



SNAKE AWARENESS POLICY

Early Education and Care services may be located in snake-prone areas, or visit bush settings as part of their educational program, where it is known that snakes may be active and present. Snakes are most prevalent during spring or summer but could be encountered at any time of the year- especially on sunny days.

Unprovoked, snakes rarely attack humans and are generally shy, timid animals that will avoid conflict if given the opportunity. Snakes are protected under the Nature Conservation Act 1992 and it is an offence to kill or injure them. The greatest risk of snake bite from venomous snakes is from people trying to kill or handle them.

Our Service is committed to providing a safe and healthy environment for children and staff whilst being respectful of wildlife in and around our environment. We aim to minimise the potential risk of injury from a snake bite by educating children and staff about the risks associated with snakes.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
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	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.2.3	Environmentally responsible	The service cares for the environment and supports children to become environmentally responsible

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
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
89	First Aid Kits
97	Emergency and evacuation procedures
98	Telephone or other communication equipment
100	Risk assessment must be conducted before excursion
136	First aid qualifications
168	Education and care services must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies or procedure

RELATED POLICIES

Administration of First Aid Policy Emergency Evacuation Policy Family Communication Policy Health and Safety Policy	Incident, Injury, Trauma and Illness Policy Supervision Policy Work Health and Safety Policy
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PURPOSE

We aim to ensure every reasonable precaution is taken to protect children and staff from harm and hazards likely to cause injury, including the potential risk from snake bites. This policy aims to define the risks of snakes within our service environment, the necessary strategies implemented to minimise the risk of snake bites and the appropriate medical response if required.

SCOPE

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

SNAKES

Australia has around 170 species of land snakes, some equipped with venom more toxic than any other snakes in the world. Victoria is home to some of the most venomous snakes in the world. Most Victorian snakes belong to the family Elapidae (front-fanged venomous land snakes). All members of this family are venomous. Even very young small snakes can deliver a lethal bite. Snake bites can be potentially fatal [so immediate medical assistance](#) should be sought for all cases of suspected snake bite.

IMPLEMENTATION

THE APPROVED PROVIDER/MANAGEMENT/NOMINATED SUPERVISOR WILL:

- ensure that obligations under the *Education and Care Services National Law and National Regulations* are met
- ensure educators, staff, students, visitors and volunteers have knowledge of and adhere to this policy
- Include the potential risk of encountering a snake on the service premises in a risk assessment
- Include a procedure to respond to encountering a snake in the Service's EMP
- provide a snake identification chart for snakes found in our local area for educators and staff in the EMP
- positively identify the snake for the anti-venom medication treatment of a snake bite (do **NOT** catch the snake; photograph for identifying purposes, if safe to do so)
- ensure that at least one educator, staff member or nominated supervisor who holds a current ACECQA approved first aid qualification is available in an emergency at all times the service is providing education and care to children [Reg. 136]
- provide emergency first aid training for all educators and staff annually
- ensure First Aid Kits contain compression bandages
- ensure daily inspections of the outdoor and indoor learning environment are conducted prior to children arriving at the service
- ensure lawns and gardens are well maintained
- cut any long grass around the boundaries of the premises
- remove snake habitats from around the premises

- maintain clean surroundings around any animal housing/cages to reduce any potential mice population (a food source for snakes)
- reptile proof any chicken or other animal enclosures
- ensure pet food and water bowls are not accessible to wildlife
- educate children about how to respond to a snake sighting or encounter at the Service or when participating on an excursion
- ensure a fully stocked first aid kit, containing compression bandages, is taken on excursions
- have the contact number of a licensed snake handler readily available to assist in rescuing the snake if the snake cannot return to its natural environment - [for example the snake is located in a garden shed or storage container; the snake is located inside and is unable to exit the building/premises]
- complete an *Incident, Injury, Trauma Record* in the event of a snake bite
- the approved provider will make a notification of a serious incident to the regulatory authority (within 24 hours) through the [NQA IT System](#) when emergency services have attended an education and care service in response to an emergency

EDUCATORS WILL:

- examine the Service grounds during their daily indoor and outdoor safety checks to ensure no snakes are sighted
- ensure no animal food or water is left out for wildlife overnight
- become familiar and confident with the Service's emergency evacuation policies and procedures in case of a snake encounter or snake bite
- always leave snakes alone
- be aware of snake species inhabiting the local area
- maintain current ACECQA approved first aid qualification every 3 years
- ensure the First Aid Kit is easily accessible and contains compression bandages
- notify the nominated supervisor/responsible person immediately if a snake is sighted
- educate children about snakes and snake bite prevention behaviours
- ensure children are reminded on a regular basis that if they encounter a snake, to move away quietly and report the sighting to an educator
- educate children about how to keep themselves safe from snakes.

ENCOUNTERING A SNAKE

If a snake is sighted or encountered at the Service educators and staff will:

- inform children to move away quietly
- remove all children and staff from the immediate area, or evacuate the room until the snake is removed if indoors
- isolate this area until the snake is removed or moves
- note the location of the snake
- if possible, monitor the snake from a safe distance (at least 5 metres away)
- if the snake remains and is perceived to be a threat, contact local snake handler or WIRES
- if indoors, close doors to the room and place towels along the bottom of the doors so the snake cannot move to another area and wait for snake handler to remove the snake
- **not** approach the snake or try to contain it.

EMERGENCY SNAKE BITE ACTION PLAN

- Conduct a primary survey of the area – do not attempt to catch or kill the snake (identify snake, or if safe to do so have someone photograph the snake for anti-venom purpose)
- Stay calm and call for help- have someone call 000 for an ambulance
- Reassure the child/adult and encourage them to keep calm and still
- Immediately apply a firm bandage over the bite marks or scratches
- Apply Pressure Immobilisation Technique (see Appendix 1)
- Maintain continued pressure and immobilise ensuring the child/adult does not move
- Rest and reassure the patient
- **Do not** take off clothing
- **Do not** wash bite as a venom sample can be used to identify the snake
- **Do not** cut or suck the bite to drain venom
- **Do not** apply a tourniquet
- Be prepared- resuscitation may be required

FAMILIES WILL:

- Familiarise themselves with the *Snake Awareness Policy*
- Ensure their child wears closed shoes to the Service
- Reinforce snake awareness behaviours with their child

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Snake Awareness Policy* will be reviewed on an annual basis annually or earlier if there are changes to legislation or ACECQA guidance, or any incident related to our policy. Feedback will be requested from children, families, staff, educators and management and notification of any change to policies will be made to families within 30 days.

RELATED RESOURCES

Administration of First Aid Procedure Incident, Injury, Trauma and Illness Record	Snake Threat - Risk Assessment Action Plan
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SOURCE

Australian Venom Research Unit, University of Melbourne www.avru.org

Australian Capital Territory Government Environment, Planning and Sustainable Development Directorate-
Environment *Urban Wildlife Snakes*

[Education and Care Services National Regulations](#). (Amended 2023)

Health Direct <https://www.healthdirect.gov.au/snake-bites>

Revised National Quality Standard. (2018).

St John Ambulance Australia (2020 *First aid fact sheet Snake Bite*

Western Australian Legislation Education and Care Services National Regulations (WA) Act 2012 (For WA Services only)

REVIEW

POLICY REVIEWED	OCTOBER 2025	NEXT REVIEW DATE	OCTOBER 2026
VERSION	V7.10.25		
MODIFICATIONS	- policy maintenance - no major changes to policy - sources checked for currency and updated as required		
POLICY REVIEW	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
AUGUST 2024	- policy maintenance - no major changes to policy - hyperlinks checked and repaired as required - Childcare Centre Desktop resources added - sources checked for currency and updated as required		OCTOBER 2025
AUGUST 2023	- annual policy maintenance - Continuous improvement section added - Sources checked - Appendix moved to end of policy		AUGUST 2024

APPENDIX 1

Pressure immobilisation bandage

A pressure immobilisation bandage is recommended for anyone bitten by a venomous snake. This involves firmly bandaging the area of the body involved, such as the arm or leg, and keeping the person calm and still until medical help arrives.

Follow these steps to apply a pressure immobilisation bandage:

- First put a pressure bandage over the bite itself. It should be tight, and you should not be able to easily slide a finger between the bandage and the skin.
- Then use a heavy crepe or elasticised roller bandage to immobilise the whole limb. Start just above the fingers or toes of the bitten limb and move upwards on the limb as far as the body. Splint the limb including joints on either side of the bite.
- Keep the person and the limb completely at rest. If possible, mark the site of the bite on the bandage with a pen.

(Source: Australian Government, *health direct*)

Poster

First aid fact sheet Snake bite St John Ambulance



First aid fact sheet

Snake bite

! All known or suspected snake bites must be treated as potentially life-threatening, and medical aid should be sought urgently.

Signs and symptoms

Signs of a snake bite are not always visible. In some cases, the patient may not have felt anything. Symptoms may not appear for an hour or more after the person has been bitten. Depending on the type of snake, signs and symptoms can include some or all of the following:

- immediate or delayed pain at the bite site
- swelling, bruising or local bleeding
- bite marks (usually on a limb) that can vary from obvious puncture wounds to scratches that can be almost invisible
- swollen and tender glands in the groin or armpit of the bitten limb
- faintness, dizziness
- nausea and vomiting
- headache
- abdominal pain
- oozing of blood from the bite site or gums
- double or blurred vision
- drooping eyelids
- difficulty in speaking or swallowing
- limb weakness or paralysis
- difficulty in breathing
- occasionally, initial collapse or confusion followed by partial or complete recovery.

What to do

Pressure bandage & immobilise

- 1 Follow DRSABCD.
- 2 Call Triple Zero (000) for an ambulance.
- 3 Lie the patient down and ask them to keep still. Reassure the patient.
- 4 If on a limb, apply an elasticised roller bandage (10–15 cm wide) over the bite site as soon as possible.
- 5 Apply a further elasticised roller bandage (10–15 cm wide), starting just above the fingers or toes and moving upwards on the bitten limb as far as can be reached.
 - Apply the bandage as firmly as possible to the limb. You should be unable to easily slide a finger between the bandage and the skin.
- 6 Immobilise the bandaged limb using splints.
- 7 Write down the time of the bite and when the bandage was applied. If possible, mark the location of the bite site (if known) on the skin with a pen, or photograph the site. Do not wash venom off the skin or clothes because it can assist identification.
- 8 Stay with the patient until medical aid arrives.

In a medical emergency call Triple Zero (000)

DRSABCD Danger ► Response ► Send for help ► Airway ► Breathing ► CPR ► Defibrillation

You could save a life with first aid training • www.stjohn.org.au • 1300 360 455

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