they have a severe allergy. To reduce the risk of exposure to a high-risk allergen, preschools may decide in consultation with their community, to ask families not to bring nut or nut products to the preschool site or to preschool activities.

- Preschools should also review their program to make sure that they do not support the use of these products.

- Regulation 136 of the Education and Care Services National Regulations state that at least one person who has undertaken approved anaphylaxis training and one who has undertaken approved emergency asthma training must be in attendance and immediately available at all times. As with the First Aid requirement this person may be located in the school as long as they are available in an emergency. Each school needs to consider how they will meet this requirement.

More information is on the Department's student health website at

www.schools.nsw.edu.au/studentsupport/studenthealth/conditions/anaphylaxis/guidelines/index.php

Sick children

Moama Public School is aware of the Education and Care Services National Regulations 85 – 87 outline the procedures for children who become ill, have an accident or need medication at preschool.

➔ If a child becomes ill while at preschool, parents should be contacted and asked to collect them or arrange for their nominated emergency contact to pick them up.

➔ The child should be made comfortable and kept under adult supervision until they recover or are collected by their parent.

More information on procedures for supporting sick children is on the student health section of the Department's website at :

www.schools.nsw.edu.au/studentsupport/studenthealth/schpracprog/unwellstudents/index.php

➔ educators could utilise the trained First Aid officer or Principal for advice and support when dealing with sick children.

Infectious diseases

Educators are aware that the Education and Care Services National Regulations (regulation 88) requires that an infectious diseases policy is in place that outlines the practices to be followed.

➔ Children suffering from certain infectious diseases should be excluded from attending preschool.

➔ Staff should always refer to the current NSW Health guidelines on exclusion and follow standard infection control procedures.

➔ If a child is suspected of having an infectious disease, for example chicken pox, they should be isolated from other children, made comfortable and supervised by a staff member until collected.

➔ If a child contracts a vaccine-preventable disease, preschool staff should tell the principal who will contact parents and the nearest public health unit if necessary.

➔ All parents must be told of any outbreak of an infectious disease at the preschool and asked to keep children with infectious diseases at home for the appropriate timeframe.

This information can be found in the NSW Health fact sheet, Infectious Diseases of Children at <http://www.health.nsw.gov.au/factsheets/infectious/childhoodillness.html>.

➔ The child must also get a medical clearance from a doctor before they return to preschool.

➔ Element 2.1.4 Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines.

➔ Parents should be encouraged to tell the class teacher if a family member has an infectious disease, as this can help reduce the risk of the infection spreading to others.

➔ Preschool staff should ensure that parents from culturally and linguistically diverse backgrounds are given information in their first language if necessary.

More information can be found online in: Infection Control Guidelines on the Department's WHS website at https://detwww.det.nsw.edu.au/adminandmanage/ohands/safeworklearn/injury_manage/infection/index.htm

Staying Healthy: Preventing infectious diseases in early childhood education and care services, 5th edition
National Health and Medical Research Council, 2013 at
<http://www.nhmrc.gov.au/publications/synopses/ch43syn.htm>

➔ educators will utilise the trained First Aid officer and/or Principal for advice and support when dealing with infectious diseases.

Otitis Media

Otitis media Ear infections are very common in young children and can cause a lot of pain and distress. Most infections are easily cleared but in some cases children can develop chronic otitis media which is long-term inflammation of the middle ear. Educators need to be aware that otitis media can result in hearing loss. This can fluctuate over time and impact on learning and development especially in the area of speech and language. Otitis media is a significant ear health issue. The Department of Education is committed to working with NSW Health to reduce the incidence and impact of otitis media and conductive hearing loss. Suggested strategies to help reduce the impact of recurrent ear infections include:

- using infection control procedures, particularly handwashing, to prevent the spread of respiratory infections
- ensuring noses are regularly wiped
- referring children to their local community health centre for screening and follow-up.

TIPS: Make it practice for children to blow their noses after running around outside. Teach children the Breathe, Blow, Cough program for preventing ear infections (see Appendix 2.2).

Useful Resource: Healthy Little Ears –produced by Mid-Western Area Health Service.

Recording illness, accidents and incidents

Educators know the Education and Care Services National Regulations (regulations 85 – 87) highlight the need for records to be kept on illness or injury whilst children are at the preschool.

→ Teachers in preschools, as for all teachers in the school, need to ensure that all illnesses, accidents and incidents are documented.

This may be kept in a register which states;

- the child's name
- date
- time and details of the illness
- accident or incident
- resulting injury or harm

→ The record will also note the action taken and by whom, be signed by the teacher, witnessed by another adult and verified by the parents.

→ An accident or incident report should be prepared for anything that occurs on the premises that is not minor. A commonsense approach should be taken to decide whether the accident needs to be reported.

Advice can be found in Reporting School Accidents which is the support document for the Reporting School Accidents Policy – PD/2002/0064/ VO3. The policy is online at

www.det.nsw.edu.au/policies/student_admin/general/accidrpt/Accident_Policy_Update_2006.pdf

→ ***reportable incidents should be made in consultation with the principal***

→ All completed accident and incident reports should be given to the principal.

→ The principal is responsible for any appropriate notifications. Serious incidents, as specified in **regulation 12** are to be reported to Early Learning who will then notify the regulatory authority.

→ The reports must be kept until the child reaches the age of 25 years, as with all children attending the school. This section also relates to Quality Area 7.

→ Element 7.3.1 Records and information are stored appropriately to ensure confidentiality, are available from the service and are maintained in accordance with legislative requirements.