Procedure: Provision of first aid services

Purpose

This procedure specifies minimum requirements and responsibilities for providing first aid services at ANU.

Definitions

**Emergency Procedures** are basic plans, established in advance, stating what action to take in the event of an emergency. They minimise the consequences of an incident, such as injuries, damage to property or the environment.

**First Aid** is the provision of emergency treatment and life support for people suffering injury or illness. The main aims of first aid are to preserve life, promote recovery and to prevent the injury and illness from becoming worse.

**First Aid Officer** is a suitably qualified person nominated by the manager/supervisor to administer first aid in the workplace. All first aid officers must hold a current certificate of competency in first aid or be a registered health professional such as a medical practitioner or nurse.

**Senior First Aid Officer** are persons who have successfully completed the “Apply First Aid” course.

**Advanced First Aid Officer** are persons who have successfully completed the “Apply Advanced First Aid” as well as a module on “Resuscitation”.

**Remote First Aid Officer** are persons who have successfully completed the “Remote First Aid” course. “Remote First Aid” training is in addition to “Senior First Aid”.

**Occupational First Aid Officer** are persons who have successfully completed the “Manage First Aid in the Workplace” course.

Procedure

1. This procedure applies to the provision of first aid for all staff, students and visitors within the University and off site campuses. It includes information on first aid kits, procedures, facilities and training of first aid officers.

Responsibilities
Deans/Directors or nominated representative

2. All Deans and Directors must ensure that staff and other persons are not exposed to unacceptable health and safety risks. Specific obligations for this procedure include:

- Ensuring that all staff members have access to first aid facilities and appropriate first aid equipment.
- Ensuring that there is an adequate number of trained first aid officers. The First Aid in the Workplace Code of Practice 2012 recommends that for: low risk workplaces: at least one first aid officer for every 50 staff (eg. working in an office). High risk workplace: at least one first aid officer for every 25 staff (eg. working with chemicals in a laboratory).
- Ensuring that this First Aid Procedure is implemented within their school.

Facilities/Operations Manager or nominated representative

3. Facilities/Operations managers or equivalent must ensure compliance with the University’s First Aid Procedure. They have to:

- Conduct an annual first aid risk assessment to determine the facility’s first aid requirements in conjunction with the first aid officers in that area.
- See Code of Practice: First Aid in the Workplace
- Ensure appropriate resources are allocated to eliminate or minimise risks to health and safety.
- Ensure appropriate processes are carried out to eliminate or minimise risks to health and safety.
- Allocate the checking and maintenance of first aid items among the first aid officers in their area.
- Allocate the checking and maintenance of Automatic External Defibrillators (AED) among the first aid officers in their area.

First Aid Officers

4. Nominated first aid officers must have at least a current Senior First Aid Certificate with skills as well as complex lifesaving techniques such as expired air resuscitation (EAR), cardio–pulmonary resuscitation (CPR) and safe operation of AEDs. The first aid officer classifications/categories and their respective responsibilities within the University are as follows:
Senior First Aid Officer

5. Senior first aid officers have the essential skills required to administer first aid to a victim of illness or injury until the arrival of professional medical help.

Advanced First Aid Officer

6. Advanced first aid officers are able to provide advanced first aid response and life support, and are responsible for the management of casualty(s), incidents, and other first aid officers until the arrival of medical assistance.

Remote Area First Aid Officer

7. Remote area first aid officers have the skills and knowledge to provide first aid to a casualty(s) in a remote and/or isolated situation.

Occupational First Aid Officer

8. Occupational first aid officers are able to provide advanced first aid response, life support, management of casualty(s), incidents, and other first aid officers, until the arrival of medical or other assistance. Occupational first aid officers are also responsible for:
   - maintaining first aid rooms in the workplace
   - maintaining the AED in the workplace
   - ensuring that the locations of all the first aid kits in the area are reflected in the emergency floor plans and updated annually
   - providing notices of the location of first aid kits on each floor of the building.

9. First aid officers in the local area must assist the facilities/operations manager with the first aid risk assessments.
   - First aid officers must be familiar with the specific hazards and conditions of their workplace.
   - First aid officers must keep a first aid treatment log book.
   - Upon treatment of an injury, first aid officers may also report the incident via the University’s on-line Incident Notification Form in lieu of the injured person and his/her supervisor by following the University’s incident reporting procedure.
   - Provide a copy of their treatment of the injured person to the Work Environment Group when requested.
WHS Committees

10. It is the responsibility of the local WHS Committees to:
   - Monitor and review local risk analysis for first aid requirements and first aid implementation.
   - Recommend actions needed to comply with the University’s first aid procedure.
   - Consult with the WHS Branch for further advice regarding this procedure.

Work Environment Group

11. The Work Environment Group is responsible for:
   - adding first aid officers trained at ANU to the Human Resources Management System (HRMS) database
   - provide advice as required to local WHS committees.

First Aid Officers

12. It is recommended that there be a minimum of two (2) first aid officers per area. This ensures that all colleges/schools/areas have adequate first aid coverage during normal hours of operation.

13. Upon presentation of a current first aid certificate, the University will provide an allowance to authorised first aid officers in their local area. To claim the allowance, a completed first aid allowance form must be provided to Human Resources.

First Aid Equipment

First Aid Kits

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

15. The number of first aid kits required in an area/building is determined by the first aid risk assessment. The risk assessment must look at the following factors:
   - The number of levels in a building/structure.
   - Ease of access to all areas within a building/structure.
   - The number of staff housed within the building/structure.
   - The number of first aid officers housed within the building/structure.
   - The nature of hazards within the building/structure (low/high risk hazards
and tasks)

- Special locations (vehicle, remote sheds etc.).
- Special requirements (Hydrofluoric acid, Cyanide, etc.).

16. First aid kits should be:

- Kept in a prominent, accessible location and be able to be retrieved promptly.
- Located close to areas where there is a higher risk of injury or illness.
- Near laboratories or workshops and accessible to staff in that area.
- Located on every permanently occupied floor of a multistorey building.

17. Induction for new staff must include locations of first aid kits.

18. The first aid kit should provide basic equipment for injuries requiring first aid including:

- cuts, scratches, grazes, splinters and puncturing
- minor burns
- eye injuries
- broken bones
- muscular sprains and strains
- major bleeding wounds and more severe injuries

19. Contents of first aid kits must be based on a risk assessment regarding the nature of the work being conducted in the area, as well as the nature of hazards identified (low/high risk). For example, there may be a need for additional eye pads in a workplace where there is a higher risk of eye injuries.

See: Appendix A for minimum contents for a first aid kit.

20. **Warning:** Medication, including analgesics such as paracetamol and aspirin must not be included in first aid kits. Staff requiring prescribed and over-the-counter medications should carry their own medication for their personal use as necessary.

21. A nominated first aid officer shall be responsible for the first aid kit and should:

- Undertake regular checks after each use. If the kit has not been used, this check should be undertaken once every 12 months to ensure the kit contains a complete set of the required items.
• Ensure that items within the kit have not deteriorated, are within their expiry
dates, and in good working order.

• Monitor access to the kits and ensure that used items are replaced.

22. First aid kit maintenance may be conducted by an external provider.

First Aid Signs

23. First aid signs assist in easily locating first aid equipment and facilities. First
aid signs are a white cross on a green background, in accordance to Australian
Standard 1319–1994: Safety signs for the occupational environment. A number of
first aid signs must be displayed to clearly indicate the location of first aid
facilities within the building. The exact location and number should be considered
annually in the risk assessment conducted by the Facilities/Operations manager or
nominated representative and first aid officers.

See: Appendix B for examples of recommended first aid signs.

Emergency Shower and Eye Wash Stations

24. All emergency showers must meet the Australian Standard, AS 4775–2007
Emergency eyewash and shower equipment. Access to shower equipment should
be provided in workplaces where there is a risk of:

• Exposure to hazardous chemicals that can result in skin absorption.

• Exposure to infectious substances.

• Serious burns to a large area of the face or body. This includes risk of
chemical or electrical burns or burns that are deep, in sensitive areas or
greater than a 20 cent piece.

• Exposure to cryogenic liquid (showers should be near cryogenic liquid usage
areas).

25. Shower facilities should consist of:

• A permanently rigged hand-held shower hose or

• An appropriate deluge facility.

Emergency eyewash and shower equipment and be connected to the water supply.
Where the risk calls for an eye wash station, it should ideally be plumbed to the
potable water supply, tempered, and reachable within 10 seconds or less without
major impediments.

27. All shower and eyewash equipment must be tested and tagged according to
ANU guidelines. A tag must be attached to each unit and marked upon completion of each inspection.

Resuscitation Equipment

Automatic External Defibrillators

28. Automatic external defibrillator (AED) can reduce the risk of fatality from cardiac arrest and is a useful addition to the workplace.

- AEDs may be used by anyone following the prompts. Where a trained person is available, they should operate the AED.
- AEDs should be located in an area that is clearly visible, accessible and not exposed to extreme temperatures.
- The requirement for an AED should be considered in the first aid risk assessment.
- The occupational first aider, or assigned person, must ensure the AED location signs and units are maintained according to the manufacturer’s specifications. This includes maintenance of the pads and the checking and/or replacing of batteries.

See: Location map for all AEDs on campus

Also see: List of all AEDs on campus

Oxygen Resuscitation Equipment

29. Oxygen resuscitation equipment must be situated in first aid rooms or with the AED. In the event of an emergency, the equipment should be operated by a first aid officer trained in resuscitation techniques.

First Aid Facilities

30. A first aid room is recommended for:

- Low risk workplaces with 200 staff or more (eg. offices).
- High risk workplaces with 100 staff or more (eg. laboratories and workshops).

31. All new buildings that will house 100 or more staff must have first aid rooms.

32. A first aid room should:

- Have hand washing facilities with hot and cold water (or easy access where this is not provided in the room).
• Offer privacy via a screen or a door.
• Be well-lit and ventilated.
• Be easily accessible to emergency services (minimum door width of 1 metre for stretcher access).
• Have an entrance that is clearly marked with first aid signage.
• Be well maintained under the cleaning contract or arrangements

33. The following items should be provided in a first aid room:
• A first aid kit appropriate for the workplace.
• Hygienic hand cleanser and disposable paper towels.
• An examination couch with waterproof surface and disposable sheets.
• An examination lamp with magnifier.
• A cupboard for storage.
• A chair and a table or desk.
• A telephone and/or emergency call system.
• A container with disposable lining for soiled waste.
• A container for the safe disposal of sharps.
• A bowl or bucket with a minimum capacity of 2 litres.
• The names and contact details of first aid officers and emergency organisations.

**ANU Health Service**

34. The University Health Service is a fully accredited primary health care facility. It provides comprehensive health services to current students and staff of the University. Staff of ANU Health Service provide a wide range of services but may not be able to provide immediate first aid/medical/emergency treatment.

**Emergency Procedures**

35. The University has developed general emergency procedures that guide management, staff, students and visitors on the appropriated action to take in the event of an emergency occurring on campus.

36. During an emergency evacuation, first aid officers should carry with them at least one first aid kit, and if available, the oxygen resuscitation equipment and AED (if located in their area) to the assembly point.
37. During an emergency evacuation, first aid officers can be identified by their green helmets with a white cross.

Vaccinations

38. The University has an immunisation procedure that seeks to minimise the risk to staff, students and visitors in relation to contracting serious infections. Please consult this procedure to determine immediate requirements for first aid officers.

Record Keeping

Providing First Aid Information

39. All colleges/schools/areas must provide easy to understand first aid information that can be readily accessed. The information must be:

- Displayed on the Health and Safety noticeboards
- Displayed on the intranet website of the respective college/school
- Included in the emergency plans.

40. The first aid information should include:

- The location of first aid equipment and facilities.
- The names and location of trained first aid officers.
- Specific first aid procedures to be followed for hazards that are specific to the area.

41. All first aid information and instruction must be included as part of staff induction training. Information must be reviewed and updated at least annually.

Records of Injury and Treatment

42. First aid officers must keep a record of all treatment they provide and any first aid equipment dispensed. In the case of an incident, a copy of this information must be handed to the attending health care professional.

43. Information to be recorded by the first aid officer must include:

- The name and contact number of the casualty
- Details about the nature of the injury
- Details about the time and date of the incident
- Details of treatment given
- Name of person administering treatment.
44. When recording first aid information, the following must be noted:
   - Each first aid officer should have their own record book. However shared books are permitted, if protected, for privacy reasons
   - Use black or blue pen only
   - Any corrections should be crossed out with a single line and initialled
   - Do not use correction fluid to correct mistakes
   - Sign and date the record
   - The treatment book should have non-removable pages
   - Examples of log books include:
     - Any hardbound notebook
     - Zions ‘Register of Injuries & First Aid Treatment Log Book’ -- recommended.

45. Records must be confidential. Access is restricted to authorised personnel only (eg first aid officer, health care professional providing follow-up treatment).

46. A copy of the first aid treatment given to injured staff must be sent to Work Environment Group upon request.

Incident Notification

47. The reporting of incidents, accidents, significant exposures, dangerous occurrences and hazards assists the University community in avoiding repeated incidents. All incidents and hazards must be reported via the University's on-line Incident Notification Form in accordance to the University’s procedure for death, injury, exposures and dangerous incident reporting.

References

- Work Health and Safety Act (2011)
- Work Health and Safety Regulations (2011)
- First Aid in the Workplace Code of Practice (2012)
- AS 4775–2007: Emergency eyewash and shower equipment
- AS 1319–1994: Safety signs for the occupational environment

Appendix A– Minimum contents for an ANU First Aid kit

<table>
<thead>
<tr>
<th>Consumables</th>
<th>Minimum Quantity</th>
</tr>
</thead>
</table>

Procedure: Provision of first aid services
<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adhesive non-stretch, hypo-allergenic dressing tape (2.5 cm x 5 m)</td>
<td>1</td>
</tr>
<tr>
<td>Adhesive plastic, cloth or hypoallergenic dressing strips, sterile (packet of 50)</td>
<td>1</td>
</tr>
<tr>
<td>Antiseptic liquid/spray (50 mL)</td>
<td>1</td>
</tr>
<tr>
<td>Body Fluid Spill kit (at least 1 per floor)</td>
<td>1</td>
</tr>
<tr>
<td>Infectious Waste absorbent</td>
<td>1</td>
</tr>
<tr>
<td>Disposable scoop and scraper</td>
<td>1</td>
</tr>
<tr>
<td>Disposable apron</td>
<td>1</td>
</tr>
<tr>
<td>Clinical Waste disposable bag x 2</td>
<td>1</td>
</tr>
<tr>
<td>Hygienic skin wipe x 2</td>
<td>1</td>
</tr>
<tr>
<td>Procedure for safe clean up (disposable gloves, surgical masks etc may also be included)</td>
<td>1</td>
</tr>
<tr>
<td>BPC wound dressings:</td>
<td>1 each</td>
</tr>
<tr>
<td>No 14 (medium)</td>
<td></td>
</tr>
<tr>
<td>No 15 (large)</td>
<td></td>
</tr>
<tr>
<td>Burnaid gel sachets (3.5 g)</td>
<td>5</td>
</tr>
<tr>
<td>Conforming cotton bandages:</td>
<td>3 each</td>
</tr>
<tr>
<td>5 cm</td>
<td></td>
</tr>
<tr>
<td>7.5 cm</td>
<td></td>
</tr>
<tr>
<td>Crepe bandage (10 cm)</td>
<td>1</td>
</tr>
<tr>
<td>Dressing – Combine pad 9 x 20 cm</td>
<td>1</td>
</tr>
<tr>
<td>Dressing with burn gel (10 x 10 cm)</td>
<td>1</td>
</tr>
<tr>
<td>Eye pads, sterile (single use)</td>
<td>4</td>
</tr>
<tr>
<td>Item</td>
<td>Quantity</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>Gauze swabs, 7.5 cm x 7.5 cm, sterile, (3 per pack)</td>
<td>5</td>
</tr>
<tr>
<td>Non-adherent wound dressings, sterile</td>
<td></td>
</tr>
<tr>
<td>5 cm x 5 cm (small)</td>
<td>6</td>
</tr>
<tr>
<td>7.5 cm x 10 cm (medium)</td>
<td>3</td>
</tr>
<tr>
<td>10 cm x 10 cm (large)</td>
<td>1</td>
</tr>
<tr>
<td>Plastic bags (amputated bag set in envelope):</td>
<td>1 each</td>
</tr>
<tr>
<td>Large (255 mm x 300 mm)</td>
<td></td>
</tr>
<tr>
<td>Medium (100 mm x 180 mm)</td>
<td></td>
</tr>
<tr>
<td>Small (75 mm x 100 mm)</td>
<td></td>
</tr>
<tr>
<td>Rescue blanket, silver space, non-flammable</td>
<td>1</td>
</tr>
<tr>
<td>Safety pins (packet of 6)</td>
<td>1</td>
</tr>
<tr>
<td>Splinter probes, single use, sterile</td>
<td>10</td>
</tr>
<tr>
<td>Saline (15 mL)</td>
<td>8</td>
</tr>
<tr>
<td>Triangular bandages, minimum 90 cm</td>
<td>2</td>
</tr>
<tr>
<td>Wound cleaning wipe (single 1% Centrimide BP)</td>
<td>10</td>
</tr>
<tr>
<td>Non-consumables</td>
<td>Quantity</td>
</tr>
<tr>
<td>Blue\Black pen</td>
<td>2</td>
</tr>
<tr>
<td>Chemical ‘Ice’ pack</td>
<td>1</td>
</tr>
<tr>
<td>CPR card or sticker</td>
<td>1</td>
</tr>
<tr>
<td>First Aid Manual</td>
<td>1</td>
</tr>
<tr>
<td>Item</td>
<td>Quantity</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>Label with Emergency services telephone numbers</td>
<td>1</td>
</tr>
<tr>
<td>List and contact details of current first aid officers</td>
<td>1</td>
</tr>
<tr>
<td>Scissors, blunt, short nosed, minimum length 12.5 cm</td>
<td>1</td>
</tr>
<tr>
<td>Sharps Container— eg. ‘Sharpsafe 0.6 lt’</td>
<td>1</td>
</tr>
<tr>
<td>Splinter forceps 125 mm</td>
<td>1</td>
</tr>
<tr>
<td>Treatment book with non-removable pages</td>
<td>1</td>
</tr>
<tr>
<td>Personal protective equipment (PPE)</td>
<td></td>
</tr>
<tr>
<td>Disposable surgical masks</td>
<td>2</td>
</tr>
<tr>
<td>Gloves, disposable nitrile examination gloves, single use</td>
<td>2 pairs each</td>
</tr>
<tr>
<td>Small</td>
<td></td>
</tr>
<tr>
<td>Medium</td>
<td></td>
</tr>
<tr>
<td>Large</td>
<td></td>
</tr>
<tr>
<td>Pocket mask with filter and one-way valve</td>
<td>1</td>
</tr>
<tr>
<td>Safety glasses\goggles</td>
<td>1</td>
</tr>
</tbody>
</table>

48. Some types of workplaces may require additional items to treat specific types of injuries or illnesses as determined by the first aid risk assessment. For example, areas that deal with hydrofluoric acid must have calcium gluconate gel in their first aid kits.
Figure 1: First aid facilities sign

Figure 2: Sign to indicate direction to first aid