

First aid officers

Selecting and training the correct number for your workplace

When determining the number of employees that require a first aid qualification, an assessment of risk is required. As a minimum, follow the [First Aid in the Workplace Code of Practice 2021](#) – which provides practical information to meet the provisions of the *Work Health and Safety Act 2011* (Qld):

Low Risk Workplaces: There is no exposure to hazards that could result in *serious injury or illness.

First Aid Officer Ratio:	1 trained First Aid Officer per 50 workers (in departmental workplaces include staff, students and volunteers in your count of workers).
Explanation:	People at these workplaces are not exposed to hazards that could result in serious injury or illness (e.g. offices, libraries). Potential injuries and illnesses requiring first aid would be minor in nature.

High Risk Workplaces: There is exposure to hazards that could result in *serious injury or illness.

First Aid Officer Ratio:	1 trained First Aid Officer per 25 workers (in departmental workplaces include staff, students and volunteers in your count of workers).
Explanation:	People at these workplaces are exposed to hazards that could result in serious injury or illness and would require first aid.

High Risk and Remote Workplaces These are high risk workplaces that do not have timely access to medical and ambulance services. i.e. 1 hour or more from a permanent medical facility.

First Aid Officer Ratio:	1 trained First Aid Officer per 10 workers (in departmental workplaces include staff, students and volunteers in your count of workers).
Explanation:	People at these workplaces are exposed to hazards that could result in serious injury or illness and there is no timely access to medical care.

NB. For schools with students with life-threatening health conditions, a first aid risk assessment may override these ratios, as it may determine that the employees who supervise students may be required to provide emergency first aid. Refer to [Managing students' health support needs at school](#) procedure for further information.

Choosing your First Aid Officers

Consider:

- personal skills, characteristics, capacity and ability to remain calm in an emergency
- commitment, reliability and availability

- locations (e.g. science, industrial design and technology, home economics/catering, sports/physical education, excursions, playground duty, office)
- supervision of people with life-threatening health conditions (e.g. asthma, anaphylaxis, epilepsy, diabetes).

First Aid Training

- First Aid Officers are to hold nationally recognised statement/s of attainment issued by a registered training organisation (RTO) for the nationally endorsed first aid unit/s of competency
- First aiders can be staff or other adults qualified to administer first aid and are available to provide first aid.
- Where possible, courses including asthma management and anaphylaxis management are preferred.
- Course examples: Provide First Aid, Provide Advanced First Aid, Provide First Aid in Remote Situations and Provide Emergency First Aid Response in an Education and Care Setting (suitable for ECEC locations).
- Training providers can be found by searching the course name [here](#), selecting the course and clicking the onscreen 'find RTOs approved to deliver this unit of competency link'.
- Arrangements involving non-staff members (e.g. camp leaders) to provide first aid are to be made through consultation, cooperation and coordination and are to be documented.
- Ensure contingency arrangements are in place when a First Aid Officer is away on planned or unplanned leave.
- It is not the department's position to have students as designated First Aid Officers.

First Aid Training - Frequency

- Refresher training in cardio pulmonary resuscitation (CPR) is to be undertaken annually and first aid qualification/certification renewed every three years or as specified by the RTO.

***Serious Injury/Illness – definition:**

When is an injury or illness serious?

The *Work Health and Safety Act 2011*, *Work Health and Safety Regulation 2011* and the *Safety in Recreational Water Activities Act 2011* set out that a serious injury of a person is:

- an injury or illness requiring the person to have immediate treatment as an in-patient in a hospital
- immediate treatment for the amputation of any part of his or her body
- a serious head injury
- a serious eye injury
- a serious burn
- the separation of his or her skin from an underlying tissue (such as degloving or scalping)
- a spinal injury
- the loss of a bodily function
- serious lacerations
- medical treatment (treatment by a doctor) within 48 hours of exposure to a substance

A serious illness is:

- any infection to which the carrying out of work is a significant contributing factor, including any infection that is reliably attributable to carrying out work with micro-organisms
 - that involves providing treatment or care to a person
 - that involves contact with human blood or body substances
 - that involves handling or contact with animals, animal hides, skins, wool or hair, animal carcasses or animal waste products
- the following occupational zoonoses (diseases contracted from animals) contracted in the course of work involving the handling or contact with animals, animal hides, skins, wool or hair, animal carcasses or animal waste products
 - [Q fever](#)
 - Leptospirosis
 - Brucellosis
 - Hendra virus
 - Avian influenza
 - Anthrax