

At Sprouts Early Learning, the safety, rights, wellbeing and best interests of children are the paramount consideration in all decisions. This includes responses to injury, illness, medical care and emergency situations. All first aid practices are guided by a child safe lens, ensuring children feel protected, respected and supported during vulnerable moments. Under the *Education and Care Services National Regulations* the approved provider must ensure policies and procedures are in place for the administration of first aid (Reg. 168) and take reasonable steps to ensure policies and procedures are followed. First aid can save lives and prevent minor injuries or illnesses from becoming major. The ability to provide prompt basic first aid is particularly important in the context of an early childhood service where educators have a duty of care and obligation to assist children who are injured, become ill, or require support with administration of medication.

NATIONAL QUALITY STANDARD (NQS)

| QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY | | |
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| 2.1.1 | Wellbeing and comfort | Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation. |
| 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. |

| EDUCATION AND CARE SERVICES NATIONAL LAW AND REGULATIONS | |
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| S.167 | Offence relating to protection of children from harm and hazards |
| 12 | Meaning of serious incident |
| 85 | Incident, injury, trauma and illness policies and procedures |
| 86 | Notification to parents of incident, injury, trauma and illness |
| 87 | Incident, injury, trauma and illness record |
| 88 | Infectious diseases |

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| 89 | First aid kits |
| 90 | Medical conditions policy |
| 92 | Medication record |
| 93 | Administration of medication |
| 94 | Exception to authorisation requirement-anaphylaxis or asthma emergency |
| 97 | Emergency and evacuation procedures |
| 101 | Conduct a risk assessment for excursions |
| 102C | Conduct a risk assessment for transporting of children by the education and care service |
| 136 | First aid qualifications |
| 137 | Approval of qualifications |
| 161 | Authorisations to be kept in enrolment record |
| 162 | Health information to be kept in enrolment record |
| 168 (2)(a)(iv) | Education and care service must have policies and procedures |
| 170 | Policies and procedures to be followed |
| 171 | Policies and procedures to be kept available |
| 175 | Prescribed information to be notified to Regulatory Authority |
| 176 | Time to notify certain information to Regulatory Authority |
| 183 | Storage of records and other documents |

RELATED POLICIES

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| Administration of Medication Policy Anaphylaxis Management Policy Asthma Management Policy Child Safe Environment Policy Dealing with Infectious Diseases Policy Diabetes Management Policy Emergency and Evacuation Policy Enrolment Policy Epilepsy Management Policy Family Communication Policy | Health and Safety Policy Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Record Keeping and Retention Policy Responsible Person Policy Safe Transportation Policy Sun Safety Policy Supervision Policy Water Safety Policy Work Health and Safety Policy |
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PURPOSE

“Children’s safety is not just a response to risk, it is the lens through which we plan, lead and care.”

Donna Bush



This policy ensures that the administration of first aid is guided by the paramount consideration of children’s safety, rights and wellbeing, recognising that children may be physically and emotionally vulnerable during illness or injury. In alignment with the Western Australian Child Safe Standards, the Service recognises that “paramount” means of greater importance than any other matter, and that all first aid decisions — including timing, privacy, supervision and escalation to medical services — will prioritise the child’s safety, dignity and wellbeing above all competing considerations. Our Service has a duty of care to provide and protect the health and safety of children, educators, and visitors of the Service. This policy aims to support educators to:

- Preserve life
- Ensure the environment is safe and other people are not in danger of becoming ill or injured
- Ensure that ill or injured persons are stabilised and comforted until medical assistance intervenes
- Relieve pain if possible
- Monitor ill or injured persons and promote recovery
- Provide immediate and effective first aid to children or adults
- Apply additional first aid if the condition does not improve

‘First aid can reduce the severity of an injury or illness and in extreme cases, could mean the difference between life and death.’ (Safe Work Australia).

SCOPE

This policy applies to children, families, educators, staff, approved provider, nominated supervisor, management, students, volunteers and visitors of the Service.

IMPLEMENTATION

First aid is the emergency aid or treatment given to persons suffering illness or injury following an accident and prior to obtaining professional medical services if required. It includes emergency treatment, maintenance of records, dressing of minor injuries, recognition and reporting of health hazards, and participation in safety programs. Legislation that governs the operation of approved children’s services is based on the health, safety and welfare of children, and requires that children are protected from hazards and harm. Educators and leaders will apply a child safe decision-making approach when administering first aid, ensuring actions prioritise children’s dignity, comfort, voice and wellbeing as the paramount consideration.

CHILD SAFE AND PARAMOUNT DECISION FRAMEWORK

When administering first aid, educators and leaders will consider:

- Is the child physically and emotionally safe?
- Is the child's dignity and privacy protected?
- Is consent sought in age-appropriate ways?
- Are power dynamics considered (e.g. child fear, embarrassment)?
- Does the response demonstrate that the child's wellbeing overrides operational pressures?
- Would a reasonable person conclude that the child's best interests were the central consideration?

Where uncertainty exists, the Service will err on the side of child safety.

THE APPROVED PROVIDER/NOMINATED SUPERVISOR/MANAGEMENT WILL:

ensure obligations under the *Education and Care Services National Law and National Regulations* are met

- document decision-making where first aid responses involve complex safety considerations (e.g. suspected abuse, restraint risk, refusal of care, or parental conflict).
- ensure that decisions relating to first aid responses, staffing, supervision and emergency actions are guided by the paramount consideration of children's safety and wellbeing.
- ensure educators, staff, students, visitors and volunteers have knowledge of and adhere to this policy and procedure
- ensure all new employees, students and volunteers are provided with a copy of this policy as part of their induction process
- ensure there is an induction process for all new staff, including casual and relief staff, that includes providing information on the location of first aid kits and specific first aid requirements; individual children's allergies and individual children's medical management plans
- ensure families are aware of this *Administration of First Aid Policy*
- take every reasonable precaution to protect children at the Service from harm and/or hazards that can cause injury
- ensure that the following qualified people are in attendance and immediately available in an emergency, **at all times** the service is providing education and care to children [Reg. 136]
 - at least one educator, staff member or nominated supervisor who holds a current ACECQA approved first aid qualification

- at least one educator, staff member or nominated supervisor of the service who has undertaken current approved anaphylaxis management training
- at least one educator, staff member or nominated supervisor of the service who has undertaken current approved emergency asthma management training

(One staff member may hold one or more of the three qualifications)

- ensure staff maintain current ACECQA approved first aid qualification and ACECQA approved anaphylaxis and asthma management training every 3 years and renew cardio-pulmonary resuscitation every 12 months [best practice not mandatory]
- plan and review the staff roster to ensure all first aid qualification requirements are met at all times
- appoint a nominated first aid officer
- ensure a risk assessment is conducted prior to an excursion or regular outing, to identify risks to health, safety, or wellbeing and specifying how these risks will be managed and minimised (NB: risk assessment for a regular outing or regular transportation is required at least annually) [Reg. 102B, 102D (4)]
- provide and maintain an appropriate number of up-to-date, fully equipped first aid kits, that meet Australian Standards [Reg. 89]
- monitor the contents of all first aid kits and arrange replacement of stock, including when the use-by date has been reached
- dispose of out-of-date materials and supplies appropriately
- ensure safety signs showing the location of first aid kits are clearly displayed
- provide training for the administration of an auto-injector device annually and document on staff files [not mandatory]
- provide and maintain a transportable first aid kit that can be taken to excursions and other activities [Reg. 89]
- ensure that first aid training details are recorded and kept up to date on each staff member's record
- ensure that families/parents are notified when practicable or within 24 hours if their child is involved in an incident, injury, trauma or illness at the Service and that details are recorded on the *Incident, Injury, Trauma and Illness* Record [Reg. 86, 87]
- ensure the regulatory authority is notified within 24 hours if a child is involved in a serious incident, injury, trauma or illness at the Service [Reg. 12, 176]
- ensure that staff members are offered support and debriefing subsequent to a serious incident requiring the administration of first aid

- ensure a resuscitation flow chart is displayed in a prominent position in the indoor and outdoor environments of the Service [best practice not mandatory]
- keep up to date with any changes in procedures for administration of first aid and ensuring that all educators are informed of these changes.
- ensure parents/guardians provide written consent (via the enrolment record) for service staff to administer first aid
- ensure parents/guardians provide written consent for the approved provider, nominated supervisor or educator to seek medical treatment for their child by a registered medical practitioner, hospital or ambulance service and if required, transport the child to hospital [Reg. 161(1)(a)]

EDUCATORS WILL:

- support children's emotional safety during first aid by explaining procedures in age-appropriate ways and ensuring children feel safe, heard and respected.
- implement appropriate first aid procedures, when necessary, by adhering to the Service's *Administration of First Aid Procedure*
- maintain current ACECQA approved first aid qualification, and qualifications for approved anaphylaxis management and emergency asthma management every 3 years [best practice- not mandatory]
- renew cardio-pulmonary resuscitation every 12 months [best practice- not mandatory]
- participate in administration of an auto-injector device training at least annually (not mandatory)
- ensure that all children are adequately supervised while providing first aid and comfort for a child involved in an incident or suffering trauma
- ensure that the details of any incident requiring the administration of first aid are recorded on the *Incident, Injury, Trauma and Illness Record* accurately
- conduct a risk assessment prior to an excursion, regular outing or when providing regular transportation of children to identify risks to health, safety, or wellbeing and specifying how these risks will be managed and minimised (NB: risk assessment for a regular outing or regular transportation is required at least annually) [Reg. 102B, 102D (4)]

FAMILIES WILL:

- read and comply with the policies and procedures of the Service
- sign Service records of accidents or injuries that have occurred, acknowledging they have been made aware of the incident and the first aid that treatment that was given to the child



- provide the required information for the Service's medication record
- notify the Service upon enrolment of any specific health care needs of their child- including medical conditions and allergies
- provide the Service with a medical management plan for their child if required and ensure these are kept up to date at all times
- provide written consent (via the enrolment record) for service staff to administer first aid
- provide written consent for the approved provider, nominated supervisor or educator to seek medical treatment for their child by a registered medical practitioner, hospital or ambulance service and if required, transport the child to hospital
- be contactable, either directly or through emergency contacts listed on the child's enrolment record
- notify educators of any change in condition of their child's health that may impact the child's care and require the administration of first aid (ACECQA, 2021).

INCIDENT, INJURY, TRAUMA AND ILLNESS RECORD

Any incidents, injuries trauma or illness, including first aid provided, must be recorded and include the following details, as per Education and Care Services National Regulation 87:

- name and age of the child
- circumstances leading to the incident, injury, trauma, or illness (including any symptoms)
- time and date
- details of action taken by the service including any medication administered, first aid provided or
- medical personnel contacted
- details of any witnesses
- names of any person the service notified or attempted to notify, and the time and date of this
- signature of the person making the entry, and time and date of this.

FIRST AID KIT

The approved provider of the Service will ensure that first aid kits are kept in accordance with Education and Care Services National Regulations [Reg. 89].

ALL FIRST AID KITS AT THE SERVICE MUST:

- be suitably equipped
- not be locked

- not contain paracetamol
- be suitable for the number of employees and children and sufficient for the immediate treatment of injuries at the Service
- be easily accessible to staff and educators
- be constructed of resistant material, be dustproof and of sufficient size to adequately store the required contents
- be capable of being sealed and preferably be fitted with a carrying handle as well as have internal compartments
- contain a list of the contents of the kit
- be regularly checked using the *First Aid Kit Checklist* to ensure the contents are as listed and have not degraded or expired
- have a white cross on a green background with the words 'First Aid' prominently displayed on the outside
- be easily recognisable
- be easy to access and if applicable, located where there is a risk of injury occurring
- include emergency telephone numbers, and location of the nearest first aid trained educators
- display a photograph of the first aid trained educators, along with contact details to assist in the identification process
- be provided in each work vehicle
- be stocked with precautionary items such as sunscreen and water if using outdoors.
- be taken on excursions and during regular transportation
- be maintained in proper condition and the contents restocked as required.

Our nominated First Aid Officer responsible for maintaining all First Aid kits at the Service is:

| FIRST AID OFFICER | |
|--|--|
| Name | |
| Role | |
| Number of First Aid Kits Responsible for at the Service: | |
| Additional First Aid Officer: | |

These individuals are responsible for conducting and maintaining each first aid kit by complying with the *First Aid Kit Checklist*, certifying each kit has the required quantities, items are within their expiry dates, and sterile products are sealed. This will occur after each use or if unused, at least annually.

Individuals, along with the nominated supervisor will also consider whether the first aid kits and components are appropriate and effective for the Service's hazards and the injuries that have occurred. If the kit requires additional resources, these individuals will advise and follow up with the nominated supervisor.

Our Service will display a well-recognised, standardised first aid sign to assist in easily locating first aid kits. Signage will comply with AS 1319:1994 – Safety Signs for the Occupational Environment.

FIRST AID KIT CHECKLIST

Our Service will use the checklist provided by the *Childcare Centre Desktop*. The checklist will be completed-annually to ensure first aid kits are equipped and maintained.

Safe Work Australia's *First Aid in the Workplace Code of Practice* also provides a guide to what to include in a First Aid Kit. (Appendix E- Example of contents)

<https://www.safeworkaustralia.gov.au/doc/model-codes-practice/model-code-practice-first-aid-workplace>

We will determine the need for additional items to those in the checklist, or whether some items are unnecessary, after analysing the number of children at our Service and what injuries children or adults may incur. We will review our incident, injury, trauma and illness records to assist us in making an informed decision about what to include.

For further advice on first aid in the workplace, refer to the following website for state and territory specifications. <https://www.safeworkaustralia.gov.au/safety-topic/managing-health-and-safety/first-aid>

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Administration of First Aid Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management. Critical reflection will include evaluation of how effectively the Service upheld the principle of paramount consideration in first aid responses, particularly during serious incidents or emergency situations.

CHILDCARE CENTRE DESKTOP- RELATED RESOURCES

| | |
|---------------------------------------|--|
| Administration of First Aid Procedure | Head Injury Guide and Procedure |
| Dental Accident Procedure | Illness Management Procedure |
| First Aid Checklist | Incident, Injury, Trauma or Illness Record |
| First Aid Kit Fact Sheet Guide | Incident Injury Report Register |
| First Aid Certificate Register | Incident Injury Report Record Staff |

SOURCES

Australian Children’s Education & Care Quality Authority. (2014).
 Australian Children’s Education & Care Quality Authority. (2023). [Guide to the National Quality Framework](#).
 Australian Children’s Education & Care Quality Authority. (2023). Policy and procedure guidelines- [Administration of First Aid Policy Guidelines](#)
 Early Childhood Australia Code of Ethics. (2016).
 Education and Care Services National Law Act 2010. (Amended 2023).
[Education and Care Services National Regulations](#). (Amended 2023)
 Safe Work Australia First Aid in the Workplace Code of Practice: [First Aid in the Workplace](#)
[Western Australian Education and Care Services National Regulations](#)

REVIEW

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|-----------------|---------------|-------------------|------------------|
| NEW POLICY | Donna Bush | Managing Director | Aug 24 |
| POLICY REVIEWED | November 2024 | NEXT REVIEW DATE | OCTOBER 2025 |
| VERSION NUMBER | V2603 | | |
| POLICY REVIEWED | MODIFICATIONS | | NEXT REVIEW DATE |
| March 2026 | New Policy | | March 2027 |