

HDKA promotes a commitment to child safety, wellbeing, participation, empowerment, cultural safety and awareness including children with a disability, Aboriginal and Torres Strait Islander children and/or communities and children from cultural and/or linguistically diverse backgrounds.

HDKA has a zero tolerance of child abuse and a duty of care to prevent and manage child abuse risks including physical and online environments.

Procedure

The Approved Provider (HDKA) is responsible for:

- Assessing the first aid requirements for the service.
- Ensuring that at least one educator with current approved first aid qualifications is in attendance and immediately available at all times.
- Advising families that a list of first aid and other health products used by the service is available for their information and that first aid kits can be inspected on request.
- Providing and maintaining an appropriate number of up-to-date, fully-equipped first aid kits.
- Providing a portable first aid kit that can be taken offsite for excursions and other activities.
- Providing approved first aid training for staff on an annual basis.
- Ensuring that first aid training details are recorded on each staff member's record.
- Ensuring there is an induction process for all new staff, casual and relief staff that includes providing information on the location of first aid kits and specific first aid requirements.
- Ensuring that staff are offered support and debriefing following a serious incident requiring the administration of first aid (refer to *Incident, Injury, Trauma and Illness Policy*).
- Ensuring the regulatory authority is notified of any serious incident, injury or trauma.
- Ensuring that the prescribed educator-to-child ratios are met at all times.
- Ensuring that all educators' approved first aid qualifications, anaphylaxis management training and emergency asthma management training are current.

Staff at the service are responsible for:

- Ensuring they have up to date first aid training including CPR, management of anaphylaxis and asthma management – should they not be able to attend scheduled HDKA training staff must access independent training which meets the required standard – notifying HDKA office six months prior to the expiration of their first aid, asthma or anaphylaxis accredited training.
- Ensuring safety signs showing the location of first aid kits are clearly displayed.
- Ensuring that parents and HDKA are notified within 24 hours if their child is involved in an incident, injury, trauma or illness at the service and recording details on the *Incident, Injury, Trauma and Illness Record*.
- Ensuring parents sign the *Incident, Injury, Trauma and Illness Record*.
- Ensuring a resuscitation flow chart is displayed in a prominent position in the indoor and outdoor environments of the service.
- Keeping up to date with any changes in procedures for administration of first aid and ensuring that all educators are informed of these changes.
- Ensuring that every reasonable precaution is taken to protect children at the service from harm and hazards that are likely to cause injury ie. removing dangerous objects.
- Ensuring that the prescribed educator-to-child ratios are met at all times.
- Ensuring a risk assessment is conducted prior to an excursion to identify risks to health, safety or wellbeing and specifying how these risks will be managed and minimised (Regulations 100, 101).
- Ensuring a portable first aid kit is taken on all excursions and other offsite activities.

- Monitoring the contents of all first aid kits and arranging with the Approved Provider for replacement of stock including when the use-by date has been reached.
- Disposing of out-of-date materials appropriately.
- Implementing appropriate first aid procedures when necessary.
- Maintaining current approved first aid qualifications and qualifications in anaphylaxis management and emergency asthma management, as required.
- Practicing CPR and administration of an auto-injection device at least annually (in accordance with other service policies).
- Ensuring that all children are adequately supervised (refer to the *Supervision of Children Policy*) while providing first aid and comfort for a child involved in an incident or suffering trauma.
- Conducting a risk assessment prior to an excursion to identify risks to health, safety or wellbeing and specifying how these risks will be managed and minimised (Regulations 100, 101).
- Ensuring parents provide all necessary medical information.

Parents/guardians are responsible for:

- Providing the required information for the service's medication record (refer to Definitions).
- Providing written consent (via the enrolment record) for service staff to administer first aid and call an ambulance if required.
- Being contactable either directly or through emergency contacts listed on the child's enrolment record in the event of an incident requiring the administration of first aid.

Volunteers and students are responsible for following this policy and its procedures while at the service.

Attachment 1

First aid risk assessment form

This template can be used to assess the first aid requirements for the service. Consultation is an important aspect of first aid risk assessment and management. The Approved Provider and educators should use this as a guide only and may identify other areas specific to their service.

1	How many people work at the service? (Estimate for most days)						
2	How many children are enrolled at the service? (Write the number)						
3	Do people regularly work in the service after hours?						
4	Do people work on their own after hours including on weekends? If yes approximately how many, how often and for how long at any one time?						
5	Describe the nature of incidents, injuries or illnesses that have occurred in the service over the last 12 months (if possible attach a summary of the incident reports)						
6	Where is the nearest medical service and how long would it take to get an injured person to this service?						
7	Where is the nearest major hospital with a 24-hour accident and emergency service? How long would it take to get an injured person to this hospital?						
8	What type of and how many first aid kits are available at the service?						
9	Are the contents of first aid kits complete and up to date as per the contents list?						
10	Where are the first aid kits located?						
11	How many current first aid officers are there at the service? (List the number, approved first aid qualifications and qualification expiry dates)						
12	Identify and list specific hazards and where they may be located	<table border="1"> <tr> <td>Hazards <i>Heaving lifting</i></td> <td>Location <i>Storeroom</i></td> </tr> </table>	Hazards <i>Heaving lifting</i>	Location <i>Storeroom</i>			
Hazards <i>Heaving lifting</i>	Location <i>Storeroom</i>						
13	Are there any specific hazards or health concerns that require specific first aid kits or treatment such as anaphylaxis, asthma etc? If yes list the particular hazards or health concerns and where the specific first aid requirements are kept	<table border="1"> <tr> <td>Hazards or health concerns</td> <td>Specific first aid requirements</td> <td>Specific training required</td> <td>Staff have appropriate training</td> <td>Location of first aid equipment</td> </tr> </table>	Hazards or health concerns	Specific first aid requirements	Specific training required	Staff have appropriate training	Location of first aid equipment
Hazards or health concerns	Specific first aid requirements	Specific training required	Staff have appropriate training	Location of first aid equipment			
14	Is there an induction process for all new staff that includes location of first aid kits, specific first aid requirements etc?						

Recommendations



Administration of First Aid procedure

Mandatory – Quality area 2

Reference number	Recommendation	Responsibility and time frame
<i>Eg 3 & 4</i>	<i>Develop safety procedures for staff working on their own or after hours</i>	<i>Approved Provider within 2 months</i>

Names of persons responsible for completing this form

Name _____ Signature _____ Date _____

Name _____ Signature _____ Date _____

Date for next review _____