

## EXAMPLES OF COMPLETED FIRST AID ASSESSMENTS

### OFFICE BASED AREA

## FIRST AID ASSESSMENT: ON - CAMPUS ACTIVITIES

### 1. ASSESSMENT FACTORS

Academic/Administrative unit: OHS		
Date: 20/07/2019	Campus: Clayton	Building No: 100
Floor level(s): 2		
Assessor/s: Mark Church/Betty Bingham		
<b>NATURE OF HAZARDS</b>		
<b>Hazards:</b>	<b>Describe the hazard:</b>	
Manual handling Stairs	Lifting stationery supplies Trips	
<b>KNOWN OCCURANCES OF INJURIES, ILLNESSES AND INCIDENTS</b>		
Nature of incidents resulting in injury, illness: <i>Attach summary incident reports for past 12 months</i>		
Sprains & strains x 3 Slips/trips x 2		
<b>LOCATION, SIZE AND LAYOUT OF THE WORKPLACE</b>		
No of floors: 2	Access between floors: Stairs	Maximum distance to First Aid kit: 50m
Nearest medical service:	Address: University Health Service, Clayton campus	
Time to get to the service:	Walking: 5 min	By car: N/A
Nearest major hospital:	Address: Monash Medical Centre, 246 Clayton Rd, Clayton	
Time to get to hospital:	Walking: N/A	By car: 15 min
<b>NUMBER AND DISTRIBUTION OF EMPLOYEES</b>		
Number of persons working in the area: <i>(include employees, contractors, students, visitors; provide an estimate when more people may be working the area)</i>	170 (all staff)	
Numbers of general public present in the workplace:	10	
Is work required after hours, at night or at weekends? If so, provide details:	Refer to <i>After-Hours Procedure</i>  N/A	

## 2. OUTCOME OF ASSESSMENT

OUTCOME	
No of persons potentially exposed:	All office staff
Injuries/illnesses that may occur:	Strains & sprains Slips/trips
Level of risk: <i>Refer to First Aid Assessment Tool</i>	Low risk
Risk controls:	Manual handling training, risk assessments, signage

## 3. FIRST AID FACILITIES REQUIRED

(Refer to First Aid procedure)

FACILITIES, RESOURCES	DETAIL
Number of Level 2 First Aiders required:	3 (currently Level 2 FA x 2; Level 1 FA x 1)
First Aid kits: <i>(number and location)</i>	4 Ground floor: Reception x 1, Tea Room x 1 First floor: Tea Room x 1, Room 42 x 1
Type of kit: <i>(e.g. office, high hazard)</i>	Office
Other First Aid Modules: <i>(eg burns, asthma, cyanide for which additional training is required)</i>	N/A
Location of nearest defibrillator:	Reception, Building 99
Medical oxygen: <i>(location; names of First Aiders trained to administer oxygen)</i>	Nil

## 4. OUTSTANDING RESOURCES

(If any of the above resources in Item 3 are not in place, please state below the timeframe and person responsible for implementation)

One of the First Aiders needs to be trained up to Level 2 within the next month  
Person responsible to organize this: Mark Church

## 5. SIGN OFF

Signed Name (Assessor)	
Signed Name (Assessor)	
Date Copy Sent to OH&S	30/07/2019

Please ensure you keep a copy for your own records.

**LABORATORY BASED AREA**

**FIRST AID ASSESSMENT - ON-CAMPUS ACTIVITIES**

**1. ASSESSMENT FACTORS**

<b>Academic/Administrative unit:</b> Science			
<b>Date:</b> 20/07/2019	<b>Campus:</b> Clayton	<b>Building No:</b> 102	<b>Floor level(s):</b> 4
<b>Assessor/s:</b> Jane Black/Bill Green			
<b>NATURE OF HAZARDS</b>			
<b>Hazards:</b>		<b>Describe the hazard:</b>	
Chemicals Burns Sharps		Phenol, HF, alcohols, acids Steam Needles, scalpel blades	
<b>KNOWN OCCURANCES OF INJURIES, ILLNESSES AND INCIDENTS</b>			
<b>Nature of incidents resulting in injury, illness:</b> <i>Attach summary incident reports for past 12 months</i>			
Sprains and strains x 8 Burns x 10 Cuts lacerations x 17 Foreign bodies x 5 Animal bites x 5 Needle stick injuries x 8			
<b>LOCATION, SIZE AND LAYOUT OF THE WORKPLACE</b>			
<b>No of floors:</b> 4	<b>Access between floors:</b> lifts/stairs	<b>Maximum distance to First Aid kit:</b> 50m	
<b>Nearest medical service:</b>	<b>Address:</b> University Health Service, Clayton campus		
<b>Time to get to the service:</b>	<b>Walking:</b> 5 min	<b>By car:</b> N/A	
<b>Nearest major hospital:</b>	<b>Address:</b> Monash Medical Centre, 246 Clayton Rd, Clayton		
<b>Time to get to hospital:</b>	<b>Walking:</b> N/A	<b>By car:</b> 15 min	
<b>NUMBER AND DISTRIBUTION OF EMPLOYEES</b>			
<b>Number of persons working in the area:</b> <i>(include employees, contractors, students and visitors; provide an estimate when more people may be working the area)</i>	360 (max. in semester)		
<b>Approx. numbers of general public present in the workplace:</b>	0		
<b>Is work required after hours, at night or at weekends? If so, provide details:</b>	Refer to <i>After-Hours Procedure</i> No		

## 2. OUTCOME OF ASSESSMENT

OUTCOME	
No of persons potentially exposed:	360
Injuries/illnesses that may occur:	Burns (Phenol & HF), needle stick, strains/sprains, bites, cuts, puncture with foreign body
Level of risk: (refer to First Aid Assessment Tool)	High risk
Risk controls:	Risk assessments, signage, training, SDS

## 3. FIRST AID FACILITIES REQUIRED

(Refer to First Aid procedure)

FACILITIES, RESOURCES	DETAIL
Number of Level 2 First Aiders required:	No of First Aiders = 16
First Aid kits: (number and location)	9 in total x 1 at Reception, Ground Floor x 2 in each lab area (Floors 1-4, x 2 kits on each floor)
Type of kit: (e.g. office, high hazard)	High hazard kits in lab areas Office kit in reception area
Other First Aid Modules: (e.g. burns, asthma, cyanide for which additional training is required)	Phenol and HF Modules
Location of nearest defibrillator:	At Reception, Ground Floor
Medical oxygen: (location; names of First Aiders trained to administer oxygen)	Yes: x 1 located near First Aid kit at Reception, Ground Floor; x 4 First Aiders trained in oxygen administration - see attached certificates

## 4. OUTSTANDING RESOURCES

(If any of the above resources in Item 3 are not in place, please state below the timeframe and person responsible for implementation)

- Train an additional 3 (Level 2) First Aiders (currently there are only 13 trained). Training has been organised for 2 weeks' time
- Update Phenol & HF Modules - to be updated within one week (x 4 staff already trained to use these modules)
- Responsible person - Michael Moore, Manager

## 5. SIGN OFF

Signed Name (Assessor)	
Signed Name (Assessor)	
Date Copy Sent to OHS	30/07/2019

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## OFF-CAMPUS ACTIVITIES

# FIRST AID ASSESSMENT: OFF - CAMPUS ACTIVITIES

## 1. ASSESSMENT FACTORS

<b>Academic/Administrative unit:</b> Geological Sciences			
<b>Date:</b> 22/07/2019	<b>Campus:</b> Clayton	<b>Specific Location:</b> Moondara State Park	<b>Duration:</b> 2 Nights, 3 days
<b>Assessor/s:</b> Jo Brown, Mary Murphy			
<b>Off-campus activity*</b> (Please check as applicable)		<input type="checkbox"/> URBAN <input checked="" type="checkbox"/> RURAL <input type="checkbox"/> REMOTE	<input checked="" type="checkbox"/> low risk <input type="checkbox"/> high risk
<b>Date of Activity:</b> 01/09/2019 * Refer to <i>Off-Campus Activities Procedure</i> for definition			
<b>NATURE OF HAZARDS</b>			
<b>Hazards:</b>		<b>Describe the hazard:</b>	
Hilly area High temperatures - 30°C average		Bush walking Outdoor activity in Summer	
<b>KNOWN OCCURANCES OF INJURIES, ILLNESSES AND INCIDENTS</b>			
<b>Nature of incidents resulting in injury, illness:</b> <i>Attach summary incident reports for past 12 months</i>			
Sprains/strains x 2 - twisted ankle on rough ground Cuts bruises x 2 - knife cut preparing food Dog bite x 1 - dog bite			
<b>AVAILABILITY OF EMERGENCY ASSISTANCE</b>			
<b>What is the access for emergency evacuation:</b>	Princes Hwy, Moe (via Moe-Rawson Rd)	Maximum distance to nearest First Aid kit approx. 50m Base camp where all staff are located has off-campus kit	
<b>Nearest medical service:</b>	<b>Address:</b> Yallorn North Medical Centre, Reserve Street, Yallorn North		
<b>Time to get to the service:</b>	<b>Walking:</b> N/A	<b>By car:</b> 22 mins	<b>kms (approx.):</b> 25
<b>Nearest hospital with 24 accident and emergency service:</b>	<b>Address:</b> Latrobe Regional Hospital, 10 village Avenue, Traralgon		
<b>Time to get to hospital:</b>	<b>Walking:</b> N/A	<b>By car:</b> 35 mins	<b>kms (approx.):</b> 45
<b>NUMBER AND DISTRIBUTION OF PERSONS PARTICIPATING</b>			
<b>Number of persons participating in the activity:</b>	27		
<b>Numbers of general public present in the area:</b>	N/A		
<b>Will participants be working in isolation? If so, please describe:</b>	All will work in groups of 3		

## 2. OUTCOME OF ASSESSMENT

OUTCOME	
No. of persons potentially exposed:	27
Potential injuries/illnesses:	Sun burn Sprain/strain Cuts/abrasions Dog bite
Level of risk:	Medium risk
Risk Controls:	(Refer to the Off-Campus Risk Assessment and previous similar trips)  Risk assessments, training, supervision

## 3. FIRST AID FACILITIES REQUIRED

(Refer to First Aid procedure)

FACILITIES, RESOURCES	DETAIL
Number of First Aiders required:	x 2 (minimum)
Level of training: (e.g. level 2 /Remote)	Level 2
First Aid kits: (number and location)	Vehicle kit in each vehicle x 4 Off-campus kit incl. burns module x 1 for base camp
Can all First Aid equipment be transported to the area:	Yes
Type of kit: (e.g. vehicle, off-campus)	See above
Other First Aid Modules: (e.g. burns, asthma, cyanide for which additional training is required)	See above

## 4. OUTSTANDING RESOURCES

(If any of the above resources in Item 3 are not in place, please state below the timeframe and person responsible for implementation)

- Off-campus trip organizer, Jo Brown, will ensure that First Aiders have attended a CPR refresher before end of August 2019
- A Mental Health First Aider will also be included in the group (training to organised by Jo Brown)

## 5. SIGN OFF

Signed	
Name (Assessor)	
Signed	
Name (Assessor)	
Date Copy Sent to OH&S	30/07/2019

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