Melbourne Archdiocese
Catholic Schools

First Aid Procedure

1. Purpose

This procedure outlines how Melbourne Archdiocese Catholics Schools Ltd (**MACS**) will:

- Minimise the risk of injury and illness across MACS schools and offices
- Ensure effective first aid and infection control practices through a systematic approach to identifying and maintaining first aid arrangements and facilities.

2. Scope

This procedure applies to all MACS staff, volunteers, students, parents and carers at the following MACS workplaces:

- MACS offices
- MACS schools, including specialist schools operated by MACS subsidiary, MACSS and boarding school premises operated by MACS schools
- MACS approved activities, including those activities that take place offsite or out-of-hours.

Duty of Care for Child Safety: This procedure assumes adherence to the Child Safety & Wellbeing Framework and other applicable child safety management processes prior to and alongside the first aid and infection control requirements below. Additionally, this procedure must be read in conjunction with the relevant Care, Safety and Welfare of Students framework policies and procedures.

Throughout this procedure, workplace management refers to the individual accountable for first aid arrangements within a given MACS workplace. This typically includes:

- Principals in school-based settings and
- MACS senior roles (or equivalent manager roles) in non-school workplaces, such as MACS offices.

3. First aid package

MACS workplaces implement first aid in accordance with the MACS first aid package, which consists of:

First Aid Policy	sets out MACS' organisational **commitment and high-level expectations** for first aid and infection control across all MACS workplaces
First Aid Procedure	specifies MACS' **minimum** first aid and infection control requirements that all workplaces must implement when planning for, providing and reviewing first aid arrangements
First Aid Plan – Workplace Template	provides a **local plan template** for each workplace to document **how they meet** MACS' minimum requirements and contextualise first aid arrangements, facilities and practices to their specific campus/office

This package ensures consistent minimum standards across MACS while allowing each workplace to contextualise first aid arrangements to their specific environment, risks and community needs. Workplaces may remove template sections that are not applicable to their setting, provided all MACS minimum requirements remain fully documented.

3.1. First aid planning

MACS workplaces must plan for the first aid needs of students, staff or others on the MACS site or at approved MACS offsite activities. Workplace management will oversee that:

- all staff and students understand the first aid and infection control framework, and staff only provide first aid that aligns with their level of training, expertise and responsibilities as part of their duty of care
- the MACS *First Aid Policy* and workplace's contextualised *First Aid Plan* are accessible for families and the wider school community. This includes offering interpreting and translation services to communicate key information about their child.

3.2. First aid resources provision

Workplace management is responsible for implementing adequate first aid arrangements within their respective workplaces, including:

- attesting to the provision and maintenance of first aid systems
- ensuring sufficient financial and physical resources for first aid planning, training and equipment.

In addition, workplace management must ensure that staff assigned first aid responsibilities (e.g. First Aid Officers) have adequate time and resources to perform these duties effectively.

Where staff hold dual roles (e.g. teacher, facilities manager, front office administrator or Principal), consideration should be given to workload and operational demands without role conflict and ensure both responsibilities can be fulfilled to the required standard.

3.3. First aid risk assessment

To support compliance and consistency across MACS workplaces, MACS Health, Safety and Wellbeing (HSW) is responsible for conducting a workplace **first aid risk assessment every two years**. This risk assessment considers a range of workplace scenarios and identifies the minimum first aid controls required to manage foreseeable risks.

The HSW team will:

- conduct a comprehensive first aid risk assessment covering a variety of workplace profiles and scenarios such as:
  - number of staff and others in the workplace
  - size and layout of the workplace
  - high risk areas
  - nature of hazards
  - location of the workplace (e.g. proximity to medical facilities)
  - the nature and location of regular events, after-hour programs and/or off-site activities
  - known medical conditions of staff
  - previous incidents and injuries
  - fleet vehicles
- identify minimum first aid requirements for potential workplace scenarios to ensure acceptable risk control.

3.4. Student health support information provided by parents and carers

The Principal is responsible for ensuring that accurate and up-to-date information about any identified student health support need is maintained. The Principal will oversee that:

- parents and carers are requested to provide accurate, up-to-date written information about their child's health support needs, including details about any diagnosed conditions such as anaphylaxis, asthma and diabetes and other relevant health support needs

- parents and carers are reminded to update this information at least **annually**, whenever there is a change to their child's medical condition and when health-related supports are no longer required in the school environment.

This information supports the identification of appropriate first aid arrangements and the development and implementation of individual plans to support appropriate first aid response *(see section 7.4* for details*).*

3.5. First aid requirements

Workplace management must identify **minimum first aid requirements** in consultation with the workplace's Health and Safety Representative and/or First Aid Officers and contextualise these within the *First Aid Plan – Workplace Template*.

The *First Aid Plan – Workplace Template* is the **workplace's operational companion** for demonstrating compliance with MACS' minimum first aid requirements. It must outline all first aid arrangements, facilities, equipment, roles and local practices (e.g. the location of the first aid room/area, the placement of first aid kits and any additional workplace arrangements). The workplace plan must be:

- completed and reviewed **at least annually** to ensure it continues to meet the needs of the workplace and any changes to staffing, layout and hazards *(see section 9.4 for details on when to review)*
- used to record:
  - the minimum first aid requirements identified by the first aid risk assessment
  - any additional local practices, equipment or training as part of good practice or in response to specific workplace hazards
- submitted to the **Executive Director** as part of the **annual attestation process**
- communicated to all staff within the workplace to support understanding and awareness of local first aid arrangements.

The Principal must document both student and staff requirements and provisions within the template for each campus. Separate policies for students and staff are not required as first aid arrangements, facilities and equipment are typically shared by both groups in a school environment.

For MACS offices (non-school workplaces), first aid requirements may be determined directly with the MACS HSW Team. These workplaces must implement the first aid arrangements specified by HSW and complete only the sections of the *First Aid Plan – Workplace Template* that are applicable to their setting.

Excursions, camps and travel

The Principal will oversee that first aid requirements are assessed prior to each camp and excursion through an *Event and Activity Risk Assessment*, in accordance with the School Excursions Procedures, Camps Procedure and International Travel Procedure.

A Risk Assessment Tool is also available for individual students with disabilities, chronic health conditions or physical or mental impairments to help assess risks, impact on first aid and identify any additional supports required.

All MACS workplaces must adhere to the *Travel Policy – MACS Employees*.

3.6. Workplace risk register

Workplace management will oversee that first aid and infection control risks and associated controls are summarised in the relevant workplace risk register, in accordance with the *Risk Management Framework.*

4. First aid roles and training

MACS workplaces must ensure that appropriate first aid training is in place to support timely and competent response to injury or illness. This section outlines the first aid roles and the minimum training requirements for First Aid Officers and other staff training for student support.

First Aid Officers are designated trained first aiders who act as the **primary point of contact or escalation** for first aid within the workplace. Other trained staff may provide first aid within their level of training and support the First Aid Officer(s) as required.

Workplace management will oversee that:

- the appropriate number of trained first aiders required is **identified** on the *First Aid Plan – Workplace Template* (refer to *Appendix 2*: Minimum first aid requirement per workplace size for the minimum first aiders required for the workplace)
- trained first aiders are **available** to assist ill or injured individuals within their training level and refer to further medical advice as needed
- the names and contact details of First Aid Officers are **communicated** through established workplace channels such as meetings, intranets and noticeboards
- a **staff training register** is maintained, including staff names, courses completed, training providers and renewal dates.

All trained first aiders must:

- hold current first aid qualifications, specifically:
  - HLTAID011 – Provide First Aid renewed every three years; and
  - HLTAID009 – Provide Cardiopulmonary Resuscitation (CPR) renewed annually
- provide first aid within the scope of their training until the person recovers or handover to medical services
- be familiar with a concussion recognition tool such as the Concussion Recognition Tool 6 (CRT6) or the HeadCheck App to help assess and manage head injuries, noting that these tools are not designed to diagnose concussion (*see section* ***Error! Reference source not found.***)
- follow infection control practices during provision of first aid and in the disposal of first aid waste (s*ee section 8* Infection control response)
- record all first aid administered in MACS Guard or the local incident management system (*see section 9*)
- take reasonable care of their own safety and that of others when providing first aid
- maintain confidentiality of personal information while treating an injured or ill person and only record information critical to provision of first aid.

4.1. First Aid Officers

First Aid Officers are designated trained first aiders who are readily available and responsible for leading and coordinating first aid responses within the workplace (e.g. nurse, officer administrator, workplace management or delegate). In addition to the requirements for all trained first aiders, First Aid Officers must:

- be readily available to respond to first aid incidents
- be clearly identified and communicated to staff and school community
- act as the primary contact and coordinate first aid response, including escalation to medical services where required
- ensure first aid incidents are recorded in accordance with *section 9*.

4.2. Additional staff training

Anaphylaxis

Refer to the *Anaphylaxis Management Policy for MACS Schools* for further details on training requirements.

Asthma

Refer to the *Student Health Support Policy* and associated procedures, as well as the Health pages on CEVN.

Other student medical support training

The Principal may approve or require other relevant training based on the **health support needs of students**, known medical conditions within the school, or specific risks associated with school programs and activities. This may include, but is not limited to:

- **Condition-specific training** e.g. diabetes, epilepsy, severe allergies beyond anaphylaxis or other diagnosed medical needs.
- **Activity-specific training** e.g. wilderness first aid, camp-related risk management, water safety or training required for certain excursions or educational programs.

5. First aid room/First aid area

MACS workplaces must provide appropriate facilities to support the provision of first aid. The type and extent of facilities (i.e. area vs room) required for the workplace is outlined in *Appendix 2*: Minimum first aid requirement per workplace size.

A dedicated first aid room or area must be maintained and used exclusively for the provision of basic first aid and for allowing injured or ill students, staff or others to rest. The space is not used for any other purpose.

Child safety must be prioritised whenever a student is present in the first aid room or first aid area. This includes ensuring appropriate supervision, maintaining Line of Sight and involving additional staff where required to prevent any risk of harm or discomfort to the student.

Where a student and an adult (e.g. staff, contractor, visitor) are being treated at the same time, additional precautions must be taken to maintain child safety and appropriate boundaries.

For MACS offices (non-school workplaces), a dedicated first aid room is not required but a clean, quiet and private first aid area should be available for the provision of basic first aid and/or for injured or ill staff or others to rest in.

All first aid room/area must be:

- communicated to all staff and students
- easily accessible to all injured or ill people and emergency services and not used for any other purpose
- well-lit, ventilated and clearly identified with signage. The appropriate signage is a white cross on a green background, e.g.:



The minimum provisions of a first aid room are outlined in *Appendix 3: Minimum first aid room provision*.

6. First aid kits and equipment

6.1. Number and location of first aid kits

Workplace management will oversee that:

- the appropriate number, location and contents of the workplace first aid kits will be determined in consultation with the Health and Safety Representative's and First Aid Officers. Refer to

Appendix 2: Minimum first aid requirement per workplace size for the ratios of minimum first aid kits to student and staff numbers

- the location of first aid supplies must be communicated to all staff and volunteers
- each first aid kit must be:
  - clearly identified by a suitable sign or label (white cross on green background)
  - unlocked and readily accessible
  - positioned in a prominent and easily accessible location.

Where applicable, principals will also oversee that **student** medication is kept in lockable storage in accordance with the *Medication Administration Procedures,* which support the *Student Health Support Policy*. Workplace management may consider the use of portable first aid kits, in addition to the main first aid kits, to support:

- yard duties
- specific areas with assessed risks (e.g. technology, science, maintenance)
- excursions, camps, sports activities and emergency evacuations, with contents tailored to the nature of the activity or environment (e.g. rural locations, sporting events)
- school-owned vehicles (e.g. buses used for school purposes), with the kit's location clearly identified by a prominent sticker either marking or describing its placement. Consideration should be given to the destination and access to medical services
- other activities such as offsite MACS-sanctioned staff events (e.g. concert in the park) and emergency evacuations
- MACS fleet vehicles that are used for work travel. The location of a first aid kit should be identified by a prominent sticker on the vehicle that either marks the location of the kit or states its location.

6.2. First aid kit contents

Contents of first aid kits must be tailored to the types of injuries and illnesses likely to occur in the workplace. The contents may vary depending on the nature of the hazard identified in the workplace and location. Workplace management will oversee that:

- the contents of all first aid kits are appropriate to the types of injuries and illnesses likely to occur, and are tailored to the specific hazards of each location (e.g. eye wash or burn modules for science laboratories)
- the first aid kit:
  - contents comply with the minimum requirements outlined in Paragraph 124 of the First Aid in the Workplace Compliance Code (WorkSafe Victoria)
  - excludes analgesics (e.g. paracetamol, aspirin) due to the risk of adverse health effects and the need for medical oversight
  - aligns with the *First Aid Kit Contents Checklist*, particularly for kits located in specialised areas such as technology and design rooms, yard duty kits
  - includes a first aid manual, a pocket-sized quick reference guide with step-by-step instructions
  - includes a copy of the Concussion Recognition Tool 6 (CRT6) or equivalent in all first aid kits.

Workplaces may choose to exceed the minimum requirements as part of good practice or in response to specific workplace hazards.

Medication storage and administration

For student medication, the Principal must refer to the *Medication Administration Procedures*, which support the *Student Health Support Policy* for guidance on:

- procedures for identifying students who require medication in the school environment

- how medication is received, stored and administered
- clearly defines the responsibilities of staff involved in these procedures.

For staff medication, individuals are responsible for managing their own medication, including carrying and administering it as needed.

6.3. First aid kit maintenance

Workplace management and/or designated First Aid Officers will schedule and conduct inspections of first aid kits **at least quarterly and/or after each use**. Inspections will take note of the following:

- the kit contains a complete set of the required items
- items have not deteriorated and are within their expiry dates
- sterile products are sealed and have not been tampered with
- whether the kit needs refilling of items.

The *First Aid Kit Contents Checklist* or equivalent may be used to support the first aid kit inspection.

6.4. Additional first aid equipment

Workplace management, in consultation with Health and Safety Representatives and First Aid Officers, are to consider whether other first aid equipment is necessary to treat the injuries and illnesses that could occur as a result of a hazard in the workplace. Such first aid equipment includes:

- **Automated external defibrillator (AED):** Workplace management, in consultation with the Health and Safety Representatives and First Aid Officers, may decide to include an AED as part of the first aid provision; particularly where a review of the risks of the school indicates circumstances where life-threatening injuries could result and timely access to emergency services cannot be assured (e.g. settings with staff or visitors with a known or perceived increased risk of cardiac arrest)
  - **location:** AEDs must be clearly signed, easily accessible and kept in temperature-stable areas; e.g. in reception, next to the first aid room, common areas, or main corridors
  - **training:** While not mandatory, prospective AED operators should be trained in its use and emergency procedures. **Annual** refresher training is recommended
  - **maintenance:** AEDs are to be maintained in accordance with the manufacturer's specifications. Inspection includes:
    - AED is ready for use, clean and free of excessive wear and tear. AED function should be checked monthly and after each use
    - pads are connected, sealed and the use by date is current. Used pads must be replaced immediately
    - battery pack is working, and there is a replacement strategy before its expiry date. Batteries should be checked monthly and after each use
    - AED's ready light or tick is visible indicating that it is ready to use
    - AED cabinet or case has no cracks, loose parts or is broken
    - records of maintenance, testing and inspection must be maintained
- **Eye wash and shower facilities:**
  - requirements are to be determined by a review of risks at the school. Eye wash and shower facilities should be provided in any area (e.g. science laboratories, maintenance workshops) where there is a risk of serious burns or exposure to hazardous chemicals to the eyes or a large area of the body or face
  - must be maintained, including regular scheduled activation of the equipment, to ensure that it is in working order and inspected annually for compliance with *AS 4775: Emergency eyewash and shower equipment (see Appendix 4: Eye wash and shower facilities maintenance requirements (AS 4775:2026) for detail)*.

7. First aid response

Workplace management will oversee that the trained first aiders provide timely and appropriate care in the event of injury, illness, or medical emergency involving staff or others on workplace premises or during workplace-approved activities.

Trained first aiders must:

- seek consent of the person receiving first aid before administering wherever the person is conscious and able to communicate
  - For students, consent must be sought using age-appropriate, accessible language to support their right in decisions about their own care
- administer first aid in accordance with their level of training and competence
- apply basic first aid using the DRSABCD action plan:
  Danger → Response → Send for help → Airway → Breathing → CPR → Defibrillator
- maintain confidentiality and only record information relevant to the first aid provided (s*ee section 9 for reporting and notification requirement*).

Where privacy is required for treatment (e.g. removing clothing for injury care) for students, supervision must still be maintained. This may include positioning another staff member within line of sight or using open-door practices to ensure the student's safety and wellbeing.

7.1. Responding to medical emergency

In the event of a medical emergency, workplace management will ensure that staff take immediate action to safeguard the safety and wellbeing of the student or individual involved.

Staff must:

1. **Stop:** Get everyone to safety and ensure you are safe
2. **Make it safe:** Prevent the incident from getting worse. Prevent access to the area. Provide first aid within the scope of their training if required
3. **Communicate:** Call 000 for emergency police / fire / ambulance response, or 132 500 for SES, if required. Contact MACS 24/7 Emergency Management Hotline on 0436 958 801 for support and advice
   - If there is uncertainty about whether an ambulance should be called (e.g. the injury appears serious but not immediately life-threatening), staff must err on the side of caution and call triple zero (000)
4. **Manage:** With support from your leadership team, MACS Emergency Management and General Manager (Region), devise and implement a plan to manage the incident
   - This includes attempting to notify the emergency contacts as soon as reasonably practicable after the emergency action has been taken
5. **Follow-up:** Report the incident and undertake a lessons management process.

For students:

- parental consent from parents or carers is **not required** before initiating emergency procedures
- with identified health support needs, **staff must refer to** the student's individual health support plans as listed in *section 7.4* or other documentation to guide the emergency first aid response.

Student medical transport cost

The Principal may, in good faith, authorise the calling of an ambulance when **the injury or illness exceeds the capacity** of staff trained in first aid. Where immediate action is required, ambulance transport may be arranged without prior contact with parents or carers.

In such cases, the parents and carers are responsible for any medical expenses incurred, including ambulance costs, as per the Enrolment Agreement. Principals should encourage families to maintain current ambulance cover to avoid unexpected financial liability.

Refer to MACS Emergency and Critical Incident Management for more support.

7.2. Student head injury and suspected concussion

The Principal must ensure that the school has appropriate systems in place to identify, respond to and manage suspected concussion. First aiders are not required to be concussion experts or to diagnose concussion but they must be familiar with the approved concussion recognition tool. Where a student has been diagnosed with a concussion, first aider must ensure the correct concussion protocol is implemented and records relating to concussion are maintained. Refer to Resources (*see section 13 in these Procedures*) for further detail.

The Principal will oversee that:

- first aiders must be familiar with the approved concussion recognition tool (e.g. Concussion Recognition Tool 6 (CRT6), HeadCheck App) when a student experiences a head impact or suspected concussion
- an ambulance is called immediately if any "red flag" symptoms are observed, including:
  - neck pain or tenderness
  - loss of vision or double vision
  - weakness, tingling, or numbness in more than one arm or leg
  - severe or increasing headache
  - seizure, fits, or convulsion
  - loss of consciousness
  - deteriorating conscious state
  - repeated vomiting
  - increasingly restless, agitated, or combative behaviour
  - visible deformity of the skull
- the parents and carers are contacted whenever a concussion recognition tool is used, even if symptoms resolve
- students diagnosed with concussion are supported to rest for **24–48 hour** period without study
- students are excluded from **competitive contact sport** at school until medical clearance is provided.

7.3. Students feeling unwell

The Principal will oversee that:

- parents and carers understand that students who are feeling unwell should not attend school. If a student arrives at school unwell, parents and carers are contacted immediately
- if a student becomes unwell during the day:
  - parents and carers are contacted as soon as possible
  - medical assistance is sought, if required
  - early departure guidance is followed in accordance with the school's *Recording and Monitoring School Attendance Procedure* and the *Student Absence – Guidelines for Schools*
- emergency contact details for each student are kept up-to-date to support timely communication in the event of illness or an emergency.

7.4. Students with identified health support needs

The Principal will oversee that:

- students with identified health support needs have their first aid requirements clearly documented in relevant plans, such as:
  - *Asthma Care Plan*
  - *Individual Anaphylaxis Management Plan (IAMP)*

  - *Medical Advice Template (MAT)*
  - *Medication Authority Form (MAF)*
  - *Personal Care Advice Template (PCAT)*
  - *Student Health Support Plan (SHSP)*
  - *Student Safety Plan*
  - *Toileting and Continence Care Plan*
  - or other applicable student support documentation

- the school's *Attendance Policy* and the *Student Absence – Guidelines for Schools* are followed
- for students receiving **palliative care** who have a **Not-for-Resuscitation (NFR)** order, the school's first aid response is documented in the *Student Health Support Plan*, including specific instructions on when to call an ambulance
- school staff **do not make medical decisions or determine** when an NFR order should be followed, this remains the responsibility of qualified medical professionals.

7.5. Use of ice packs

The Principal will oversee that:

- when treating minor injuries (e.g. bumps or bruises), **do not apply ice packs directly to the skin** and remove the ice pack immediately if pain or discomfort occurs
- staff may use a cold compress (e.g. a towel or cloth rinsed in cold water) as an alternative to an ice pack
- ice packs are not used when treating nosebleeds; a cold compress may be used instead
- staff do not use ice packs or cold compresses in the following circumstances, and instead seek medical assistance or call an ambulance:
  - loss of consciousness, even if brief
  - less than alert conscious state
  - suspected fracture
  - suspected spinal injury
  - damage to eyes or ears
  - penetration of the skin
  - deep open wounds.

8. Infection control response

Adequate infection control must be practiced at all times when administering first aid or cleaning up blood or body fluids. Workplace management will oversee that:

- staff are provided with appropriate instruction and training on adequate infection control to minimise the risk of exposure.

The following general infection control procedures must always be adhered to:

- cover cuts and abrasions with an occlusive (air- and water-tight) dressing to prevent contamination of cuts/abrasions with another person's blood and/or body fluids
- wear **protective gloves** when in contact with body fluids, non-intact skin and mucous membranes
- wear a **mask, eye protection and a gown** where there is a risk of splashing blood or other body fluids
- remove broken glass or sharp material with forceps or tongs and dispose of them in sharps container
- after direct contact with injured person or blood/body fluids, **wash hands thoroughly** with warm soapy water, rinse, dry and sanitise hands using an alcohol-based hand rub or gel.

8.1. Cleaning and sanitising

Where a blood/biological spill has occurred, staff must:

- isolate the area where the incident occurred
- clean up blood and other body fluids spills with disposable paper towels/tissues or a biohazard spill kit
- sanitise the area with hospital grade disinfectant (or 5ml of bleach to 500ml of water)
- dry the area with disposable paper towels/tissues after clean-up (wet areas attract contaminants)
- for spills on carpet, shampoo as soon as possible (do not use disinfectant, steam cleaning may be used instead)
- cleaned and disinfected/sterilised reusable items such as scissors and tweezers after use.

8.2. Disposal of contaminated waste

Contaminated waste (e.g. dressings, wipes, cleaning cloths, human tissue and blood) should be disposed of in:

- biohazard waste containers/bags, or
- general waste, using double-bagged and clearly labelled bags, or
- sanitary waste bins, where appropriate.

Sharps must be disposed of in a sharps container. All sharps containers must be compliant with AS 23907:2023 Sharps injury protection - Requirements and test methods - Sharps containers.

8.3. Infectious diseases

To protect the health and wellbeing of the community, MACS workplaces must manage and control the transmission of infectious diseases.

Unwell individuals: Unwell students and staff should not attend the workplace to minimise the risk of spreading illness and protect the health of the MACS community.

Exclusion requirements: In the event the confirmed case of an infection disease in:

- **Primary** schools, refer to the Victorian Department of Health School exclusion table for required exclusion periods for both cases and contacts and relevant management guidelines. Schools must comply with the minimum exclusion periods outlined in the regulations and inform parents and carers accordingly
- **Secondary** schools, while not legally required, should follow the same exclusion guidance to ensure community safety and wellbeing.

Staff responsibilities: All MACS staff must adhere to any relevant exclusion provisions as specified in the *Public Health and Wellbeing Regulations 2019*. Where there is a confirmed case of an infectious disease, staff must immediately inform their line manager and refer to the Victorian Department of Health Disease information and advice to prevent the transmission of infectious disease.

9. First aid reporting and notification

All students and staff incidents involving injury, illness or the provision of first aid must be reported **as soon as reasonably practicable**, specifically:

- Records of all incidents and first aid rendered should be reported onto MACS Guard **or local incident register** as soon as reasonably practicable
- First aid treatment records are subject to requirements under Health Records legislation and must be managed accordingly.

9.1. Student documentation and notification to parents and carers

When first aid is administered to students, schools must complete a *First Aid Form* or equivalent. The First Aid Form must be placed on the student's school file and provided to the parents and carers as part of the notification process. The form should include:

- a description of the accident and/or incident
- student details
- action taken
- details of the person recording the accident and/or incident
- name of witness (if applicable)
- any follow-up actions taken or planned.

The parents and carers **must be notified** on each occasion where:

- first aid is administered to a student for a minor injury or condition
- a student feels unwell at school and/or seeks medical assistance
- if they are required to collect an ill or injured student from school.

If the parents and carers **cannot be contacted**, the Principal must ensure that the emergency contact nominated by the parents and carers are notified.

Schools must provide parents and carers with information about the school's policies and procedures relating to first aid, student health support, medication administration and medical management of students. Updates to these policies and procedures should be communicated through the school's website, newsletters or other online platforms.

9.2. Staff notification

All MACS staff must notify their manager or supervisor **as soon as practicable** if they:

- experience or witness a work-related injury or illness
- develop symptoms of an infectious disease.

9.3. WorkSafe notifiable incidents

Workplace management is responsible for ensuring:

- any student and staff incident that meets WorkSafe Victoria's notifiable incidents under the Occupational Health and Safety Act is **reported immediately** upon becoming aware of a notifiable incident
- any notices or reports **issued by WorkSafe Victoria** are forwarded to:
  - the Health, Safety and Wellbeing (HSW) team via ohs@macs.vic.edu.au, and/or
  - the relevant MACS regional office.

9.4. Record keeping

All medical information is managed in accordance with the school's Privacy Policy and *Privacy Collection Notice – Students and Parents*, ensuring confidentiality and appropriate access.

Records must be maintained for all first aid related incidents at each MACS workplace. Records may be retained in electronic format and must be kept for a minimum of seven years, in accordance with the *IT Security – Standard Data Retention and Destruction Schedule*.

10. First aid management review

Workplace management, in consultation with Health and Safety Representatives and First Aid Officers, must implement a process of reviewing first aid arrangements by:

- scheduling and conducting a first aid review **at least annually**, and as required following an incident, workplace change or audit
- reviewing the types of first aid administered and identifying any additional preventative measures that could be implemented
- discuss first aid data and improvement opportunities at regular forums such as at HSW committee meetings
- implementing recommendations for improvement, including up-to-date training, contact details, officer availabilities, kits, equipment and procedures.

The outcome of the first aid management review must be reflected in the *First Aid Plan – Workplace Template* which forms part of the **annual attestation to the Executive Director**.

11. Roles and reporting responsibilities

Role	Responsibility	Reporting requirement
Workplace Management (Principal/General Manager)	• Complete and review the *First Aid Plan – Workplace Template* annually and submit to Executive Director (or when there are changes to layout, staffing, hazards). • Consult Health and Safety Representatives and First Aid Officers when determining local first aid arrangements, facilities, kit locations, and response protocols. • Resource first aid (budget, equipment, facilities) and ensure First Aid Officers have time to undertake duties (including kit checks, training, and response). • Appoint sufficient and qualified First Aid Officers and ensure coverage for all hours/areas and known risks. • Ensure first aid room/area is fit-for-purpose, signed, mapped, and communicated to staff/students; maintain line-of-sight practices where privacy is required (child safety). • Ensure kit inspections at least quarterly and after use, replenishment and location signage up-to-date. • Ensure communication channels for accessing first aid are visible. • Ensure infection control (PPE, disposal, cleaning) is embedded in local arrangements. • Report notifiable incidents to WorkSafe Victoria immediately upon becoming aware; forward notices to HSW and regional office same business day. • Ensure all incidents/first aid are recorded in MACS Guard (or local register).	• The contextualised local *First Aid Plan* are current, signed and shared with staff and annual Executive Director attestation. • Site maps showing first aid room and kit locations. • Training register for trained first aiders are maintained. • Kit inspection logs and replenishment records. • Incident records (MACS Guard/ local).

Role	Responsibility	Reporting requirement
Principal (school-specific)	• Maintain current student medical information and ensure individual health plans are accessible and followed by staff. • Notify parents and carers each occasion first aid is given or a student is unwell/needs collection on the day, escalate per PROTECT if a disclosure or risk of harm arises. • Ensure excursions/camps have first aid coverage, kits and emergency plans documented in risk assessments.	• Provide First Aid Form to parents and carers and file in student record. • Communicate policy updates via website/newsletters.
MACS Health, Safety and Wellbeing (HSW) Team	• Conduct organisational-level first aid risk assessments. • Provide guidance, support and monitoring across workplaces.	• Receive and review WorkSafe notices/reports from workplaces.
Health and Safety Representatives	• Participate in consultation regarding first aid arrangements, facilities, kits, equipment and reviews. • Provide feedback on hazards or improvements relating to first aid.	• Not applicable
First Aid Officers	• Hold and maintain current first aid qualifications. • Provide first aid within the scope of their training and competence. • Follow DRSABCD and apply infection control practices. • Maintain confidentiality of personal information. • Ensure first aid kits they are responsible for are inspected quarterly or following use.	• Record all first aid administered in MACS Guard or the local incident system. • For students, ensure the First Aid Form is completed and filed.
All MACS Staff	• Provide first aid within the limits of their training and competence. • Follow infection control practices and exclusion requirements for infectious diseases. • Notify their manager if unwell, injured or witnessing a first aid incident.	• Notify their manager as soon as reasonably practicable for work-related injuries, illnesses or infectious diseases. • Record incidents in MACS Guard or the local register.

12. Definitions

Definitions of standard terms used in this Procedure can be found in the Glossary of Terms.

Concussion

Concussion is a brain injury resulting in a disturbance of brain function. It occurs through a collision with another person or object where biomechanical forces to the head, or anywhere on the body transmit an impulsive force to the head/brain.

First aid

The immediate treatment or care given to a person suffering from an injury or illness until more advanced care is provided or the person recovers. In the case of severe injury or illness, members

of staff are not required to diagnose or treat the condition apart from carrying out the appropriate first aid procedures. Diagnosis and treatment are the responsibility of the ambulance officer or medical practitioners.

First aider

A person who has successfully completed a nationally accredited training course or an equivalent level of training that has given them the competencies required to administer first aid.

First aid equipment

Includes first aid kits and other equipment used to treat injuries and illnesses.

First aid facilities

Includes first aid rooms, health centres, clean water supplies and other facilities needed for administering first aid.

First Aid Officer

A person who has completed the appropriate first aid training and nominated by workplace management to act as the primary point of contact and escalation for first aid within the workplace.

Health support need

The overarching term used to describe students' identified health support needs including medical or health conditions, complex medical needs and personal care requirements.

Line of Sight

Adults should see or hear children as much as possible, minimising isolation by ensuring adults aren't alone with students and maintaining visibility in physical/online spaces to prevent harm.

MACS Workplace

A MACS workplace includes any location where MACS employees, students, contractors, volunteers or visitors undertake work, learning or school-approved activities. This includes MACS central and regional offices, MACS schools, MACS specialist schools operated by MACS subsidiaries (including MACSS), school boarding premises operated by MACS schools, and any offsite or out-of-hours activities that are approved by MACS or a MACS school.

Occupational health and safety

A broad term used to describe the overall health, safety and wellbeing of a group of people engaged in work or employment, also involving the management of risk in a workplace.

Registered health practitioner

Describes a person who is registered with the AHPRA or another relevant professional registration body and who practices within the scope of their professional registration.

School approved activities

Any academic, sporting, social or other activities for which students' attendance or participation is authorised or organised by the school.

13. Related policies and documents

Supporting documents

First Aid Plan – Workplace Template
First Aid Kit Contents Checklist
First Aid Form – School and Parent/Carer Record – Template for Schools

Related MACS policies and documents

Anaphylaxis Management Policy for MACS Schools
Child Safety Code of Conduct
Child Safety and Wellbeing Policy
Collection Notice – Students and Parents
Duty of Care Policy for MACS Schools
Excursions, Camps and Travel Policy for MACS Schools

First Aid Policy
Health, Safety and Wellbeing Policy
Health, Safety and Wellbeing Framework
Medical Management Procedures
Medication Administration Procedures
Personal Care Support Procedures
Privacy Policy
Risk Management Framework
Student Health Support Policy

Resources (external to MACS)

AS 23907:2023 Sharps injury protection - Requirements and test methods - Sharps containers. Australian Standard

AS 4775:2026 – Emergency shower, eyewash and eye/face wash equipment and drench hoses

Blue Book – Guidelines for the Control of Infectious Diseases (Victorian Department of Health)
Murdoch Children's Research Institute – Concussion Essentials
Occupational Health and Safety (OHS) in schools: A practical guide for school leaders
Safe Work Australia Model Code of Practice: First aid in the workplace
The Royal Children's Hospital Melbourne – Head injuries
The Royal Children's Hospital Melbourne – Head injury – Return to school and sport
WorkSafe Victoria Compliance Code: First aid in the workplace

14. Legislation and standards

Occupational Health and Safety Act 2004 (Vic)
Occupational Health and Safety Regulations 2017
Occupational Health and Safety (Psychological Hazard) Regulations 2025
Public Health and Wellbeing Act 2008 (Vic)
Public Health and Wellbeing Regulations 2019
Health Records Act 2001 (Vic)
Disability Standards for Education 2005
WorkSafe Victoria – First aid in the workplace Compliance Code

15. Procedure information table

Sponsoring Executive	Director, People & Culture
Document Owner	General Manager, Health, Safety & Wellbeing
Approval authority	Director, People & Culture
Approval date	29 September 2026
Next review by	September 2027
Publication	CEVN, School Website, Gabriel
Related policy	First Aid Policy Health, Safety & Wellbeing Policy
Superseded documents	N/A

16. Appendix 1: Procedure self-assessment checklist

First aid procedure: Self-assessment checklist	
☐	An **annual request** is made for Parents and Carers to provide up-to-date and accurate information regarding their child's health support needs and a **reminder to update** this information annually and whenever a child's medical condition changes
☐	*First Aid Plan – Workplace Template* is: • **completed and reviewed at least annually** to ensure it continues to meet the needs of the workplace and any changes to staffing, layout and hazards • used to document **minimum first aid requirement** and provision, along with additional local practices, equipment or training implemented as good practice or in response to specific workplace hazards • **submitted to the Executive Director** as part of the annual attestation process
☐	First aid **policy, procedure and arrangements** are communicated to staff, students and Parents and Carers (as applicable)
☐	First aid requirements are assessed prior to each **camp and excursion** through an *Event and Activity Risk Assessment*
☐	First aid and infection control risks and associated controls are summarised in the relevant **workplace risk register**
☐	**First aiders** have completed the HLTAID011 – Provide First Aid (every three years) and HLTAID009 – CPR refresher (annually) training
☐	**Emergency numbers and contact details** of all First Aid Officers are clearly communicated and visibly displayed at the workplace
☐	**Training register** is maintained and includes all first aid training details including staff name, course titles, course completion and expiry dates
☐	**First aid room/area** (as applicable) meet the minimum standards and is clearly identified with appropriate signage.
☐	**Quarterly inspections** are conducted to confirm the number, content, condition and accessibility of first aid kits and equipment for each location
☐	All incidents and any first aid rendered are **recorded in MACS Guard** or the local incident recording system
☐	Serious workplace incidents reported to **WorkSafe Victoria** if criteria are met
☐	First aid arrangements are reviewed annually and after incidents or changes

Key Resources

- First Aid Plan – Workplace Template
- First Aid Kit Contents Checklist
- First Aid Form (for notification to Parents and Carers)

17. Appendix 2: Minimum first aid requirement per workplace size

This appendix specifies the minimum number of first aiders, first aid facilities, and first aid kits required based on workplace size.

Workplace size	**Minimum** first aid requirement		
Fewer than 50 employees (and students)	2 first aiders	First aid area (sick bay)	2 first aid kit
50 – 199 employees (and students)	4 first aiders	First aid area (sick bay)	4 first aid kits
200 – 399 employees (and students)	6 first aiders	A first aid room with a bed and stretcher	6 first aid kits
400 – 599 employees (and students)	8 first aiders	A first aid room with a bed and stretcher	8 first aid kits
600 – 799 employees (and students)	10 first aiders	A first aid room with a bed and stretcher	10 first aid kits
800 – 999 employees (and students)	12 first aiders	A first aid room with a bed and stretcher	12 first aid kits (including specific “type of incident” treatment)
>1000 employees (and students)	12+ one first aiders for every additional 100 employees and students	A first aid room with a bed and stretcher	12 first aid kits + 1 kit for every additional 100 employees and students

Additional first aid provision requirements

The requirements above represent the minimum first aid provision for normal workplace operations. Workplaces must assess whether **additional** first aiders, facilities, kits or equipment are required based on factors such as:

- off-site activities, camps and excursions
- sporting, outdoor education and adventure activities
- remote or isolated locations
- large events or activities involving significant numbers of participants
- identified workplace hazards and risks
- delays in accessing medical treatment or emergency services, and
- the absence or unavailability of trained first aid officers.

18. Appendix 3: Minimum first aid room provision

This appendix sets out the mandatory and recommended provisions for workplace first aid rooms to comply and support with the response of injuries and medical needs.

Where a workplace provides a designated first aid room (i.e. ≥ 200 employees and students), the following minimum requirements **must** be provided:

- Electrical power points
- A sharps disposal system
- A bed or chair suitable for resting an injured or unwell person
- A stretcher
- A first aid kit appropriate for the workplace risk profile
- Personal protective equipment (PPE), including:
  - resuscitation mask or face shield with one-way valve
  - disposable surgical masks
  - eye protection
  - disposable gloves
  - apron or gown.

It is **recommended** that first aid rooms also include:

- A sink with hot and cold running water, or hand sanitiser with paper towels
- A work bench or dressing trolley
- Storage facilities for equipment and supplies
- Biohazard waste container and/or sanitary waste bin
- A desk and telephone (or other communication device)
- Signage displaying emergency telephone numbers and the names/contact details of First Aid Officers
- Signage indicating emergency first aid procedures
- A wheelchair (if required for the workplace's needs).

19. Appendix 4: Eye wash and shower facilities maintenance requirements (AS 4775:2026)

This appendix outlines the minimum inspection, testing, and maintenance requirements for emergency eyewash and safety shower equipment, consistent with *AS 4775:2026 Emergency shower, eyewash and eye/face wash equipment and drench hoses.*

19.1. Weekly activation (Functional check)

AS 4775:2026 requires emergency eyewashes, showers, eye/face washers and combination units to be activated at least weekly to:

- verify the equipment is operating correctly
- flush sediment from the supply line
- minimize the accumulation of stagnant water.

This weekly activation requirement applies to the following emergency equipment:

- emergency showers
- eyewashes
- eye/face washes
- combination units.

Who can conduct the weekly check
Weekly activation may be undertaken by the designated school staff member who has been instructed on the activation and visual inspection requirement of the equipment, such as:

- Site-based staff such as Facilities or Maintenance personnel
- Trained Health and Safety representatives
- Laboratory staff or supervisors.

19.2. Annual inspection (Full compliance check)

A comprehensive annual inspection must be completed to verify that emergency showers and eyewash equipment continue to meet the performance, installation and operational requirements of AS 4775:2026. The annual inspection should include assessment of:

- equipment operation and performance
- accessibility and visibility
- signage and identification
- water supply and drainage arrangements
- condition and components fittings
- maintenance, inspection and testing records.

Records of annual inspections should be retained in accordance with MACS record-keeping requirements.

Who can conduct the annual inspection
The annual inspection should be completed by a competent person with knowledge of the requirements of AS 4775:2026 and the operation of emergency shower and eyewash equipment. This may include:

- a qualified external service provider
- suitably trained facilities personnel
- HSW personnel with relevant competency and experience.