**First Aid Assessment**

Name of Organisation

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| --- |
| **1. Size and location of workplace** |
| Number of floors |  |
| Access between floors |  |
| Nearest hospital |  |
| Nearest medical centre or occupational health service |  |
| Maximum time to medical service |  |
| **2. Number and composition of workers and others at workplace** |
| Number of workers |  |
| Number of other people |  |
| Shifts |  |
| Overtime worked | Yes / No  |
| Remote or isolated workers | Yes / No. If Yes, provide details |
| **3. Injuries, illnesses and incidents** |
| Last 12 months claims data |  |
| Incidents not resulting in injury |  |
| Other |  |

NATURE OF WORK BEING CARRIED OUT AND HAZARDS AT WORKPLACE

|  |  |  |  |
| --- | --- | --- | --- |
| **Hazard** | **How hazard could cause harm** | **Likelihood of harm occurring and degree of harm** | **First aid equipment** |
| Manual handling | Soft tissue strain | Low risk of daily exposure to manual handlingrisks. Mechanical aids, workstation alterations and systems of work significantly eliminate and minimise risk. | Possible strains and sprains requiring ice packs, slings and compression bandages. |
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REQUIRED FIRST AID

|  |  |
| --- | --- |
| Number of first aiders needed |  |
| First aiders need to be trained to: | * Recognise and respond to common life-threatening injuries or illnesses using cardiopulmonary resuscitation (CPR) and other first aid procedures.
* Provide appropriate first aid for a range of injuries and illnesses.
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| Number and location of kits |  |
| Contents of first aid kits | Standard work first aid kit. |
| Kit maintenance | Designated first aiders will look after one kit each. |
| Additional equipment |  |

**Note:** Retain a completed copy of this document with Health & Safety records for reviewing and audit purposes

*Source: WorkSafe Example of a first aid assessment March 2020*