



# INJURIES TO STUDENTS POLICY



## **Rationale:**

- All children have the right to feel safe and well, and know that they will be attended to with due care when in need of first aid.

## **Aims:**

- To administer first aid, and provide adequate treatment for children when in need in a competent and timely manner, whilst attempting to eradicate or at least minimise injuries to students at school.

## **Implementation:**

- All injuries to students must be attended to, no matter how apparently minor.
- A first aid room and first aid kits will be available for use at all times. A comprehensive supply of basic first aid materials will be stored in a locked cupboard in the first aid room.
- A sufficient number of staff (including at least 1 administration staff member) to be trained to a level 2 first aid certificate, and with up-to-date CPR qualifications.
- Supervision of the first aid room will form part of the daily yard duty roster, though for the sake of consistency of treatment and communication effectiveness, only a small number of qualified and appropriate staff members will be allocated to first aid room duty.
- All injuries that occur during class time will be referred to the administration staff who will manage the incident, all injuries that occur during recess or lunch breaks, will be referred to the teacher on duty in the first aid room.
- An up-to-date confidential register located in the first aid room will be kept of all injuries or illnesses experienced by children that require first aid.
- All staff will be provided with basic first aid and infection control skills, including blood spills, and a supply of protective disposable gloves will be available for use by staff.
- Only minor injuries such as scratches will be treated by staff members on duty, while all other injuries-including those requiring parents to be notified or suspected treatment by a doctor - require a level 2 first aid trained staff member to provide first aid.
- Children with injuries involving blood or non-intact skin must have the wound covered at all times.
- No medication (including headache tablets) will be administered to children without the written permission of parents or guardians using the appropriate Medications Administration form.
- Parents of all children who receive first aid will receive a completed form indicating the nature of the injury, any treatment given, and the name of the teacher providing the first aid. For more serious injuries/illnesses, the parents/guardians must be contacted by the administration staff so that professional treatment may be organised. Any injuries to a child's head, face, neck or back must be reported to parents/guardian.
- Any student who is collected from school by parents/guardians as a result of an injury, or who is administered treatment by a doctor/hospital or ambulance officer as a result of an injury, or has an injury to the head, face, neck or back, or where the treating first aid teacher considers the injury to be greater than "minor" will be reported on Department of Education Accident/Injury form LE375, and entered onto CASES21.
- Serious injuries, fatalities, or any incident that exposed a person to immediate risk to their health or safety must be reported to the Department of Education Emergency and Security Management

Branch immediately on (03) 9589 6266 and WorkSafe on (13 23 60) and reference should be made by staff to the school's Incident Management policy.

- All teachers have the authority to call an ambulance immediately in an emergency. If the situation and time permits, a teacher should confer with others before deciding on an appropriate course of action.

**Evaluation:**

This policy will be reviewed as part of the school's three-year review cycle, or as required due to changes in relevant Acts, Laws or should situations arise that require earlier consideration.

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| School Council Approval   | <i>Kongwak PS</i>   | <i>Aug 18<sup>th</sup> 2021</i> |
|                           | <i>Inverloch PS</i> | <i>Aug 19<sup>th</sup> 2021</i> |
| Review Cycle:             | 3                   |                                 |
| Next review and approval: | 2024                |                                 |