

## Contents

1. OBJECTIVE.....	2
2. BACKGROUND .....	2
3. SCOPE.....	2
4. WHAT MUST GO RIGHT? .....	2
5. PROCEDURE/IMPLEMENTATION .....	2
5.1. Identifying First Aid Requirements .....	2
5.1.1. <i>Option 1.</i> .....	2
5.1.2. <i>Option 2.</i> .....	3
5.2. Risk Assessment .....	3
5.3. First Aid Personnel .....	4
5.3.1. <i>Low-risk workplace</i> .....	4
5.3.2. <i>Higher-risk workplace</i> .....	4
5.4. First Aid Equipment and Facilities .....	5
5.4.1. <i>First Aid Kits:</i> .....	5
5.4.2. <i>Automated External Defibrillators (AED):</i> .....	6
5.4.3. <i>Eye Wash Equipment:</i> .....	6
5.4.4. <i>First Aid Rooms:</i> .....	6
5.5. Signage.....	7
5.6. First Aid Treatment and Management .....	7
5.7. Allergies and Food Sensitivities .....	7
5.8. Monitoring and Evaluation .....	7
5.9. Information, Instruction and Training .....	8
5.10. Records .....	8
6. Responsibilities.....	8
6.1. Leaders.....	8
6.2. First Aiders .....	8
6.3. Staff, students and contractors.....	9
6.4. HSW Team .....	9
7. Definitions .....	9
8. Supporting Documents.....	10

## 1. OBJECTIVE

To ensure first aid requirements and related risks at RMIT University, are identified and managed in accordance with the **Occupational Health and Safety Act 2004, Victoria** and related **Code of Practice – First Aid in the Workplace including:**

- First aid training; and
- First aid kits / equipment and access to facilities.

This procedure has been established in accordance with RMIT's risk management methodology and describes the requirements for identification, assessment, implementation and maintenance of first aid requirements to ensure preparedness for the effective management of first aid incidents.

## 2. BACKGROUND

N/A

## 3. SCOPE

This process applies to all RMIT Staff, Students and Contractors.

## 4. WHAT MUST GO RIGHT?

The expected outcomes – known as 'what must go right' – will be that:

- Leaders have considered all risks associated with their work and learning environment in consultation with staff, students and contractors and have ensured appropriate first aid measures are in place to address risk.
- All leaders, staff, students and contractors are aware of the location of first aid equipment and facilities and who the trained first aiders are in their area of control.

## 5. PROCEDURE/IMPLEMENTATION

### 5.1. Identifying First Aid Requirements

Leaders are to identify first aid requirements within their area of control in consultation with staff, students, contractors, the HSR and the Senior Adviser, Health and Safety (as required).

Consideration and assessment of the work and learning environment should be given / conducted to determine the necessary first aid requirements; specific determination should be made as to whether the work and learning environment is:

- A Low-risk Workplace; or
- A Higher-risk Workplace.

To meet the first aid requirements addressed in the compliance code, employers may follow either of the following two approaches:

#### 5.1.1. *Option 1.*

This option provides detailed guidance on how to comply with the Occupational Health and Safety Act 2004 (the OHS Act), including:

- The number of first aid officers to be provided as well as their duties and training
- The number of first aid kits to be provided and their contents
- The number of first aid rooms to be provided and their requirements.

### 5.1.2. Option 2.

This option follows the Risk Assessment approach and should be used for High-risk Workplaces. First aid risk assessments must be completed for both on-campus and off-campus activities undertaken by each program.

First aid risk assessments must be reviewed every three years and more frequently when:

- The size and/or layout of the area has changes;
- The number and distribution of staff and/or students (or others) changes significantly;
- There are changes in working hours, shifts, overtime;
- The nature of the hazards and the severity of the risks change;
- If requested to do so by a Health and Safety Representative (HSR)

First aid related hazards and risks may be identified through the following means:

- Consultation with staff, students, contractors and the HSR;
- Workplace observations, inspections and audits;
- Hazard and incident reporting;
- Pre-planning for new work activities, locations or equipment;
- Review of incident, injury, hazard and claims data;

Arrangements must be established to ensure that first aid management requirements are adequately met in accordance with the level of risk and legislation to provide for the health, safety and wellbeing of staff and others.

These arrangements may include but are not limited to:

- Nominating designated first aid personnel;
- Access to external first aid / medical providers; and
- Central designated first aider accessible / in close proximity to the particular work and learning environment.

## 5.2. Risk Assessment

If required, leaders are to conduct a risk assessment for first aid related hazards, risks and management needs in their area of control. Refer to First Aid Risk Assessment guidance material.

All risk assessments are to be conducted in consultation with staff, students, ongoing long term contractors and the HSR and must be documented using the First Aid Risk Assessment Template. All risk assessment documentation must be retained within the work area.

The risk management approach involves the following four steps:

- Identifying the hazards that could result in work-related injury or illness;
- Assessing the type, severity and likelihood of injuries and illness;
- Providing the appropriate first aid equipment, facilities and training; and
- Reviewing first aid requirements on a regular basis or where circumstances change.

Certain work and learning environments have greater risks of injury or illness due to the nature of work and the nature of hazards at the workplace.

Consideration may be given to the following hazards and potential harm scenarios:

- **Manual Handling Tasks** - Overexertion / repetitive movement can cause muscular strain.
- **Slips Trips and Falls** - Slips, trips and falls can cause fractures, bruises, laceration, dislocations, and concussion.
- **Electricity** - Contact with electrical current can cause shock, burns, loss of consciousness and cardiac arrest.
- **Machinery and Equipment** - Being hit by moving vehicles, or being caught by moving parts of machinery can cause fractures, amputation, bruises, lacerations, eye trauma and dislocations.
- **Hazardous Substances** - Toxic or corrosive chemicals may be inhaled, contact skin or eyes causing dizziness, vomiting, skin allergies, respiratory problems, poisoning, chemical burns or irritation.
- **Occupational Violence** - Behaviours including intimidation and physical assault can cause nausea, shock and physical injuries.
- **Biological** - Allergens, exposure to infectious agents and sharps injuries can cause severe allergic reaction, skin rash/irritation, lacerations and infection.
- **Extreme Temperatures** - Hot surfaces and materials can cause burns. Exposure to heat can cause heat stress and fatigue. Exposure to extreme cold can cause hypothermia and frost bite.
- **Radiation** - Welding arc flashes, ionizing radiation and lasers can cause burns.
- **Animals** - Bites, stings, kicks, scratches

*Other considerations should take into account:*

- Size and layout of the work and learning environment
- Distance between work areas
- Response time of emergency services
- Number and composition of staff, students, contractors and others in the work and learning environment
- Particular needs of staff, students and contractors who have a disability or a known health concern
- Members of the public who may be attending events at the work and learning environment

### 5.3. First Aid Personnel

Leaders are responsible for determining the first aid needs of their area of control based on their first aid risk assessment and in consultation with staff, students, ongoing long term contractors and the HSR.

#### 5.3.1. Low-risk workplace

If the risk assessment identifies that the work and learning environment is considered low-risk, compliance is achieved by providing:

- One first aider for 10 to 50 employees
- Two first aiders for 51 to 100 employees
- Thereafter, an additional first aider is required for every additional 100 employees

#### 5.3.2. Higher-risk workplace

If the risk assessment identifies that the work and learning environment is considered a higher-risk, compliance is achieved by providing:

- One first aider for up to 25 employees
- Two first aiders for 26 to 50 employees
- An additional first aider for every additional 50 employees

First aiders must be staff of RMIT and should be appointed taking into account the following attributes:

- A genuine interest in first aid;
- Voluntarily appointed to the role;
- Able to be called away from their ordinary work at short notice;
- Free to carry out the role as necessary;
- Spend the majority of their time in their specific work area;
- Able to be released to undertake training in order to maintain skill levels;
- Relate well to other staff;
- Have the capacity to deal with injury and illness; and
- Should be prepared to be immunised against Hepatitis B (paid for by the work and learning environment).

First aiders are to be communicated to all staff, students and contractors and their contact details are to be provided and maintained on Health and Safety notice boards and through the RMIT website. Refer to Register of First Aiders.

## 5.4. First Aid Equipment and Facilities

Leaders must ensure staff are informed of all first aid equipment, facilities and management requirements for their areas of control. This will usually be conducted through their induction and on-boarding process.

### 5.4.1. First Aid Kits:

All staff, students and contractors must be able to access a first aid kit. An appropriate number of first aid kits must be maintained in each work and learning environment as determined by the first aid risk assessment.

First aid kits must be easily accessible and sign posted.

The first aid kit should provide basic equipment for administering first aid for injuries including but not limited to:

- Cuts, scratches, punctures, grazes and splinters;
- Muscular sprains and strains;
- Minor burns;
- Major bleeding wounds;
- Broken bones;
- Eye injuries; and
- Shock.

For details on first aid contents and how to order please refer to First Aid Risk Assessment guidance material. The first aid risk assessment will determine any additional items required in addition to the basic kit contents. Purchase of any additional items can only be approved by the Leader of the area after sighting the first aid risk assessment for the area.

The First Aider must ensure that the contents of all first aid kits are checked and restocked at a minimum of every six months or more frequent intervals as determined by the First Aider. Contents can be purchased through Corporate Express.

For fieldwork activities there must be an assessment to determine the number and type of portable first aid kits suitable for the activities carried out.

#### *5.4.2. Automated External Defibrillators (AED):*

AEDs at RMIT are managed and maintained by Property Services.

A first aid risk assessment is to be conducted in consultation with the respective Senior Adviser, Health and Safety to determine where automatic defibrillators are required. A number of AEDs have been installed at strategic locations across RMIT. Refer to AED Register.

#### *5.4.3. Eye Wash Equipment:*

A risk assessment is to be conducted in consultation with the respective Senior Adviser, Health and Safety to determine the type of eye wash equipment required.

Eye wash equipment may be permanently fixed or portable, depending on the work or learning environment. Eye wash equipment should be provided where there is a risk of hazardous substances or infectious substances causing eye injury.

Portable, self-contained eye wash units have their own flushing fluid which needs to be refilled or replaced after use.

Where it has been identified that emergency eye wash stations are required, there shall be sufficient numbers of eye wash stations and consideration of placement so that the maximum distance of travel to reach any eye wash station is 10 meters.

#### *5.4.4. First Aid Rooms:*

A first aid room should be established at a work and learning environment if a risk assessment indicates that it would be difficult to administer appropriate first aid unless a room is provided.

The contents of the first aid room should suit the hazards that are specific to the work and learning environment however the following items should be provided:

- A first aid kit appropriate to the work and learning environment;
- An automated external defibrillator;
- A stretcher;
- Sink and wash basin with hot and cold water;
- Work bench or dressing trolley;
- Cupboards for storing medicaments, dressings and linen;
- Hazardous waste container or bio-hazard bags for soiled dressing;
- A sharps disposal system;
- Electric power points;
- A couch blankets and pillows;
- An upright chair;
- A desk and telephone;
- Signage indicating emergency telephone numbers;
- Signage indicating emergency first aid procedures;
- Resuscitation mask; and
- Face goggles

## 5.5. Signage

Where appropriate, the employer needs to provide safety signs to identify first aid facilities, including emergency services telephone numbers and details of first aid officers.

The signs should be a white cross on a green background.

Additional guidance is provided in AS 1319 Safety signs for the occupational environment.

## 5.6. First Aid Treatment and Management

First aiders should consider their own safety and the safety of others prior to providing first aid treatment to an injured or ill person. The first aider should only proceed with first aid treatment when it is safe to do so and only provide treatment within the bounds of their training.

First aiders must ensure that any treatment given is recorded on the First Aid Treatment Form. The incident must also be entered into P.R.I.M.E (if entered on-line) or onto the Incident Notification Form and forwarded to Senior Advisor, Health and Safety (if paper based).

## 5.7. Allergies and Food Sensitivities

Records should be kept and made available to first aid personnel of staff members who may have allergies, sensitivities or intolerances of any kind which may include:

- The specific substance or situation to be avoided;
- Symptoms in the event of a staff member being exposed; and
- The prescribed treatment.

## 5.8. Monitoring and Evaluation

Leaders are responsible for reviewing the effectiveness of First Aid equipment and facilities in consultation with staff, students, contractors and the HSR.

Existing measures in place must be reviewed and, if necessary, revised:

- If changes to the workplace are made or new or additional information becomes available;
- In the event of reviewing an Incident Notification report, in particular the immediate treatment provided;
- In relation to any incident notifiable to WorkSafe;
- Where, for any reason, the measures do not adequately control risk; and
- Following a reasonable request from a member of staff, student, contractor or HSR.

Other methods and forums for periodic review and consultation include but are not limited to:

- Direct discussions with relevant staff, students, contractors or members of a designated work group;
- Staff meetings;
- Health and Safety committee meetings; and
- When conducting health and safety reviews and audits (including third party).

## 5.9. Information, Instruction and Training

First aiders should hold a nationally recognised statement of attainment issued by a Registered Training Organisation for the nationally endorsed first aid unit of competency. The level of training will be based on the level of risk of the respective area and in accordance with the Compliance Code: First Aid in the Workplace.

A basic Provide First Aid (HLTAID003) certificate is valid for three years. CPR refresher is required every twelve months. Refer to First Aid Risk Assessment for training needs.

The cost of attendance at training courses will be met by the relevant School/non-academic business unit.

First aid information and instruction must be given to staff, students and contractors as a part of their Health and Safety induction and area specific orientation.

Identified hazards will be communicated to staff, students and contractors through existing consultation forums and as a part of the control / management process.

## 5.10. Records

All records of hazard identification and risk assessment, information, instruction and training must be maintained in accordance with the Records Management Process.

## 6. Responsibilities

### 6.1. Leaders

- Ensure first aid reviews/ assessments have been conducted in their area of control.
- Ensure appropriate numbers of trained first aiders and adequately stocked first aid kits are available and purchased where necessary.
- Ensure first aiders are trained at the level determined by the risk assessment and currency is maintained.
- Ensure first aiders are adequately supported in their activities by incorporating the role into their annual work plans, attending required training and provision of network opportunities within their area of control.
- Implement this process in their area of control.
- Review performance against this procedure on a regular basis.

### 6.2. First Aiders

- Hold a current First Aid Qualification to fulfil the duties of their role.
- Respond promptly to provide an emergency service to an injured or ill staff member, student, contractor or other.
- Arrange prompt and appropriate referral as required.
- Ensure that any treatment given is recorded on the First Aid Treatment Form.
- Keep confidential all information received in the course of duty (medical information must only be released to relevant medical staff).
- Encourage staff to report incidents via the on-line reporting software (P.R.I.M.E) or via the paper based Incident Notification form (if P.R.I.M.E is unavailable)
- Attend training as required.
- The First Aider must ensure that the contents of all first aid kits are checked and restocked at a minimum of every six months or more frequent intervals.



### 6.3. Staff, students and contractors

- Assist in first aid risk assessments where required.
- Follow this process and all reasonable instructions relating to HSW and first aid in the work and learning environment.

### 6.4. HSW Team

- Facilitate first aid risk assessments where required.
- Regularly review this process in consultation with relevant staff.
- Develop and report on KPIs relevant to this process.
- Monitor compliance with this process and report on outcomes.

## 7. Definitions

Defines any key terms and acronyms relating to the process where they apply.

<b>Term / acronym</b>	<b>Definition</b>
First aid in the workplace	The provision of emergency treatment and life support for people suffering injury or illness at work.
First aider	A member of RMIT staff who volunteers to provide emergency treatment and life support in accordance with the level of first training undertaken.
First aid facilities	Includes first aid kit content, first aid rooms and associated first aid equipment such as AED's
Low-risk workplace	<p>Low-risk workplaces are those where:</p> <ul style="list-style-type: none"> <li>• Employees are not exposed to hazards that could result in serious injury or illness that would require immediate medical treatment such as those associated with plant, hazardous substances, dangerous goods, confined spaces and hazardous manual handling</li> <li>• The business is located where medical assistance or ambulance services are readily available to the community and to the workplace where the business operates.</li> </ul> <p>Low-risk workplaces include offices, libraries and most retail operations.</p>
Higher-risk workplace	<p>Higher-risk workplaces are those where employees may be exposed to hazards that could result in serious injury or illness that would require immediate medical treatment. Higher risk workplaces include workshops, laboratories, and any areas where hazardous machinery or materials are used.</p> <p>Examples of serious injuries requiring immediate medical treatment are:</p> <ul style="list-style-type: none"> <li>• The amputation of any part of the body</li> <li>• A serious head injury</li> <li>• A serious eye injury</li> <li>• Degloving or scalping</li> <li>• Electric shock</li> <li>• A spinal injury</li> <li>• The loss of a bodily function</li> <li>• Serious lacerations.</li> </ul>
DWG	Designated Work Group: A group of employees of the employer at one or more workplaces. The particulars of the DWG are determined by negotiation between the employer and the employees and should take into account the number of employees,

the location and the types of activities conducted in the workplace. A DWG is formed for the purpose of electing a HSR.

Executive Leaders	Heads of School, Deans, Senior Managers
HSR	Health and Safety Representative: An employee who is a member of the DWG and elected by its members to represent them in relation to health and safety matters, risks, or concerns.
HSW	Health, Safety and Wellbeing
Operational Leaders	Line Managers, supervisors

## 8. Supporting Documents

Lists the supporting and related Processes and Guidance Material, Legislative references, Australian and International Standards etc. that may be useful references for process users

- RMIT - Health Safety & Wellbeing Policy
- HR - HSW-EL03 - Operational Risk Management
- HR - HSW-PR09 - HSW Risk Management
- HR - HSW-PR07 - Consultation & Communication
- HR - HSW-PR04 - HSW Records Management
- First Aid Risk Assessment Template
- HR - HSW-PR10 - Incident Management & Investigation
- Compliance Code - First Aid in the Workplace (WorkSafe Victoria)