FIRST AID POLICY

SALESIAN COLLEGE
CHADSTONE EST.1957

POLICY STATEMENT

The College is committed to the safety of its students, staff and others who attend the College or are involved in the College's activities or events. First aid at the College involves immediate assistance pending the arrival of health professionals (for incidences assessed as serious) or parents, carers, guardians or emergency contacts (for less serious cases).

POLICY SYNOPSIS

Consistent with our commitment, policies and procedures are for the provision of first aid in response to incidents of illness and injury that inevitably occur from time to time.

This policy outlines the College's approach to first aid management of Health Centre / First Aid Room presentations, noting different arrangements are required for offsite activities. There is a distinction made between less serious matters where care is transferred to parents, carers and guardians and emergency cases that are transferred to health professionals. In all cases, staff comply with record-keeping requirements.

The policy also outlines arrangements made for First Aid including professional learning, management of medications (including EpiPens and Ventolin), locations of first aid facilities and first aid kits, communication of this policy and the College's responses to breaches.

This College has prepared this plan following an assessment of risk provided in Appendix 1.

Important notes:

1. For treatment of anaphylaxis, treatment is in accordance with the Anaphylaxis Policy, accompanying procedures and each individual's Anaphylaxis Management Plan.
2. For treatment of asthma, treatment is also in accordance with each individual's Asthma Management Plan.
3. Treatment of other known conditions is in accordance with medical notes located on 'Simon', the College's information management system.

VERSION CONTROL

The College is committed to regularly updating this policy in response to developments and experience.

Prepared by	Risk & Compliance Manager
Version	2.3
Approved by	College Leadership Team
Approval date	September 2025
Next review	2026

ISSUE HISTORY

Date Modified	Modified by	Version	Details
3/01/2023	Risk & Compliance Manager	1.0	Redevelopment supported by MACS template. Updated Injury incident reporting section to be synonymous with OH&S incident reporting.
June 2023	Health Centre Officer	2.0	Concussion and Dispensing S8 and S4D Prescription Medication management content added
5/02/2024	Risk & Compliance Manager	2.1	Update to concussion management as per AIS recommendations and review cycle date
17 June 2025	Risk & Compliance Manager	2.2	Update in relation to Concussion Recognition Tool 6
3 September 2025	Risk & Compliance Manager	2.2	Update of the policy in relation to the sending of student home whilst on an excursion. Approved at Leadership Level

RATIONALE

The College is committed to the safety of its students, staff and others who attend the College or are involved in the College's activities or events. In many cases, first aid can reduce the adverse consequences of illnesses and injuries. In addition, the College has a legal duty of care to take all reasonable steps to minimise the risk of foreseeable harm to others and we are required to have policies and procedures to provide a safe environment where students are and feel safe. All workplaces are required by law to maintain appropriate first aid facilities.

SCOPE

This policy covers students, staff and others whilst at the College or involved in activities or events held outside the College. It also covers parents, carers and guardians whose support is needed to update records and provide health management plans and medications.

This policy covers situations where first aid should or is provided by staff to students, staff and others at the College or at a College activity or event.

PRINCIPLES

The care and safety of our community members is at the core of our Salesian values and a legal requirement. This policy assists in discharging our obligations.

DEFINITIONS

First Aid	The emergency treatment provided to students, staff and others who suffer injury or illness while at the College or involved in a College event or activity using the facilities or materials available at the time

	Includes preserving life (ensuring airways are open, restoring breathing / circulation, monitoring pending transfer to a health professional, protecting the person, preventing deterioration of condition and promoting recovery. Excludes diagnosis or treatment of conditions
First Aid Officers	Staff members who have been trained in first aid and are designated to provide initial care of ill or injured staff, students or others
SIMON	The College's learning management system

POLICY

The College maintains first aid services and facilities to meet the needs of staff, students and others while at the College or involved in College activities such as camps, excursions, and out of hours school events.

Sufficient staff are trained under the provisions of the Occupational Health and Safety Act 2004 to ensure adequate provision of first aid based on the number of students, the activities being undertaken and the environment.

Under the provisions of the Occupational Health and Safety Act 2004 an assessment of numbers (students, staff and others), activities, proximity of medical facilities and the environment determines the number of first aid trained staff required at the College and for off-site activities (refer Appendix 1).

A first aid officer with current first aid qualifications must always be available to respond and assist an ill or injured person.

Additional training for anaphylaxis management will be undertaken by all staff in schools.

Management of Health Centre / First Aide Room Presentations

During class times, students who are ill or injured may attend the Health Centre (Bosco Campus) or First Aid Room (Mannix Campus) for the purpose of first aid with the permission of their teacher. Permission is normally given if the student is presenting in an unwell state. Where appropriate, students will be accompanied by another student or staff member. Students are always accompanied when the injury or illness is serious including those involving severe allergic reactions (including anaphylaxis and asthma), head injury or a suspected broken bone.

At any time when a student is ill or injured and is unable to be moved, a teacher or student should send a message to the Health Centre or Reception indicating assistance is urgently required.

Outside of class times, students who are ill or injured may attend for first aid at their own discretion.

Staff and others (e.g. visitors and contractors) requiring first aid attend The Health Centre or First Aid Room when they need to.

In response to presentations, a trained first aid staff member will provide first aid.

In the event that it is deemed that immediate medical attention is required, 000 will be called – the College urges first aid staff to err on the side of caution.

If the unwell/injured person feels able to return to study or work, and with the approved assessment of the first aid responder, arrangements will be made for monitoring health for the rest of the day and normal study or work can resume.

If a student believes they are unable to return to classes, contact is made with a parent, carer, guardian or emergency contact so they student can be collected. In the event that the College cannot secure a response, the student will remain in the Health Centre or First Aid Room whilst efforts to make contact continue.

When a student requires further medical treatment or is to be sent home:

- The student's parents are notified to collect the student
- The Year Level Coordinator or Dean of Students is notified - if possible prior to the student's departure

General guidelines for the management of Health Centre / First Aid Room presentations is provided in Appendix 2.

Management of Emergencies

In cases of serious incidents, injuries or illnesses:

- Priority is given to the welfare of the individual
- The site is made safe and evacuated when necessary
- Trained first aid staff determine whether the injured person can be moved (e.g. to Health Centre or First Aid Room) and administer first aid
- Arrangements are made for any transportation (e.g. ambulance) that is required
- Parents, carers or guardians of students and emergency contacts for staff and others are contacted as early as possible

Steps to follow in the event of a medical emergency are provided in Appendix 4.

Any assistance from others that is needed should be secured for timely completion of these tasks e.g. to move the person, to await an ambulance.

Once emergency actions conclude, the incident is recorded and, when the event is a Worksafe notifiable incident, Worksafe are notified in accordance with legal requirements and our OHS Policy.

In situations where parents, carers, guardians or emergency contacts can't be reached, a staff member accompanies the ill or injured person.

Any time the presence of an ambulance is requested, the Principal or an Assistant Principal is notified as soon as possible.

As soon as is possible and reasonable after an injury and if appropriate, parents, carers or guardians are made aware of the College's participation in the Catholic Church Insurance Student Care Policy.

Camps, Sports, Excursions

Planning for camps, sports and excursions includes the appointment of a designated Teacher in Charge, collection of first aid kits and an assessment of participants' medical conditions and the trained staff required to provide first aid.

First aid kits are available from the Health Centre (Bosco Campus) and First Aid Room (Mannix Campus). The Teacher in Charge should make prior arrangements so that the appropriate number and type of kits can be prepared. The kit type and number will be recorded to keep a record of its whereabouts and to ensure it is restocked as needed.

In the event of an injury or illness where further treatment is required, the Teacher in Charge will determine whether to:

- Arrange transportation e.g. ambulance for urgent treatment
- Contact the student's parents, carers or guardians to arrange transport and treatment
- Students are not to travel or be transported on their own.

Any time the presence of an ambulance is requested or in the event of a major incident, the Assistant Principal – Students and / or Assistant Principal – School Organisation is notified as soon as possible.

The Teacher in Charge keeps a record of all first aid attendances and advises the Health Centre Administration Assistant or Reception on a timely basis.

Record Keeping

Student records

The Health Centre Administration Assistant keeps an up to date record of students' health issues based on information provided by parents. Information regarding a student with a serious illness or disability is communicated to staff via alerts and student profiles on SIMON (administration system). Further information can be sought from the Health Centre Administration Assistant as required.

Staff records

Relevant staff medical information and pre-existing medical conditions are recorded in the College's staff database (Synergetic).

Incident reporting

The College keeps a record of all first aid attendances. Whether managing an illness or injury at Health Centre, First Aid Room or at a remote location (in the case of camps, sports and excursions), the following applies:

Severity of illness or injury	Manage and document	Complete online incident form	Notify Worksafe
Minor illnesses and superficial injuries	✓		
Intermediate - an illness or injury that presented as, or was subsequently identified as more serious OR the circumstances indicate a significant risk that severe illness / injury could occur	✓	✓	
Severe - serious injury, ambulance called or failure of plant	✓	✓	✓

In instances where a student, staff or other person is referred for first aid, the Health Centre Administration Assistant will complete the recording of information, with the support of the first responder.

When the event is a Worksafe notifiable incident, Worksafe is notified by the Health Centre Administration Assistant in accordance with legal requirements and out OH&S Policy.

For offsite activities, other staff should email relevant details of incidents to the Health Centre Administration Assistant for encoding. In the event of an intermediate or severe illness or injury, the Teacher in Charge completes an incident form and notifies Worksafe Victoria.

The incident form is provided in Appendix 5 and Appendix 6 should be completed for 'near misses' i.e. where the injury isn't severe but circumstances or the potential for injury is concerning.

Professional Learning

Where possible, first aid should be administered by designated first aid staff within their limits of skill, expertise and training. Staff can contact NURSE-ON-CALL (1300 60 60 24) in an emergency or for health advice.

First Aid Officers

The Principal has determined that, in addition to the Health Centre Administration Assistant, most staff across both campuses are required to be trained in Basic First Aid HLTAID011 (this certificate is to be renewed every three years), which includes the refresher in Provide Cardiopulmonary Resuscitation (CPR) HLTAID009 (renewed every year). In addition, staff have additional training to assist with excursions, camps and sport. A register of first aid trained staff is maintained by administration staff.

All Staff

All staff attend at least two briefings annually on anaphylaxis management and, consistent with Ministerial Order 706, complete an e-training course and have their competency in using an autoinjector tested in person within 30 days of completing the course. Staff are required to complete this training every two years.

Training in the management of asthma is undertaken annually.

Additional training in other medical conditions, such as diabetes or epilepsy is dependent on the first aid risk assessment.

A register of all first aid training is maintained by administration staff..

Medications

As advised by MACS, medication will only be administered to students at the College (or during College related activities) with explicit written permission (Medication Authority From) from parents or guardians, or in the case of an emergency, with the permission of a medical practitioner. This includes the administration of aspirin and paracetamol for first aid purposes as these medications may mask symptoms of serious conditions. Whilst guided by the MACS policies and procedures, Salesian College Chadstone has adopted the same principles to administering medication to mitigate the risk and ensure student safety. For further information see Medical Management Policy and Administration of Medication to Students Procedure.

In the case of an EMERGENCY, authorisation may be given verbally by a parent/guardian/carer authorised to consent to administration of medication or, if such a person cannot reasonably be contacted in the circumstances, a registered medical practitioner or an emergency service.

Medication may be administered to a child without an authorisation in case of an anaphylaxis or asthma emergency. The College maintains a stock of EpiPens and storage is available for EpiPens supplied by families but senior students can keep their EpiPen with them. Similarly, the College maintains a stock of Ventolin but families are encouraged to supply asthma medication that students carry with them. See Anaphylaxis Policy for more information.

When a student presents to the College's Health Centre as unwell (not an emergency incident) and requires pain relief, our Health Centre staff will contact the parent/guardian/carer and advise that their child is unwell and that we cannot administer pain relief. Parents/guardians/carers can either, come and provide the medication to their child themselves or, pick their child up from the College.

Dispensing S8 and S4D Prescription Medication

Such medications that may fall under the S8 and S4Ds categories on the school premises or at school camps would be, Queitiapine, Vyvanse, Dexamphetamine, Concerta and Ritalin.

For the dispensation and administration of these medications during school times and/or activities, they are required to be in the original packaging with dispensing details, a Medication Authority Form provided and only enough medication that the student is requiring.

All S8 and S4D prescription medications are to be recorded accurately in a drug register record, found in the Health Centre at Bosco and First Aid room at Mannix and signed off by 2 staff members, also a medication administration form is to be filled in and then uploaded into the student's medical profile on SIMON.

Details to be contained in records

These medications must be written in a drug register and on a school medication administration form that will be uploaded into SIMON on the individual student's profile.

A person required to keep records, as soon as practicable after completing administration must record:

(a) The date of each transaction; and

(b) The name, form, strength and quantity of the poison or controlled substance

Two staff must always be witnessing the administration of medication.

Concussion

The Concussion Recognition Tool 6 is used to assist with the identification of a suspected concussion.

If concussion is suspected, the school:

- must contact the parent or carer and ask them to collect the student from school
- must recommend that the parent or carer seek a medical assessment, even if the symptoms resolve.

If concussion is not suspected, the school:

- must contact and inform the parent or carer of the injury, including that a concussion is not suspected based on use of the Concussion Recognition Tool 6
- must tell the parent or carer to seek a medical assessment if signs or symptoms of concussion develop over the next few days at home
- can allow the parent or carer to collect the student from school
- must be alert to any subtle symptoms or signs afterwards at school that can suggest concussion.

In the likelihood that a student is diagnosed with a concussion (see concussion recognition tool Appendix 7), they are to:

- Withdraw from sports effective immediately.
- Seek professional medical advice as deemed appropriate.
- Deliberate physical and cognitive rest for 24-48 hours post-concussion.
- Children 19 years or under – No return to contact/collision activities before 21 days from complete resolution of all concussion symptoms.
- Undertake a medical review before return to full contact training.

If there is any significant and sustained deterioration in concussion symptoms, further rest from specific trigger activity.

Call an Ambulance when these signs and symptoms are present:

- Neck pain or tenderness
- Double Vision
- Weakness or tingling/burning in the arms or legs
- Severe or increasing headache
- Seizure or convulsion
- Loss of Conscious state
- Vomiting
- Increasingly restless, agitated, or combative.

If in doubt always refer to the Concussion Recognition Tool, displayed in Health Centre (see Appendix 7).

Location of the Health Centre (First Aid Room)

The College has first aid rooms on each of its campuses. They are located in the Health Centre (Bosco Campus Cooper Building) and First Aid Room (Mannix Campus). Each facility is equipped in accordance with the Worksafe compliance code: First aid in the workplace. The first aid rooms are supervised by a qualified first aid person who is responsible for the general upkeep of the facilities and purchase and maintenance of first aid supplies and equipment. Each room has a locked cabinet for the storage of medication.

A checklist of matters for the Health Centre Administration Assistant to address is provided in Appendix 3.

First Aid Kits

First aid kits, EpiPens and Ventolin are kept in the Health Centre (Bosco Campus) and First Aid Room (Mannix Campus). Students may also carry an EpiPen with them and all asthma sufferers should carry their own medication.

Supplies are checked regularly and at each term break to ensure they are complete and within 'use by' dates. Families are advised before medication expires and are required to supply replacement medication.

First aid kits must be collected and taken to all offsite events and activities.

Communication

Information about our policies and procedures for first aid, administration of medication, and management of students with medical conditions is available on our Parent Access Module (PAM) system for parents, carers and guardians and on our Knowledge Base (KB) system for staff. Updates to policies and procedures are provided through our website, newsletters or online applications.

Parents are required to provide the College with up-to-date and accurate medical information including information about conditions such as anaphylaxis, asthma, diabetes and epilepsy. Parents are also required to provide this information annually, prior to camps and excursions and if their child's medical condition has changed.

An entry will be made on the College's administration system (SIMON) for all presentations to the Health Centre / First Aid Room and whenever first aid is administered. This report is accessible to the parent, guardian and/or carer via the Parent Access Module (PAM).

A student's parent, guardian or carer is notified as soon as possible to collect an ill or injured student or to advise them of a serious illness or injury to their child.

Breaches of This Policy

Breaches of this policy or procedures may result in application of provisions dealing with employment concerns in the Agreement.

RESPONSIBILITIES

All	Responsible for taking care of their own health, complying with this policy, procedures and reasonable instructions and treating the health and, where necessary, transportation of an ill or injured person as the priority
Board	Responsible for approval of this policy and receiving reports from the Child Safety, Risk and Compliance Committee that will include OHS Committee meeting minutes and reports of serious injuries incidents.
Child Safety, Risk and Compliance Committee	Responsible for the review of this policy, assessing the College's performance in management of first aid and making recommendations to the Board

Principal and Leadership Team	Responsible for implementing this policy and reporting on matters involving the provision of first aid to the Child Safety, Risk and Compliance Committee and the Board
First aid officers	Responsible for providing initial care to injured or ill staff, students or others by delivering first aid treatment in accordance with their level of training but they are not required to diagnose conditions or to provide ongoing medical assistance
OHS Committee	Responsible for reviewing more serious incidents at the College and analysing trends in Health Centre attendances
Health Centre Administration Assistant	Responsible for managing the Health Centre, providing first aid, assisting families in managing conditions and raising awareness of health matters in our College community
Staff/First responders	Responsible for providing emergency first aid assistance (including arranging transportation where necessary), notifying parents as soon as possible and recording and following up incidents
Parents, carers and guardians	Responsible for ensuring students do not attend the College while unwell, providing up-to-date contact and health information (including medical condition, anaphylaxis and asthma management plans) and medication (including EpiPens and Ventolin) and for providing permissions for activities and offsite events
Students	Responsible for complying with rules, procedures and directions from staff and displaying a caring attitude for the health and safety of others

PRINCIPLES

The care and safety of our community members is at the core of our Salesian values and a legal requirement. This policy assists in discharging our obligations.

RESOURCES

- WorkSafe, Victoria – Compliance Code for 1st aid in the workplace
- Dept of Education & Training Victoria, First Aid Content Checklist
- Murdoch Hospital, Perth WA, Head Check Concussion Recognition Support Tool
- The Royal Children's Hospital Melbourne Head Injury, return to school and sport, Concussion Recognition Tool 5.

RELATED POLICIES

- Anaphylaxis Policy (not available on the College website)
- Medical Management Policy (not available on the College website)
- Administration of Medication to Students Procedure (not available on the College website)
- Occupational Health and Safety Policy (available on the College website)

APPENDIX 1 - RISK ASSESSMENT TO IDENTIFY FIRST AID REQUIREMENTS

This assessment is reviewed at least annually with the First Aid Policy. Separate risk assessments are completed prior to camps and excursions.

Risk	Assessment
The size and layout of the school – buildings, external areas.	Buildings on the Bosco Campus are on the northern boundary with the technology centre and oval somewhat remote. Mannix Campus activities are conducted predominantly in one building.
High risk areas – technology and science laboratories, health and physical education facilities, performing arts facilities, workshops or maintenance areas, chemical storage areas.	Technology, Sport and the Facilities Department are assessed as higher risk activities.
The number of campuses.	The College is comprised two campuses separated by the Monash Freeway.
The number of employees, students and others in the workplace.	Up to 1,100 students, 160 staff and visitors attend the College each day.
Known medical conditions of staff, students and others.	There are a number of anaphylactic and asthmatic students and some staff. There are other staff and student pre-existing medical health conditions recorded.
Previous incidents or trends in illness or injuries.	Other than incidents arising from illnesses / conditions, incidents often relate to sport.
The nature and location of camps, excursions and other off site activities.	The College conducts offsite sports and outdoor education camps.
School vehicles.	The College operates five buses and has use of one utility vehicle.
Proximity to medical facilities and access to emergency services.	The College is in close proximity to Monash Health, Cabrini and a number of inner city emergency departments. The closet Ambulance Victoria station is Mount Waverley.
Proximity of hazards in the school or local environment.	There are no particular hazards impacting on the College.

First aid needs identified

Need	Response based on assessment
The number of designated first aid officers	The College has determined that, in addition to the Health Centre Administration Assistant, most staff across both campuses are required to be trained in Basic First Aid HLTAID011 (this certificate is to be renewed every three years), which includes the refresher in Provide Cardiopulmonary Resuscitation (CPR) HLTAID009. In addition, staff have additional training to assist with excursions, camps and sport.
The location of first aid room, if required	The Bosco First Aid Facility is located in the Health Centre (Cooper Building) and the Mannix First Aid room is located near the main entrance and adjacent to the staff room.
The number, location and contents of first aid kits.	First aid kits are located in the Health Centre and Mannix First Aid Room where kits for excursions are also available for distribution and in assessed higher risk departments such as Facilities and Technology.

APPENDIX 2 GENERAL GUIDELINES FOR FIRST AID

Circumstance	Description
Identified health needs	First aid requirements for students with identified health care needs should be explained in their health support plan or anaphylaxis or asthma management plan.
Student feeling unwell	Assess a range of signs and symptoms including fever, act based on the summary of signs and symptoms. Immediately seek emergency assistance if there is doubt about the condition or a sense that the condition is deteriorating.
Student has a minor injury	When using an icepack to treat a minor injury, do not apply directly to skin and remove if pain or discomfort occurs and use a cold compress (towel or cloth rinsed in cold water).
Other injuries	When an injury causes a nosebleed, use a cold compress (not an ice pack). In the following circumstances an icepack/cold compress should not be used, and medical help should be sought (usually by calling an ambulance): • loss of consciousness (even if only briefly) or a less than alert conscious state • suspicion of a fracture or spinal injury • damage to eyes or ears • penetration of the skin or deep open wound
Bleeding	Avoid contact with the blood, comfort them and move them to safety if required. Put on single use gloves. Flush the wound using warm water and wash the wound using warm water and soap. Pat dry the wound and apply a waterproof occlusive dressing ensuring the wound is covered completely. If bleeding continues, apply additional pressure using either a hand or firm bandage. Remove any linen stained with blood or body fluids and substances. Place them in leak-proof plastic bags until they can be properly disposed of. Remove gloves and place them in an appropriate biohazard container. Wash hands in warm soapy water and rinse before pat-drying thoroughly.
Managing Blood Spills	Put on single-use gloves and avoid direct contact with blood or other body fluids. Use paper towels to mop up the spill and dispose of the paper towels in an appropriate biohazard container Alternatively, using gloves, saturate a disposable towel with bleach, cover the spill with the towel, leave it for ten minutes then wash the area with hot water and detergent. Place towel and gloves into a disposable plastic bag, seal and dispose of the bag, then rewash hands. Never use, touch or breathe the fumes from bleach. Wash the area with warm water and detergent, then rinse and dry the area. Note: Take care not to splash. Remove gloves and place them in an appropriate biohazard container. Wash hands, arms or other body parts that have been in contact with blood in warm soapy water and rinse thoroughly before pat-drying. If re-usable items were used such as scissors or single-use tweezers, then assess to consider how the item was used and determine the appropriate decontamination method. Single use items should be disposed of appropriately and replaced
Needle and Syringe Disposal	If the discarded syringe or needle is accessible, • Place the disposal container on the ground next to the syringe. • Using tongs, pick up the syringe from the middle keeping the sharp end away from yourself and place it in the disposal container, needle point down. Note: never try to recap a needle, even if the cap is also discarded. • Screw the lid of the disposal unit on firmly. • Remove gloves and place them in a plastic bag, seal the bag and dispose of it in a rubbish bin. • Wash hands in warm soapy water and dry thoroughly. • To dispose of the sharps disposal container, contact the Syringe Disposal Helpline on 1800 552 355 - disposal containers or syringes must not be put in normal waste disposal. If the discarded syringe or needle is not accessible, mark the area so that others are not at risk, supervise area and contact the Syringe Disposal Helpline on 1800 552 355. Put on single-use gloves.
Needle-Stick Injury Actions	Gently squeeze area to make it bleed a little. Flush the injured area with flowing water. Wash the affected part with warm soapy water, then pat dry. Cover the wound with waterproof dressing. Ensure the injured person sees a doctor as soon as possible for an assessment of the risk And treatment, if required. An adult should accompany the student to the nearest doctor/medical centre.
Body Fluid Contact	Open cuts or weeping sores on hands or lower arms should always be covered. Staff members with such cuts or sores should not treat students at all.

APPENDIX 3 COLLEGE CHECKLIST

Task	Person/s responsible	Due date	Distribution	Notes
List of students by Homeroom with asthma and anaphylaxis	Health Centre Administration Assistant	Term 1 and 3 professional learning days and updated as required	Health Centre First Aid Room Leadership Team YLCs Staffroom Food Tech Learning Support	Access via Simon and Synergetic
Anaphylaxis and Asthma Individual Management Plans	Health Centre Administration Assistant and Parents	Start of each year	Parents/ carers	Access via Simon
Students with known allergies	Health Centre Administration Assistant and AP Students	Term 1 and 3 professional learning days and updated as required	Health Centre First Aid Room Leadership Team YLCs Food Tech Principal Deputy Principal	Access via Simon
Student own medical packs (diabetes, anaphylaxis, own medication)	Health Centre Administration Assistant and Parents	Students' 1st day Update as required due to expiry or change	Health Centre (Bosco) First Aid Room (Mannix)	Update previous year's pack for students in Years 8 – 12 Correspondence to parents re update / set up of pack
Medical Management Plan	Health Centre Administration Assistant with Parents		Upload to Parent Access Module (PAM)	Upload plans on Simon
Anaphylaxis Management Plan	Health Centre Administration Assistant with Parents	Update due anniversary of plan		
Asthma Care Plan	Parents	Update due anniversary of plan		
Allergy Care Plan	Parents	Update due anniversary of plan		

APPENDIX 4 MANAGING A MEDICAL EMERGENCY

1. Check for DANGER to yourself and others

2. Check for RESPONSE

3. SEND for help (000)

4. Check AIRWAY
    a. Check for and remove foreign materials in recovery position
    b. Open airway by tilting chin

5. Check BREATHING and monitor it in recovery position and treat injuries and shock

6. If no sign of life, commence CPR and continue until help arrives or person recovers

7. Apply a DEFIBRILLATOR (if available)

APPENDIX 5 REGISTER OF INJURIES FORM

REGISTER OF INJURIES		NUMBER	
INJURED PERSONS DETAILS			
Family name		First name	
Role at College			
INJURY			
Date		Time	
Nature of injury			
Injury - nature and bodily location (attach diagram if helpful)			
Exact location where injury occurred (e.g. building, level, room) (attached photo / diagram if helpful)			
Describe how injury was sustained			
Describe any equipment involved in the injury			
WITNESSES			
Name		Contact no.	
Name		Contact no.	
FOLLOW UP			
Who was injury reported to?			
Outline any treatment that was provided			
Did the injured person return to work or study?			
REPORTED BY			
Family name		First name	
Position			
Signed		Dated	
FOLLOW UP I acknowledge receipt of advice of injury incident and confirm that written acknowledgement has been given to the injured worker.			
Family name		First name	
Position			
Signed		Dated	
FURTHER ACTION			
Action			
Signed		Dated	

APPENDIX 6 REGISTER OF OHS CONCERNS

REGISTER OF OHS CONCERNS (includes incidents and near misses)		NUMBER	
INCIDENT DETAILS			
Date		Time	
Nature of incident			
Damage or potential for injury / damage			
Exact location where incident occurred			
Describe how incident occurred / an incident could have occurred			
Describe any equipment involved in the incident			
WITNESSES			
Name		Contact no.	
Name		Contact no.	
FOLLOW UP			
Who was incident reported to?			
Outline any action that was taken			
REPORTED BY			
Family name		First name	
Position			
Signed		Dated	
FOLLOW UP I acknowledge receipt of advice of incident and confirm that written acknowledgement has been given to the reporter			
Family name		First name	
Position			
Signed		Dated	
FURTHER ACTION			
		Dated	

CRT6 Concussion Recognition Tool

To Help Identify Concussion in Children, Adolescents and Adults

1: Visible Clues of Suspected Concussion

Visible clues that suggest concussion include:

- Loss of consciousness or responsiveness
- Lying motionless on the playing surface
- Falling unprotected to the playing surface
- Disorientation or confusion, staring or limited responsiveness, or an inability to respond appropriately to questions
- Dazed, blank, or vacant look
- Seizure, fits, or convulsions
- Slow to get up after a direct or indirect hit to the head
- Unsteady on feet / balance problems or falling over / poor coordination / wobbly
- Facial injury

2: Symptoms of Suspected Concussion

Physical Symptoms
Headache
"Pressure in head"
Balance problems
Nausea or vomiting
Drowsiness
Dizziness
Blurred vision
More sensitive to light
More sensitive to noise
Fatigue or low energy
"Don't feel right"
Neck Pain

Changes in Emotions
More emotional
More Irritable
Sadness
Nervous or anxious

Changes in Thinking
Difficulty concentrating
Difficulty remembering
Feeling slowed down
Feeling like "in a fog"

Remember, symptoms may develop over minutes or hours following a head injury.

3: Awareness

(Modify each question appropriately for each sport and age of athlete)

Failure to answer any of these questions correctly may suggest a concussion:

"Where are we today?"

"What event were you doing?"

"Who scored last in this game?"

"What team did you play last week/game?"

"Did your team win the last game?"

Any athlete with a suspected concussion should be - IMMEDIATELY REMOVED FROM PRACTICE OR PLAY and should NOT RETURN TO ANY ACTIVITY WITH RISK OF HEAD CONTACT, FALL OR COLLISION, including SPORT ACTIVITY until ASSESSED MEDICALLY, even if the symptoms resolve.

Athletes with suspected concussion should **NOT**:

- Be left alone initially (at least for the first 3 hours). Worsening of symptoms should lead to immediate medical attention.
- Be sent home by themselves. They need to be with a responsible adult.
- Drink alcohol, use recreational drugs or drugs not prescribed by their HCP
- Drive a motor vehicle until cleared to do so by a healthcare professional

APPENDIX 7 CONCUSSION – To help identify concussion in children, adolescents and adults. Follow Concussion Recognition Tool;

CONCUSSION RECOGNITION TOOL 5 ©

To help identify concussion in children, adolescents and adults

RECOGNISE & REMOVE

Head impacts can be associated with serious and potentially fatal brain injuries. The Concussion Recognition Tool 5 (CRT5) is to be used for the identification of suspected concussion. It is not designed to diagnose concussion.

STEP 1: RED FLAGS — CALL AN AMBULANCE

If there is concern after an injury, including whether ANY of the following signs are observed or complaints are reported, then the player should be safely and immediately removed from play/game/activity. If no licensed healthcare professional is available, call an ambulance for urgent medical assessment:

- Neck pain or tenderness
- Double vision
- Weakness or tingling/burning in arms or legs
- Severe or increasing headache
- Seizure or convulsion
- Loss of consciousness
- Deteriorating conscious state
- Vomiting
- Increasingly restless, agitated or combative

Remember:

- In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed.
- Assessment for a spinal cord injury is critical.
- Do not attempt to move the player (other than required for airway support) unless trained to so do.
- Do not remove a helmet or any other equipment unless trained to do so safely.

If there are no Red Flags, identification of possible concussion should proceed to the following steps:

STEP 2: OBSERVABLE SIGNS

Visual clues that suggest possible concussion include:

- Lying motionless on the playing surface
- Slow to get up after a direct or indirect hit to the head
- Disorientation or confusion, or inability to respond appropriately to questions
- Blank or vacant look
- Balance, gait difficulties, motor incoordination, stumbling, slow laboured movements
- Facial injury after head trauma

Supported by

STEP 3: SYMPTOMS

- Headache
- "Pressure in head"
- Balance problems
- Nausea or vomiting
- Drowsiness
- Dizziness
- Blurred vision
- Sensitivity to light
- Sensitivity to noise
- Fatigue or low energy
- "Don't feel right"
- More emotional
- More irritable
- Sadness
- Nervous or anxious
- Neck pain
- Difficulty concentrating
- Difficulty remembering
- Feeling slowed down
- Feeling like "in a fog"

STEP 4: MEMORY ASSESSMENT
(IN ATHLETES OLDER THAN 12 YEARS)

Failure to answer any of these questions (modified appropriately for each sport) correctly may suggest a concussion:

- "What venue are we at today?"
- "Which half is it now?"
- "Who scored last in this game?"
- "What team did you play last week/game?"
- "Did your team win the last game?"

Athletes with suspected concussion should:

- Not be left alone initially (at least for the first 1-2 hours).
- Not drink alcohol.
- Not use recreational/ prescription drugs.
- Not be sent home by themselves. They need to be with a responsible adult.
- Not drive a motor vehicle until cleared to do so by a healthcare professional.

The CRT5 may be freely copied in its current form for distribution to individuals, teams, groups and organisations. Any revision and any reproduction in a digital form requires approval by the Concussion in Sport Group. It should not be altered in any way, rebranded or sold for commercial gain.

ANY ATHLETE WITH A SUSPECTED CONCUSSION SHOULD BE IMMEDIATELY REMOVED FROM PRACTICE OR PLAY AND SHOULD NOT RETURN TO ACTIVITY UNTIL ASSESSED MEDICALLY, EVEN IF THE SYMPTOMS RESOLVE

© Concussion in Sport Group 2017