



Xavier Catholic College First-Aid Policy and Guidelines



PURPOSE

Care of people and concern for their welfare are integral to the ethos of **Xavier Catholic College**. This school/college is committed to ensuring, so far as is reasonably practicable, the health, safety and welfare of all employees, students and others who are legally present on our premises and in our workplace. In keeping with this commitment, priority is given to the provision of adequate first aid facilities and first aid treatment for all persons at [school/college] in accordance with the legislative requirements of the *Work Health and Safety Act 2011* and the Work Health and Safety Regulations 2011.

POLICY FRAMEWORK AND CONTENT

The college also recognises that it has a duty of care and is responsible and accountable for ensuring, so far as is reasonably practicable, the health, safety and welfare of students, workers, volunteers and other people who provide services to the school/college.

To meet these social and moral responsibilities and to meet our commitment under the legislation, we will provide resources including finance for first aid facilities, first aid equipment and appropriate training, policy and procedure. The school/college will be responsible for maintaining records of staff training in first aid and CPR/emergency care, and collating injury and illness records and information.

SCHOOL/COLLEGE COMMITMENT AND RESPONSIBILITIES

The management (*ie* the principal or a person acting in the capacity of the principal) of the school/college, representing the PCBU, as required under the *WHS Act 2011* and *Regulation 2011* is responsible for:

- provision of first aid equipment based on an assessment of the needs of the school/college
- providing access to facilities for the administration of first aid
- providing an adequate number of workers are trained to administer first aid at the workplace

To meet these responsibilities the Principal shall:

- Determine the number of personnel trained in first aid
- Consider a minimum of at least two staff members in the primary school and four staff members in secondary school/college are trained in first aid
- Provide adequate and ongoing training/information for all teachers and ancillary staff as required including CPR/emergency care training
- Provide sufficient time or support for first aiders and others in charge of first aid facilities to perform their duties
- Provide adequate signage for first aid facilities and kits in accordance with Australian Standards
- Facilitate the development of policy and procedures adapted to the particular requirements of the school/college
- Provide ongoing evaluation and review of the needs of the school/college environment
- Monitor ongoing compliance with legislative requirements
- Maintain a reporting and recording system for first aid including a register of injuries
- Investigate, in consultation with WHS Committee(s)/Representative(s), incidents involving injury and illness
- Keep a record of employees who are trained in first aid and their level of training

RESPONSIBILITIES OF FIRST AID PERSONNEL

To meet the requirements of the *WHS legislation* a person trained in first aid will be designated as the primary first aid officer and will be responsible for:

- Initial provision of first aid treatment
- Maintaining all first aid kits within the college
- Maintaining first aid facilities i.e. sick bays in accordance with legislative requirements
- Administering medication

The person designated as primary first aid officer will be paid an allowance for additional tasks and responsibilities, according to the award.

Other personnel trained in first aid are responsible for the provision of first aid treatment as required and may be designated by the primary first aid officer or principal to be in charge of a first aid kit or kits.

Trained personnel taking first aid kits from the school/college for school/college excursions, sports events etc. are responsible for:

- The care of excursion first aid kits
- Providing emergency care
- Recording incidents and injuries using the appropriate forms
- Returning and restocking of the first aid kit as necessary

While acknowledging the duty of care of trained first aid personnel, such persons must not provide treatment beyond the level of recognised training and/or instruction that they have received.

RESPONSIBILITIES OF WORKERS

Workers are required under the *WHS Act* to take reasonable care for their own health and safety and must not adversely affect the health and safety of other persons. Workers must comply with any reasonable instruction and cooperate with any reasonable policy or procedure relating to health and safety at the workplace, such as procedures for first aid and for reporting injuries and illnesses.

In relation to First Aid workers are responsible for:

- Providing basic life support and emergency care that is consistent with their current level of training
- Reporting and recording incidents and injuries as per school/college procedures

Workers are required not to interfere with or misuse anything provided in the interest of health and safety under work health and safety legislation in the workplace eg removing first aid supplies from first aid kits and first aid facilities.

RESPONSIBILITIES OF PARENTS AND/OR GUARDIANS

To ensure the health and safety of students at all times and to ensure that staff have necessary medical information, parents and/or guardians are responsible, in relation to their children and/or charges, for:

- Keeping the school/college informed of any medical conditions, treatments and medical contact details
- Providing staff with appropriate information and training/instruction where medical conditions require specialised treatment
- Updating the school/college on any changes in medical conditions and/or required treatments

CONTINUOUS IMPROVEMENT

Our school/college management team, in consultation with workers through the WHS Committee/Representative/s will regularly monitor, evaluate and review this *First Aid Policy*, related guidelines, procedures and relevant records, to ensure continuous improvement of first aid management.

POLICY REVIEW

This *Policy* will be reviewed within twelve months of its date of adoption.

POLICY DATES			
<i>Formulated</i>	18 March 2013	<i>Adopted</i>	18 MARCH 2013
<i>Implemented</i>	18 March 3013	<i>Reviewed</i>	
<i>Next Review Due</i>	18 MARCH 2018		
POLICY AUTHORISATION			
<i>Principal</i>	Michael Vella	<i>Signature</i>	

SAMPLE FIRST AID GUIDELINES

These guidelines have been developed in keeping with the Code of Practice *First Aid in the Workplace*, July 2012. They have been designed to provide practical guidance for schools and colleges to assist compliance with the requirements under the WHS Act and Regulations to provide adequate first aid in the workplace. They include information on first aid kits, procedures, facilities and training for first aiders.

In our commitment towards compliance with Work Health and Safety legislation, the school/college will establish a first aid program.

Key Terms

First Aid is the immediate treatment or care given to a person suffering from an injury or illness until more advanced care is provided or the person recovers.

First aider is a person who has successfully completed a nationally accredited training course or an equivalent level of training that has given them the competencies required to administer first aid.

First aid equipment includes first aid kits and other equipment used to treat injuries and illnesses. First aid facilities include first aid rooms, health Centre's, clean water supplies and other facilities needed for administering first aid.

High risk workplace means a workplace where workers and students are exposed to hazards that could result in serious injury or illness and would require first aid. Examples in the school/college environment are TAS/Martial Arts rooms, Science labs, some sporting or excursion actives.

Low risk workplace means a workplace where workers and students are not exposed to hazards that could result in serious injury or illness such as the school/college administration area, libraries and classrooms.

1. Compliance with Legislation/Industry Standards

To ensure compliance with WHS legislation the school/college will, on an annual basis:

- Conduct relevant risk assessments
- Conduct a risk assessment after an accident/injury/illness has been recorded
- Consult with workers in accordance with the school/college's consultation arrangements
- Review current written procedures in relation to legislative requirements
- Review training requirements and ensure appropriateness of training received
- Review requirements for infectious disease control to ensure measures are up to date and enforced eg offer vaccination of staff for Hepatitis B
- Provide updated information

2. Consultation

S47: A person conducting a business or undertaking must consult, so far as is reasonably practicable, with workers who carry out work for the business or undertaking who are (or likely to be) directly affected by a work health and safety matter.

S48: If workers are represented by a health and safety representative, the consultation must involve that representative

As part of our commitment to consultation in the workplace our workers will be consulted about:

- Issues pertaining to our first aid policy and procedures
- Medical treatment of students
- Their needs in terms of first aid facilities
- Issues pertaining to infectious disease control
- Their needs in terms of training and instruction
- Any changes in procedures and other first aid requirements, prior to implementation of changes
- When new information relating to first aid becomes available eg during a Pandemic Alert

Consultation will be facilitated with other business operators including organisations/groups involved in offering curriculum opportunities so that consultation takes place in a co-operative and co-ordinated way.

3. Consulting, co-operating and co-ordinating activities with other duty holders.

S46: A person conducting a business or undertaking must consult, co-operate and co-ordinate activities with all other persons who have a work health and safety duty in relation to the same matter, so far as is reasonably practicable.

In some circumstances responsibilities for health and safety may be shared with other business operators who are involved in the same activities or who share the same workplace. In these situations communication should take place to determine who is doing what so that a co-operative and co-ordinated approach is taken so that all risks are eliminated or minimised so far as is reasonably practicable.

In schools/colleges consideration needs to be given to those independent service providers that come into the school and may either be a person conducting a business or undertaking in their own right eg private music/PE teachers etc or may alternatively work for a person conducting a business or undertaking eg teachers provided by a specialised company eg sporting personnel.

4. Provision of Information

Workers should be regularly provided with information on first aid issues:

- At induction training
- Directly from management
- At staff meetings
- In WHS information folders/WHS hardware, staff handbooks/manuals.
- On the staff WHS information board
- At special information sessions where necessary

All workers should be advised of the location of first aid resources and trained first aiders.

All first aid kits should have information posted beside them, indicating names of currently qualified first aiders, their location or extension number and the phone number of emergency services eg poisons information centre etc.

5. *Determination of First Aid Requirements*

Regulation 42:

When considering how to provide first aid, a person conducting a business or undertaking must consider all relevant matters including:

- The nature of the work being carried out at the workplace
- The nature of the hazards at the workplace
- The size, location and nature of the workplace
- The number and composition of the workers at the workplace

6. *Risk assessment* - consider all relevant matters and the subsequent needs in providing first aid including:

- Identification of hazards that could result in workplace injury or illness given the nature of the work being carried out at the school/college
- the size, location and nature of the workplace including activities that take place off site eg excursions, sporting activities
- Consideration to the number and composition of workers, students, volunteers, contractors and visitors
- the type, severity and likelihood of injury and illnesses
- Providing the appropriate first aid equipment, facilities and training
- Review of first aid requirements on a regular basis or as circumstances change
- Possible emergency situations
 - likelihood and severity of such incidents
 - numbers likely to be involved
 - type of treatment that may be required
 - resources available including proximity of external assistance
- Possible medical emergency, remembering to include medical conditions of new students
- Special consideration for events when more people are likely to be on site eg Fete, Working Bee

Note: When considering the size of your workforce any contractors, sub-contractors and volunteers should be considered as the size of the workplace will vary over time.

Consideration should also be given to:

- the particular needs of workers who have a disability or health concern
- others at the school /college who are not workers but maybe be members of the public such as those attending a Fete, Working Bee or special event.

7. Risk Control Measures

Following a risk assessment a determination as to the control measures required should be made. Measures may include a combination of information, instruction, training, safe work procedures, personal protective equipment, safety equipment and signage.

8. First aid facilities

A risk assessment will help determine the type of first aid facilities needed. For example, a clean, quiet area within the workplace that affords privacy to an injured or ill person should be available.

Access to a telephone for contacting emergency services or an emergency call system should be considered.

- Accessibility at all times
- Availability of a legally compliant first aid kit
- Provision of disposable sheets and pillow overlays or other suitable bedding
- Suitable containers for the disposal of contaminated waste
- Provision of suitable disposal and replacement of out-of-date medical supplies

9. First aid rooms

A first aid room should be established if a risk assessment indicates that it would be difficult to administer appropriate first aid unless a first aid room is provided. In most schools/colleges this would be a necessity.

A first aid room is recommended for:

- Low risk workplaces with 200 workers or more
- High risk workplaces with 100 workers or more

Student's numbers should be counted as 'workers'.

The location and size of the first aid room should allow easy access and movement of injured people who may need to be supported or moved by stretcher or wheelchair. The First Aid Room should:

- be located within easy access to a sink with hot and cold water and easy access to toilet facilities and offers privacy via screening or a door
- be easily accessible to emergency services (minimum door width of 1 metre for stretcher access)
- be well lit and ventilated
- have an appropriate floor area
- have an entrance that is clearly marked with first aid signage

Points to be considered:

- Extent of first aid facilities needed
- Appropriate location (ensuring access and visual supervision)
- Number, type and location of kits required
- Type of kits and additional first aid supplies for external events eg excursions, sports carnival, sporting activities, swimming carnival and water activities.

- Provision of area for first aid facilities for employees (in addition to sick bays for students)
- Provision of personal protective equipment eg gloves, CPR masks

The following items are should be provided in the First Aid Room

- A first aid kit appropriate for the workplace
- Hygienic hand cleanser and disposable paper towels
- A bed with waterproof surface and disposable sheets
- An examination lamp with magnifier
- A cupboard for storage
- A container with disposable lining for soiled waste
- A container for the safe disposal of sharps
- A bowl or bucket
- Electric power points
- A chair and a table or desk
- A telephone and/or emergency call system
- The names and contact details of first aiders and emergency organisations

Note: No other items other than those required for first aid should be stored in this room and the room should be used for no other purpose than first aid treatment.

10. First Aid Signs

Displaying well-recognised, standardised first aid signs will assist in easily locating first aid equipment and facilities. First aid signs may be constructed to suit individual requirements but should comply with AS 1319:1994 – *Safety Signs for the Occupational Environment*

Points to consider:

- Determination of signage required in accordance with Australian Standards
- Determination of the location of the signage
- Information near first aid kits on the first aid provider, contact details etc.

11. Other First Aid Equipment

In addition to first aid kits consideration should be given to whether any other first aid equipment is necessary to treat the injuries or illnesses that could occur as a result of a hazard in the workplace. Because of the vulnerability of students in the care of schools/colleges consideration should be given to having readily on hand a 'spare' EpiPen/Anapen and the relevant aids to assist a student in the event of asthma attack. EpiPen's/Anapens have a shelf life of approximately 12 months.

12. Automatic defibrillators

Providing an automatic defibrillator can reduce the risk of fatality from cardiac arrest and is a useful addition for workplaces where there are large numbers of members of the public.

Automatic defibrillators are designed to be used by **trained or untrained persons**. They should be located in an area that is clearly visible, accessible and not exposed to extreme temperatures. They should be clearly signed and maintained according to the manufacturer's specifications.

13. Eye wash and shower equipment

Eye wash and shower equipment may be permanently fixed or portable, depending on the specific area of the workplace. Eye wash equipment should be provided where there is a risk of hazardous chemicals causing eye injuries.

Immediate access should be provided to shower equipment in workplaces where there is a risk of:

- exposure to chemicals resulting in skin absorption or contamination from infectious substances
- serious burns to a large area of the face or body including chemical or electrical burns.

Portable, self contained eye wash or shower units have their own flushing fluid which needs to be replaced or refilled after use. Further guidance is available in AS 4775 – *Emergency eyewash and shower equipment*.

14. First Aiders

Regulation 42:

- A person conducting a business or undertaking must ensure that an adequate number of workers are trained to administer first aid at the workplace or that workers have access to an adequate number of other people who have been trained to administer first aid.

15. *Determine roles and responsibilities*

Number of trained first aiders

The following ratios are recommended:

- Low risk workplaces – one first aider for every 50 workers
- High risk workplaces – one first aider for every 25 workers

In the school/college environment students should be included in the number given for workers. Generally, it would be assumed that in most circumstances schools/colleges are low risk workplaces.

Legislation requires the nomination of a staff member as the primary first aid officer who is responsible for:

16. Training, information and instruction requirements/needs

First aiders should hold **nationally recognised Statement/s of Attainment** issued by a Registered Training Organisation (RTO) for the nationally endorsed first aid unit/s of competency.

In view of the duty of care all teachers owe to the students in their care consideration should be given to providing all workers at the school/college with the competencies addressed in the ***Apply First Aid course***. This course provides competencies required to recognise and respond to common life-threatening injuries or illnesses, including life-support using cardiopulmonary resuscitation (CPR) and to manage the casualty and incident until the arrival of medical or other assistance.

In low risk workplaces (such as schools/colleges), first aiders are sufficiently trained if they can perform CPR and treat minor illnesses and injuries. Consideration may be given to providing some staff who regularly are responsible for some of the higher risk sporting activities or outdoor adventure activities the ***Manage First Aid in the Workplace (Occupational First Aid)***. This course provides competencies required to apply advanced first aid procedures.

In special circumstances such as events conducted by schools/colleges, for example, community service to remote areas, Duke of Edinburgh activities consideration could be given to providing a staff member with the competencies required to administer first aid in remote and/or isolated situations, including waiting for aero-medical evacuation. The ***Provide First Aid in Remote Situations*** is a course that offers such competencies.

17. Additional training for first aiders

First aiders should attend training on a regular basis to refresh their first aid knowledge and skills and to confirm their competence to provide first aid. **Refresher courses in CPR should be undertaken annually and first aid qualifications would be renewed every three years.**

First aiders in schools/colleges will also need additional first aid training to respond to specific situations, for example where students have asthma or diabetes and severe allergies and as a result are at risk of an anaphylactic episode. Training in the management of an Anaphylactic incident should be delivered by a nurse who is recognised as anaphylactic trained. The online eLearning Anaphylaxis module is helpful to provide training for new staff or staff who are waiting to receive face- to- face training.

Ongoing provision of updated information should also include:

- infectious disease control
- condition and instruction in treatment for students/staff with specific medical needs
- training relevant to the activities being conducted (eg excursions in isolated locations, equipment used in design and technology)

18. Induction of new and casual staff

As part of the PCBU's duty of care to provide adequate information, instruction and training, new and casual/temporary staff should be provided with relevant information including:

- Who is trained to administer first aid
- Who is responsible for first aid kits and first aid facilities
- What is expected from workers in the event of a medical emergency
- Medical emergency procedure
- Responsibility to report items used in first aid kits
- Procedures for reporting medical incidents (injury/illness)
- Name of person who administers medication

Details of individual needs of children and staff if and when appropriate

19. First Aid Kits

All workers must be able to access a first aid kit.

Contents

The first aid kit should provide basic equipment for administering first aid for injuries including:

- Cuts, scratches, punctures, grazes and splinters
- Muscular sprains and strains
- Minor burns
- Amputations and/or major bleeding wounds
- Broken bones

- Eye injuries
- Shock

The **contents of the first aid kits** should be based on a risk assessment. For example there may be higher risk of eye injuries and a need for additional eye pads in certain areas of the school/college such as science labs, TAS rooms and outdoor areas where gardening equipment is used. The hazards to be factored into the risk assessment would include:

- Use of chemical liquids or powders are handled in open containers
- Areas where spraying, hosing or abrasive blasting operations are carried out
- Activities where there is possibility of flying particles causing eye injuries
- Activities if there is a risk of splashing or spraying of infectious materials
- areas where welding, cutting or machining operations are carried out.

20. Design of Kits

First aid kits can be any size, shape or type to suit your workplace but each kit should:

- Be large enough to contain all the necessary items
- Be immediately identifiable with a white cross on green background that is prominently displayed on the outside
- Contain a list of the contents for that kit
- Be made of material that will protect the contents from dust, moisture and decontamination

21. Location

In the event of a serious injury or illness, quick access to the kit is vital. First aid kits should be kept in a prominent, accessible location and able to be retrieved promptly. First aid kits should be located close to where there is a higher risk of injury or illness. For example, a school with a science laboratory or carpentry workshop should have first aid kits located in these areas.

If the workplace occupies several floors in a multi-storey building, at least one kit should be located on every second floor. Emergency floor plans displayed in the workplace should include the location of the first aid kits.

A portable first aid kit should be provided in vehicles of mobile workers, school owned busses/mini-busses, Utes etc as these become the workplace while used for school/college activities. These kits should be safely located so as not to become a projectile in the event of an accident.

22. Restocking and maintaining first aid kits

A person in the workplace should be nominated to maintain the first aid kit (usually a first aider) and should monitor access to the first aid kit and ensure any items used are replaced as soon as practicable after use.

Factors to be considered:

- Ensuring first aid kits and their signage are in good repair
- Ensuring kits are always stocked in accordance with legislative requirements and what has been determined is safe/appropriate for the school/college
- Suitable disposal and replacement of out-of-date medical supplies

- Appropriately recording all first aid treatment, including supplies and equipment used

Regulation 43:

A person conducting a business or undertaking must ensure that an emergency plan is prepared for the workplace that provides procedures to respond effectively in an emergency.

The emergency procedures must include:

- An effective response to an emergency situation
- Procedures for evacuating the workplace
- Notification of emergency services at the earliest opportunity
- Medical treatment and assistance, and
- Effective communication between the person authorised by the person conducting the business or undertaking to co-ordinate the emergency response and all persons at the workplace.

23. Procedures and plans for managing an emergency

First aid procedures should be developed and implemented to ensure workers have a clear understanding of first aid in the workplace. A person with first aid skills should be nominated to develop first aid procedures in consultation with workers. (See below for requirements regarding procedures.)

24. Written Procedures

Written procedures should be consistent with *Australian Resuscitation Council* guidelines, the relevant regulator and any other legal requirements.

Procedures should be developed in consultation with WHS Committee/Representative/s and all workers and include a time frame for implementation. All procedures should be monitored and evaluated to ensure effectiveness and correct procedure is followed eg precautions for infectious disease control, at least once a year.

Procedures should be reviewed also following an incident/accident where treatment is required or when new information becomes available. WHS Committee and/or WHS Representatives should be invited to participate in this process.

Procedures should be developed for particular students and staff, if appropriate, for:

- General medical and other emergency situations
- Workers and students with known medical conditions eg asthma, diabetes
- Excursions, sporting events and water programs

Emergency procedures should specify the role of first aiders according to their level of qualification and competence. In particular, first aiders should be instructed not to exceed their training and expertise in first aid. Other staff, including supervisors, should be instructed not to direct first aiders to exceed their first aid training and expertise.

Note: Suggested Inclusions in a statement of first aid procedures can be located at 3.6 page 15 of the *Code of Practice First Aid in the Workplace*, July 2012. Further guidance on emergency plans and preparing emergency procedures is available in the *Code of Practice: Managing the Work Environment and Facilities*

Also see *Appendix 2* for sample medical emergency procedures.

25. Record Keeping

A record of any first aid treatment given should be kept by the first aider and reported to the Principal on a regular basis to assist reviewing first aid arrangements. First aid treatment records are subject to requirements under the Health Records legislation.

Records must be kept of all persons trained in first aid and emergency care. These records must be updated and regularly reviewed to ensure adequate training levels are maintained.

26. Register of Injuries

A register of injuries should be kept to check:

- records are kept up to date
- information about injury statistics is available to WHS committee members/representatives
- information is forwarded to the relevant person in the organisation and to the regulator where required

27. Continuous Improvement

To ensure the effectiveness and ongoing compliance of the *First Aid Policy* and program with legislation, Australian Standards and *Australian Resuscitation Council* requirements, the following should occur:

28. Monitoring of first aid procedures, including:

- Monitoring of the use of correct procedures mainly through consultation
- Review of treatment to ensure correct practice
- Changes being made where appropriate
- Workers being consulted and informed
- Workers being instructed in new procedures

29. Evaluation of first aid procedures, including:

- Evaluations of current procedures through consultation
- Procedures being changed where appropriate (*NB.* input is required from suitable sources with medical knowledge)
- Training and instruction being adapted to incorporate new procedures
- Evaluations of new practices or changes in practices prior to their introduction in the workplace

30. Review of the following is required:

- *First Aid Policy* on agreed time basis
- Injury and accident statistics and accident/incident reports to ensure adequate treatment is being provided, made available to WHS Committee/Representatives before each meeting
- First aid treatment procedures including those in infection control
- Training requirements
- Provision of information
- Legislative and industry requirements

The information obtained from regular monitoring, evaluation and review will be used to refine and improve. Employees will be provided with feedback, information and where necessary instruction training in new procedures.

Appendix 1

First Aid Mini-Checklist

All questions must be answered. 'No' answers indicate gaps in safety practices for which careful hazard identification, assessment and control of risks and should be undertaken.

The following checklist can provide a guide to review and assess if improvements might be needed:

	Yes	No
• Do the first aid kits and modules suit the hazards at your workplace?	<input type="checkbox"/>	<input type="checkbox"/>
• Are more first aid kits required?	<input type="checkbox"/>	<input type="checkbox"/>
• Are first aid kits accessible to workers?	<input type="checkbox"/>	<input type="checkbox"/>
• Are first aid kits well maintained and identifiable to workers?	<input type="checkbox"/>	<input type="checkbox"/>
• Is a first aid room or health Centre required?	<input type="checkbox"/>	<input type="checkbox"/>
• Are first aid facilities well maintained?	<input type="checkbox"/>	<input type="checkbox"/>
• Do first aiders have the skills and competencies required of them and are their skills up-to-date?	<input type="checkbox"/>	<input type="checkbox"/>
• Do workers know how to access first aiders?	<input type="checkbox"/>	<input type="checkbox"/>
• Are more first aiders needed?	<input type="checkbox"/>	<input type="checkbox"/>
• Do workers have access to first aiders at all times?	<input type="checkbox"/>	<input type="checkbox"/>
• Do workers and other people know what to do in an emergency situation?	•	•
• Is there easy access for emergency services, such as parking for an ambulance?	•	•

Action Notes

School			
Name of person completing checklist		Position or Role	
Signature		Date	

First Aid and the Risk Management Process

Step 1 – Identify potential causes of workplace injury and illness

- Does the nature of the work being carried out pose a hazard to people's health and safety?
- Have these hazards been identified in work that is being carried out?
- Has incident and injury data been reviewed?
- Has consultation with workers and their health and safety representatives occurred?
- Is specialist or external assistance required?

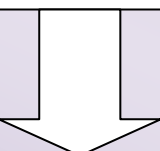


Step 2 – Assess the risk of workplace injury and illness

- How often does a hazard have the potential to cause harm?
- What type of injuries would the hazards cause?
- How serious are the injuries?
- Does the number and composition of workers and other people affect how first aid should be provided?
- Could the size and location of the workplace affect how first aid is provided?

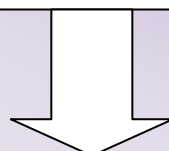


Step 3 – What first aid is required?



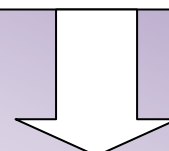
First aiders

- How many first aiders are needed?
- What competencies do they require?
- What training do they need?



First aid kits & procedures

- What kits/modules are needed and where should they be located?
- Is other first aid equipment needed?
- Who is responsible for maintaining the kits?



First aid facilities

- Is a first aid room or health centre required?



Step 4

Review first aid to ensure effectiveness

Appendix 3

Sample Emergency Procedure*(Medical Emergency on School/College Grounds)*

1. Make the area safe. Evacuate the area in the event of an incident or potential threat to safety (eg gas cylinders ruptured).
2. Alert the front office/reception.
3. Front office/Reception to notify emergency services where necessary. Information required by emergency services will include:
 - Exact location of school/college (ie address, nearest cross street, landmark)
 - Type of incident/accident (eg medical emergency, accident involving plant/equipment)
 - Number of persons injured and/or trapped
 - Any Hazmat incident (eg gas fire)
 - Contact details (ie phone number and person reporting incident)
4. The primary first aid provider is to **assess** the casualty / casualties and **treat** where necessary, using first aid principles (ie DRABC). Other first aiders are to assist in treatment required.

First aid providers treating injured/ill persons must use correct infection control procedures including the use of gloves, masks etc.

5. Where emergency services are not required persons injured or ill are to be taken to the first aid room for further treatment or observation.

Where school/college children or young persons are ill/injured parents/guardians are to be contacted. In some circumstances the school/college authority will need to be informed as soon as possible.

6. First aid providers must complete incident/accident report forms and submit to the front office/reception as soon as practicable.

Where first aid supplies are used persons in charge of first aid kits/facilities are to be notified to ensure re-stocking of kits as soon as possible. Usually those people in charge of the kits and keeping them supplied are the people who are designated first aid persons. Treatment details and supplies used should be recorded in the first aid book.

Appendix 4

EXAMPLE OF CONTENTS FOR A FIRST AID KIT – SAFEWORK AUSTRALIA CODE OF PRACTICE

For most workplaces, a first aid kit should include the following items:

Item	Kit contents
	Quantity
Instructions for providing first aid – including Cardio-Pulmonary Resuscitation (CPR) flow chart	1
Note book and pen	1
Resuscitation face mask or face shield	1
Disposable nitrile examination gloves	5 pairs
Gauze pieces 7.5 x 7.5 cm, sterile (3 per pack)	5 packs
Saline (15 ml)	8
Wound cleaning wipe (single 1% Cetrimide BP)	10
Adhesive dressing strips – plastic or fabric (packet of 50)	1
Splinter probes (single use, disposable)	10
Tweezers/forceps	1
Antiseptic liquid/spray (50 ml)	1
Non-adherent wound dressing/pad 5 x 5 cm (small)	6
Non-adherent wound dressing/pad 7.5 x 10 cm (medium)	3
Non-adherent wound dressing/pad 10 x 10 cm (large)	1
Conforming cotton bandage, 5 cm width	3
Conforming cotton bandage, 7.5 cm width	3
Crepe bandage 10 cm (for serious bleeding and pressure application)	1
Scissors	1
Non-stretch, hypoallergenic adhesive tape – 2.5 cm wide roll	1
Safety pins (packet of 6)	1
BPC wound dressings No. 14, medium	1
BPC wound dressings No. 15, large	1
Dressing – Combine Pad 9 x 20 cm	1
Plastic bags - clip seal	1
Triangular bandage (calico or cotton minimum width 90 cm)	2
Emergency rescue blanket (for shock or hypothermia)	1
Eye pad (single use)	4
Access to 20 minutes of clean running water or (if this is not available) hydro gel (3.5 gm sachets)	5
Instant ice pack (e.g. for treatment of soft tissue injuries and some stings).	1

Medication, including analgesics such as paracetamol and aspirin, should not be included in first aid kits because of their potential to cause adverse health effects in some people including asthmatics, pregnant women and people with medical conditions. The supply of these medications may also be controlled by drugs and poisons laws. Workers requiring prescribed and over-the-counter medications should carry their own medication for their personal use as necessary.

Note: [In relation to students requiring medication including those with the conditions noted above see Administration of Medication in Schools Guidelines.]

Some types of workplaces may require additional items to treat specific types of injuries or illnesses.

Outdoor work

If work is performed outside and there is a risk of insect or plant stings or snake bites, assess whether the following items should also be included in the first aid kit:

- a heavy duty crepe bandage
- Sting relief cream, gel or spray.

Remote work

Where people work in remote locations, a first aid kit should include:

- a heavy duty crepe bandage 10 cm (for snake bites)
- large clean sheeting (for covering burns)
- thermal blanket (for treating shock)
- whistle (for attracting attention)
- torch/flashlight.

The appropriate contents will vary according to the nature of the work and its associated risks.

Burn injuries

If your workers or students are at risk of receiving burns, you should include the following items:

- burn treatment instructions on two water-proof instruction cards: one for the first aid kit and the other to be located on the wall next to the emergency shower or water supply
- hydro gel (8 × 3.5 gram sachets)
- hydro gel dressings
- clean polythene sheets (small, medium and large)
- 7.5cm cotton conforming bandage.

Appendix 5

Prescribed First Aid Kits

The following suggested kit contents , based on Appendix 3 provides an example of Contents for a First Aid Kit requirements for 100 students and should be located in all areas within the school/college where a first aid kit is required

Kit Contents	Qty
Adhesive plastic dressing strips, sterile, individually wrapped, packets of 50	1
Adhesive dressing tape, 2.5cm x 5cm	2
Plastic Bags for amputated parts, small	
– Small	1
– Medium	1
– Large	1
Dressings, non-adherent, sterile, 7.5 cm 7.5 cm	5
Eye pads, sterile	2
Gauze bandages	
– 5 cm	2
– 10 cm	2
Gloves, disposable, single	4
Rescue blanket, thermal, silver space	1
Safety pins, packets	1
Scissors, blunt/short nosed, minimum length 12.5 cm	1
Splinter forceps	1
Sterile eyewash solution, 10 ml single use ampoules or sachets	6
Swabs, pre-packed, antiseptic, packs of 10	1
Triangular bandages, minimum 90 cm	4
Wound dressings, sterile, non-medicated, large	3
Resuscitation mask	1
First-aid pamphlet as approved by WorkCover	1

1. Ice packs should be easily accessible and instant ice packs available for sporting events
2. An eye module should be included in first aid kits in areas where:
 - Chemicals are handled
 - Spraying, hosing, compressed air or abrasive blasting operations are carried out.
 - Where there is a possibility of flying particles
 - Welding, cutting or machining operations are conducted
 - Wearing of eye protection is recommended

These areas would include science areas, art rooms, technological and applied science areas, grounds maintenance workshops and cleaners' rooms.

An eye module would consist of:

- Guidance notes
- Sterile eye wash solution, 10ml single use ampoules or sachets
- Sterile eye pads
- Adhesive tape

3. **For use in remote areas**, additional first aid kit contents include:

- Emergency reference manual
- Broad crepe bandages (for the treatment of snake bites)
- Cervical collar (for spinal/neck injuries)
- Instant ice packs
- Large clean sheeting (for covering burns)
- Whistle (for attracting attention)
- Torch/flashlight
- Note pad and pencil (for recording treatment given)

4. **First aid kit containers** should protect the kit contents from dust and damage and should be large enough to hold all required modules, preferably in separate compartments. The container should be easily recognisable (*ie* a white cross on a green background displayed on the outside), and should not be locked.

5. **First aid kits should be readily available at/in all**

- Office/administration areas, sick bays or first aid rooms where primary first aid officer is available to administer first aid
- Playgrounds
- Science areas
- Technological and applied science areas
- Creative art areas
- Food technology areas
- Canteens/tuckshops
- Cleaners' rooms
- Grounds maintenance workshops
- Swimming pools
- After school/college care facilities
- Residential facilities
- School/college vehicles
- Excursions
- Sporting events
- Fetes, fairs, firework displays, working bees etc.