Standard Operating Procedure



Title: First Aid Procedure

Department	Environmental, Health and Safety		Document no	EHS-030	
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Document Owner

EHS Manager

Affected Parties

All Site colleagues

Purpose

The purpose of this SOP is to formalise the role of the nominated site first aiders, and to provide a clear understanding of the first aiders responsibilities and provide first aiders with information relating to the delivery of first aid.

Scope

All nominated first aiders/personnel are to follow the requirements set out in this procedure.

Definition

Nominated First Aider	An employee nominated to provide first aid treatment to site employees, contractors and visitors. The holder of a current First Aid Certificate or an equivalent accredited first aid training provider.	
Analgesic	Only tablets or capsules containing not more than 500 milligrams of Paracetamol shall be dispensed as an analgesic for the relief of mild to moderate temporary pain.	
Clinical Waste	Any material used by the nominated first aider in first aid treatment that has been in contact with body fluids, particularly blood. This would include using disposable gloves, disposable forceps and wound dressings.	
Medical Treatment	Treatment, which can only be given by a medical practitioner or other health professional (e.g. Dentist, Physio.).	
Lost Time	Unable to return to work for one full shift (or more), from time of absence due to injury.	

Related Documents

Form-575	Incident Investigation Form	
Form-580	Incident Communication Form	
Form-585	Contents of First Aid Emergency Kits	
EHS-015	Waste Removal Process	
EHS-025	EHS Incident Management	

EHS Statement

Any person endeavouring to assist during the management of an accident must first ensure his or her own safety. Consider ALL human blood, other body fluids and tissue as potentially infectious. The following safe working procedures should be observed:

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1.4. Communicate the incident and respective preventative actions with other departments through 'Incident Communication form' (Form-580).

2. Maintenance of First Aid Rooms and Emergency Kits

2.1. The nominated First Aider shall ensure that the First Aid Rooms and Emergency Kits contains nothing except items as listed "Contents of First Aid Emergency Kit" (Form-585). If additional supplies are required, the first aider shall make the person responsible for ordering such items aware of what items are required.

3. Training

- 3.1. Each nominated First Aider shall possess a current First Aid Certificate and shall renew that certificate at three yearly intervals.
- 3.2. Each nominated First Aider shall receive training in relevant procedures for first aid management of injury and illness regularly.

4. Dispensing of Analgesics

- 4.1. A nominated First Aider shall be designated to dispense Paracetamol.
- 4.2. Analgesia (Paracetamol) is to be held in the EHS Office under the supervision of authorised EHS staff.

5. Clinical Waste Disposal

- 5.1. The nominated First Aider shall place all clinical waste in the yellow container provided in each First Aid Room. (See SOP EHS-015).
- 5.2. When the container is filled to "full" level, it is to be securely capped using the lid supplied. It is the responsibility of the person responsible for waste disposal on each site to identify the appropriate "contaminated waste" disposal service provider for their site.

6. Scope of First Aid Activities

The following procedures have been written for injuries and illnesses that may **commonly** occur in an occupational setting.

An accredited First Aid Manual should also be consulted if in doubt.

7. Burns

7.1. Treatment

In an occupational setting, employees may suffer burns from:

- 7.1.1. Chemical exposure to skin,
- 7.1.2. Heat (hot surfaces, naked flames, steam).
- 7.1.3. Remove the person from the danger of further injury if able. Re-assure the person.
- 7.1.4. Cool the burn by irrigation with water for at least 20 minutes. Chemical burns: Remove all contaminated clothing, including shoes and socks. Discard appropriately. DO NOT APPLY ICE PACKS TO BURNS.

7.2. Thermal Burns

Remove clothing or articles, which could constrict the damaged area before tissue swells (boots, belts, rings, etc).

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- 8.3.1. Obtain an accurate history of the incident.
- 8.3.2. Examine the eye area and treat any soft tissue bleeding.
- 8.3.3. If you are able, have the person open their eyelids and with the use of good light examine the eye closely. Note whether the pupils are different sizes and if there is any bleeding into the white of the eye.
- 8.3.4. Ask the person if their vision is blurred.
- 8.3.5. Where the injury is suspected, refer to Eye Specialist or local hospital after hours.

9. Sprains, Strains and Bruises

- 9.1. The objective of first aid treatment to sprains, strains and bruising is to:
 - 9.1.1. Provide pain relief.
 - 9.1.2. Minimise swelling and dysfunction.
 - 9.1.3. Support injured muscle area.
 - 9.1.4. In the case of strains, gentle movements will reduce muscle spasm.

9.2. Treatment

- 9.2.1. Remember R.I.C.E.
 - **R**est
 - Ice (never directly applied, but wrapped in cloth)
 - Compression (support bandage)
 - Elevation (where applicable).
- 9.2.2. Apply ice for 15-20 minutes, checking each five minutes for discomfort, then every two hours for the first 24 hours, then every four hours for the next 24 hours.
- 9.2.3. DO NOT use creams or massage the affected area for the first 48 hours.
- 9.2.4. In all cases of sprains or strains, the Return to Work Coordinator is to be advised as soon as practicable to determine if alternative duties are required.
- 9.2.5. If, following treatment, there is no improvement in minor sprain or strain injuries within 24 hours, refer to the local medical practitioner.

NOTE: IF IN DOUBT as to the SEVERITY of the INJURY, TREAT AS A FRACTURE and REFER to MEDICAL HELP.

10. Treatment of Wounds

- 10.1. These may be:
 - Abrasions.
 - Lacerations.
 - Penetrating wounds.
 - Incision wounds.

The first aid treatment is the same, as follows, for all of these.

Note: DISPOSABLE GLOVES TO BE WORN AT ALL TIMES.