

# PROVIDING FIRST AID IN SCHOOLS – MORE THAN JUST A BANDAID

## Introduction

The thrust of my paper Providing First Aid in Schools - more than just a bandaid is twofold.

Firstly it will highlight the need for appropriate risk assessments which should provide a framework to implement suitable controls to aid injury and illness prevention in schools.

And secondly even with the best of risk assessments, injury and illness will happen. Preparedness of teaching staff to provide first aid is therefore high priority but are the generic Level 2 or Senior First Aid courses offered enough, does one size fit all?

Outside the home, children aged 5-15 years spend the majority of their time at school. It is therefore not surprising that the number of injuries occurring at school versus those occurring during waking hours at home are equal.

## OHP

Each year in Victoria unintentional school injury accounts for 20% of presentations to hospital emergency departments and 25% of hospital admissions. In fact 131 of every 100,000 school children under 15 years will require admission to hospital annually. Falls associated with playground equipment account for the majority of injuries, with forearm fractures at 41% being the most common injury requiring admission to hospital.

Providing first aid in school is more than simply using bandaids. Rather, carefully targeted decisions are needed to ensure reasonable safety of school communities. Importantly schools appreciate there have been significant changes which now more than ever, make it imperative that specific processes operate dynamically to determine what appropriate measures are needed to provide appropriate first aid responses wherever schools are operating.

## In Loco Parentis and Administration of First Aid

There is a requirement for students to compulsory attend school and as a result there is a legal responsibility owed to students by the school and the teachers to secure a safe and healthy work environment. OHP The High Court of Australia determined that a school has a statutory obligation of duty of care “in loco parentis” (1). In loco parentis therefore refers to teachers who stand in the place of the parent whilst students are in their care. Although it is not possible to protect a student from all harm there is court precedence to indicate that OHP “teacher’s have a personal duty to take reasonable care for the safety of

students, as well as the education authority's non delegable duty to ensure that reasonable care is taken for the safety of students.....It is the responsibility of both teachers and their education authority employers to respond to these duties in legally defensible ways" (2).

As part of the duty of care owed to students, teachers are required to administer first aid when necessary within the limits of their skill, expertise and training" (3). If a teacher is a current designated workplace first aider then under OH&S legislation they have a duty of care to respond to the first aid emergency.

Interpreting "in loco parentis" teachers and other staff in charge of students are expected to use their best endeavours at all times, to secure the welfare of the students at school in the same way that parents might be expected to act towards their children. **OHP** In essence if teachers are not a trained workplace first aider or if first aid competencies have lapsed or a teacher has not undertaken any first aid training they still have a duty of care to respond and to provide first aid management which they believe to be appropriate within the limits of their skill, expertise and knowledge.

### **Australian Occupational Health and Safety Legislation**

Workplace safety is the responsibility of all – governments, employers and employees. In Australia, State, Territory and Federal governments have the responsibility for making and enforcing laws relating to workplace health and safety and each State, Territory or the Federal government has an Occupational Health and Safety Act and pursuant to that Act a first aid Code of Practice, Standard or Regulation.

I will however now draw specifically from the Victorian legislation, but in doing so wish to ensure those delegates from the other States and Territories that there is very little difference between corresponding legislations.

**OHP** The Victorian Occupational Health and Safety Act 2004 requires an employer, to "provide and maintain so far as is practicable a working environment that is safe and without risks to health" and "to provide adequate facilities for the welfare of employees at any workplace..." (4).

**OHP** When the Victorian, First Aid in the Workplace - Code of Practice is examined, the directive from the Act, to "provide and maintain" a safe working environment can be translated into undertaking a first aid risk assessment and the meaning of "adequate facilities" translates into the assessment identifying the provision, maintenance and use of first aid equipment, facilities, services and suitably trained staff for the workplace, the school (5).

The Code is the essential tool which provides a framework employers use to get answers. The answers are obtained through the undertaking of a first aid risk assessment.

## First Aid Risk Assessment

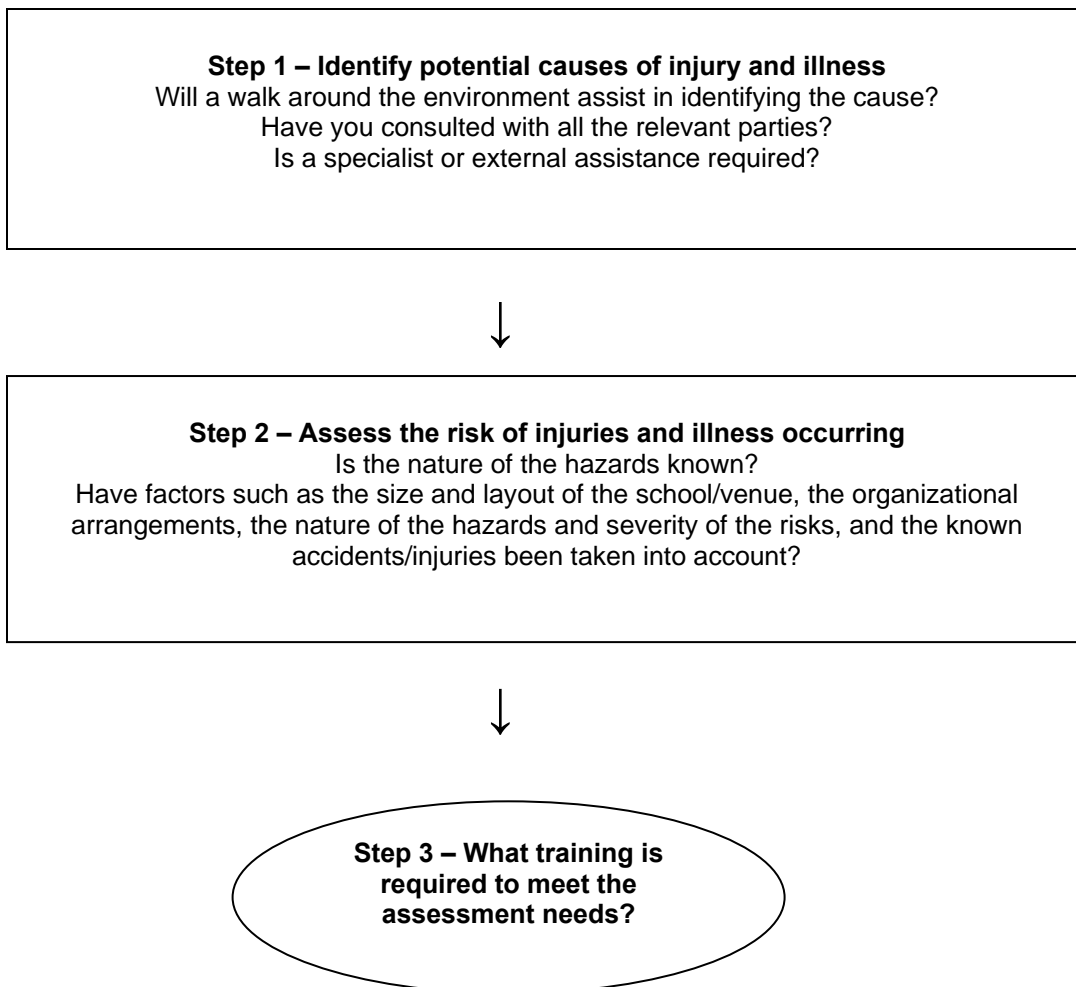
**OHP** Rather than using the generic assessment tool in the Code, the Victorian Department of Education and Training or DE&T has provided a brief customised tool to the schools' first aid assessment process by providing a flow chart found in the Schools Reference Guide (the Guide) . PAUSE

The Guide rightly suggests that the flow chart in conjunction with using the Code would help determine the first aid needs of each school.

In undertaking a first aid assessment, schools should be vigilant to review not only workplace injury and workplace illness patterns but examine the range of general illnesses and conditions likely to be present in the able and disabled school population. This area of the assessment is a unique aspect to schools in determining the first aid competencies required for teachers.

**?OHP**

### DIAGRAM 1



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| <p><b>First aiders and training</b><br/>How many first aiders are needed?<br/>What are the required first aid competencies?<br/>What training is needed?</p> | <p><b>First aid kits</b><br/>How many kits are needed?<br/>Are kits identifiable?<br/>Who is responsible for maintenance?</p> | <p><b>First aid rooms</b><br/>Who has responsibility and control of the room?<br/>Are the contents of the room appropriate for the needs of the users?</p> |
|--|---|--|

Making such an assessment requires more than reading, understanding and using, the Code or the DE&T tool. This process may be clear however making relevant, useful, meaningful and an accurate assessment requires assessors to draw on knowledge and experiences beyond the abilities of most school staff. There is a strong case to be made for drawing on outside expertise in making such assessments.

### **DE&T First Aid Policy**

The Departments First Aid Policy provides valuable information specific to the first aid operations in schools and importantly first aider responsibilities. It is in the policy where the possible range of first aid duties for first aiders is addressed. The first aider's assessment duties relevant to this paper are:

#### **OHP**

- Participating in the risk assessment process, which may include providing feedback on injury reports and first aid register data to identify persistent or serious hazards
- Providing input on first aid requirements for excursions

DE&T does expect school first aiders to participate in providing input into the risk assessment process. Further it is recognised several risk assessments may need to be undertaken to cover the range of school activities proposed in any one school. An adequate assessment of risks is intended to lead to the implementation of suitable controls which assist in injury prevention where possible and where not, in their management. Obviously these assessments are fundamental to decisions taken about school staff first aid training specific to the needs of any given situation, activity or location and indeed the quality of subsequent first aid response.

Excursions can be problematic, as any principal knows. Teachers accompany students on school camps, intra and interstate and on trips overseas, the key question that must be asked is, are the accompanying teachers trained to cope with the first aid risks and provision of appropriate responses associated with the excursion? Clearly the duty of care requires these risks are identified and controls implemented to make the event as safe as possible.

## **Student Safety and Risk Management**

The principal has the primary responsibility for providing and maintaining a safe and healthy workplace. Some of the duties placed on the principal can be delegated to a management representative, these can include ensuring that effective preventative action is taken to control workplace hazards.

An example of such a control can be the current Victorian requirement that all schools record details of accidents at school or on excursions through the Cases/Cases 21 injury management system (9). The Cases system in addition to the collection of first aid injury and illness data allows for valuable statistics to be collected by a school thus providing information to a risk assessor with which to establish emerging patterns of injury or illness. Examining these patterns allows for analysis to ascertain if the activity is worth the risk.

The principal is required to ensure that adequate pre-excursion planning and preparation takes place. (9).

**OHP** School council approval is required for:

- Overnight excursions
- Camps
- Interstate (domestic) visits
- Excursions requiring sea or air travel
- Excursions involving weekends or vacations
- Adventure activities

However only the principal needs to approve all single day excursions other than those above.

For approval to be granted several areas require consideration, some of these include:

- The adequacy of the planning, preparation and organisation in relation to; the school policy and the guidelines and advice provided by the Department
- The provisions made for the safety and welfare of students and staff (10).

The Safety in Outdoor Adventures Activities Series booklets (11) (12) provide excellent and in depth advice.

It is in these booklets that the very essence of the planning process is crystal clear. Although activity specific, the questions the booklets pose could be adopted for all excursions. It allows the answers to these questions to be analysed by the risk assessor to determine if the risk for the students is too high or if a suitable control can be taken to alleviate or mitigate the risk.

There is little doubt that all excursions require a risk assessment. Complacency in believing that “the same excursion that was undertaken last year and worked well” does not fit the legal requirement for schools. As the students are different from years previously so is the risk. One “size” does not fit all and forever.

Traveling intrastate, interstate or internationally poses risks for injury and illness that are not within the general school environment. These considerations and some possible first aid implications may include:

### **OHP**

- Group Characteristics
  - Numbers/ratios, age, maturity, sex, known or unknown medical or psychological conditions, skills and qualifications, abilities and disabilities
- Environment
  - Terrain - rugged, unstable, treed, mountainous - major trauma e.g. Multiple fractures, blood loss, spinal and head injury
  - Weather conditions- temperature, water flooding, hurricane, threat of fire e.g. drowning, hypo/hyperthermia, burns, heat exhaustion
  - Flora and fauna – area specific poisons, bites and stings e.g. box jellyfish, funnel web spider,
- Location
  - Geographical isolation – e.g. remote area first aid skills, equipment for casualty management
  - Sanitation – gastroenteritis, salmonella, typhoid, cholera
  - Nutritional - e.g. food and water contamination, food variances, poisoning food allergies
  - Transport safety – modes, speed, transport maintenance, driver skills, seat belting
  - Hospital and Medical support - distance, adequacy of services, communications, medical evacuation, response time,
- Culture
  - Language, customs e.g. barriers

### **First Aid Training**

In Victoria most teachers undertake a First Aid Level 2 course to prepare for their school first aider role (this course is equivalent to Senior First Aid in other States). DE&T has specified certain training requirements to assist first aid training providers to contextualize training appropriately which in my view can be successfully incorporated into the First Aid Level 2 course. These requirements are that training provide:

## OHP

- Basic familiarity with key parts of the OH&S legislation relevant to schools (including “in loco parentis” role of teachers and provision of medical services)
- OHS management systems in schools
- Material relevant to student health and safety
- First aid and Risk assessment (and the CAP risk management procedure)
- First aid services in schools
- Preparing for excursions including risk assessment management and reporting
- Specific first aid skills

## Conclusion

Providing first aid in schools is more than simply using bandaids. Accountability for the health and safety of staff and students resides with principals and school councils.

Schools are doubly legally responsible to provide a healthy and safe environment Firstly because a legal relationship “in loco parentis” exists and secondly because of OH&S legislation.

This paper has explored the need for schools to undertake workplace first aid risk assessments and for principals to direct teachers planning for an event for students outside the school environs to assess or have assessed a specific risk assessment relating to that activity.

## References

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