

First Aid Procedure (11)





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1. PURPOSE

To define the arrangements Catholic Church Endowment Society Inc. has implemented for the provision of first aid in the workplace.

2. SCOPE

This procedure applies to all workers under the Catholic Church Endowment Society Inc. (CCES).

3. DEFINITIONS

Definitions can be found on the [Catholic Safety & Injury Management Website](#).

3.1. Information

Low Risk – A workplace where workers are less likely to be exposed to hazards that could result in serious injury or illnesses (e.g. Offices, shops & libraries). Work related injuries and illnesses requiring first aid are likely to be minor in nature.

High Risk - A workplace where workers are exposed to hazards that could result in serious injury or illness and would require first aid. Examples of workplaces that may be considered high risk are ones in which workers:

- use hazardous machinery, for example mobile plant, chainsaws, power presses and lathes
- use hazardous substances, for example chemical manufacture, laboratories, horticulture, petrol stations and food manufacturing
- are at risk of falls that could result in serious injury, for example construction and stevedoring
- carry out hazardous forms of work, for example, working in confined spaces, welding, demolition, electrical work and abrasive blasting
- are exposed to the risk of physical violence, for example working alone at night, cash handling or having customers who are frequently physically aggressive, or
- work in or around extreme heat or cold, (e.g. foundries and prolonged outdoor work in extreme temperatures.

4. RESPONSIBILITIES

Specific responsibilities for carrying out certain actions required by the CCES, have been allocated to particular position holders within the organisation. Such responsibilities are consistent with the obligations that the legislation places on officers, managers, supervisors, workers and others in the workplace.

Responsibility, authority and accountability processes have been defined in [Responsibility, Authority & Accountability Procedure \(12\)](#), and summarised in:

- [Responsibility, Authority & Accountability Matrix – Workers \(025G\)](#);
- [Responsibility, Authority & Accountability Matrix – Managers & Supervisors \(023G\)](#);
- [Responsibility, Authority & Accountability Matrix – Officers \(024G\)](#); and



- [Work Health & Safety and Injury Management Policy](#).

You are required to familiarise yourself with this procedure in order to understand the obligations that you may have in relation to its implementation and to carry out your assigned actions and responsibilities.

This Procedure is to be read in conjunction with your Organisational Policies and / or Procedures.

5. PROCEDURE

5.1. Determination of First Aid Requirements

The Manager in consultation with workers, shall determine the first aid arrangements applicable to the particular worksite by completing [First Aid Risk Assessment \(059F\)](#) or equivalent.

The workplace first aid risk assessment will consider the following;

- the nature of the work being carried out at the worksite;
- the nature of the hazards at the worksite;
- the size and location of the worksite;
- the number and composition of people at the worksite.

To determine the first aid arrangements to be implemented at the worksite, relevant to the circumstances of the worksite, a risk management approach will be adopted involving the following:

- the identification of hazards that could result in work-related injuries or illnesses;
- the assessment of the type, severity and likelihood of these injuries or illnesses;
- the provision of the required first aid equipment, facilities, and training; and
- the review of first aid arrangements on a regular basis or as circumstances change.

5.1.1. The Nature of the Work and Workplace Hazards

CCES acknowledges the diversity in CCES work environments, due to the nature of the work being carried out and the nature of the hazards at the worksite, and this affects the arrangements required for first aid. Table 1 provides a guide to assist with determining first aid requirements as well as first aid kit content.



Table 1: Guide for the determination of First Aid requirements

Hazard	Injury / Illness	First Aid Treatment Requirements
Manual Tasks	Musculoskeletal Disorders	Ice Packs Compression Bandages
Gravity	Fractures, bruising, lacerations, dislocations, concussion.	Fractures – Bandages, padded splints Lacerations – Gloves, pads, bandages
Electricity	Electric shock, burns, cardiac arrest.	Burn – Non adherent burns dressings
Mechanical and Equipment	Fractures, amputations, crush injuries, bruising, lacerations, and dislocations.	Fractures – Bandages, padded splints Lacerations – Gloves, pads, bandages
Chemicals	Poisoning, burns, irritation	Non adherent burns dressings
Radiation	Burns	Non adherent burns dressings
Extreme Temperatures	Heat: burns, heat stress, fatigue Cold: hyperthermia, frostbite	Heat – Ice packs Cold – heat packs / blankets
Biological	Infections, allergic reactions	Gloves Masks
Animals	Bites, stings, scratches, kicks, allergic reactions	Pressure immobilisation bandages Ice packs Padded splints Crepe or elasticised bandages

5.1.2. Size and Location of the Worksite

In determining the first aid requirements of a worksite, the Manager shall consider the size and location of the worksite, in relation to emergency services. This consideration shall take into account:

- the distance between different work areas;
- the response times for emergency services.

5.2. First Aid Equipment, Facilities and Training

5.2.1. First Aid Kits

Workers must be able to access a first aid kit. This will require at least one first aid kit to be provided per worksite. The first aid kit should contain basic equipment for administering first aid for injuries including:



- cuts, scratches, punctures, grazes and splinters;
- muscular sprains and strains;
- minor burns;
- amputations and / or major bleeding wounds;
- broken bones;
- eye injuries; and
- shock.

The Manager shall determine the nature and quantities of first aid consumables and other equipment kept within first aid kits at each worksite. The contents of the first aid kit should be based on the outcomes of the workplace [First Aid Risk Assessment \(059F\)](#) or equivalent and as a minimum be a Basic First Aid Kit.

Additional equipment may be needed for serious burns and remote worksites.

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

- be large enough to contain all the necessary items;
- be immediately identifiable;
- contain a list of the contents for that kit;
- be made of material that will protect the contents from dust, moisture and contamination;
- be located in a prominent and easily accessible location.

The First Aider of the worksite shall:

- monitor access to the first aid kit and ensure any items used are replaced as soon as reasonably practicable after use;
- undertake regular documented checks, (items have not deteriorated, within their expiry dates, and sterile products are sealed and have not been tampered with.) at least once every twelve (12) months to ensure the kit contains a complete set of the required items (Education – every three (3) months); [First Aid Kit Checklist \(084F\)](#) or equivalent can be used.

For larger worksites may wish to utilise a [First Aid Kit Register \(085F\)](#) or equivalent to monitor locations for stock control.

5.2.2. First Aid Signs

The Manager shall ensure that first aid equipment and facilities are signed with well-recognised, standardised first aid signs to assist workers in locating first aid equipment and facilities. Further information on the design and use of signs is available in AS / NZS 1319 – *Safety Signs for the Occupational Environment*.



5.2.3. Other First Aid Equipment

In addition to first aid kits, other first aid equipment necessary to treat the injuries or illnesses that could occur as a result of a hazard at the workplace shall be considered. This equipment may include, but not limited to, the following:

- automated external defibrillators (AEDs);
- fixed or portable eye wash and safety shower equipment.

5.2.3.1. Automated External Defibrillators

If an AED is deemed necessary for the site then the AED must be checked quarterly for the following:

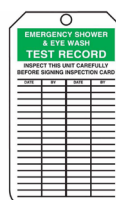
- casing of the defibrillator is in good condition and undamaged;
- carry case / cabinet is in good condition and undamaged;
- cabinet alarm is in good working order (where applicable);
- expiry dates of the adult and paediatric defibrillation pads;
- expiry date of the battery / batteries.

The check must be documented and retained.

5.2.3.2. Fixed or Portable Eye Wash & Safety Shower Equipment

Plumbed emergency showers and eyewash equipment shall be activated weekly for a period long enough to verify operation to ensure that flushing fluid is available. This weekly interval may be varied to monthly based on a documented risk assessment at the worksite. Inspections of emergency showers and eye wash stations must be recorded using [Safety Shower & Eyewash Testing Form \(060F\)](#) or equivalent.

Emergency showers and eye wash stations shall be inspected annually (annual flow test) by a competent person. An Annual Test Record Tag (example below) must be affixed and updated once testing has been completed.





5.2.4. First Aid Rooms

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

For example, workers who carry out work at workplaces where there is a higher risk of serious injury or illness (e.g. schools) occurring that would not only require immediate first aid, but also further treatment by an emergency service, may benefit from having access to a dedicated first aid room.

A first aid room is recommended for:

- low risk worksite with two hundred (200) workers or more;
- high risk worksite with one hundred (100) workers or more.

The contents of a first aid room should suit the hazards that are specific to the workplace. The location and size of the room should allow easy access and movement of injured people who may need to be supported or moved by stretcher or wheelchair.

The following items should be provided in the room:

- a first aid kit appropriate for the workplace;
- thermometer;
- 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 container with disposable lining for soiled waste;
- a container for the safe disposal of sharps;
- a bowl or bucket (minimum two (2) litres capacity);
- electric power points;
- a chair and a table or desk;
- a telephone and/or emergency call system.

A first aid room should:

- be located within easy access to a sink with hot and cold water (where this is not provided in the room) and toilet facilities;
- offer privacy via screening or a door;
- be easily accessible to emergency services (minimum door width of one (1) metre for stretcher access);
- be well lit and ventilated;
- have an appropriate floor area (fourteen (14) square metres as a guide);
- have an entrance that is clearly marked with first aid signage.



Maintaining a first aid room should be allocated to a trained occupational first aider, except where this room is part of a health centre or hospital.

5.2.5. First Aiders

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

First aiders should attend training on a regular basis. Refresher training in Cardio Pulmonary Resuscitation (CPR) should be carried out annually and first aid qualifications should be renewed every three (3) years. Additional training may be required when a change to the workplace or the activities undertaken is identified as altering the hazards and therefore, the types of potential work-related injuries or illnesses.

The following ratios of trained first aider is recommended:

- low risk workplaces – one (1) first aider for every fifty (50) workers;
- high risk workplaces – one (1) first aider for every twenty-five (25) workers; and
- remote high risk workplaces – one (1) first aider for every ten (10) workers.

The names and contact details of designated first aiders must be displayed in the first aid room and / or designated notice board.

5.3. Records

First aid treatment shall be documented on the [First Aid Treatment Record \(042F\)](#) or equivalent and remain confidential.

Document used to manage first aid as prescribed by this procedure will be produced in a format that allows tracking for verification and review and be in accordance with requirements detailed in [Document Control Procedure \(22\)](#).

5.4. Review

This procedure will be subject to a planned review by the document owner in accordance with the requirements outline in [Document Control Procedure \(22\)](#).

Other methods for reviewing and evaluating the performance of this procedure will include:

- audit activity;
- investigations;
- performance reports.

6. RELATED SYSTEM DOCUMENTS

6.1. Policies & Procedures

Document Control Procedure (23)



Hazard Management Procedure (14)

Responsibility, Authority & Accountability Procedure (12)

6.2. Forms & Tools

First Aid Kit Checklist (084F)

First Aid Kit Register (085F)

First Aid Risk Assessment (059F)

First Aid Treatment Record (042F)

Safety Shower & Eyewash Testing Form (060F)

Group Legal Register (010T)

First Aid (11) Process Flow Chart (029T)

7. REFERENCES

Legislation and other requirements related to this procedure are defined in [Group Legal Register \(010T\)](#) which can be accessed via the Catholic Safety & Injury Management Website.

7.1. Internal Resources

Responsibility, Authority & Accountability Matrix – Managers & Supervisors (023G)

Responsibility, Authority & Accountability Matrix – Officers (024G)

Responsibility, Authority & Accountability Matrix – Workers (025G)

7.2. External Resources

First aid in the workplace – Code of Practice (June 2020)

8. AUDITABLE OUTPUTS

The following examples of records will be used to verify implementation of this procedure:

- First Aid Risk Assessments
- First Aid Treatment Records
- First Aid Kit Checks
- Safety Shower & Eyewash Testing Form



9. VERSION CONTROL & CHANGE HISTORY

Version	Approved by	Approved Date	Reason for Development of Review	Next Review Date
V6	Sector Forums	March 2013	Legislation – New WHS Act	2016
April 2015 – Document consolidation across CCES sectors				
V1	Executive Manager CSHWSA	24/04/2015	Procedure consolidation	2016
V2	Executive Manager CSHWSA	11/12/2016	Review following a Licence level Audit	2019
V3	Executive Manager CSHWSA	26/06/2019	Review	2022
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