

FIRST AID PROCEDURE

SCOPE

This Procedure relates to all activities under the management and control of Monash University in Australia and applies to affected staff, students, contractors and visitors.

PROCEDURE STATEMENT

This procedure specifies the minimum requirements and responsibilities for the provision of First Aid at Monash University.

1. Abbreviations

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|-----------------|--|
| BPD | Buildings & Property Division |
| CPR | Cardiopulmonary resuscitation |
| MTLD | Monash Talent & Leadership Development |
| OH&S | Monash Occupational Health & Safety |

2. First Aid Assessment

2.1 General

- 2.1.1 Each academic/administrative unit must undertake a First Aid Assessment to determine:
- The number of First Aiders required; and
 - The number and location of First Aid kits required.
- 2.1.2 Guidelines for the completion of First Aid Assessments are provided in the [First Aid Assessment Tool](#).
- 2.1.3 First Aid Assessment forms and examples of completed forms are provided in the Tools section of this document.
- 2.1.4 The First Aid Assessment must be completed by the First Aid Coordinator, in consultation with the local Safety Officer and the Health & Safety Representative (where elected).
- 2.1.5 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 Committee meetings.
- 2.1.6 The [OHS Consultant/Advisor](#) for the area will assist with First Aid Assessments, if required.
- 2.1.7 A copy of completed First Aid Assessments must be sent to the [OHS Health Team](#).

2.1.8 First Aid Assessments must be reviewed every three years and in addition 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; or
- The nature of the hazards and the severity of the risks change.

2.2 First Aid considerations for Off-Campus Activities

First Aid requirements must be included in the OHS Risk Assessment, contextualised for the specific off-campus activity. Further details of factors that should be considered are provided in the [OHS Off-Campus Activities and Travel Procedure](#).

2.2.1 Urban areas

For off-campus activities to places where emergency First Aid or medical services are available (e.g. shops, museums, factories, hospitals or other universities), there is no requirement to provide a Monash University First Aider.

2.2.2 Low risk activities

- All low risk activities must include one Monash University First Aider qualified in HLTAID011 Provide First Aid.
- It may be necessary to increase the number of First Aiders depending on the outcome of the OHS Risk Assessment for the activity.
- Guidelines for minimum numbers First Aiders are provided in the [First Aid Assessment Tool](#).

2.2.3 High risk activities

- Due to the increased level of risk, the number of First Aiders must conform to the guidelines provided for off-campus activities in rural areas in the [First Aid Assessment Tool](#).

2.2.4 Rural areas

- Off-campus activities in rural areas should include as many First Aiders as practicable and these must be qualified in HLTAID011 Provide First Aid or higher.
- Guidelines for minimum numbers of First Aiders for off-campus activities in rural areas can be found in the [First Aid Assessment Tool](#).
- It may be necessary to alter the number of First Aiders and level of qualification required (e.g. HLTAID005 Provide First Aid in Remote Situations), depending on the outcome of the OHS Risk Assessment for the activity.
- Whenever practical, First Aiders should not travel in the same vehicle.
- For additional information regarding off campus activities, refer to the [OHS Off-Campus Activities and Travel Procedure](#).

2.2.5 Remote areas

- It may be necessary to alter the number of First Aiders and level of qualification required (e.g. HLTAID005 Provide First Aid in Remote Situations), depending on the outcome of the OHS Risk Assessment for the activity.
- Guidelines for minimum numbers of First Aiders for off-campus activities in remote areas are provided in the [First Aid Assessment Tool](#).
- It is recommended that at least one person trained in Mental Health First Aid or an equivalent course attends rural/remote off-campus activities. Information about Mental Health First Aid courses is provided on the [myDevelopment website](#).
- Whenever practical, First Aiders should not travel in the same vehicle.
- For additional information regarding off-campus activities refer to the [OHS Off-Campus Activities and Travel Procedure](#).

2.2.6 International activities

- For international activities, which are based at an overseas campus of Monash University (e.g. Prato, Malaysia, Indonesia) or at other universities/organisations that provide First Aid, there is no requirement to provide a First Aider from Australia.
- For international activities in urban, rural or remote areas, the requirements outlined in Sections 2.2.1 - 2.2.5 apply.

3. First Aiders

3.1 Number of First Aiders required

- 3.1.1 The number of First Aiders is determined by undertaking a First Aid Assessment as outlined in Section 2.
- 3.1.2 Guidelines for determining the number of First Aiders are provided in the [First Aid Assessment Tool](#).

3.2 Requirements for First Aiders

3.2.1 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;
- Be readily available when required;
- Feel free to relinquish the role of First Aider if they so wish;
- 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.

3.3 Procedures for contacting First Aiders

- 3.3.1 Each academic/administrative unit must have procedures in place to ensure that First Aiders can be promptly contacted in an emergency including after-hours where applicable (i.e. Security staff, who are all First Aid trained and have access to a portable defibrillator).
- 3.3.2 These procedures can include:
 - Signage at 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 notice boards; and
 - Area's intranet/Google site.
- 3.3.3 These procedures must be current, i.e. lists and signs must be kept up-to-date.
- 3.3.4 All staff must be made aware of procedures for contacting First Aiders and any changes to them.

4. First Aid Training

4.1 First Aid qualifications

4.1.1 First Aiders will be considered appropriately qualified provided that they:

- Complete a First Aid course, minimum level qualification is HLTAID011 Provide First Aid;
- Renew their First Aid qualifications every three years;
- Renew HLTAID009 Provide Cardiopulmonary Resuscitation (CPR) qualifications at least once per year, with the exception of the year that they renew their Provide First Aid qualifications, as HLTAID009 is a component of HLTAID011. If desired, First Aiders are welcome to attend two CPR sessions per year.
- Qualification expiries and the frequency of renewal periods are based on recommendations from WorkSafe Victoria. A grace period of 2 months will be extended by Monash Talent and Leadership Development (MTLD) to the First Aider renewing their qualifications, as per its qualification renewal policy. If extenuating circumstances prevent the timely

renewal of qualifications, the Monash University First Aider can seek permission from the Health, Safety & Wellbeing Manager to continue as a First Aider while awaiting training. The course must already be booked when applying for this grace. This applies only to Monash University First Aiders who have previously been qualified and acted in this role while working at the University.

4.1.2 The cost of training courses will be met by the academic/administrative unit.

4.1.3 Staff or students with First Aid qualifications obtained outside the University can be accepted as First Aiders on verification of their training qualifications by the [OHS Health Team](#).

4.2 First Aid training

4.2.1 Monash Talent & Leadership Development (MTLD) organises First Aid training courses specifically tailored for Monash University on all campuses.

4.2.2 Information regarding the content and scheduling of OHS courses offered at Monash University is provided on the [myDevelopment website](#).

First Aid courses offered include:

- HLTAID011 Provide First Aid
- HLTAID009 Provide Cardiopulmonary Resuscitation

4.2.3 More specialised First Aid courses offered upon request include:

- HLTAID006 Provide Advanced First Aid
- HLTAID005 Provide First Aid in Remote Situations
- 22556VIC Course in the Management of Asthma Risks and Emergencies in the Workplace
- 22298VIC Course in Basic Oxygen Administration
- 22300VIC Course in First Aid Management of Anaphylaxis

4.2.4 Additional specific training modules can be requested to customise courses for specific needs of academic/administrative units.

4.2.5 MTLD issues reminder notices to First Aiders who need to refresh their training.

4.2.6 MTLD maintains a database of First Aiders who have undergone training. These records can be viewed via the Power BI OHS Dashboard.

Note: In some instances qualified medical professionals (e.g. medical practitioners, registered nurses) may be exempt from First Aid training. Such professionals should liaise with the [OHS Health Team](#) to discuss possible exemption. In addition, they must have been approved by their supervisor to act in an official capacity as a First Aider (refer also to Section 13).

5. Infection Control

5.1 Hepatitis B Immunisation

5.1.1 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.

5.1.2 Further information is available in the [Immunisation Procedure](#) and the [OHS Information Sheet: Hepatitis B immunisation for First Aiders](#).

5.2 Standard Precautions

5.2.1 First Aiders must use good hygiene and follow standard precautions, as taught during First Aid training, to minimise their exposure to human blood and body fluids.

5.2.2 It must be assumed that all human blood or body fluids are potentially infectious.

5.2.3 Small spots of blood/body fluid spills must be cleaned up as instructed in the First Aid course. For larger spills, contact the Manager, Cleaning Services at your campus or local [Biosafety Officer](#) so that appropriate cleaning can be organised.

5.2.4 Used dressings must be placed in a biohazard bag and the area's [OHS Consultant/Advisor](#) or [Biosafety Officer](#) contacted regarding appropriate disposal.

5.3 Disposal of needles and syringes

- 5.3.1 It is not the First Aiders duty to dispose of needles and/or syringes found on campus. If these are found, the area must be secured and [Security](#) contacted so that appropriate disposal can be organised.

5.4 Infection control and emergency resuscitation

- 5.4.1 There is no reason to deny anyone resuscitation. The decision whether to use rescue breathing (i.e. mouth-to-mouth resuscitation) is up to each First Aider. Rescue breathing should not be performed without a barrier device (e.g. resuscitation mask or shield). Compression-only CPR is an acceptable and appropriate resuscitation method for the First Aider to perform, per the Australian Resuscitation Council.
- 5.4.2 First Aiders must use either a resuscitation mask or a disposable one-way valve shield when performing rescue breathing. These are available in all First Aid kits.

6. First Aid Documentation and Reporting Procedure

6.1 First Aid Reports

- 6.1.1 First Aiders must record all treatment (however minor) on the [First Aid Report](#).
- 6.1.2 First Aid Report is available online, via the my.monash app or the [OH&S website](#).

6.2 Reporting procedure

- The casualty is treated by First Aider for injury/illness;
- First Aid Report is completed by First Aider;
- When injury/illness is related to work, the casualty should be encouraged to complete an online Hazard & Incident Report in [SARAH](#) as soon as they are well enough. For contractors and short-term visitors, the Contractor Responsible Person or Monash staff member hosting the visitor is responsible for completing the report in [SARAH](#).

7. First Aid Kits

7.1 Number of First Aid kits

- 7.1.1 The number of First Aid kits is determined by completing the First Aid Assessment (see Section 2).
- 7.1.2 Guidelines for determining the number of first aid kits are provided in the [First Aid Kit Guide](#).

7.2 First Aid kits must:

- Be accessible to staff and students at all times (i.e. not located behind a locked door or in a locked cupboard);
- Where a kit is located in a publicly accessible area and is subject to pilfering, it 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.

7.3 Contents of First Aid kits

- 7.3.1 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, small portable First Aid kits may be more appropriate (e.g. for off-campus trips, sporting activities, etc.).
- 7.3.2 First Aid kits for office areas and public buildings should include the contents listed in the applicable [First Aid Kit Contents List](#). The First Aid Assessment may determine that different first aid items or quantities are more appropriate for the needs of the work area.
- 7.3.3 For high hazard areas (e.g. laboratories, workshops, plant rooms, catering areas, etc.), the kit contents must comply with the requirements listed in the applicable [First Aid Kit Contents List](#).
- 7.3.4 For off-campus trips, the kit contents must comply with the requirements listed in the applicable [First Aid kit Contents List](#).

7.4 Medication in First Aid kits

- 7.4.1 The inclusion of medications in First Aid kits can be determined by completing a First Aid Assessment.
- 7.4.2 Additional modules are available if a First Aider has been specifically trained in their use (e.g. Ventolin, adrenaline). See Section 8.
- 7.4.3 First Aiders need to be aware that the administering of medication should only occur in certain circumstances. If it is anticipated First Aiders will need to administer medication, they need to be provided with appropriate training.
- 7.4.4 In general, administering scheduled medications needs to be managed by a registered health professional. However, in providing First Aid, it may be appropriate for a First Aider, in certain circumstances, to:
- Assist a patient with taking their medication (such as an asthma inhaler); or
 - Assist a patient to take, or administer a medicine to a patient, in line with their First Aid training or on the instruction of a registered health professional or Ambulance Victoria (for example, giving an adrenaline (epinephrine) auto-injector in anaphylaxis).
- 7.4.5 First Aiders are not expected to know staff or students' medical conditions.
- 7.4.6 Monash staff and students who require prescribed or over-the-counter medicines should carry their own medicines for their personal use as needed.
- 7.4.7 Where the University considers it necessary, 300 mg of dissolvable aspirin can be included in the First Aid kit for the treatment of chest pain, to be administered on the instruction of Ambulance Victoria or a registered health professional.
- 7.4.8 Where the University considers it necessary, mild analgesics can be included in the First Aid kit with appropriate controls on access. This can include paracetamol or similar agents that are available for unrestricted purchase. These medications should be used in accordance with the instructions on the package.
- 7.4.9 Medication should be stored according to the manufacturers' instructions, and be replaced when they reach their expiry date.
- 7.5 First Aid kits for vehicles
- 7.5.1 All vehicles used on off-campus trips (excluding those to other workplaces, e.g. factories) must travel with a First Aid kit.
- 7.5.2 For vehicles, the first aid kit contents must comply with the requirements listed in the applicable [First Aid Kit Contents List](#).
- 7.6 Maintenance of First Aid kits
- 7.6.1 The First Aid Coordinator 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.
- 7.6.2 This duty may be delegated to another First Aider or administrator, if more practical in a given area.
- 7.6.3 Records of checking of the contents of First Aid kits must be maintained by the academic/administrative unit. The date and the signature of the person checking the kit must also be recorded on a sticker affixed to the kit.
- 7.7 Recommended suppliers for First Aid kits

Brenniston
 Factory 9
 25-35 Narre Warren - Cranbourne Rd
 Narre Warren Vic 3805
sales@brenniston.com.au
 Phone: 9704 7635 or 1300 730 079

Premium Health
 PO Box 7072
 Brighton Vic 3185
larissa@premiumhealth.com.au
 Phone: 9530 7111

Livingstone First Aid & Safety
 106 – 116 Epsom Rd
 Roseberry NSW 2018
firstaid@livingstone.com.au
 Phone: 1300 727 203

St John's Ambulance
 170 Forster Rd
 Mount Waverley VIC 3149
info@stjohnvic.com.au
 Phone: 8588 8588

Medical Solution Australia P/L
 Mint Place Business Park Unit
 10/337-339 Settlement Road
 Thomastown VIC 3074
sales@medicalsolution.com.au
 Phone: 1300 136 158

8. First Aid for specific hazards and health concerns

8.1 Additional modules for First Aid kits

- 8.1.1 For certain specific hazards and health concerns (e.g. asthma, anaphylaxis, hydrofluoric acid, cyanide, burns, eye injuries and incidents involving macaques), additional kit modules will be required.
- 8.1.2 Modules must be marked as appropriate and stored (preferably in a separate compartment) within the First Aid kit.
- 8.1.3 Where the University considers it necessary, an asthma-relieving inhaler (e.g. Ventolin) and a spacer to treat asthma attacks and adrenaline (epinephrine) auto-injector (e.g. EpiPen) for the treatment of anaphylaxis. These may also be available as additional kit modules.
- 8.1.4 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.
- 8.1.5 The [OHS Health Team](#) must be consulted during the First Aid Assessment.
- 8.1.6 Additional and refresher training for the use of specific equipment and procedures is organised through [MTLD](#).
- 8.1.7 Each academic/administrative unit is responsible for ensuring that modules are well supplied and that out-of-date stock is replaced as necessary.
- 8.1.8 Records of checking of the contents of First Aid modules must be maintained by the academic/administrative unit.
- 8.1.9 The academic/administrative unit is responsible for all costs involved in purchasing the modules, module supplies and training staff in using the modules.
- 8.1.10 The recommended contents of the additional modules for First Aid kits are listed in the [First Aid kit Contents List](#).

8.2 Burns module

- 8.2.1 This module must 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.

8.3 Eye module

- 8.3.1 This module must be in a separate container within the First Aid kits in workplaces, where the wearing of eye protection is recommended, for example:
 - 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; or
 - Off-campus activities where there is dust or the possibility of flying particles.

8.4 Emergency asthma management

- 8.4.1 The asthma module must be in a separate container within the First Aid kit, in the most appropriate location(s).
 - A record of each time that the inhaler (e.g. Ventolin/salbutamol) is used must be made on the First Aid Report. The spacer (which must be single-use) should be given to the casualty to take away and must not be reused for another casualty.
 - The inhaler (e.g. Ventolin/salbutamol) is for emergency use only and must not be given to any person to keep.

8.5 Anaphylaxis module

- As a general rule, the provision of an adrenaline auto-injector (e.g. EpiPen) in a First Aid kit will apply only to off-campus trips.

- Provision of an adrenaline auto-injector in a First Aid kit must only be considered where the First Aid Assessment indicates a risk of anaphylaxis.
- In all cases, the [OHS Health Team](#) should be consulted.

8.5.1 Where it is indicated that a person has already been diagnosed to be at-risk of anaphylaxis, it is essential that they bring their own adrenaline auto-injector and their Anaphylaxis Plan on the trip.

Failure of the at-risk person to provide an Anaphylaxis Plan and in-date adrenaline auto-injector may result in exclusion from the trip.

8.5.2 The nominated First Aider (who must be trained in anaphylaxis management) must be made aware of the possibility of anaphylaxis and must review the anaphylaxis plan and check that the prescribed adrenaline auto-injector is in-date prior to the trip.

8.5.3 The nominated First Aider must keep a record of the administration of the adrenaline auto-injector on the First Aid Report. The following must also be recorded:

- Brand name of drug;
- Dose administered;
- Time of administration; and
- Name of person who assisted with the administration.

8.5.4 For further information on the management of anaphylaxis refer to the Australian Society of Clinical Immunology and Allergy at <http://www.allergy.org.au/>.

8.6 Hazard-specific modules

8.6.1 The following modules must be clearly marked in a separate container within the First Aid kit and be readily accessible to the area where the specific hazard is used. Further information on First Aid for these specific hazards can be accessed in the following documents:

- Cyanide - [OHS Information Sheet: First Aid for Cyanide Poisoning](#)
- Hydrofluoric acid (HF) - [OHS Information Sheet: Hydrofluoric Acid](#)
- Macaques - [Management of Suspected Exposure to Macacine Alphaherpesvirus 1 \(B Virus\) Procedure](#)

9. Other First Aid Equipment

9.1 Emergency showers and eyewash stations

9.1.1 When working with biologicals and chemicals in laboratories, the requirements for emergency showers and eyewash stations are defined in Australian Standards for Laboratory Design and Construction (AS/NZS 2982) and Safety in the Laboratory (AS/NZS 2243) series.

9.1.2 Emergency showers and eyewash stations shall be available at a distance of no more than 15 metres or 10 seconds travel from any position in the laboratory.

9.1.3 Where these facilities are not available, alternate arrangements must be made in consultation with the [OHS Consultant/Advisor](#) for the area.

9.1.4 Emergency showers and Eyewash stations

- Emergency showers and eyewash stations are tested and flushed annually by Buildings & Property Division (BPD) staff or by local facilities management at off-campus sites.
- In accordance with AS 4775:2007, staff in the area must establish procedures to ensure that Safety showers/Eyewash stations are tested/flushed weekly to ensure the correct flow of water and that the water is clear and free from particles.
- Testing the safety showers on a less frequent basis can be conducted, provided the area can demonstrate that correct and clean flow of water is maintained.

9.1.5 The responsibility for testing and flushing emergency showers and eyewash stations must be determined in consultation with the First Aid Coordinator, the Safety Officer, Health & Safety Representative (where elected) and local OHS committee.

9.1.6 Records of the flushing and testing of emergency showers and eyewash stations must be maintained by the academic/administrative unit.

9.2 Oxygen cylinders

9.2.1 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 specific training to administer medical oxygen.

9.2.2 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 stored and handled in correct manner; and
- The equipment is serviced on an annual basis by an authorised service agency.

9.2.3 The responsibility for the testing and servicing of the oxygen cylinders must be determined in consultation with the First Aid Coordinator, the Safety Officer and local OHS committee to ensure this is performed by a person trained in the use of this equipment.

9.2.4 Records of maintenance, testing and service of the oxygen cylinders must be maintained by the academic/administrative unit.

9.3 Defibrillators

9.3.1 General

- In certain circumstances a defibrillator may be required. A First Aid Assessment must be completed to determine whether a defibrillator is required.
- The [OHS Health Team](#) must be consulted during the First Aid Assessment.
- Training in the use of defibrillators is included in HLTAID011 Provide First Aid and HLTAID009 Provide Cardiopulmonary Resuscitation courses.
- Trained First Aiders should preferably use the defibrillator. However, if trained staff are not available immediately, an untrained person may use the defibrillator by switching it on and following the voice prompts.
- The academic/administrative unit where the defibrillator is located is responsible for all costs involved in the purchase of and maintenance of the defibrillator (e.g. pads, batteries, servicing, etc.).

9.3.2 Purchase, storage and maintenance of the defibrillator

- The defibrillator must be purchased from an approved supplier. For a list of approved suppliers, contact the [OHS Health Team](#).
- The defibrillator must be stored in an immediately accessible (during normal office hours) and signposted area. In order to minimise the risk of tampering or theft, it is recommended that the defibrillator be stored in a wall-mounted box, which activates an alarm when opened.

9.3.3 Maintenance of defibrillators

- Procedures must be established to ensure that the defibrillator(s) are inspected and maintained in accordance with the manufacturer's guidelines.
- It is the responsibility of the academic/administrative unit where the defibrillator is located to organise and pay for the pads and batteries to be replaced when necessary.
- Daily visual checks of the defibrillator are required and do not need to be documented.
- Monthly documented checks are required. The appropriate forms are available on the [OHS website](#) and the [OHS Health Team](#) can be contacted to assist.
- Records of maintenance, testing and inspection of the defibrillator(s) must be maintained by the academic/administrative unit.

- The Defibrillator Coordinator is responsible for ensuring these checks occur. They may nominate First Aiders or administrators to carry out these checks. The [OHS Health Team](#) must be notified if First Aiders are not available to carry out the checks.
- The responsibility for the testing and inspection of the defibrillator(s) must be determined in consultation with the Defibrillator Coordinator, First Aid Coordinator, Safety Officer, Health & Safety Representative (where elected) and local OHS committee.
- The [OHS Health Team](#) must be notified regarding the location of and the person(s) in charge of the defibrillator (Defibrillator Coordinator).
- The [OHS Health Team](#) must be notified regarding any changes to the location of the defibrillator or the person(s) in charge (Defibrillator Coordinator).
- Compliance with this procedure will be audited on a regular basis.

9.3.4 Requirements for defibrillator training

- Defibrillator training in the use of defibrillators is included in HLTAID011 Provide First Aid. Annual defibrillator refresher training is required and is incorporated in HLTAID009 Provide Cardiopulmonary Resuscitation.
- Use of a defibrillator must be recorded in a [First Aid Report](#) and in a Hazard & Incident Report via [SARAH](#).

10. Emergency Procedures

- 10.1 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 333 Emergency Procedures booklets or on the Emergency Procedures posters (currently being rolled out) at building exit points. For international campus locations, local emergency procedures must be followed.
- 10.2 Academic/administrative units that occupy non-University buildings (e.g. based in hospitals or satellite campuses), must follow the emergency response procedures developed by the building manager at their particular building.
- 10.3 Each academic/administrative unit must ensure that off-campus activities are supplied with a reliable, 24-hour means of communication.
- 10.4 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.
- 10.5 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, the attending First Aider will need to evaluate the risks to the injured/exposed person and the risks to others, and if it is appropriate to administer First Aid treatment as per the wishes of the casualty. It may be necessary to seek assistance from Security or Emergency Services personnel.

11. Counselling

- 11.1 Counselling is available to Monash University First Aiders who are affected by their duties.

Counselling can be provided by:

- [Campus Community Division](#) on each campus
- [Employee Assistance Program](#)
- [OHS Health Team](#)

12. Legal Liability

- 12.1 The support available to staff with an OHS function, including First Aiders, is set out in section 3 of the [OHS Roles, Responsibilities and Committees Procedure](#).

13. Responsibility for Implementation

13.1 A comprehensive list of OHS responsibilities is provided in the [OHS Roles, Responsibilities and Committees Procedure](#). The specific responsibilities with respect to First Aid are summarised below.

13.1.1 Heads of academic/administrative units

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

- First Aid roles are appointed in accordance with the [OHS Roles, Responsibilities and Committees Procedure](#);
- The First Aid Procedure is implemented; and
- A First Aid Assessment is undertaken in the areas under their control to determine first aid requirements, as outlined in Section 2.

13.1.2 Local OHS committees

It is the responsibility of local OHS committees to:

- Develop and monitor local First Aid implementation strategies;
- Recommend actions needed to comply with the First Aid Procedure;
- Consult with [OH&S](#) when specialist First Aid advice is required.

13.1.3 First Aid Coordinators

It is the responsibility of the First Aid Coordinator to:

- Notify area First Aiders of the requirement to be immunised against Hepatitis B;
- Act as focal point for communication between First Aiders in the work area and [OH&S](#);
- Complete the First Aid Assessment for their area;
- Allocate a list of specific duties to First Aiders;
- Ensure that the First Aiders list and contact numbers are current and clearly signposted on or near first aid kits 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 and equipment;
- Liaise with the local OHS committee and [OH&S](#) on First Aid matters;
- Advise staff and students of the location of First Aid facilities, and how to contact First Aiders; and
- Participate in networking and education sessions during the year.

13.1.4 First Aiders

It is the responsibility of the First Aiders to:

- Complete, or have completed, a Hepatitis B immunisation course. Seroconversion to Hepatitis B needs to be obtained. 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 5);
- 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 (e.g. to a medical clinic, GP, hospital emergency department) as required;
- Keep confidential all information received in the course of their duty (medical information must only be released to relevant medical staff);
- Record all treatment (however minor) on the [First Aid Report](#) and forward to the [OHS Health Team](#);
- Encourage staff who have had an occupational injury/illness to complete an online Hazard and Incident Report in [SARAH](#);
- Access information from an SOS bracelet or similar in order to attend to a casualty;
- Attend training as required, including annual training in HLTAID009 Provide Cardiopulmonary Resuscitation;

- Maintain First Aid facilities, including First Aid equipment, checking and restocking of First Aid kits, as delegated or if there is no First Aid Coordinator for the area; and
- Report any deficiencies in the First Aid service to their First Aid Coordinator or the [OHS Health Team](#).

13.1.5 Defibrillator Coordinators

It is the responsibility of the Defibrillator Coordinator to:

- Review the First Aid Assessment for their area, in conjunction with the First Aid Coordinator;
- Ensure that the First Aiders list and contact numbers are current and clearly signposted near the defibrillator so that they can be promptly contacted in an emergency;
- Ensure that the defibrillator is stored in an immediately accessible (during normal office hours) and signposted area;
- Notify the [OHS Health Team](#) to changes in the location of and the person(s) in charge of the defibrillator;
- Ensure that defibrillators, their supplies and equipment are maintained, including organising and arranging payment for the pads and batteries to be replaced when necessary;
- Establish local area procedures to ensure that the defibrillator is inspected and maintained in accordance with the manufacturer's guidelines. Ensure monthly documented checks are carried out. Keep records of monthly checks, maintenance, testing and inspection of the defibrillator;
- Ensure daily visual checks of the defibrillator are carried out. This does not need to be documented and can be delegated to First Aiders or administrators. The [OHS Health Team](#) must be notified if First Aiders are not available to carry out the checks;
- Advise staff and students of the location of the area's defibrillator and how to contact First Aiders;
- Communicate updates regarding defibrillators to their area's First Aid Coordinator, First Aiders and staff and students;
- Communicate to staff and students that if a First Aider is not available, an untrained person may use the defibrillator by switching it on and following the voice prompts;
- Liaise with the local OHS committee and [OH&S](#) on first aid and defibrillators; and
- Participate in networking and education sessions during the year.

14. Tools

14.1 The following Tools are associated with this procedure.

- [Hepatitis B Immunisation Questionnaire & Consent form](#)
- [First Aid Assessment Tool](#)
- [On-campus First Aid Assessment Form](#)
- [Examples of Completed First Aid Assessments](#)
- [First Aid kit Contents Lists](#)

15. Records

For OHS records document retention, please refer to [OHS Records Management Procedure](#).

DEFINITIONS

A comprehensive list of definitions is provided in the [Definitions Tool](#). Definitions specific to this procedure are as follows:

| Key word | Definition |
|----------------------|--|
| First Aider | A staff member who has: <ul style="list-style-type: none"> • A current qualification in HLTAID011 Provide First Aid; • Undertaken annual training in HLTAID009 Provide Cardiopulmonary Resuscitation; • Completed or who is completing the hepatitis B immunisation process; and • Been approved by their supervisor to act in an official capacity, administering first aid to staff, students, visitors and contractors as required. |
| High Risk Activities | These activities may be undertaken at a field location (sea, estuary, river, creek or a quarry), a hospital, a research institute, a factory or an industry location and include active participation in research or teaching activities such as laboratory or clinical work, water sampling, examination of rocks, undertaking art projects, etc. |
| Low Risk Activities | These include a visit to view a collection at an Art Gallery, a demonstration of experiments or a guided tour, but do not include active participation. |
| Remote Areas | Remote areas are greater than 300km or 3 hours travel from medical support services. |
| Rural Areas | Rural areas are greater than 80 km but less than 300 km, or one hour by road from a hospital with 24-hour accident and emergency services. |
| Urban Areas | Urban off-campus activities include excursions, study tours and site visits to places such as industry locations, hospitals and factories. |

GOVERNANCE

| | |
|-----------------------|---|
| Parent policy | OHS&W Policy |
| Supporting procedures | Monash University OHS Documents After-hours Procedure Immunisation Procedure Immunisation Grid OHS Off-campus Activities and Travel Procedure OHS Information Sheet: Hepatitis B immunisation for First Aid OHS Information Sheet: Hydrofluoric Acid OHS Information Sheet: First Aid for Cyanide poisoning OHS Training Requirements Matrix OHS Induction and Training Procedure OHS Roles, Responsibilities and Committees Procedure |
| Supporting schedules | N/A |
| Associated procedures | Australian and International Standards AS/NZS 2243.1: 2021 Safety in Laboratories - Planning and operational aspects 2243.2: 2021 Safety in Laboratories - Chemical aspects |



| | |
|----------------------------|--|
| | <p>2243.3: 2010 Safety in Laboratories - Microbiological aspects & containment facilities</p> <p>2243.4: 2018 Safety in Laboratories - Ionizing radiations</p> <p>2243.5: 2004 Safety in Laboratories - Non-ionizing radiations – Electromagnetic, sound and ultrasound</p> <p>2243.6: 2010 Safety in Laboratories - Mechanical aspects</p> <p>2243.7: 1991 Safety in Laboratories - Electrical aspects</p> <p>2243.8: 2014 Safety in Laboratories - Fume cupboards</p> <p>2243.9: 2009 Safety in Laboratories - Recirculating fume cabinets</p> <p>2243.10: 2004 Safety in Laboratories - Storage of chemicals</p> <p>AS/NZS 2982: 2010 Laboratory Design and Construction - General Requirements</p> <p>AS 3745: 2010 Emergency Control Organization and Procedures for Buildings, Structures and Workplaces</p> <p>AS 4775:2007 Emergency Eyewash and Shower Equipment</p> <p>ISO 45001:2018 Occupational Health and Safety Management Systems</p> <p>WorkSafe Guidance Documents</p> <p>Compliance Code - First Aid in the Workplace (Edition No 1 November 2021)</p> <p>Acknowledgements</p> <p>The following documents were used as references in the development of this procedure:</p> <p>Australian Resuscitation Council Policy Statements, Australasian College of Surgeons</p> <p>Australian Resuscitation Council, Guideline 10.1 Basic Life Support Training, 2013</p> <p>Parasol Active First Aid, 8th Edition, 2009</p> <p>Rural and Remote Health-definitions, Policy and Priorities, John Wakerman and John Humphreys</p> <p>Wilderness Medicine, 5th edition, Paul S Auerbach, 2007</p> |
| Related legislation | <p>Health Act 1958 (Vic)</p> <p>Health (Infectious Diseases) Regulations 2001 (Vic)</p> <p>Occupational Health and Safety Act 2004 (Vic)</p> |
| Category | Operational |
| Approval | <p>Chief Operating Officer & Senior Vice-President</p> <p>5 April 2022</p> |
| Endorsement | <p>Monash University OHS Committee</p> <p>15 March 2022</p> |
| Procedure owner | Health, Safety & Wellbeing Manager |
| Date effective | 5 April 2022 |
| Review date | 5 April 2025 |
| Version | 10.0 |
| Content enquiries | ohshelpline@monash.edu |

DOCUMENT HISTORY

| Version | Date Approved | Changes made to document |
|---------|---------------|--|
| 5.1 | June 2014 | First Aid Procedure v5.1 |
| 6 | November 2014 | <ol style="list-style-type: none"> 1. Purpose - removed reference to injuries being reported to OHS Committee. This should be covered by Hazard and Incident reports. 2. Level 2 now called HLTAID003. Level 3 deleted as not applicable. 3. Added to role of First Aid Coordinator to include attending networking/education sessions. 4. Added when referring to qualified medical personnel "in these circumstances First Aiders must still be approved by their supervisor to act in an official capacity". 5. Added Section 13.3.2. Defibrillators - Maintenance. 6. Areas will now be totally responsible for all checks and maintenance requirement (including organizing for replacement pads and batteries) of their defibrillators. Copies of check lists will no longer be sent to the OHS Health Team. 7. The OHS Health Team must be notified if there are no First Aiders available to carry out the checks. 8. Compliance with the changes to the maintenance of the defibrillators will be audited on a regular basis. 9. The OHS Health Team will be available to assist as necessary. |
| 6.1 | July 2015 | <ol style="list-style-type: none"> 1. Updated hyperlinks throughout procedure to new OHS website. |
| 7 | November 2015 | <ol style="list-style-type: none"> 1. Added definitions for "high risk" and "low risk" activities to Definitions section. 2. Updated information regarding First Aid Report forms in Section 10.1. 3. Updated Section 6.2 to clarify that a Monash First Aider is not required for urban activities to sites where first aid and/or medical assistance is available. 4. Added Section 6.5 – First Aid Assessment for international activities. |
| 7.1 | November 2016 | <ol style="list-style-type: none"> 1. Fixed formatting issues. |
| 7.2 | August 2017 | <ol style="list-style-type: none"> 1. Updated logos in header. |
| 7.3 | December 2017 | <ol style="list-style-type: none"> 1. Updated Responsibility for Implementation section to align with Roles, Responsibilities and Committees procedure 2. Removed Parosol from Section 8.6 - Recommended Suppliers for First Aid Kits. 3. Clarified requirements for having additional modules for specific hazards/health concerns. 4. Minor formatting changes and updates to Abbreviations and Definitions sections. |
| 8.0 | December 2018 | <ol style="list-style-type: none"> 1. Removed the requirement for First Aid Coordinators to be qualified First Aiders and be immunised against hepatitis B. 2. Removed Phenol First Aid module, as this is no longer a requirement. 3. Updated 'Staff Development (SDU)' to 'Monash Talent & Leadership Development (MTLD)' throughout. 4. Premium Health added as a preferred supplier. |
| 9.0 | April 2019 | <ol style="list-style-type: none"> 1. Updated Section 3 – First Aid Assessments to reflect that for off-campus activities, first aid requirements should be documented as part of the OHS Risk Assessment for the activity and a separate First Aid Assessment form is not required. |
| 9.1 | May 2019 | <ol style="list-style-type: none"> 1. Updated list of recommended suppliers for first aid kits |

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|-----|------------|--|
| 9.2 | July 2020 | <ol style="list-style-type: none"> 1. Clarified defibrillator checking and documentation requirements. 2. Updated certification logo. |
| 9.3 | July 2021 | <ol style="list-style-type: none"> 1. Updated certification logo in footer to ISO 45001 2. Updated the Standard to ISO 45001 under “Associated procedures” in the Governance table 3. Updated OHS Policy under ‘Parent Policy’ to OHS&W Policy |
| 10 | April 2022 | <ol style="list-style-type: none"> 1. Updated First Aid course codes and titles in line with current nomenclature. 2. Removed references to Level 2 and Level 3 training. 3. Added statement regarding extension of grace period for qualification renewal. 4. Added Section 4.2 Medications in First Aid Kits. in accordance with updates to the WorkSafe Compliance Code – First Aid in the Workplace November 2021. 5. Added Section 13.1.5 Defibrillator Coordinator. 6. Added additional resource document to Acknowledgements section. 7. Updated title of Procedure owner in Governance table. 8. Added definitions for remote, rural and urban areas to Definitions table. |