

Accident Procedure

Policy: Staff and EHS-CCP will ensure that all accidents are managed using proper first aid techniques and reporting procedures.

Performance Standard 1304.22(a)(1-4)

SERIOUS INJURY OR ILLNESS

The immediate concern is to the aid of the sick or injured person. Proceed according to the following plan:

- A. No staff member should place themselves at risk in the rescue of an injured child or staff member. Call Emergency **911** and request the needed emergency responders.
- B. Do not move the victim, especially if their injury is the result of a fall, unless they are in a life threatening or dangerous environment.
- C. Notify a qualified first aid person in the facility. Most all staff working directly with children are Qualified first aid personnel (if they are certified in CPR/First Aid).
- D. Treat immediately life-threatening injuries first in priority order:
(Emergency 911 should be called first for each of the following):
 - 1) Impaired Breathing
 - 2) Heart or Circulatory
 - 3) Severe Bleeding
 - 4) Shock
 - a) **Impaired Breathing**-Work efficiently. The average person will die in six minutes or less if their oxygen supply is cut off. Place victim on his/her back, loosen collar, remove any obstructions to the airway, and apply mouth-to-mouth resuscitation (if so trained). After the victim is breathing alone, treat for shock.
 - b) **Heart/Circulation Failure**-Work quickly. If possible, get trained help and work as a team. Apply cardiopulmonary resuscitation (CPR). If successful, treat for shock.
 - c) **Severe Bleeding**-Act Quickly. Apply direct pressure on the wound with your hands, using a clean cloth if one is available. If there are no fractures, elevate the wound. If bleeding is of a spouting or pumping nature, apply pressure to the appropriate arterial pressure point. Never use a tourniquet except as a last resort.
 - d) **Shock**- If there is no head or chest injury, keep head lower than the rest of the body. Loosen clothing and cover with blankets. Encourage fluids if victim is conscious and there is no abdominal injury or nausea.
 - e) Other injuries/illnesses should be treated in priority with respect to threat to life.
 - f) Depending on the seriousness of the injury the victim should be taken to a nearby hospital by ambulance, or driven by someone else.

Procedure:

- Any accident involving a child that requires a teacher to provide first aid (bumps, bruises, scrapes, splinters, band aid, and ice packs) must be recorded on a **Health Status/Illness/Injury/Report**. The report will be placed in child's classroom file and a copy will be sent to the parent.
- Any serious injuries resulting in the child being sent home or to a medical provider will be reported by telephone to the ECDC immediately following the accident. If the ECDC is not available, the Health Manager will be notified. This will be entered into the child's case notes in Child Plus.
- Use the first aid skills that you have learned through training. When in doubt, contact the school nurse if applicable or the Health Manager.
- Follow posted medical and dental emergency procedures.
- If **911** is called, have the child's **DSS Child Registration Form** available for medical service personnel. Then contact the parents as listed on the form.
- In the event of a life-threatening emergency, staff will follow the posted emergency procedures.
- ECDC will notify the Health Manager of all emergency incidents.
- Document accidents on the **Accident Report Form** and send to the ECDC within 24 hours. The ECDC will sign, date, and file the report form.
- The Health Manager will review all accident reports on a monthly basis.

Referenced Procedures:

Medical & Dental Emergency Procedure

Referenced Forms:

Health Status/Illness/Injury Report

Accident Report

DSS Child Registration Form