



PROCEDURES FOR FIRST AID

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1. PURPOSE

The objectives of these procedures are to specify minimum requirements and responsibilities for the provision of first aid in accordance with the Occupational Health and Safety Act (2004) and the Compliance Code *First Aid in the Workplace* (Edition No 1 September 2008). These procedures also aim to ensure that all injuries are reported to the appropriate local OHS&E committee for preventive action and to ensure the delivery of an appropriate response to all medical emergencies.

2. SCOPE

These procedures apply to the provision of first aid on the Australian campuses of Monash University and to Monash controlled entities.

3. ABBREVIATIONS

BAN	Bronchodilator accreditation number
CPR	Cardiopulmonary resuscitation
ESS	Employee Self Service
OH&S	Occupational health and safety branch
SDU	Staff development unit

4. DEFINITIONS

4.1. FIELD ACTIVITIES IN URBAN AREAS

Field activities in urban areas comprise all teaching and/or research activities authorised by Monash University involving staff, students and authorised volunteers that are undertaken less than 80 km or under one hour by road from a hospital with a 24 hour accident and emergency service.

Field activities in urban areas include excursions, field excursions, study tours and site visits to places such as industry locations, hospitals and factories.

NB Field activities in urban areas do not include visits by staff members or students to another site for the purpose of lectures, seminars or meetings.

For the purposes of these procedures, field activities in urban areas will be divided into two broad categories:

- **Low risk activities**

These activities are undertaken at a location such as an art gallery, a research institute, a factory, an industry location, a hospital or public building. The purpose of the visit is to, say, view a collection, a demonstration or experiments or to take a guided tour but not to participate in active research or teaching activities such as experimental, laboratory, clinical or studio work or study.

- **High risk activities**

These activities are undertaken at a field location in an urban area such as a sea, estuary, river or creek, a quarry, a hospital, a research institute, a factory or an industry location. The purpose of the activity may include active research or teaching activities such as laboratory or clinical work, water sampling, examination of rocks, undertaking art projects, etc.

4.2. FIELD ACTIVITIES IN RURAL AREAS

Rural activities comprise all teaching and/or research activities authorised by Monash University involving staff, students and authorised volunteers that are undertaken in an area greater than 80 km or one hour by road from a hospital with 24 hour accident and emergency services.

4.3. FIELD ACTIVITIES IN REMOTE ACTIVITIES

Remote field activities comprise all teaching and/or research activities authorised by Monash University involving staff, students and authorised volunteers that are undertaken greater than 300km or 3 hours from medical support services.

4.4. HEAD OF ACADEMIC/ADMINISTRATIVE UNIT

Head of academic/administrative unit is used to denote the head of the area that is undertaking the activity. For academic areas, this term includes head of faculty, school, department, institute or centre. For administrative areas, the term includes head of division, branch, centre or unit.

4.5. LEVEL 2 FIRST AID QUALIFICATION

HLTFA301B Apply First Aid is the national competency based equivalent of a level 2 first aid qualification

4.6. LEVEL 3 FIRST AID QUALIFICATION

HLTFA402B Apply Advanced First Aid is the national competency based equivalent of a level 3 first aid qualification

4.7. MONASH CONTROLLED ENTITY

Monash controlled entities (eg companies) include entities where Monash can control decision making, directly or indirectly, in relation to the financial and operating policies so as to enable the entity to operate with it in pursuing the objectives of Monash University.

For the remainder of this document, a Monash controlled entity will be referred to as a controlled entity.

4.8. MONASH UNIVERSITY FIRST AIDER

A staff member who has;

- a current first aid certificate;
- undertaken annual CPR updates;
- completed or who is completing a course of hepatitis B immunisations;
- has been approved by their supervisor to act in an official capacity, administering first aid to staff, students, visitors and contractors as required.

4.9. RISK ASSESSMENTS

Risk assessments are documents which state for each project or subsequent task, procedure and process, chemical or item of equipment, a description of the associated hazard/s controls in place and those yet to be implemented along with nominated completion date and responsible person. These documents may use either standard, matrix based risk management process or control banding methodologies.

4.10. SUPERVISOR

Supervisors are those who are responsible for overseeing:

- the work program of other staff;
- the study program of honours and postgraduate students; and
- undergraduate students in lectures, tutorial and practical classes and on field trips.

The supervisor of staff or students has a particular responsibility for safeguarding the occupational health and safety of those in their charge. The supervisor can delegate the supervision or training of a staff member or student to a suitably qualified and/or

experienced person, as appropriate for the task. The supervisor is, however, responsible for ensuring that the staff member or student has received appropriate training and has gained sufficient competence to undertake the task.

5. SPECIFIC RESPONSIBILITIES

A comprehensive list of OHS responsibilities is provided in the document *Occupational health and safety management at Monash University: Structure, functions, roles and responsibilities*. The responsibilities with respect to first aid are summarised below.

5.1. HEADS OF ACADEMIC/ADMINISTRATION UNITS

It is the responsibility of the head of academic/administrative unit/controlled entity to ensure that:

- the *Procedures for First Aid* are implemented in their unit/entity;
- a first aid assessment is undertaken in their unit/entity to determine first aid requirements, as outlined in Section 6 First Aid Assessment.

5.2. LOCAL OHS&E COMMITTEES

It is the responsibility of local OHS&E committees to:

- develop and monitor local first aid implementation strategies;
- recommend actions needed to comply with the *Procedures for First Aid*;
- consult with OH&S when specialist first aid advice is required.

5.3. FIRST AID CO-ORDINATORS

The first aid co-ordinator must hold a current first aid certificate (minimum Level 2) in order to fulfil the duties of the role. They do not, however, necessarily need to act as a first aider in their area. In areas with only one or two first aiders, the role of the first aid co-ordinator should be taken on by one of the existing first aiders.

It is the responsibility of the first aid co-ordinator to:

- act as focal point for communication between first aiders in the work area and OH&S;
- assist with the first aid assessment of the unit/entity;
- allocate a list of specific duties to first aiders;
- ensure that first aiders list and contact numbers are current so that they can be promptly contacted in an emergency;
- ensure that first aid kits, supplies and equipment are maintained;
- monitor the record keeping associated with first aid kits, supplies equipment; liaise with the local OHS&E committee and OH&S;
- advise staff and students of the location of first aid facilities, and how to contact first aiders

5.4. FIRST AIDERS

It is the responsibility of the first aiders to:

- complete, or have completed, a hepatitis B immunisation course. This requirement applies to all new first aiders and first aiders renewing their first aid training who act as Monash University first aiders (see section 9);
- respond promptly to provide an emergency service for injury/illness as required, while always working within their level of competence;
- arrange prompt and appropriate referral as required;
- keep confidential all information received in the course of their duty (medical information must only be released to medical staff);
- record **all** treatment (however minor) on the First Aid Injury Report;
- encourage staff who have had an occupational injury/illness to record this on a Hazard and Incident Report;

- access information from an SOS bracelet or similar in order to attend to a casualty;
- attend training as required. This includes an annual CPR update;
- maintain first aid facilities, including first aid equipment, checking and restocking of first aid kits as necessary;
- report any deficiencies in the first aid service to their first aid co-ordinator.

6. FIRST AID ASSESSMENT

6.1. GENERAL

- 6.1.1. Each unit/entity must undertake a first aid assessment to determine:
- The number of first aiders required;
 - The number and location of first aid kits required.
- 6.1.2. Guidelines for the completion of first aid assessments are provided in sections 19.
- 6.1.3. First aid assessment forms are provided in 20. Forms are included for:
- On-campus activities
 - Field activities
- If required, these forms may be altered to suit specific needs of areas.
- 6.1.4. Examples of completed first aid assessments are provided in 21. These examples include first aid assessments of:
- Office areas
 - Laboratory areas
 - Field activities
- 6.1.5. The first aid assessment must be completed by the first aid co-ordinator in consultation with the local safety officer and the health & safety representative.
- 6.1.6. Staff and students must be consulted during the completion of first aid assessments. Consultation may include discussions:
- with the health and safety representative;
 - at staff meetings; and
 - at local OHS&E committee meetings.
- 6.1.7. The OHS&E consultant/manager/advisor for the area will assist with first aid assessments, if required.
- 6.1.8. First aid assessments must be completed for both on-campus and field activities undertaken by each unit/entity.
- 6.1.9. A copy of completed first aid assessments should be sent to the Occupational Health team in the OH&S branch.
- 6.1.10. **First aid assessments must be reviewed whenever:**
- the size and/or layout of the area is changed;
 - the number and distribution of staff and/or students (or others) changes significantly;
 - there are changes in hours, overtime, shifts;
 - the nature of the hazards and the severity of the risks change; or
 - at least every 3 years

6.2. FIRST AID ASSESSMENT FOR FIELD ACTIVITIES IN URBAN AREAS

(See definitions of areas and activities provided in section 4)

6.2.1. Low risk activities

- All low risk activities should include one Level 2 trained first aider.
- It may be necessary to increase the number of first aiders dependent on the outcome of the first aid assessment.

6.2.2. High risk activities

- The number of first aiders must conform to the guidelines provided for field activities in rural areas.

6.2.3. For additional information regarding off campus activities refer to: [Guidelines for health and safety during field activities in urban areas](#)

6.3. FIRST AID ASSESSMENT FOR FIELD ACTIVITIES IN RURAL AREAS

6.3.1. Off campus activities in rural areas should include as many first aiders as practicable and these should be trained to at least Level 2 with additional appropriate modules as determined by the first aid assessment.

6.3.2. Guidelines for minimum numbers of first aiders for field activities in rural areas:

- **Groups up to 15 people**
Up to two persons trained in Level 2 First Aid or higher
- **Groups of 16 to 29 people**
2 people trained in Level 2 First Aid or higher
- **Groups of over 30 people**
2 people trained in Level 2 First Aid or higher, plus an additional person trained in Level 2 First Aid or higher, for every additional 10 people or part thereof.

6.3.3. It may be necessary to alter the number and level of qualification of the first aiders required, dependent on the outcome of the first aid assessment.

6.3.4. Whenever practical, first aiders should not travel in the same vehicle.

6.3.5. For additional information regarding off campus activities refer to: [Guidelines for health and safety during field activities in rural and remote areas](#)

6.4. FIRST AID ASSESSMENT FOR FIELD ACTIVITIES IN REMOTE AREAS

6.4.1. Guidelines for minimum numbers of first aiders for field activities in remote areas:

- **Groups up to 15 people**
2 people trained in remote area first aid
- **Groups of 16 to 30 people**
2 people trained in remote area first aid, plus an additional person trained in Level 2 first aid
- **Groups of over 30 people**
2 people trained in remote area first aid plus an additional person trained in Level 2 first aid for every additional 10 people or part thereof.

6.4.2. It may be necessary to alter the number and level of qualification of the first aiders required, dependent on the outcome of the first aid assessment.

6.4.3. It is recommended that a least one person trained in mental health first aid or an equivalent course attends rural/remote field activities. Information about mental health first aid courses is provided on the SDU web site www.adm.monash.edu.au/staff-development/ws/ohs

6.4.4. Whenever practical first aiders should not travel in the same vehicle.

- 6.4.5. For additional information regarding off campus activities refer to: [Guidelines for health and safety during field activities in rural and remote areas](#)

7. FIRST AIDERS

7.1. NUMBER OF FIRST AIDERS REQUIRED

- 7.1.1. The number of first aiders is determined by undertaking an assessment as outlined in section 6.
- 7.1.2. Guidelines for determining the number of first aiders are provided in section 19.

7.2. REQUIREMENTS FOR FIRST AIDERS

Staff who wish to act as Monash University first aiders must:

- have a keen interest in first aid;
- be prepared to participate in a hepatitis B immunisation program;
- be appointed to the role of their own free will;
- be able to be called away from their ordinary work at short notice;
- feel free to relinquish the role of first aider if they so wish;
- be readily available when required;
- be able to be released from their duties to undertake training in order to maintain skill levels;
- be able to relate well to staff and students;
- have the capacity to deal with injury and illness; and
- be committed to undertake regular update training and information sessions.

7.3. PROCEDURES FOR CONTACTING FIRST AIDERS

- 7.3.1. Each unit/entity **must** have procedures in place to ensure that first aiders can be promptly contacted in an emergency including after hours where applicable (ie security staff who are all first aid trained and have access to a portable defibrillator).
- 7.3.2. **These procedures can include:**
- Signs to first aid stations where first aiders:
- are present; and/or
 - can be contacted or located.
- Lists of first aiders and contact details clearly displayed:
- by phones;
 - on emergency procedure notices;
 - on first aid kits;
 - on safety noticeboards.
- 7.3.3. These procedures must be current, ie lists and signs must be kept up to date.
- 7.3.4. All staff must be made aware of procedures for contacting first aiders and any changes to them.

8. FIRST AID TRAINING

(See *OHS Induction & training at Monash University*; www.adm.monash.edu.au/ohse/documents .

8.1. FIRST AID QUALIFICATIONS

- 8.1.1. Monash University first aiders will be considered appropriately qualified provided that they:
- Complete a first aid certificate, minimum Level 2 first aid;
 - Renew their first aid certificate every three years;
 - Attend a cardiopulmonary resuscitation (CPR) training session at least once per year. (If desired, first aiders are welcome to attend two CPR sessions per year.)

Note: First aiders not fulfilling these criteria are not considered to be Monash University first aiders.

- 8.1.2. The cost of attendance at training courses will be met by the unit/entity.
- 8.1.3. Staff or students with first aid qualifications obtained outside the university can be accepted as Monash University first aiders on verification of their certificate by the OH&S branch.

8.2. FIRST AID TRAINING

- 8.2.1. The Staff Development Unit (SDU) organises first aid training courses specifically tailored for Monash University on all campuses.
- 8.2.2. Information regarding the content and scheduling of OHS courses offered at Monash University is provided on the SDU web site www.adm.monash.edu.au/staff-development/ws/ohs/
First aid courses offered on campus include:
 - Level 2
 - CPR training
- 8.2.3. First aid courses offered off campus upon request include:
 - Level 3
 - Remote area first aid
 - Emergency asthma management
 - Oxygen therapy
- 8.2.4. Additional specific training modules can be requested to customise courses for specific needs of units/entities.
- 8.2.5. SDU issues reminder notices for first aiders due for CPR refreshers and renewal of Level 2 certificates
- 8.2.6. SDU maintains a database of first aiders who have undergone training. This information can be obtained by contacting SDU.
- 8.2.7. In some instances qualified medical professionals (eg medical practitioners, registered nurses) may be exempt from first aid training. It will be necessary to liaise with OH&S to discuss possible exemption.

9. INFECTION CONTROL

9.1. HEPATITIS B IMMUNISATION

- 9.1.1. All new first aiders and first aiders undertaking renewal training who act as Monash University first aiders must complete, or have completed, a hepatitis B immunisation course as they may be inadvertently exposed to risk while assisting a patient.
- 9.1.2. Further information is available in *Procedures for immunisation* and the OH&S *Information Sheet No.12: Hepatitis B immunisation for first aiders*, which are available at the occupational health and safety website at www.adm.monash.edu.au/ohse/documents .

9.2. STANDARD PRECAUTIONS

- 9.2.1. First aiders must use good hygiene and standard precautions, as taught during first aid training, to minimise their exposure to human blood and body fluids.
- 9.2.2. It should be assumed that all human blood or body fluids are potentially infectious.

- 9.2.3. Small spots of blood/body fluid spills should be cleaned up as instructed in the first aid course. For larger spills contact the Manager of Cleaning Services or local biosafety officer so that appropriate cleaning can be organized.
- 9.2.4. Used dressings should be placed in a biohazard bag and the area's OHS&E consultant or biosafety officer contacted regarding appropriate disposal.

9.3. DISPOSAL OF NEEDLES AND SYRINGES

- 9.3.1. It is not the first aiders duty to dispose of needles and/or syringes. If these are found the area should be secured and Security contacted so that appropriate disposal can be organized

9.4. INFECTION CONTROL AND EMERGENCY RESUSCITATION

- 9.4.1. There is no reason to deny anyone resuscitation. The decision whether to use direct mouth-to-mouth resuscitation is up to each first aider.
- 9.4.2. Where possible first aiders should use either the individual resuscitation masks issued to them during their training or the mask kept in each first aid kit.

10. FIRST AID DOCUMENTATION AND REPORTING PROCEDURE

10.1. FIRST AID INJURY REPORTS

- 10.1.1. First aiders must record all treatment (however minor) either electronically or on the (paper based) First Aid Injury Report.
- 10.1.2. Paper based forms are stored in a pad in the first aid kit or electronic reports can be made via ESS
- 10.1.3. Further supplies can be obtained from OH&S branch on 990 51016 or by email on ohsehelpline@monash.edu.au.

10.2. REPORTING PROCEDURE

- Casualty is treated by first aider for injury/illness;
- First aid injury report is completed by first aider;
- Paper based first aid injury reports are sent to the Occupational Health Nurse Consultant, OH&S at the Clayton campus, for all campuses except Gippsland. At the Gippsland campus, first aid injury reports must be sent to the Campus Nurse, Gippsland campus.
- Electronic first aid reports lodged from any campus will automatically be sent to the Occupational Health Nurse Consultant.
- When injury/illness is related to work, the casualty should be encouraged to complete a Hazard & Incident Report Form as soon as they are well enough.

11. FIRST AID KITS

11.1. NUMBER OF FIRST AID KITS

- 11.1.1. The number of first aid kits is determined during the first aid assessment (see section 6).
- 11.1.2. Guidelines for determining the number of first aid kits are provided in section 19.4.

11.2. FIRST AID KITS MUST:

- be accessible at all times (e.g. not located behind a locked door or in a locked cupboard);
- In general, must not be locked. When first aid kits are located in areas accessible to the public and are subject to pilfering, they may be locked, with key access provided by an adjacent break glass system so that the kit is immediately accessible;
- have a white cross on a green background prominently displayed on the outside;

- be sturdy, dust and moisture proof, coated inside and out with an impervious finish;
- be located at a known first aid station. Each first aid station will be clearly signposted with the kit positioned in the immediate area; and
- be large enough to accommodate additional modules where they are needed, preferably in separate compartments.

11.3. CONTENTS OF FIRST AID KITS

11.3.1. The contents of first aid kits will need to vary depending on the nature of the hazards in the area as indicated by the first aid assessment.

In some circumstances i.e. for field trips, small portable first aid kits may be more appropriate.

11.3.2. First aid kits must not contain antiseptics or medications unless a first aider has been specifically trained in their use e.g. ventolin

11.3.3. In general, first aid kits for office areas and public buildings should comply with the contents requirement listed in section 22.1 -Contents of first aid kits for office areas and public buildings.

11.3.4. For high hazard areas, e.g. laboratories, workshops, plant rooms, catering areas etc, the kit contents should comply with the requirements listed in section 22.2 - Contents of first aid kits for high hazard areas.

11.3.5. For field trips, the kit contents should comply with the requirements listed in sections 22.3 - Contents of first aid kits for field trips.

11.4. FIRST AID KITS FOR VEHICLES

11.4.1. All vehicles and caravans used on field trips (excluding those to other workplaces, e.g. factories) must travel with a first aid kit.

11.4.2. For vehicles, the first aid kit contents should comply with the requirements listed in 22.5 Vehicle first aid kits.

11.5. MAINTENANCE OF FIRST AID KITS

11.5.1. The first aid co-ordinator must ensure that the stocks of all first aid kits (including vehicle first aid kits) are maintained and that out of date stock is replaced as necessary.

11.5.2. This duty may be delegated to another first aider if more practical in a given area.

11.5.3. Records of checking of the contents of first aid kits must be maintained by the unit/entity. The date and the signature of the person checking the kit should also be recorded on a sticker affixed to the kit

11.6. PURCHASE OF FIRST AID KITS AND SUPPLIES

Kits and contents can be purchased from suppliers such as:

Medical Solution

P.O. Box 60, The Mall
Heidelberg West Vic 3081
Phone: 1300 136 158

R.J. Hee Pty. Ltd.

Factory 9
25-35 Cranbourne/Narre Warren Rd
Narre Warren Vic 3805
Phone: 9704 7635

Parasol EMT (Melbourne)

Unit 8/200 Turner Street
Port Melbourne 3207
Phone: 1300 366 818

Livingstone First Aid & Safety

8/87 Newlands Rd
Reservoir VIC 3073
Phone: 1300 721 721

12. FIRST AID FOR SPECIFIC HAZARDS AND HEALTH CONCERNS**12.1. ADDITIONAL MODULES FOR FIRST AID KITS**

- 12.1.1. For certain specific hazards and health concerns, eg asthma, hydrofluoric acid, phenol, cyanide, burns, eye injuries, incidents involving macaque monkeys, additional kit modules will be required. These modules should be stored (preferably in a separate compartment) within the first aid kit
- 12.1.2. A first aid assessment must be completed to determine:
 - the requirements for each specific module; and
 - the number of first aiders to complete module-specific training.
- 12.1.3. The Occupational Health team, OH&S must be consulted during the first aid assessment.
- 12.1.4. Additional and refresher training for the use of specific equipment and procedures is organised through SDU.
- 12.1.5. Each unit/entity is responsible for ensuring that modules are well supplied and that out of date stock is replaced as necessary.
- 12.1.6. Records of checking of the contents of first aid modules must be maintained by the unit/entity.
- 12.1.7. The unit/entity is responsible for all costs involved in purchasing the modules, module supplies and training staff in using the modules.
- 12.1.8. The recommended contents of the additional modules for first aid kits are listed in section 23.

12.2. BURNS MODULE

This module should be included in first aid kits in the workplace where there is the possibility of a person sustaining a serious burn. Such places may include those where:

- heat is used in a process;
- flammable liquids are used;
- chemical acids or alkalines are used; and/or
- other corrosive chemicals are used.

12.3. CYANIDE MODULE

This module should be clearly marked in a separate container within the first aid kit and be readily accessible to the area where cyanide is used. It should be located adjacent to the oxygen. Further information on first aid for cyanide poisoning refer to [Information Sheet No. 25 First Aid for Cyanide Poisoning](#).

12.4. HYDROFLUORIC ACID (HF) MODULE

This module should be clearly marked in a separate container within the first aid kit and be readily accessible to the area where HF is used. For further information on first aid for HF poisoning refer to [Information Sheet No. 24 Hydrofluoric Acid](#).

12.5. MACAQUE FIRST AID MODULE

This module should be clearly marked in a separate container within the first aid kit located in the area where the macaques are kept. For further information on first aid for Macaque incidents refer to [Procedures for the management of suspected exposure to Cercopithecine herpesvirus 1\(B virus\)](#).

12.6. PHENOL MODULE

This module should be clearly marked in a separate container within the first aid kit and be readily accessible to the area where Phenol is used. For further information on first aid for Phenol poisoning refer to [Information Sheet No. 36 Phenol](#).

12.7. EMERGENCY ASTHMA MANAGEMENT

12.7.1. Asthma management module for first aid kits

- The asthma module should be in a separate container within the first aid kit in the most appropriate location(s).
- A record of each time that the inhaler is used must be made on the first aid injury report. The spacer must be cleaned each time that it is used in accordance with the manufacturer's instructions.
- The inhaler is for emergency use only and must not be given to any person to keep.

12.7.2. Purchase of asthma management supplies

- At least two first aiders must be nominated to obtain a Bronchodilator Accreditation Number (BAN) in order to purchase the inhaler (usually ventolin).
- The procedure for obtaining the BAN is explained in the asthma management course.
- First aiders who have been issued with a BAN have overall responsibility for the care and maintenance of the inhaler and spacer and must ensure that the inhaler medication is always up to date.

12.8. EYE MODULE

This module should be in a separate container within the first aid kits in the workplace where the wearing of eye protection is recommended e.g.

- spraying, hosing, compressed air or abrasive blasting;
- welding, cutting or machining operations;
- chemical /biological liquids or powders are handled in open containers;
- there is the possibility of flying particles;
- field activities where there is dust or the possibility of flying particles.

13. OTHER FIRST AID EQUIPMENT

13.1. EMERGENCY SHOWERS AND EYE WASH STATIONS

13.1.1. The requirements for laboratories when working with chemicals are defined in Australian standards for laboratory design and construction (AS/NZS 2982) and Safety in the laboratory series (AS/NZS 2243).

13.1.2. Emergency drench showers and eyewash stations shall be available at a distance of no more than 10 metres from any position in the laboratory.

13.1.3. Where these facilities are not available alternate arrangements should be made in consultation with the OHS&E consultant of the area.

13.1.4. Emergency showers

- Emergency showers are tested and flushed annually by Facilities & Services staff.
- Procedures must be established to ensure that emergency showers are flushed and tested on a regular basis by staff in the area

13.1.5. Eyewash stations

- Eyewash stations are tested annually by Facilities & Services staff.
- Procedures must be established to ensure that eyewash stations are flushed and tested on a regular basis by staff in the area

13.1.6. The responsibility for testing and flushing emergency showers and eyewash stations must be determined in consultation with the first aid co-ordinator, the safety officer and local OHS&E committee.

13.1.7. Records of the flushing and testing of emergency drench showers and eyewash stations must be maintained by the unit/entity.

13.2. OXYGEN CYLINDERS

13.2.1. **General**

In certain circumstances medical oxygen may need to be available for administration in an emergency.

A first aid assessment must be completed to determine:

- the requirements for the medical oxygen; and
- the number of first aiders required to complete training to administer medical oxygen.

13.2.2. **Maintenance of oxygen cylinders**

Procedures must be established to ensure that:

- the oxygen level in the cylinders is checked at least monthly;
- the equipment is serviced on an annual basis by an authorised service agency.

13.2.3. The responsibility for the testing and servicing of the oxygen cylinders must be determined in consultation with the first aid co-ordinator, the safety officer and local OHS&E committee to ensure this is performed by a person trained in the use of this equipment.

13.2.4. Records of maintenance, testing and service of the oxygen cylinders must be maintained by the unit/entity.

13.3. DEFIBRILLATORS

13.3.1. **General**

- In certain circumstances a defibrillator may be required.
- A first aid assessment must be completed to determine whether a defibrillator is required.
- The Occupational Health team, OH&S must be consulted during the first aid assessment.
- Training in the use of defibrillators is now included in the Level 2 First Aid course and the CPR updates organised through SDU.
- The unit/entity is responsible for all costs involved in the purchase of the defibrillator and associated supplies.

13.3.2. **Purchase, storage and maintenance of the defibrillator**

- The defibrillator should be purchased from an approved supplier. For a list of approved suppliers, contact the Occupational Health team, OH&S.
- The defibrillator must be stored in an immediately accessible (during normal office hours) signposted area. In order to minimise the risk of tampering or theft, it is recommended that the defibrillator be stored in a specific box which activates an alarm when opened.

- Maintenance of defibrillators

- Procedures must be established to ensure that the defibrillator(s) are serviced and maintained in accordance with the manufacturer's guidelines.
- Daily and (monthly documented checks) are also required. A copy of the monthly checks must be sent to OH&S.
- First aider(s) must be nominated to carry these out these checks.
- OH&S should be contacted regarding the appropriate checking procedure required.
- The responsibility for the testing and servicing of the defibrillator(s) must be determined in consultation with the first aid co-ordinator, the safety officer and local OHS&E committee and OH&S
- Records of maintenance, testing and service of the defibrillator(s) must be maintained by the unit/entity.
- OH&S must be notified regarding the location of and the person(s) in charge of the defibrillator.
- Any changes to the location of the defibrillator or the person(s) in charge must also be notified to OH&S.

13.3.3. Requirements for defibrillator training

- Defibrillator training is included in the Level 2 First Aid course organised through SDU. Annual defibrillator refresher training is required, and is incorporated in the annual CPR refresher training.
- A record of each time the defibrillator is used is to be made on the first aid report and sent immediately to the Occupational Nurse Consultant, OH&S.

14. EMERGENCY PROCEDURES

- 14.1.** The emergency procedures for each of the Australian campuses to be followed by a first aider called to attend an emergency situation involving serious injury or ill health are provided in the campus-specific Emergency Procedures books kept by each phone. Contact OH&S on 990 51016 or by email on ohsehelpline@monash.edu.au to obtain additional copies of these books.
- 14.2.** Units/entities which occupy non-university buildings, e.g. hospital-based units/entities must, of course, follow the emergency response procedures of the building management.
- 14.3.** Each unit/entity must ensure that field activities are supplied with a reliable 24-hour means of communication.
- 14.4.** Staff and students have a responsibility to be familiar with emergency and evacuation procedures and to comply with the instructions given by emergency response personnel such as emergency wardens and first aiders. First aiders may occasionally encounter reluctance on the part of an injured person or a person exposed to a hazardous substance to follow the directions of the first aider. This is more likely to occur if the person requiring first aid is distressed or in pain. If such a situation arises then the attending first aider will need to evaluate the risks to the injured/exposed person and the risks to others if appropriate first aid treatment is not administered. It may be necessary to seek assistance.

15. COUNSELLING

- 15.1.** Counselling is available to first aiders at the university who are affected by their duties.
- 15.2.** Counselling can be provided by:
- Community Services on each campus. Phone 990 53156 for the contact details for each campus
 - The Employee Assistance Program. Phone 1 300 361 008

- The Occupational Health team, OH&S branch on the Clayton campus. Phone 990 51014

16. LEGAL LIABILITY

The support available to staff with an OHS function, including First Aiders, is set out in the [Information Sheet No. 14: Support for Staff and Students with occupational health and safety functions](#).

17. RECORDS

<u>Record to be kept by</u>	<u>Records</u>	<u>To be kept for:</u>
Occupational Health (confidential files)	Completed immunisation questionnaire and consent forms	Indefinitely
	Completed authorisation for immunisation forms	Indefinitely
	First aid injury reports	Indefinitely
OH&S	Hazard & Incident Reports	Indefinitely
SDU	First Aid Training Records	5 years
Academic/administrative units/entities	Testing, checking and maintenance records for first aid kits and safety equipment	5 years
	Copies of Hazard & Incident Reports	Indefinitely

18. REFERENCES

18.1. LEGISLATION

Health Act 1958 (Vic)
Health (Infectious Diseases) Regulations 2001
Occupational Health and Safety Act 2004 (Vic)

18.2. MONASH UNIVERSITY OHS DOCUMENTS

www.adm.monash.edu.au/ohse/documents

Guidelines for health and safety during field activities in country and remote areas
Guidelines for health and safety during field activities in urban areas
Information Sheet No.12: Hepatitis B immunisation for first aiders
Information Sheet No. 14: Support for Staff and Students with occupational health and safety functions
Information Sheet No.24: Hydrofluoric Acid
Information Sheet No. 25: First aid for Cyanide poisoning
Information Sheet No.36: Phenol
Immunisation Grid
Occupational health & safety training guide
OHS induction and training at Monash University
OHS management at Monash University: Structure, functions, roles and responsibilities
OHS procedures for work & study during times when emergency response is limited
Procedures for immunisation
Training records

18.3. AUSTRALIAN AND INTERNATIONAL STANDARDS

AS/NZS 2243.1: 2005 Safety in Laboratories - Planning and operational aspects

2243.2: 1997 Safety in Laboratories - Chemical aspects
2243.3: 2002 Safety in Laboratories - Microbiological aspects & containment facilities
2243.4: 1998 Safety in Laboratories - Ionizing radiations
2243.5: 2004 Safety in Laboratories - Non-ionizing radiations – Electromagnetic, sound and ultrasound
2243.6: 1990 Safety in Laboratories - Mechanical aspects
2243.7: 1991 Safety in Laboratories - Electrical aspects
2243.8: 2001 Safety in Laboratories - Fume cupboards
2243.9: 2003 Safety in Laboratories - Recirculating fume cabinets
2243.10: 2004 Safety in Laboratories - Storage of chemicals
AS/NZS 2982.1: 1997 Laboratory Design and Construction - General Requirements
AS 3745: 2002 Emergency control organization and procedures for buildings, structures and workplaces
AS/NZS 4801:2001 Occupational Health & Safety Management Systems – specifications with guidance for use.
OHSAS 18001: 2007 Occupational health and safety management systems-requirements

18.4. WORKSAFE DOCUMENTS

Compliance Code *First Aid in the Workplace* (Edition No 1 September 2008).

18.5. ACKNOWLEDGEMENTS

The following documents were used as references in the development of these procedures:

Australian Resuscitation Council

Policy Statements

Australasian College of Surgeons

Parasol Active First Aid 7th Edition, 2009

Rural and Remote Health-definitions, policy and priorities. John Wakerman and John Humphreys.

Wilderness Medicine 5th edition 2007. Paul S Auerbach

19. GUIDELINES FOR COMPLETING FIRST AID ASSESSMENTS

19.1. GUIDELINES TO DETERMINE THE NUMBER OF FIRST AIDERS REQUIRED (ON-CAMPUS ACTIVITIES)

19.1.1. Low risk (*office based areas*)

Incidence of injury/illness: rare

No of employees	Level 2	Total
1 – 100	X 2	2
101 – 200	+1	3
201 –300	+1	4

(Plus an additional first aider every additional 100 employees)

19.1.2. Medium risk (*laboratories containing chemicals/hazardous materials or workshops with machinery/equipment*)

Incidence of injury/illness: 1-2 incidents per month

No of employees	Level 2	Total
1 – 50	X 2	2
51 – 100	+ 1	3
101 –150	+ 1	4

(Plus an additional first aider for every additional 50 employees)

19.1.3. High risk (*laboratories containing chemicals/hazardous materials or workshops with machinery/equipment, Kitchens, medical research facilities*)

Incidence of injury/illness: 1 or more incidents per week

No of employees	Level 2	Total
1 – 20	X 2	2
21 – 40	+1	3
41 – 60	+ 1	4

(Plus an additional first aider for every additional 25 employees)

19.2. GUIDELINES TO DETERMINE THE MINIMUM NUMBER OF FIRST AIDERS REQUIRED (FIELD ACTIVITIES)

19.2.1. Field activities in *urban areas*

Low risk: at least one level 2 first aider

High risk: as per field activities in rural areas

19.2.2. Field activities in *rural areas* (Refer also to 6.3.1 & 6.3.3 Procedures for First Aid)

No of persons	Level 2	Total
1 – 15	X 1-2	1 – 2
16– 29	X 2	2
30 – 39	+ 1	3

(Plus an additional person trained in Level 2 First Aid or higher, for every additional 10 people or part thereof.)

19.2.3. Field activities in *remote areas*

No of persons	Level 2	Remote area	Total
1 – 15	N/A	X 2	2
16 – 30	+ 1	X 2	3
31 – 40	+2	X 2	4

(Plus an additional person trained in Level 2 First Aid or higher, for every additional 10 people or part thereof).

- It may be necessary to alter the number and level of qualification of the first aiders required, dependent on the outcome of the first aid assessment.
- Whenever practical, first aiders should not travel in the same vehicle.
- It is recommended that a least one person trained in mental health first aid or an equivalent course attends rural/remote field activities. Information about mental health first aid courses is provided on the [SDU web site](#).

19.3. OTHER FACTORS TO BE TAKEN INTO CONSIDERATION

FACTORS WHICH COULD INCREASE THE NUMBERS OF FIRST AIDERS REQUIRED	FACTORS WHICH COULD DECREASE THE NUMBERS OF FIRST AIDERS REQUIRED
<p>No of incidents (past year) Increased number of incidents may indicate need for more first aiders or a change in risk category level. (Check hazard & incident reports)</p>	Decrease in number of incidents.
<p>Number of persons routinely present in workplace Consider staff, students, contractors, visitors, members of public. Open days/conferences may need extra first aid cover (contact OH&S).</p>	
<p>Spread of hours Look at work/study after hours/at night/at weekends. Plan to cover all times.</p>	Security staff are also trained first aiders.
<p>Layout of building(s) Look at the time it takes to get a first aider to a casualty. It is often a good idea to mark up a floor plan with the location of the first aider and look for gaps. High risk multistory buildings may need a first aider on every floor. Scattered work buildings may need a first aider in each building.</p>	Low risk office buildings may only need a first aider on every second floor.
<p>Hazards/health concerns First aiders should be located where there is a significant risk of injury/illness. Where a workplace stores or uses highly toxic chemicals, etc additional first aid facilities may be required.</p>	
<p>Time to medical aid As the length of time increases to get medical aid e.g. doctor or hospital, look at increasing the number and level of training of the first aider.</p>	If you have immediate access to a medical clinic or hospital emergency room, the number of first aiders may be able to be reduced. The hours that the service is available should be taken into account when first aid requirements are being calculated.
<p>Availability of first aiders Extra numbers of first aiders may be required when staff are part-time or not always located on a campus.</p>	

Allowance must also be made for absences due to leave or other reasons.	
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19.4. GUIDELINES TO DETERMINE THE NUMBER OF FIRST AID KITS

There must be at least one kit on each alternate level of a multi-level building; and at least one kit on each floor of a high risk multi-level building.

19.4.1. Low risk

Employees	First aid kits
1 – 50	X 1
51 – 100	X 2
101 – 150	X 3
150 – 200	X4
201 – 300	X5

(plus one additional kit for every additional 100 employees)

19.4.2. Medium Risk

Employees	First Aid Kits
1 – 40	X 1
41 – 80	X 2
81 – 120	X 3
121 – 180	X 4
181 – 250	x 5

(plus one additional kit for every additional 80 employees)

19.4.3. High Risk

Employees	First Aid kits
1 – 25	X 1
26 – 50	X2
51 – 100	X3
101 – 150	X4
151 – 200	X5
201 – 250	X6

(plus one additional kit for every 50 employees)

19.4.4. Remote Area

No of persons	First Aid kits
1 – 25 employees	X1 kit *

* Number of first aid kits will also depend on first aid assessment

20. FIRST AID ASSESSMENT FORMS

20.1. ON CAMPUS ACTIVITIES

FIRST AID ASSESSMENT - ON-CAMPUS ACTIVITIES

1. ASSESSMENT FACTORS

Department/School/Unit/Entity:			
Date	Campus	Building No	Floor level(s)
Assessor/s			
NATURE OF HAZARDS			
Hazards:		Describe the hazard:	
KNOWN OCCURANCES OF INJURIES, ILLNESSES AND INCIDENTS			
Nature of incidents resulting in injury, illness: <i>Attach summary incident reports for past 12 months.</i>			
LOCATION, SIZE AND LAYOUT OF THE WORKPLACE			
No of floors:	Access between floors:	Maximum distance to first aid kit:	
Nearest medical service:	Address:		
Time to get to the service:	Walking:	By car:	
Nearest major hospital:	Address:		
Time to get to hospital:	Walking:	By car:	
NUMBER AND DISTRIBUTION OF EMPLOYEES			
Number of persons working in the area <i>(include employees, contractors, students and provide an estimate when more people may be working the area)</i>			
Approx numbers of general public present in the workplace			
Is work required after hours, at night or at weekends? If so provide details.	Refer to OHS procedures for work & study during times when emergency response is limited		

2. OUTCOME OF ASSESSMENT

OUTCOME	
No. of persons potentially exposed	
Potential Injuries/illnesses	
Level of risk. <i>Refer to section 19 Procedures for First Aid</i>	
Risk controls	

3. FIRST AID FACILITIES REQUIRED

(Refer to section 19 Procedures for First Aid)

FACILITIES, RESOURCES	DETAIL
Number of Level 2 first aiders required	
First Aid Kits <i>(number and location)</i>	
Type of kit <i>(e.g. office, high hazard)</i>	
Other first aid modules <i>(eg burns, asthma, cyanide for which additional training is required)</i>	
Location of nearest defibrillator	
Medical oxygen <i>(location, names of first aiders trained)</i>	

4. OUTSTANDING RESOURCES

(If any of the above resources in Item 3 are not in place, please state below the timeframe and person responsible for implementation)

5. SIGN OFF

Signed	
Name (Assessor)	
Signed	
Name (Assessor)	
Date Copy Sent to OHS	

Please ensure you keep a copy for your own records.

FIRST AID ASSESSMENT - FIELD ACTIVITIES

1. ASSESSMENT FACTORS

Department/School/Unit/Entity:			
Date	Campus	Specific Location	Duration
Assessor/s			
Off campus activity* (Please circle)	URBAN RURAL REMOTE	low risk	high risk
Date of Activity;			
*Refer definition section 4 - Procedures for First Aid			
NATURE OF HAZARDS			
Hazards:		Describe the hazard:	
KNOWN OCCURANCES OF INJURIES, ILLNESSES AND INCIDENTS			
Nature of incidents resulting in injury, illness. Attach summary incident reports for past 12 months.			
AVAILABILITY OF EMERGENCY ASSISTANCE			
What is the access for emergency evacuation		Maximum distance to first aid kit:	
Nearest medical service	Address:		
Time to get to the service	Walking:	By car:	Kms. (approx)
Nearest hospital with 24 accident and emergency service	Address:		
Time to get to hospital	Walking:	By car:	Kms. (approx)
NUMBER AND DISTRIBUTION OF PERSONS PARTICIPATING			
Number of persons participating in the activity			
Numbers of general public present in the area			
Will participants be working in isolation? If so describe.			

2. OUTCOME OF ASSESSMENT

OUTCOME	
No. of persons potentially exposed	
Potential injuries/illnesses	
Level of risk	
Risk Controls	(Refer to the field trip risk assessment and previous similar trips)

3. FIRST AID FACILITIES REQUIRED

(Refer to sections 6.2 – 6.4 and 7 Procedures for First Aid)

FACILITIES, RESOURCES	DETAIL
Number of first aiders required	
Level of training (e.g. level 2 /Remote)	
First Aid Kits (number and location)	
Can all first aid equipment be transported to the area	
Type of kit (e.g. vehicle, field)	
Other first aid modules (eg burns, asthma, cyanide for which additional training is required)	

4. OUTSTANDING RESOURCES

(If any of the above resources in Item 3 are not in place, please state below the timeframe and person responsible for implementation)

5. SIGN OFF

Signed	
Name (Assessor)	
Signed	
Name (Assessor)	
Date Copy Sent to OHS	

Please ensure you keep a copy for your own records.

21. EXAMPLES OF COMPLETED FIRST AID ASSESSMENTS

21.1. OFFICE BASED AREA

FIRST AID ASSESSMENT - ON-CAMPUS ACTIVITIES

1. ASSESSMENT FACTORS

Department/School/Unit/Entity:			
Date 20/07/2010	Campus Clayton	Building No 100	Floor level(s) 2
Assessor/s Mark Church/Betty Bingham			
NATURE OF HAZARDS			
Hazards:		Describe the hazard:	
Manual handling Stairs		Lifting stationary Trips	
KNOWN OCCURANCES OF INJURIES, ILLNESSES AND INCIDENTS			
Nature of incidents resulting in injury, illness: <i>Attach summary incident reports for past 12 months.</i>			
Sprains & strains x 3 Slips, trips x 2			
LOCATION, SIZE AND LAYOUT OF THE WORKPLACE			
No of floors: 2	Access between floors: Stairs	Maximum distance to first aid kit: 50m	
Nearest medical service	Address: University Health Service on Clayton campus		
Time to get to the service	Walking: 5 min	By car: N/A	
Nearest major hospital	Address: Monash Medical Centre 246 Clayton Rd Clayton		
Time to get to hospital	Walking: N/A	By car: 15 min	
NUMBER AND DISTRIBUTION OF EMPLOYEES			
Number of persons working in the area <i>(include employees, contractors, students and provide an estimate when more people may be working the area.)</i>	170 all staff		
Numbers of general public present in the workplace	10		
Is work required after hours, at night or at weekends? If so provide details.	Refer to OHS <i>procedures for work & study during times when emergency response is limited</i> N/A		

2. OUTCOME OF ASSESSMENT

OUTCOME	
No of persons potentially exposed	All office staff
Injuries/illnesses that may occur	Strains & sprains. Slips/trips
Level of risk. <i>Refer to section 19 Procedures for First Aid</i>	Low risk
Risk controls	Manual handling risk assessments training. Signage

3. FIRST AID FACILITIES REQUIRED

(Refer to section 19 Procedures for First Aid)

FACILITIES, RESOURCES	DETAIL
Number of Level 2 first aiders required	3 (currently x 2 Level 2 + x 1 Level 1)
First Aid Kits <i>(number and location)</i>	4 Ground floor Reception x 1 Tea Room x 1 First floor Tea Room x 1 Room 42 x 1
Type of kit <i>(e.g. office, high hazard)</i>	Office
Other first aid modules <i>(eg burns, asthma, cyanide for which additional training is required)</i>	N/A
Location of nearest defibrillator	Reception Building 99
Medical oxygen <i>(location, names of first aiders trained)</i>	Nil

4. OUTSTANDING RESOURCES

(If any of the above resources in Item 3 are not in place, please state below the timeframe and person responsible for implementation)

One of the first aiders needs to be trained up to Level 2 within the next month.
Person responsible- to organize this- Mark Church

5. SIGN OFF

Signed	
Name (Assessor)	
Signed	
Name (Assessor)	
Date Copy Sent to OHS	

Please ensure you keep a copy for your own records.

21.2. LABORATORY BASED AREA

FIRST AID ASSESSMENT - ON-CAMPUS ACTIVITIES**1. ASSESSMENT FACTORS**

Department/School/Unit/Entity: Science			
Date 20/07/2010	Campus Clayton	Building No 102	Floor level(s) 4
Assessor/s Jane Black/Bill Green			
NATURE OF HAZARDS			
Hazards:		Describe the hazard:	
Chemicals Burns Sharps		Phenol HF, alcohols. Acids Steam Needles, scapel blades	
KNOWN OCCURANCES OF INJURIES, ILLNESSES AND INCIDENTS			
Nature of incidents resulting in injury, illness: <i>Attach summary incident reports for past 12 months.</i>			
Sprains and strains x 8 Burns x 10 Cuts lacerations x 17 Foreign bodies x 5 Animal bites x 5 Needle stick injuries x 8			
LOCATION, SIZE AND LAYOUT OF THE WORKPLACE			
No of floors: 4	Access between floors: lifts/stairs	Maximum distance to first aid kit: 50m	
Nearest medical service	Address: University health service. Clayton campus		
Time to get to the service	Walking: 5 min	By car: N/A	
Nearest major hospital	Address: Monash Medical Centre. 246 Clayton Rd Clayton		
Time to get to hospital	Walking: N/A	By car: 15 min	
NUMBER AND DISTRIBUTION OF EMPLOYEES			
Number of persons working in the area <i>(include employees, contractors, students and provide an estimate when more people may be working the area)</i>	360 (max in semester)		
Approx numbers of general public present in the workplace	0		
Is work required after hours, at night or at weekends? If so provide details.	Refer to OHS procedures for work & study during times when emergency response is limited No		

2. OUTCOME OF ASSESSMENT

OUTCOME	
No of persons potentially exposed	360
Injuries/illnesses that may occur	Burns (Phenol & HF) needle stick, strains/sprains bites cuts, foreign body
Level of risk. <i>Refer to section 19 Procedures for First aid</i>	High risk
Risk controls	Risk assessments, signage, training, MSDS

3. FIRST AID FACILITIES REQUIRED

(Refer to section 19 Procedures for First Aid)

FACILITIES, RESOURCES	DETAIL
Number of Level 2 first aiders required	No of first aiders =16
First Aid Kits <i>(number and location)</i>	X 9 X1 at reception, ground floor X2 on floors 1-4 (Lab areas)
Type of kit <i>(e.g. office, high hazard)</i>	High hazard in lab areas x 1 office kit in reception area
Other first aid modules <i>(eg burns, asthma, cyanide for which additional training is required)</i>	Phenol and HF modules
Location of nearest defibrillator	In reception on ground floor
Medical oxygen <i>(location, names of first aiders trained)</i>	Yes x 1 located near first aid kit in reception Gd floor x 4 first aiders trained- see attached certificates.

4. OUTSTANDING RESOURCES

(If any of the above resources in Item 3 are not in place, please state below the timeframe and person responsible for implementation)

- Train an additional 3 (level 2) first aiders currently there are only 13 trained.(training organised for 2 weeks time)
- Update Phenol & HF modules –to be updated within one week.(x 4 staff already trained to use these modules)
- Responsible person- Michael Moore Mgr

5. SIGN OFF

Signed	
Name (Assessor)	
Signed	
Name (Assessor)	
Date Copy Sent to OHS	

Please ensure you keep a copy for your own records.

FIRST AID ASSESSMENT - FIELD ACTIVITIES

1. ASSESSMENT FACTORS

Department/School/Unit/Entity: Geological Sciences			
Date 22/07/2010	Campus Clayton	Specific Location xxx Gippsland	Duration 2 Nights, 3 days
Assessor/s Jo Brown, Mary Murphy			
Off campus activity* (Please circle)	URBAN RURAL Yes REMOTE	low risk	high risk
Date of Activity: 01/09/2010			
*Refer definition section 4 - Procedures for first aid			
NATURE OF HAZARDS			
Hazards:		Describe the hazard:	
Hilly area Temperature hot 30c average		Bush walking Activity in Summer	
KNOWN OCCURANCES OF INJURIES, ILLNESSES AND INCIDENTS			
Nature of incidents resulting in injury, illness. Attach summary incident reports for past 12 months.			
Sprains/strains x 2 - twisted ankle rough ground Cuts bruises x 2 - knife cut preparing food Dog bite x 1 - dog bite			
AVAILABILITY OF EMERGENCY ASSISTANCE			
What is the access for emergency evacuation	Main Rd to Hospital next to base camp	Maximum distance to first aid kit 65m approx Base camp where all staff are located has field kit	
Nearest medical service	Address: East Gippsland Clinic. Brown St		
Time to get to the service	Walking: N/A	By car: 65 min.	Kms. (approx) 90
Nearest hospital with 24 accident and emergency service	Address: Gippsland Hospital. Main St		
Time to get to hospital	Walking: N/A	By car: 70 min.	Kms.(approx) 92
NUMBER AND DISTRIBUTION OF PERSONS PARTICIPATING			
Number of persons participating in the activity	27		
Numbers of general public present in the area	N/A		
Will participants be working in isolation? If so describe	All will work in groups of 3		

2. OUTCOME OF ASSESSMENT

OUTCOME	
No. of persons potentially exposed	27
Potential injuries/illnesses	Sun burn, sprain/strain, cuts/abrasions, dog bite
Level of risk	Medium risk
Risk Controls	(Refer to the field trip risk assessment and previous similar trips) Risk assessments, training, supervision

3. FIRST AID FACILITIES REQUIRED

(Refer to sections 6.2 – 6.4 and 7 Procedures for First Aid)

FACILITIES, RESOURCES	DETAIL
Number of first aiders required	X 2 (minimum)
Level of training (e.g. level 2 /Remote)	Level 2
First Aid Kits (number and location)	Vehicle kit in each vehicle x 4 Field kit inc burns module x 1 for base camp
Can all first aid equipment be transported to the area	Yes
Type of kit (e.g. vehicle, field)	See above
Other first aid modules (eg burns, asthma, cyanide for which additional training is required)	

4. OUTSTANDING RESOURCES

(If any of the above resources in Item 3 are not in place, please state below the timeframe and person responsible for implementation)

Field trip organizer Jo Brown will ensure that first aiders CPR update has taken place before end August 2010

A mental health trained(level 2) first aider will also be included in the group.

5. SIGN OFF

Signed	
Name (Assessor)	
Signed	
Name (Assessor)	
Date Copy Sent to OHS	

Please ensure you keep a copy for your own records.

22. CONTENTS OF FIRST AID KITS

22.1. FIRST AID KITS FOR OFFICE AREAS AND PUBLIC BUILDINGS EMPLOYING 1-50 PEOPLE LOW RISK OR 1-40 PEOPLE MEDIUM RISK

Names and extension numbers of first aiders in the area (normally those on the floor on which the kit is located plus those on the floor above and below)

Communication procedures for contacting first aiders(including after hours contacts)

Emergency Services telephone number

Basic first aid notes

Pen and note pad

First aid report forms x 1 pad

Resuscitation mask

Disposable gloves x 15 pairs

Band aids x 100

Sterile eye pads x 6

Unmedicated sterile wound dressing (large) x 2

Unmedicated sterile wound dressing (medium) x 2

Unmedicated sterile wound dressing (small) x 2

Triangular bandages (disposable) x 2

Triangular bandages (fabric) x 2

Crepe bandages 10cm x 1

Crepe bandage 7.5cm x 2

Gauze bandage 5cm x 1

Gauze squares x 1 packet

Normal saline ampoules 20ml x 5

Ice pack (chemical) x 1

Stainless steel scissors x 1 pair

Safety pins x 1 pkt

Hypo-allergic tape 1,25cm x 1 roll

Disposable splinter removers x 5

Chux x 2

Biohazard bags 250 x 300mm x 2

22.2. FIRST AID KITS FOR HIGH HAZARD AREAS FOR 1-25 PEOPLE

Names and extension numbers of first aiders in the area (normally those on the floor on which the kit is located plus those on the floor above and below)

Communication procedures for contacting first aiders (including after hours contacts)

Emergency Services telephone number

Basic first aid notes

Pen and note pad

First aid report forms x 1 pad

Resuscitation mask

Disposable gloves x 12 pairs

Band aids x 100

Sterile eye pads x 8

Unmedicated sterile wound dressing (large) x 2

Unmedicated sterile wound dressing (medium) x 2

Unmedicated sterile wound dressing (small) x 2

Triangular bandages (disposable) x 2

Triangular bandages (fabric) x 2

Crepe bandages 10cm x 1

Crepe bandage 7.5cm x 2

Gauze bandage 5cm x 1

Gauze squares x 1 packet

Normal saline ampoules 20ml x 5

Combine dressing 9 x10cm x 4

Ice pack (chemical) x 1

Burns Module

Space blanket

Stainless steel scissors x 1 pair

Safety pins x 1 pkt

Hypo-allergic tape 1,25cm x 1 roll

Disposable splinter removers x 5

Chux x 2

Biohazard bags 250 x 300mm x 2

22.3. FIRST AID KITS FOR FIELD TRIPS:

Names of first aiders in the area participating in the field trip
Communication procedures for contacting first aiders
Emergency Services telephone number
Basic first aid notes
Survival handbook
Whistle
Torch and batteries
Pen and note pad
First aid report forms x 1 pad

Resuscitation masks x 2
Disposable gloves x 30 pairs
Band aids x 200
Sterile eye pads x 8
Eye protection shields (disposable) x 2 sets
Unmedicated sterile wound dressing (large) x 4
Unmedicated sterile wound dressing (medium) x 8
Unmedicated sterile wound dressing (small) x 4
Triangular bandages (fabric) x 4
Heavy elastic bandage x 12.5cm x 3
Crepe bandages 10cm x 4
Crepe bandage 7.5cm x 4
Gauze bandage 5cm x 2
Combine dressings 9x10cmx4
Gauze squares x 4 packets
Normal saline ampoules 20ml x 5
Normal saline ampoules 50ml x 5
2 litres of fresh water if no onsite access to fresh water
Ice pack (chemical) x 2
Space blankets x 2
Stainless steel scissors x 1 pair
Plastic kidney dish x 1
Shears (round nose) x 1 pair
Safety pins x 1 pkt
Hypo-allergic tape 1,25cm x 2 rolls
Zinc oxide tape 7.5cm x 2 rolls
Chux x 2
Biohazard bags 250x 300mm x 2
Disposable towels x 1 pkt
Disposable splinter removers x 10
Plastic drinking vessel x 1
Burnaid burn dressing 10cmx10cm x 2 pkts (only to be used by a first aider with the appropriate training)
Cervical collar x 1 (only to be used by a first aider with the appropriate training)

First aider clean up

First aider should draw water and wash over dry land (not in a water course)

- Nail brush x 1
- Antiseptic soap x 1
- Antiseptic hand wipes x 1 pack

22.4. FIRST AID KIT FOR FIELD TRIP (PORTABLE)

(Contents may vary according to the requirements of the trip)

NB The contents of this kit assumes that field workers are carrying a means of communication with base camp at all times.

Emergency Services telephone no
Basic first aid leaflet
First aid report forms x 6
Hazard and Incident Report Form x 6

Resuscitation mask
Disposable gloves x 2- medium to large
Band aids x 20
Unmedicated sterile wound dressing (large) x 2
Triangular bandages fabric x 2
Heavy duty crepe bandages 7.5cm x 2
Small sissors x 1
Roll of strapping tape x 1
Saline amps x 50ml x 2
Space blanket x 1
Splinter removers (Disposable) x 5
Safety pins x 10
Biohazard bag 250x 300mm x 1
Antiseptic hand wipes x 1 small pack

22.5. VEHICLE FIRST AID KITS

Emergency Services telephone no
Basic first aid notes
First aid report forms x 1 pad
Hazard and Incident Report Form x 5

Resuscitation mask
Disposable gloves x 8
Band aids x 50
Sterile eye pads x 2
Unmedicated sterile wound dressing (large) x 2
Unmedicated sterile wound dressing (medium) x 2
Unmedicated sterile wound dressing (small) x 2
Triangular bandages fabric x 2
Crepe bandages 10cm x 2
Gauze bandages 7.5cm x 2
Gauze pads x 1 pkt
Saline amps x 50ml x 4
Space blanket x 1
Shears round nose x 1
Safety pins x 1 pkt
Hypo allergic tape 1.25cm x 1
Biohazard bag 250x 300mm x 1
Bottle of distilled water 500ml
Antiseptic hand wipes x 1 pack

23. ADDITIONAL MODULES FOR FIRST AID KITS

23.1. CONTAINERS FOR MODULES

The modules should be kept in containers which clearly identify their contents and purpose.

23.2. BURNS MODULE

Contents

Guidance notes

Burns dressings of assorted sizes

Size of the dressings should be determined having regard to the nature of the hazard in the workplace. Assistance with this can be obtained from first aid professionals or first aid suppliers.

23.3. EYE MODULE

Contents

Guidance notes

Eye wash (once only use container)

Sterile eye pads

Adhesive tape

23.4. ASTHMA MODULE

23.4.1. The first aid kit containing the module must be marked as follows:

'This kit contains an asthma module that must only be administered by first aiders who have completed an asthma management course'.

23.4.2. Contents

Blue reliever inhaler (usually ventolin);

Spacer to match the inhaler;

'Mediswabs';

Emergency protocol (including cleaning instructions);

First aid report forms.

23.5. CYANIDE MODULE

23.5.1. Contents

Copy of appropriate MSDS

Gloves x 4 pairs

A copy of National Occupational Health and Safety Commission: *Cyanide poisoning*, (2nd edition) 1993

Plastic bags labelled "Contaminated with cyanide"

First aid injury report forms

Hazard & incident report forms

Resuscitation masks (e.g. Laedel or Ambu)

OHS Information Sheet 25 First Aid for Cyanide Poisoning

23.6. HYDROFLUORIC ACID (HF) MODULE

23.6.1. Contents

Copy of appropriate MSDS

Calcium gluconate gel - 2.5% 50g tube x 2 tubes

Swabs x 1 packet

Gloves x 4 pairs

Plastic bag labelled "Contaminated with Hydrofluoric Acid"

First aid injury report forms

Hazard & incident report forms

OHS Information Sheet 24 Hydrofluoric Acid

23.7. FIRST AID KIT CONTENTS FOR WORKING WITH MACAQUES

23.7.1. Equipment

- 1. Eye wash facilities to ensure continuous fresh water stream for at least 15 minutes.
- 2. First Aid box clearly labeled "First Aid Box – following exposure to macaques or marmosets".

23.7.2. First Aid Box Contents

Clean disposable scrub brush (x2)
Basin for soaking large wounds (x1)
Sterile gauze pads (different sizes) for soaking and dressing of wounds (x8)
Bottle of betadine or chlorhexidine (x2)
Melolin 4 pads (various sizes)
Micropore tape roll (x1)
Bandages (x2)
Eye-wash bottle (Eyestream) (x2)
Surgical gloves (8 pairs)

23.7.3. Procedures To Be Kept Inside First Aid Box

Laminated first aid procedures (1 copy)
Information sheet for medical practitioner (2 copies)

23.7.4. Specimen Collection And Culture Materials (Animal House)

Sterile cotton or dacron swabs (without metal shafts)
Screw-top vials (3-5 ml) containing 1-2 ml of virus transport medium

23.8. PHENOL MODULE

23.8.1. Contents

Copy of the appropriate MSDS for phenol
Polyethylene glycol 300 or 400 (PEG) 500gm x 2
Swabs x 1 packet
[Chemical resistant gloves](#) x 4 pairs
Plastic bag labelled "Contaminated with Phenol"
First Aid Injury Report forms
Hazard & incident report forms
OHS Information Sheet 36: Phenol