

Contents

1. OBJECTIVE	2
2. BACKGROUND	2
3. SCOPE	2
4. WHAT MUST GO RIGHT?	2
5. PROCEDURE / IMPLEMENTATION	2
5.1. First aid kits	2
5.1.1. Location of first aid kits	2
5.1.2. Container and contents	2
5.1.3. Examples of first aid kits	3
5.1.4. Basic workplace first aid kit contents	3
5.2. Additional first aid kit modules	3
5.2.1. Eye module	4
5.2.2. Burns module	4
5.2.3. Other useful modules	5
5.2.4. Additional contents of first aid kits for use in remote locations	5
5.3. Medications in first aid kits	5
5.4. Maintaining first aid kits	6
5.5. First aid rooms	6
5.5.1. Basic first aid room contents	6
5.6. Automated external defibrillators (AEDs)	7
5.7. Safety showers and emergency eye wash stations	7
6. Responsibilities	8
6.1. Senior and Operational Leaders	8
6.2. First Aid Officers	8
6.3. Staff, students, researchers and third parties	8
6.4. HSW Team	8
7. Definitions	8
8. Supporting Documents	9

1. OBJECTIVE

This document provides guidance on first aid kits and first aid facilities as part of first aid management at RMIT.

2. BACKGROUND

N/A

3. SCOPE

This process applies to RMIT globally.

NOTE – Referenced legislation applies to Australian jurisdictions only. RMIT campuses in other jurisdiction must refer to local applicable legislation, where available.

4. WHAT MUST GO RIGHT?

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

- Senior and Operational Leaders identify the types of first aid kits and facilities, based on risk assessments, required for work and learning environments under their control
- First aid kits and facilities are maintained

5. PROCEDURE / IMPLEMENTATION

5.1. First aid kits

5.1.1. Location of first aid kits

First aid kits need to be clearly identifiable and easily accessible. Operational Leaders must provide suitable instruction to staff, students, researchers and third parties so first aid kits can be located when needed.

Where there are separate work and learning areas, it may be appropriate to locate first aid facilities centrally and provide portable first aid kits in each work and learning area.

5.1.2. Container and contents

Adequate first aid arrangements will vary from one work and learning environment to the next. Operational Leaders need to ensure that first aid kits are adequately stocked for the work and learning environment under their control.

The container used as first aid kits need to be:

- suitable for the environment to keep the contents clean, dry, organised and free from damage
- large enough to hold any additional first aid kit modules that are to be included, preferably in separate compartments
- easily recognisable (e.g., with a white cross on a green background prominently displayed on the outside and clearly marked as ‘first aid kit’).

The first aid kit containers must not be locked.

The name and telephone number of workplace first aid officers, as well as emergency services telephone numbers and addresses, should be in or near each first aid kit.

5.1.3. Examples of first aid kits



5.1.4. Basic workplace first aid kit contents

For most work and learning environments, a first aid kit needs to contain the following items:

First aid instructions / quick reference guide	1
Notebook and pen or pencil	1
Disposable surgical face masks	4
Resuscitation face mask or face shield with one-way valve	1
Disposable nitrile gloves (nitrile is a latex-free rubber suitable for people with latex allergies)	5 pairs in a range of sizes
Gauze swabs 10 x 10 cm, sterile (3-pack)	5 packs
Saline 15 ml or 30 ml	8 x 15 ml or 4 x 30 ml
Adhesive dressing strips – plastic or fabric, packet of 50	1
Non-adherent wound dressing/pad 5 x 5 cm (small)	6
Non-adherent wound dressing/pad 7.5 x 7.5 cm (medium)	3
Non-adherent wound dressing/pad 10 x 10 cm (large)	3
Conforming crepe bandage, light, 5 cm width	3
Conforming crepe bandage, light, 7.5 cm width	3
Conforming crepe bandage, 10 cm width	1
Scissors	1
Adhesive tape, non-stretch, hypoallergenic, 2.5 cm wide roll	1
Dressing – combine pad 9 x 20 cm	2
Resealable bag – large	2
Triangular bandage minimum width 110 x 155 cm	2
Eye pads, single use	2
Instant cold pack for treatment of soft tissue injuries and some stings	1
Alcohol-based hand sanitiser	1
Emergency accident blanket	1

5.2. Additional first aid kit modules

Operational Leaders need to assess whether additional first aid kit modules are needed where specific hazards exist. Some examples of commonly needed additional modules are:

5.2.1. Eye module

This module needs to be included in first aid kits in any work and learning environment where:

- chemical liquids or powders are handled in open containers
- spraying, hosing, compressed air or abrasive blasting activities/tasks are carried out
- there is any possibility of flying particles
- welding, cutting or machining activities/tasks are carried out
- wearing of eye protection is a requirement or recommended.

The module needs to be kept in a container that clearly identifies its contents and purpose.

Where an eye module is needed, the module must include (as a minimum):

- instructions for use
- one litre eye wash (for single use) and/or access to eye wash station
- sterile eye pads/eye shield
- adhesive tape.

This module does not necessarily replace the need to provide general eye wash facilities in work and learning environments with specific hazards.

5.2.2. Burns module

A burns module needs to be included in first aid kits in any work and learning environment where there is a possibility of a person receiving a serious burn. Such places may include those where:

- heat is used (e.g. in kitchens, work and learning environments where welding work is done, where there is exposed flame)
- flammable liquids are used
- chemical acids or alkalines are used, or
- other corrosive chemicals are used.

The module needs to be kept in a container which clearly identifies its contents and purpose.

Where a burns module is needed, the module must include (as a minimum):

- burn treatment instructions on two waterproof instruction cards: one for the first aid kit and the other to be located on the wall next to the emergency shower or water supply
- hydrogel, 8 x 3.5-gram sachets*
- hydrogel dressings*
- clean polythene film (cling wrap), or sheets, small, medium and large
- 7.5 cm cotton conforming bandage.

* Hydrogel products are optional contents for pain management in treating small burns in adults.

The size of dressings and sheeting required needs to be determined regarding the nature of hazards in the work and learning environment. For example, if there is a risk of molten metal splashing, large burn dressing and sheeting may be necessary first aid provisions.

This module does not replace the need to provide safety showers where these may be required to comply with the **OHS Regulations**, suggested in other compliance codes or identified in a risk assessment.

5.2.3. Other useful modules

The selection of other modules may arise out of the risk assessment process. For example, cyanide poisoning or snake bite kits may be required.

It is suggested that if the assessment indicates that additional modules are required, advice and assistance be sought from Senior Health and Safety Advisors, first aid professionals or first aid supply companies to determine what contents are appropriate.

5.2.4. Additional contents of first aid kits for use in remote locations

The appropriate contents will vary according to the location, and the nature of the work and learning and its associated risks. It is likely the first aid kit will need to include:

- emergency reference manual
- two snake bite bandages or elasticised bandages 10 – 15cm (for snake bites)
- clean polythene film (cling wrap) or large sheeting (for covering burns)
- thermal blanket (to protect from the cold)
- whistle (for attracting attention)
- torch/flashlight
- limb splint.

Note that additional first aid training specific to remote locations may be required.

5.3. Medications in first aid kits

Senior and Operational should consider including an asthma-relieving inhaler and a spacer to treat asthma attacks and adrenaline (epinephrine) auto-injector for the treatment of anaphylaxis (commonly known as an EpiPen). These may also be available as additional kit modules. These must be stored according to the manufacturers' instructions and be replaced when they reach their expiry date. First aid officers need to be aware that the administering of medication must only occur in certain circumstances.

If it is anticipated first aid officers will need to administer medication, they need to be provided with appropriate training.

Senior and Operational Leaders should also consider including 300 mg of dissolvable aspirin 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.

Where Senior and Operational Leaders consider 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 (over the counter) purchase. These medications must be used in accordance with the instructions on the package.

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 aid officer in certain circumstances to:

- assist a patient with taking their medication (such as an asthma inhaler)
- 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).

First aid officers are not expected to know employees' medical conditions.

5.4. Maintaining first aid kits

Operational Leaders need to ensure that first aid kits are restocked as necessary. Operational Leaders need to have a documented system of work for reviewing and restocking first aid kits, and for ensuring that any items that may expire are replaced regularly. First aid kits must be checked quarterly (as a minimum) and after every event requiring first aid.

The use of single-use items should be encouraged at all times.

5.5. First aid rooms

Senior and Operational Leaders should consider the provision of a first aid room if identified in a risk assessment. Where a first aid room is provided in the work and learning environment, it needs to be:

- available for provision of first aid as its primary purpose
- large enough for its purpose
- well-lit and well ventilated
- easily accessible by injured people who may need to be supported or moved by stretcher or wheelchair and have easy access to toilets
- near an exit so that an injured person may be removed quickly by ambulance where necessary.

Additional first aid kit modules and other items or equipment need to be provided for the first aid room if required.

Each first aid room (and its contents) needs to be under the control of a first aid officer who has the necessary training to, and therefore has the appropriate skills and knowledge.

5.5.1. Basic first aid room contents

The following items need to be provided in the room:

- resuscitation face mask or face shield with one-way valve
- disposable surgical face masks
- sink and wash basin with hot and cold water or hand sanitiser with paper towels
- work bench or dressing trolley
- storage facilities
- hazardous waste container or bio-hazard bags for soiled dressing a container with disposable lining for soiled waste
- a sharps container
- electric power points
- an examination couch with a waterproof surface and disposable sheets
- a desk, chair and telephone
- signage indicating emergency telephone numbers
- signage indicating emergency first aid procedures
- a first aid kit or contents appropriate for the workplace.

The following additional items may also be appropriate:

- eye protection glasses or face shield
- an automated external defibrillator.

5.6. Automated external defibrillators (AEDs)

Senior and Operational Leaders should consider whether it is reasonably practicable to have an AED in the work and learning environments under their control, to manage the risk of death from cardiac arrest.

When deciding whether it is reasonable to have AEDs in the workplace, Leaders should consider the likelihood that someone will suffer a cardiac arrest in the work and learning environment. For example, an AED may be appropriate if specific risks associated with the work and learning undertaken increase the likelihood of cardiac arrest, or if there are large numbers of members of the public, such as clients or visitors, attending the place of work and learning.

Anyone can use an AED on someone suspected of being in cardiac arrest by following the voice prompts and picture guidance. Training is not required.

AEDs should be installed in well-known, visible and accessible locations. They must not be locked and must be clearly signed. AEDs must be maintained according to the manufacturer's instructions, including replacing batteries and pads at the specified intervals.

AEDs are managed via Property Services Group (PSG) at RMIT. If the need for an AED has been identified for a particular area, the responsible Operational Leader is to lodge a request for an AED with PSG Service Desk. This will include providing the PSG Service Desk with a copy of the first aid risk assessment, including the recommended location of the AED. PSG Service Desk will review the recommended location of the AED for suitability and either confirm the location of the AED with the requesting Operational Leader or advise them of an alternative location.

Costs associated with an AED are the responsibility of the entity that controls the area where the AED will be located.

5.7. Safety showers and emergency eye wash stations

Senior and Operational Leaders must provide emergency eye-wash equipment where there is a risk of hazardous or infectious substances causing eye injuries.

Immediate access should be provided to emergency shower equipment in workplaces where there is a risk of:

- exposure to hazardous chemicals resulting in skin absorption or contamination from infectious substances, or
- serious burns to a large area of the face or body, including chemical or electrical burns or burns that are deep, in sensitive areas or larger than a 20-cent piece in an adult.

Shower facilities can consist of:

- a deluge facility (fixed safety shower as per AS4775); and supplemented by
- a permanently rigged hand-held shower hose, or
- a portable plastic or rubber shower hose designed to be easily attached to a tap spout—this may be appropriate where the work and learning environment is small, a fixed deluge facility would not be reasonably practicable, and the risk of serious burns is foreseeable but relatively low.

Eye wash and shower equipment should deliver water at a tepid temperature, and may be permanently fixed or portable, depending on the nature of the task and the work and learning environment. More guidance is available in **HR – HSW-PR31-WI02 – Safety Shower & Emergency Eyewash Station Guidelines**.

6. Responsibilities

6.1. Senior and Operational Leaders

- Ensure first aid, and other risk assessments as required, are completed to identify:
 - the types of first aid kits and facilities needed in areas under their control
 - any additional first aid kit modules may be required, including training for first aid officers in the application or use
- Ensure first aid kits, any additional modules and facilities are re-stocked and maintained
- The location and types of first aid kits, additional modules and facilities is included in induction or other training delivered to staff, students, researchers and third parties
- Ensure the provision and types of first aid kits, any additional modules and facilities is documented

6.2. First Aid Officers

- Are aware of the types and locations of first aid kits, any additional modules and facilities in their area of responsibility
- Advise Operational Leaders of any consumables used during the provision of first aid
- Undertake any additional and specific first aid training where this has been identified for areas under their responsibility
- Participate in risk assessments to determine what first aid kits, any additional modules and facilities are required in their area of responsibility

6.3. Staff, students, researchers and third parties

- Participate in inductions and training relating to the provision of first aid management in the areas of their work and learning
- Do not misuse, tamper with or damage first aid kits, their contents or other first aid facilities

6.4. HSW Team

- Liaise with Operational Leaders and first aid officers on matters relating to the management first aid
- Regularly review this process in consultation with relevant stakeholders.
- 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.

Term / acronym	Definition
AED	Automated external defibrillator. An automated external defibrillator (AED) is a portable electronic device that automatically diagnoses the life-threatening cardiac arrhythmias of ventricular fibrillation (VF) and pulseless ventricular tachycardia, and is able to treat them through defibrillation, the application of electricity which stops the arrhythmia, allowing the heart to re-establish an effective rhythm.
First aid facilities	Includes first aid kits, first aid rooms and associated first aid equipment such as AED's
First aid in the workplace	The provision of emergency treatment and life support for people suffering injury or illness at work

Term / acronym	Definition
First aid officer	A member of RMIT staff who volunteers to provide emergency treatment and life support in accordance with the level of first training undertaken
Operational leaders	Any staff member with direct reports or supervision over a cohort, including: <ul style="list-style-type: none"> • Deans and Associate Deans • Directors, Deputy and Associate Directors • General Managers and Managers • Coordinators and Supervisors • Teachers
Senior Leaders	<ul style="list-style-type: none"> • Deans and Associate Deans • Directors, Deputy and Associate Directors • General Managers and Managers • Chief Investigators

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

- HR - HSW-PR07 - Consultation & Communication
- HR - HSW-PR04 - HSW Records Management
- HR – HSW-PR31 – First Aid
- HR – HSW-PR31-TM01 – First Aid Risk Assessment Template
- HR – HSW-PR31-WI02 – Safety Showers & Emergency Eyewash Station Guidelines
- Occupational Health and Safety Act (Victoria)
- Compliance Code - First Aid in the Workplace (WorkSafe Victoria)