**FIRST AID**

**The Nature of Potential Hazards in the Church**

Certain work environments have a greater risk of injury and illness due to the nature of work or activity carried out and the nature of the hazards on site. For example, a food pantry will have a greater risk of injury requiring immediate medical treatment than the person working in the church office. This is why it is important to undertake the Risk Management process to determine the types of potential hazards that cause risk and the first aid arrangements that you will have in place in the event of an injury.

Providing immediate and effective first aid to people who have become injured or ill may reduce the severity of the injury or illness and promote recovery. In some cases, it may mean the difference between life and death.

First aid arrangements will vary from one place to the next. It will depend upon the nature of activities undertaken on the site, the type of hazards present on the site, the size and location of the site as well as the number of people that attend the site. All these factors need to be considered when deciding what first aid requirement needs to be provided.

In today’s climate of litigation there are fears that by performing first aid on a person there is risk of personal liability. During training this fear is allayed - by operating within the training and only providing treatment that is trained, no first aider can be found personally liable.

**California Good Samaritan law** (GSL) under Health & Safety Code 1799.102 protects you from **civil liability for negligence**when:

1. you act in good faith,
2. you are not seeking compensation, and
3. you render **emergency medical or non-medical care**at **the scene of an emergency**.1

**The Risk Management Process**

The following is important to involve in the assessment of what approach you will take towards your first aid facilitation:

* identifying hazards that could result in an injury or illness
* assessing the type, severity and likelihood of an injury or illness
* providing the appropriate first aid equipment, facilities, and training
* reviewing your first-aid arrangements on a regular basis or as circumstances change.

Giving the opportunity for consultation involves the sharing of information and the opportunity for feedback. It should be done before making decisions about health and safety matters.

First aiders must hold a nationally recognized certification issued by a rescued training organization (RTO) for the nationally endorsed first aid unit/s of competency.

First aid can be provided in your local church in a number of way:

* training one or more person(s) within your congregation to administer first aid.
* gather those that already have the training and certification to administer first aid.

**Additional Training for First Aiders**

First aiders should attend training on a regular basis to refresh their first aid knowledge and skills and to confirm their competence to provide first aid. Refresher training in CPR should be undertaken annually and first aid qualifications should be renewed every three years.

It is a recommended code of practice to undertake additional first aid training to respond to specific situations at their church i.e. where severe allergies could be a potential risk, first aiders should be trained to respond to anaphylaxis.

**Number of Trained First Aiders**

The number of first aiders depends on the risk level at your local church. Therefore, the risk management process is an important factor in assigning the number of trained first aiders.

The following ratios are recommended:

* **low-risk activity site - one first aider for every 50 persons**
* **high-risk activity site - one first aider for every 25 persons**

The number and type of trained first aiders can be further refined by the following five-step guide:

1. Identify the maximum number of people you have on-site at any time.
2. Consider the nature of the activity being carried out at the site and determine if there is a high risk of exposure of hazard(s) that could require immediate first aid treatment.
3. Determine if access to emergency services is difficult e.g. remoteness. If so, there are higher levels of risk, then the ratio should be adjusted to one first aider for every person.
4. If a first aider is not available, or it is not practicable to have one on duty, then the following must be provided:
	* an effective means of contacting emergency services or first aiders.
	* information, instruction, and training on how to respond to serious injury.
5. Before finalizing the number of first aiders you will train and/or appoint your congregation. Consider if there are any other reasons that additional first aiders may be necessary:
	* After hour duties
	* Seasonal work i.e. significant increase or decrease during holiday and/or seasonal times like Easter or Christmas.
	* Function, community events, or evangelistic campaigns.
	* Churches that have unique hazards such as fitness groups, Adventurers / Pathfinders, or amusement rentals.
	* Enough first aiders that could fill a rotation in holiday times.

**First Aid Procedures**

The local church should develop and implement first aid procedures to ensure that everyone has a clear understanding of first aid in the church. The procedure should cover:

* The type of first aid kits and where they are located
* Who is responsible for the first aid kits, and how frequently they should be checked and maintained
* How to establish and maintain appropriate communication systems (including equipment and procedures) to ensure rapid emergency communication with first aiders
* The communication equipment and system to be used when first aid is required, especially for remote and isolated sites. These procedures should contain information about how to locate the communication equipment, who is responsible for the equipment and how it should be maintained.
* The arrangement to allow for a team to be appropriately trained
* How to report injuries and illnesses that occur onsite
* How to make debriefing services available to those first aiders exposed to serious incidents

**Record Keeping**

A record of first aid treatment given should be kept by the first aider and reported to the church board on a regular basis to assist in reviewing first aid arrangements and assessing any potential hazards that are causing risk.