

ADMINISTRATION OF FIRST AID POLICY & PROCEDURE

Section 167, Regulations 85-90, 92-94, 101, 102c, 136, 137, 161, 162, 168-172, 176, 183

ADMINISTRATION OF FIRST AID POLICY

Policy

Tenison Woods College Early Learning & Community Centre recognises its responsibility to ensure the safety and wellbeing of children, volunteers, and staff accessing the service. In accordance with relevant Australian laws and regulations, the First Aid Policy outlines the measures and requirements for providing effective first aid support. Additionally, it incorporates the First Aid training requirements for staff and managing first aid in relation to specific health conditions.

Background

This First Aid Policy is of utmost importance as it ensures that Tenison Woods College Early Learning & Community Centre maintains a safe and secure environment for children, volunteers, and staff. By adhering to Australian laws, regulations, and industry standards, the service can effectively respond to injuries, illnesses, and medical conditions, thereby safeguarding the wellbeing of all individuals involved. It promotes the highest level of care, ensures compliance with relevant guidelines, and fosters a culture of safety and preparedness.

National Quality Standards (NQS) Links

QUALITY AREA 2: CHILDREN'S HEALTH & SAFETY		
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse and neglect.
QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.1.1	Organisation of educators	The organisation of educators across the service supports children's learning and development.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.

Legislative requirements

Section 167 Offence relating to protection of children from harm and hazards

Regulation 85 – Incident, injury, trauma and illness policies and procedures

- *The incident, injury, trauma and illness policies and procedures must be followed by nominated supervisors and staff members and volunteers when a child is injured, becomes ill or suffers a trauma.*

Regulation 86 – Notification to parents of incident, injury, trauma and illness

- *Parents must be informed as soon as practical but no later than 24 hours if the child was involved in any incident, injury, trauma or illness while at the Centre.*

Regulation 87 – Incident, injury, trauma and illness record

- *The Centre must keep a record in accordance with this regulation*
- *The incident, injury, trauma and illness record must include:*
 - *Name and age of the child, the circumstance leading to the incident, injury or trauma, the time and date of the incident, when the injury was received, or the child was subjected to the trauma.*
 - *Details of the illness while at the Centre, including:*
 - *The name and age of the child, relevant circumstance surrounding the child becoming ill and any apparent symptoms, the time and date of illness.*
- *In both these above incidences you must also include:*
 - *The action taken must be documented, including any medication administered or first aid provided and/or any medical personnel contacted;*

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- Details of any person who witnessed the incident, injury or trauma;
- The name of any person who the centre tries to notify or attempt to notify of the incident, injury, trauma or illness which the child suffered at the Centre, with the time and date;
- The name and signature of the person making the entry in the record and the time and date the entry was made;
- All the above information must be included in the incident, injury, trauma or illness record as soon as possible but no later than 24 hours after the incident, injury or trauma or the onset of the illness.

Regulation 88 – Infectious diseases

- If an occurrence of an infectious disease at the Centre, the approved provider must ensure reasonable steps are taken to prevent the spread.
- The approved provider must ensure that a parent or authorised emergency contact of each child being cared for at the Centre is notified as soon as possible of an infectious disease.

Regulation 89 – First Aid Kits

- First aid kits are kept in accordance with the regulation whenever the service is providing care and education to children.
- There must be enough first aid kits to cater to the number of children on site.
- First aid kits must be suitably equipped.
- They must be recognisable and easily accessible for adults in charge of the children.

Regulation 90 – Medical conditions policy

- The medical conditions policy of the Centre must lay out practices for the following:
 - Management of medical conditions, including asthma, diabetes or a diagnosis that a child is at risk of anaphylaxis;
 - Informing nominated supervisors, staff members and volunteers at the service of practices relating to managing those medical conditions;
 - Any requirements for a child with a specific health care need, allergy, or relevant medical condition – parent's to provide a medical management plan, medical management plan to be followed in the event of a reaction or an incident relating to the child's medical condition;
 - The Centre to develop a risk minimisation plan in consultation with the parents and medical management plan and is checked and signed by both parties;
 - Staff and volunteers are aware of the plan and have access to the plan.

Regulation 92 – Medication Record

- Medication record must include the following: Name of child, authorisation to administer medication signed by parent or guardian named on enrolment record as authorised to consent administration of medication, name of medication, time and date the medication was last administered, time and date the medication or circumstances, when the medication should be next administered, the dosage and manner to be administered, the name and signature of the person who administered and the signature of the witness who checked the dosage and administration.

Regulation 93 - Administration of medication

- Approved provider and nominated supervisor must ensure the administration is authorised and is in accordance with regulation 95 and 96.
- Medication is allowed to be given to a child if it has previously been shared with the Centre either through a medication action plan or a medication prescribed by a medical professional and authorised by the parent (in regulation 92).
- In case of an emergency, medication can be administered if parents provide verbal consent to administration of medication or if a parent or person named in the enrolment cannot be reasonably contacted by a registered medical practitioner or emergency service.

Regulation 94 – Exception to authorisation requirement – anaphylaxis or asthma emergency

- Medication may be administered to a child without authorisation in the case of anaphylaxis or asthma emergency.
- In this event the approved provider or nominated supervisor must ensure the parent or in serious cases the emergency services as soon as possible.

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Regulation 95 – Procedure for administration of medication

- If medication is administered, it must be prescribed by a registered medical practitioner from its original container, bearing the original label with the name of the child to whom the medication is to be administered before the expiry or used by date. It must be from its original container, bearing the original label and instructions.
- The medication must be administered in accordance with the instructions attached to the medication or written instructions by a registered medical practitioner.
- When administered this **MUST** be witnessed by another person, checking the dosage of the medication administered and the identity of the child to whom the medication is to be administered.

Regulation 101 - Conduct of risk assessment for excursion

- In the risk assessment attention needs to be paid to first aid required and the children attending the excursion.
- The risk assessment must identify and assess the risks that the excursion may pose to the safety, health, and wellbeing and that all first aid risks are catered to and provided for.
- Depending on the type of excursion, it is important in terms of first aid whether any adults with specialised skills are required to ensure the safety of the children.

Regulation 102c – Conduct of risk assessment for transporting of children by the education and care service

- Risk assessments must include first aid assessed risks and include disembarking and embarking transport mode.

Regulation 136 – First Aid Qualifications

- At least one staff member or nominated supervisor holds a current approved first aid qualification, anaphylaxis management training and emergency asthma management training.
- The approved first aid qualification is current only when emergency life support training and cardiopulmonary resuscitation training was completed in the last year.

Regulation 137 – Approval of qualifications

- The Centre abides by the National Authorities and has a list of approved first aid qualifications and anaphylaxis management and emergency asthma management training.

Regulation 161 – Authorisations to be kept in enrolment record

- Authorisations to be kept in enrolment record for each child at the Centre:
 - Authorisation signed by a parent or person named in the enrolment record as authorised to consent to the medical treatment of the child
 - a. Medical treatment for the child from a medical practitioner, hospital or ambulance service
 - b. Transportation of the child by an ambulance service

Regulation 162 – Health information to be kept on enrolment record

- The health information to be kept in the enrolment record for each child enrolled at the Centre:
 - The name, address and telephone number of the child's registered medical practitioner or medical service;
 - The child's Medicare number (if available);
 - Specific healthcare needs of the child, including medical conditions;
 - Allergies, including whether the child has a diagnosed as at risk of anaphylaxis;
 - Any medical management plan, anaphylaxis medical management plan or risk minimisation plan to be followed with respect to specific healthcare need, medical need, medical condition or allergy;
 - Dietary restrictions;
 - Immunisation certificate.

Regulation 162 – Health information to be kept on enrolment record

- The health information to be kept in the enrolment record for each child enrolled at the Centre.

Regulation 168 – Education and care services must have policies and procedures

- Our Centre has policies and procedures as set out in sub regulation 2 in Regulation 168.

Regulation 170 – Policies and procedures to be followed

- Nominated supervisors, staff members and volunteers all have an understanding of all policies and procedures and ensure they are followed at the service.

Regulation 171 – Policies and procedures to be kept available

- Digital copies of our policies and procedures are available via a QR code in our foyer, in our digital PowerQIP and in our handbook. A hard copy of our policies and procedures can be found in the ELCC Office.

Regulation 172 – Notification of change of policies and procedures

- All families are notified and sent updated policies and procedures.
- If a change to policy is planned, significantly affecting families, they will be given 14 day's notice.

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Regulation 176 – Time to notify certain information to Regulatory Authority

- A notice must be provided within 7 days of the relevant event or within 7 days of the approved provider becoming aware of the relevant information.
- A notice to the regulatory authority must occur:
 - Death of a child as soon as possible but within 24 hours of the death or the time that person becomes aware of the death;
 - Serious incident within 24 hours of the incident or the time that the person becomes aware of the incident.

Regulation 183 – Storage of records and other documents

- Incident, illness, injury or trauma incident records are stored safely and securely in the Centre until the child is 25 years of age.
- If the record refers to a death of a child while at the Centre or that may have occurred following an incident while at the Centre, the record will be kept until the end of the seventh year after the death.
- If the record relates to the approved provider or the nominated supervisor, the record will be kept until the end of three years after the last date on which the approved provider, nominated supervisor or staff member provided the education and care on behalf of the service.

Principles to inform our policy

All decision-making should be carried out in accordance with the principles of our service's administration of First Aid Policy.

- The health, safety and wellbeing of children is a paramount consideration for our service. Therefore, we will take every reasonable precaution to protect the children from harm and ensure that we are well equipped to administer first aid in the event of injury or illness.
- We ensure that educators and staff are able to undertake their roles effectively. In relation to the administration of first aid, they will receive regular training to ensure their qualifications are approved and up-to-date, as well as access to suitably equipped first aid kits.
- We ensure that there is at least one staff member with current first aid qualifications in attendance at all times so that education and care is provided to children.
- Clear roles ensure that management, educators, and staff are aware of their responsibilities in relation to the administration of first aid, notifications and reporting.
- We create opportunities for children to learn and develop. This includes incorporating health and safety into the educational program.

Key Terms

- **ACECQA (Australian Children's Education and Care Quality Authority):** The independent national authority that administers the National Quality Framework.
- **Approved anaphylaxis management training:** Management training Anaphylaxis management training approved by ACECQA and published on the list of approved first aid qualifications and training on the ACECQA website.
- **Approved emergency asthma management training:** Emergency asthma management training approved by ACECQA and published on the list of approved first aid qualifications and training on the ACECQA website.
- **Approved first aid qualification:** A qualification that includes training in the matters set out below, that relates to, and is appropriate to, children and has been approved by ACECQA and published on the list of approved first aid qualifications and training on the ACECQA website. Matters are likely to include: Emergency life support and cardiopulmonary resuscitation; convulsions; poisoning; respiratory difficulties; management of severe bleeding; injury and basic wound care; and administration of an auto-immune adrenalin device.
- **Communication plan:** A plan that outlines how relevant educators, staff members and volunteers are informed about the medical conditions policy and the medical management plan and risk minimisation plan for the child. It also sets out how families can communicate any changes to the medical management plan and risk minimisation plan for the child.
- **Current:** To be considered current, the following qualifications are taken to be current if the qualification was attained or the training was undertaken within the previous three years: a. Approved first aid qualifications (except for a qualification that relates to emergency life support and cardio-pulmonary resuscitation which must be completed within the previous year) b. Approved anaphylaxis management training c. Approved emergency asthma management training. Approved providers have until 1 April 2024 for any necessary

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training to be undertaken to ensure first aid qualifications and anaphylaxis and asthma management training is current, as per the above timeframes.

- **Emergency:** An incident, situation or event where there is an imminent or severe risk to the health, safety or wellbeing of a person at the service. For example, a flood, fire or a situation that requires the service premises to be locked down.
- **Emergency services:** Includes ambulance, fire brigade, police and state emergency services.
- **First aid:** Is the immediate treatment or care given to a person suffering from an injury or illness until more advanced care is provided or the person recovers. First aid training should be delivered by approved first aid providers, and a list is published on the ACECQA website: acecqa.gov.au/qualifications/requirements/first-aid-qualifications-training
- **Health information:** Health information about each child must be kept in their enrolment record. This includes:
 - the contact details of their registered medical practitioner
 - their Medicare number (if available)
 - their specific healthcare needs and allergies (including anaphylaxis)
 - any medical management plan, anaphylaxis medical management plan or risk minimisation plan to be followed
 - any dietary restrictions
 - their immunisation status
 - whether a child health record has been sighted.
- **Injury:** Any physical damage to the body caused by violence or an incident.
- **Medication:** Medicine within the meaning of the Therapeutic Goods Act 1989 of the Commonwealth. Medicine includes prescription, over-the-counter and complementary medicines. All therapeutic goods in Australia are listed on the Australian Register of Therapeutic Goods, available on the Therapeutic Goods Administration website (tga.gov.au).
- **Meaning Source Medical attention:** Includes a visit to a registered medical practitioner or attendance at a hospital.
- **Medical emergency:** An injury or illness that is acute and poses an immediate risk to a person's life or long-term health.
- **Medical Management Plan (MMP):** A document that has been written and signed by a doctor. A MMP includes the child's name and photograph. It also describes symptoms, causes, clear instructions on action and treatment for the child's specific medical condition.
- **Minor incident:** An incident that results in an injury that is small and does not require medical attention.
- **Notifiable incident:** Any incidents that seriously compromise the safety, health or wellbeing of children. The notification needs to be provided to the regulatory authority and also to parents within 24 hours of a serious incident. The regulatory authority can be notified online through the NQA IT System.
- **Risk Minimisation Plan:** A plan developed with a child's parents to ensure that:
 - The risks relating to the child's specific health care need, allergy or relevant medical condition are assessed and minimised;
 - Practices and procedures in relation to the safe handling, preparation, consumption, and service of food are developed and implemented (if relevant);
 - Practices and procedures to ensure that the parents are notified of any known allergens that pose a risk to a child and strategies for minimising the risk are developed and implemented (if relevant);
 - Practices and procedures ensuring that all educators, staff members and volunteers can identify the child, the child's medical management plan and the location of the child's medication are developed and implemented;
 - Practices and procedures ensuring that the child does not attend the service without medication prescribed by the child's medical practitioner in relation to the child's specific health care need, allergy or relevant medical condition are developed and implemented (if relevant).
- **Serious incident:** For the purposes of the definition of serious incident in section 5(1) of the Law, each of the following is prescribed as a serious incident:
 - (a) the death of a child -
 - (i) while that child is being educated and cared for by an education and care service; or
 - (ii) following an incident occurring while that child was being educated and cared for by an education and care service;
 - (b) any incident involving serious injury or trauma to a child occurring while that child is being educated and cared for by an education and care service -
 - (i) which a reasonable person would consider required urgent medical attention from a registered medical practitioner; or
 - (ii) for which the child attended, or ought reasonably to have attended, a hospital; Example: A broken limb.

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- (c) any incident involving serious illness of a child occurring while that child is being educated and cared for by an education and care service for which the child attended, or ought reasonably to have attended, a hospital; Example: Severe asthma attack, seizure or anaphylaxis reaction.
- (d) any emergency for which emergency services attended;
- (e) any circumstance where a child being educated and cared for by an education and care service -
 - (i) appears to be missing or cannot be accounted for; or
 - (ii) appears to have been taken or removed from the education and care service premises in a manner that contravenes these Regulations; or
 - (iii) is mistakenly locked in or locked out of the education and care service premises or any part of the premises.
- **Suitably equipped first aid kit:** Should be fully stocked, with no expired products, and should be checked regularly to ensure this. For example, a service might keep a checklist of the contents inside each first aid kit and initial the list each time the contents are checked. Approved providers or FDC educators may seek guidance from a reputable organisation such as St John Ambulance on first aid kit contents.

Links to other policies:

This policy is linked to related policies and procedures, including:

- Incident, Injury, Trauma, and Illness
- Providing a Child Safe Environment
- Enrolment and Orientation
- Emergency and Evacuation
- Excursions
- Safe Transportation of Children
- Dealing with Infectious Diseases
- Dealing with Medical Conditions in Children
- Sun Protection
- Water Safety
- Acceptance and Refusal of Authorisations

Induction and Ongoing Training:

- Induction training and ongoing training will be provided to managers, coordinators, educators, and staff to assist them in fulfilling their roles effectively in implementing this policy.

Policy Created/Reviewed:

- This policy was created in January 2024 and will be reviewed annually or as necessary to ensure compliance with regulations and alignment with best practices.

Monitoring, Evaluation, and Review:

- This policy will be regularly monitored for compliance by designated staff members and reviewed as necessary to ensure it aligns with current regulations and guidelines.

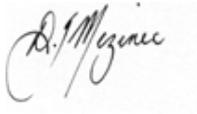
References:

- Education and Care Services National Regulations
- South Australian Education Policy and regulations
- Catholic Education South Australia policy and regulations
- Protective Practices
- The Australian Children's Education and Care Service Authority (ACECQA)
- National Quality Standard (NQS)
- Early Years Learning Framework (EYLF)
- SafeWork SA Approved Code of Practice for First Aid in the Workplace
- Cancer Council Australia regulations

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Reviewed by David Meziniec
Tenison Woods College Principal



Signed:
Dated: 31.7.24

Reviewed by Fran Scanlon
Early Learning & Community Centre Director



Signed:
Dated: 10.7.24

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ADMINISTRATION OF FIRST AID PROCEDURE

Procedure Statement

The Administration of First Aid Policy at Tenison Woods College Early Learning & Community Centre aims to ensure the safety and wellbeing of children, volunteers and staff accessing the Centre. This procedure outlines the specific measures and requirements to provide effective first aid support, incorporating legislative requirements and aligning with relevant Australian laws and regulations.

Procedure

Qualifications and Training

Tenison Woods College Early Learning & Community Centre ensures that all educators and staff possess the necessary qualifications and training in first aid, anaphylaxis management, and asthma management. At all times in the Centre there will be at least one staff member with approved first aid qualifications, including CPR, anaphylaxis and asthma management training, will be present on duty at all times. The service will maintain accurate and up-to-date records of staff qualifications and provide opportunities for ongoing training to maintain and update their first aid skills.

Compliance with Regulations and Standards

The Centre will comply with the Education and Care Services National Regulations, South Australian Education Policy and regulations, Catholic Education South Australia policy and regulations, and the SafeWork SA Approved Code of Practice for First Aid in the Workplace, regarding the following aspects of first aid administration:

- a. First aid areas, kits, and contents of kits
- b. First aid personnel and their qualifications
- c. Training requirements for educators
- d. Management of critical incidents
- e. Safe use of first aid equipment suitable for children
- f. Availability of Material Safety Data Sheets for accessible chemicals

Risk minimisation medical plans

- Risk minimisation plans are to be prepared by Leadership/Administrative staff and updated annually or as required.
- These are to be signed by the parent or authorised caregiver and the Centre, with all room staff having knowledge of the plans. As part of signing these plans, parents are allowing photos and a visual summary of children's medical plans, allergies, first aid or dietary restrictions.
- These are displayed in each room and in the piazza. The hard copy of the plans will be kept in the Centre First Aid cupboard, with the child's action plan.
- All action plans will be accessible also in the child's room(s) in the Centre.

Medication Management:

- When a child requires an additional medication as directed by a registered medical practitioner, a diploma, teacher or administration staff **ONLY** will create a medication record and fill out relevant information with the parent or authorised guardian: name of the child, details of the medication, administration records, and signatures.
- The medication administered **MUST** follow the doctor prescription, and times to be calculated from the last administered dose from home, it is **NOT** following what the parent would like. If the parent would like to administer the medication before this, they can come and do it. The ELCC will only follow the prescription.
- The staff member must ensure medication administration is authorised, with exceptions outlined in for anaphylaxis or asthma emergencies. Following the medical prescription.
- The administered medication must be witnessed by another staff member and both parties must sign and date the document. When finished, the medication record is to be kept in the child's enrolment file.
- **ONLY** Diploma, teachers or administration staff are to administer medication and witness for each other.

Risk Assessment for Excursions:

- Before an excursion staff must conduct risk assessments for excursions, focusing on first aid requirements and the safety of children attending.
- This risk assessment must take into account existing medical first aid needs of all children attending, the safety of the transport and any first aid needs it could potentially cause, the environmental factors impacting first aid as UV rate and the area of the intended excursion.

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First Aid Response

In the event of an injury, illness, or medical condition, Tenison Woods College Early Learning & Community Centre will ensure an appropriate and prompt first aid response, prioritising the safety and well-being of children, volunteers, and staff. The following guidelines will be followed:

- a. Educators with approved first aid qualifications, including anaphylaxis and asthma management training, will be present on duty at all times.
- b. If a child falls ill or is injured during the session, the designated first aider will assess the severity and determine whether the child can remain at the service. If necessary, the child will be taken to the Director's office until parents/carers can collect them.
- c. The designated first aider will promptly contact the family or emergency contacts to inform them of the illness or injury and arrange for someone to collect the child.
- d. For serious injuries or illnesses, the designated first aider will provide immediate first aid and, if required, arrange for ambulance transport to the appropriate hospital, as indicated in a child's care plan or deemed necessary.
- e. When a child needs to be transported in an ambulance, the educator will communicate with the family or emergency contacts, provide medical information to ambulance officers, and record the destination and contact details of the ambulance.
- f. If necessary, an educator will accompany the child in the ambulance, ensuring ongoing contact with emergency contacts and the family until a support person arrives.
- g. The service will arrange for an emergency educator to replace the travelling educator, ensuring the required educator-to-child ratios are maintained.
- h. The service will cover the cost of transport for the travelling educator to return to the service.

Duty of Care and Reporting

- Staff members have a duty of care to promptly call an ambulance in emergency situations where a child's health is at risk due to parental delay in collecting them. They are also responsible for providing first aid and seeking emergency support when appropriate.
- Parents are responsible for following up medical care and consulting a doctor for non-emergency conditions.
- If a parent consistently fails to collect their unwell child and does not provide alternative emergency contact details, the service may consider making a mandatory notification to ensure the child's ongoing wellbeing.
- Under no circumstances should staff transport injured or unwell children using personal vehicles, except when instructed by paramedics to meet an ambulance.

Documentation and Reporting

- All incidents, minor or major, will be appropriately documented.
- Minor incidents will be recorded in an accident register, and a note will be placed in the day sheet to notify collecting parents/guardians about the incident. Major incidents must be reported to ACECQA and CESA via the designated portal within 24 hours.
- The Director, Assistant Director, Nominated Supervisors and Administrative Management have access to the ACECQA NQA IT portal for serious incidents. Instructions can also be found in the office.

First Aid Kit Management

We will maintain well-equipped first aid kits and ensure compliance with the SafeWork SA Approved Code of Practice for First Aid in the Workplace. The Centre ensures:

- a. First aid kit contents meet the required standards and are within use-by dates.
- b. Keeping accurate Material Safety Data Sheets available for all chemicals accessible at the service.
- c. Maintaining an adequate supply of first aid materials at all times.
- d. Conducting termly checks of main first aid kit to ensure compliance and documenting any additional supply needs and weekly checks of room first aid bags to ensure it is restocked.
- e. Keeping first aid manuals readily available in the Piazza - First Aid cupboard.
- f. Updating first aid kit policies and procedures to reflect current industry standards.
- g. Maintaining a list of contact details for appropriate hospitals and emergency services next to the phone and storing them in the mobile phone.
- h. Each room will have a first aid bumbag that is to go with the room outside and when leaving the Centre on the Tenison site. Inside the room there is a First Aid box, with emergency supplies. These are to be refilled weekly and are the responsibility of the rooms.

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- i. When going on an excursion, the room will take the first aid backpack from the Tenison Woods College front office, that will be ready on the morning of the excursion.

Debriefing following any emergency, the Director will provide necessary support to staff, children, and families. This may include arranging specific support for the children, conducting debriefing sessions with the staff involved, organising meetings for all staff to discuss the event, and providing access to trained professionals for counselling purposes. The Director will also inform the Nominated Supervisor and Principal, David Meziniec, and act as the main liaison with the police or media, if necessary.

Responsibilities

The approved provider will be responsible for:

- Ensuring that obligations under the Education and Care Services National Law and National Regulations are met;
- Taking reasonable steps to ensure that the nominated supervisor, educators, staff and volunteers follow the policy and procedures Centre-based service:
 - Ensuring at least one educator, staff member or nominated supervisor is in attendance and immediately available in an emergency who:
 - holds a current approved first aid qualification.
 - has undertaken current approved anaphylaxis management training.
 - has undertaken current approved emergency asthma management training.
- Ensuring an appropriate number of first aid kits are kept, having regard to the number of children at the service. The kits must be suitably equipped, easily recognisable, and readily accessible to adults having regard to the design of the service premises and any requirements for excursions and/or transportation of children, where applicable;
- Ensuring that information relating to the administration of first aid resulting from an incident, injury, trauma or illness is recorded in the Incident, Injury, Trauma and Illness Record. It should be recorded as soon as possible, and within 24 hours, after the incident, injury, trauma or illness;
- Ensuring that incidents, injury, trauma and illness events requiring first aid are notified to families as soon as practicable but no later than 24 hours after the occurrence. In the case of a serious incident, notification must also be given to the regulatory authority within 24 hours;
- Taking reasonable steps to ensure that nominated supervisors, educators, staff and volunteers follow the 'Administration of First Aid Policy and Procedures';
- Ensuring that copies of the policy and procedures are readily accessible to the nominated supervisor, coordinators, educators and staff, and available for inspection;
- Notifying families at least 14 days before changing the policy or procedures if the changes will:
 - Affect the fees charged or the way they are collected or significantly impact the service's education and care of children; or
 - Significantly impact the family's ability to utilise the service.

The nominated supervisor and responsible person (Director) will be responsible for:

- Implementation of the 'Administration of First Aid Policy and Procedures';
- Ensuring at least one educator or staff member holds current approved first aid qualifications and is in attendance at all times that children are being educated and cared for by the service, including on excursions and during periods of transportation;
- Ensuring an appropriate number of first aid kits are kept, having regard to the number of children at the service, and they are suitably equipped, easily recognisable and readily accessible to adults having regard to the design of the service premises;
- Ensuring an appropriate number of suitably equipped first aid kits are taken on excursions
- Monitoring and maintain stock in first aid kits;
- Supporting educators and staff to maintain their current first aid qualifications.

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The educators will be responsible for:

- Implementation of the 'Administration of First Aid Policy and Procedures';
- Maintaining current approved first aid qualifications;
- Seeking further medical attention if required after first aid has been administered;
- Recording information as soon as possible, and within 24 hours after the incident, injury, trauma or illness, in the Incident, injury, trauma and illness record (including any first aid administered), and ensure families are appropriately notified;
- Ensuring an appropriate number of suitably equipped first aid kits are taken on excursions;
- Monitoring and maintain stock in first aid kits;
- Being aware of children attending the service with allergies and their attendance days and apply this knowledge when providing first aid;
- While attending to a child requiring first aid, ensure other children are adequately supervised.

The families will be responsible for:

- Providing authorisation in their child's enrolment form for the approved provider, nominated supervisor or an educator to seek medical treatment for their child from a registered medical practitioner, hospital or ambulance service and, if required, for transportation by an ambulance service;
- Being aware that medication may be administered to their child in the case of an anaphylaxis or asthma emergency without their authorisation;
- Notifying the service upon enrolment of any specific health care needs of their child, including any medical conditions and allergies and any medical management plans that need to be followed;
- Ensuring any medical management plans at the service are kept up-to-date;
- If needed, collect their child as soon as possible when notified of an incident, injury, trauma or illness that required first aid;
- Being contactable, either directly or through emergency contacts listed on the enrolment form, in the event of an incident requiring the administration of first aid and/or medical attention;
- Notifying educators or staff if there has been a change in the condition of the child's health, or of recent accidents or incidents that may impact the child's care and require the administration of first aid.