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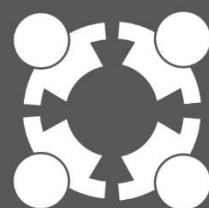
INTEGRITY



BOLDNESS



TEAMWORK



DRAFT

INDUSTRY SKILLS FORECAST

First Aid – 2018 Industry Skills Forecast for Public Consultation

Executive Summary

To be completed once document content is finalised.

Skills Forecast

Name of IRC: First Aid

Name of SSO: SkillsIQ Limited

Sector Overview

The First Aid sector is broad and far-reaching in range and scope and has universal application across all industries.

Definitions

First Aid is 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.

A **First Aider** is a person who has successfully completed a nationally accredited training course or an equivalent level of training that has given him or her the competencies required to administer First Aid.¹

Globally, around 140,000 people die each year in situations where their lives could have been saved if somebody had known and administered First Aid.²

Surf Life Saving Australia reports 11,245 situations requiring First Aid intervention so far this season (Summer 2017/18).³

More than 30,000 Australians suffer from sudden cardiac arrest every year, of whom only 5% survive. Immediate access to a defibrillator can lead to a 70% survival rate if applied quickly.⁴

The importance of First Aid is recognised globally. World First Aid Day was established in 2000 by the International Federation of Red Cross and Red Crescent Societies (IFRC) to raise awareness of the importance of First Aid in saving lives.

First Aid skills and knowledge may be required to address a range conditions, including:⁵

- | | | |
|---------------------------------|------------------------------|---------------------------|
| • Anaphylaxis | • Concussion | • Heat-induced conditions |
| • Acute Asthma | • Diabetic emergency | • Hypothermia |
| • Bites and stings | • Dislocations | • Poisoning |
| • Bleeding | • Electric shock | • Shock |
| • Burns and scalds | • Epileptic seizures | • Spinal injury |
| • Cardiac arrest / heart attack | • Eye injuries | • Sprains and strains |
| • Choking | • Febrile convulsions | • Stroke |
| | • Fractures and dislocations | |

¹ Safe Work Australia Model Code of Practice – First Aid in the Workplace) p4\

² Reported 7/9/2017 - <http://www.qld.redcross.org.au/news/world-first-aid-day-be-prepared.aspx>

³ <https://sls.com.au/> (Accessed 17 January 2018)

⁴ <https://projectdefib.com.au/>

⁵ St John Ambulance Australia, *First Aid Facts*, <http://stjohn.org.au/first-aid-facts> (Accessed 20 December 2017)

The environments in which First Aid support may be called upon can vary as extensively as the conditions which are required to be treated, with examples of four key settings including:

- Public spaces (e.g. parks and outdoor recreation areas, beaches)
- Community activity, including events
- Private residencies/homes
- Workplaces.
- Extended care facilities
- Schools.

Commonwealth and State/Territory Legislation

Under jurisdictional law, either relating to Work Health & Safety or Occupational Health & Safety, First Aid responsibilities are required to be met by every organisation in Australia. In the HLT Health Training Package, Units coded *HLTAID* generally provide a framework for meeting the First Aid requirements (including refresher training at regular intervals) for a range of job roles.

It is generally mandatory that employers acknowledge a duty of care in providing a safe workplace. Roles and responsibilities in relation to what this means in practice is set out in WHS laws and regulations, which collectively refer to requirements for First Aid in the workplace.

The *Safe Work Australia – Model Code of Practice – First Aid in the Workplace* provides practical guidance for those under the WHS Act and WHS regulations (“the regulations”) required to provide adequate First Aid facilities in the workplace. The regulations place significant obligations on “persons conducting a business or undertaking” (PCBUs). Clause 42 of the *Model Work Health and Safety Regulations* specifies the “Duty to Provide First Aid” and the *First Aid in the Workplace Model Code of Practice* sets out guidance for implementation.

This framework was established as part of the harmonised WHS laws implemented across Australia under the national policy body, Safe Work Australia, in January 2012. The model law drafted by Safe Work Australia has formed the basis for each state’s laws.

Victoria and Western Australia have indicated a commitment to the harmonised WHS laws but have not yet transitioned to them. In July 2017, WA initiated the process for modernised WH&S legislation based on the national Act.

Regulation 42: When considering how to provide First Aid, a person conducting a business or undertaking must consider all relevant matters, including:

- the nature of the work being carried out at the workplace
- the nature of the hazards at the workplace
- the size, location and nature of the workplace
- the number and composition of the workers at the workplace.

While First Aid requirements are guided by regulation, employers are responsible for ensuring that employees have access to First Aid equipment and facilities, and trained First Aiders.⁶

For example, the following standards are recommended regarding the number of First Aiders for a workplace:

Low-risk workplaces

Generally no exposure to hazards that could result in a serious injury/illness requiring immediate medical attention:

- one First Aider for 10 to 50 workers
- two First Aiders for 51 to 100 workers, and
- an additional First Aider for every additional 100 workers.

High-risk workplaces

Potential exposure to hazards that could result in a serious injury/illness requiring immediate medical attention:

- one First Aider for up to 25 workers
- two First Aiders for 26 to 50 workers, and
- an additional First Aider for every additional 50 workers.

Safe Work Australia publish annual statistics relating to Work Health and Safety. The following statistics, based on workers compensation data, illustrate the mechanism and nature of workplace injuries and do not include illnesses. Most of the injuries would require first aid treatment.

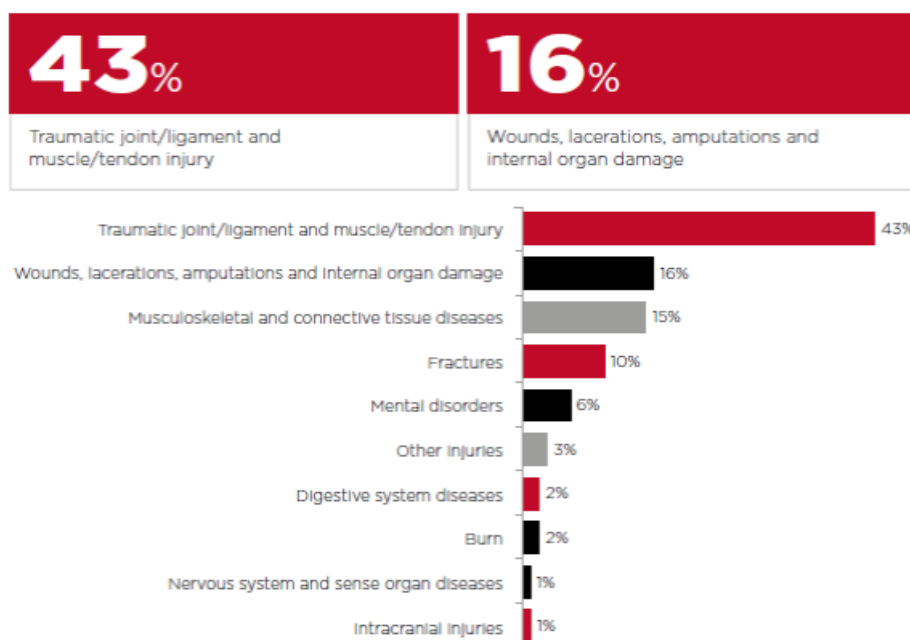
⁶ <https://www.safeworkaustralia.gov.au/first-aid>

Mechanism of incident



** Other mechanisms of incident include sound and pressure, other multiple mechanisms of incident, roll over, slide or cave-in and unspecified mechanisms of incident.

Nature of injury or disease



Safe Work Australia / Key Work Health and Safety Statistics, Australia 2017

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First Aid Training Products - Current at December 2017

There are no specific VET qualifications in First Aid. First Aid training is covered through eight Units of Competency in the Health Training Package. The current Units are:

- *HLTAID001 Provide cardiopulmonary resuscitation*
- *HLTAID002 Provide basic emergency life support*
- *HLTAID003 Provide First Aid*
- *HLTAID004 Provide an emergency First Aid response in an education and care setting*
- *HLTAID005 Provide First Aid in remote situations*
- *HLTAID006 Provide advanced First Aid*
- *HLTAID007 Provide advanced resuscitation*
- *HLTAID008 Manage First Aid services and resources.*

The HLT Units are generally categorised as ‘generic Units’ as, while they are housed in the HLT Health Training Package, they are applicable across all industries, and are used across all Training Packages in the VET system (i.e. not restricted to the Health Training Package). The status of the use of HLT Units across Training Packages is summarised in **Table 1**.

Table 1

Units	Inclusion of Unit in ...
HLTAID001 - Provide cardiopulmonary resuscitation http://training.gov.au/Training/Details/HLTAID001	5 Training Packages 72 qualifications 1,051 RTOs
HLTAID002 - Provide basic emergency life support http://training.gov.au/Training/Details/HLTAID002	7 Training Packages 35 qualifications 843 RTOs
HLTAID003 - Provide First Aid http://training.gov.au/Training/Details/HLTAID003	23 Training Packages 355 qualifications 2,421 RTOs
HLTAID004 - Provide an emergency First Aid response in an education and care setting http://training.gov.au/Training/Details/HLTAID004	2 Training Packages 4 qualifications 788 RTOs
HLTAID005 - Provide First Aid in remote situations https://training.gov.au/Training/Details/HLTAID005	6 Training Packages 32 qualifications 543 RTOs
HLTAID006 - Provide advanced First Aid http://training.gov.au/Training/Details/HLTAID006	8 Training Packages 82 qualifications 771 RTOs
HLTAID007 - Provide advanced resuscitation http://training.gov.au/Training/Details/HLTAID007	2 Training Packages 9 qualifications 257 RTOs
HLTAID008 - Manage First Aid services and resources http://training.gov.au/Training/Details/HLTAID008	3 Training Packages 17 qualifications 175 RTOs

Source: Training.gov.au. Accessed 20 December 2017

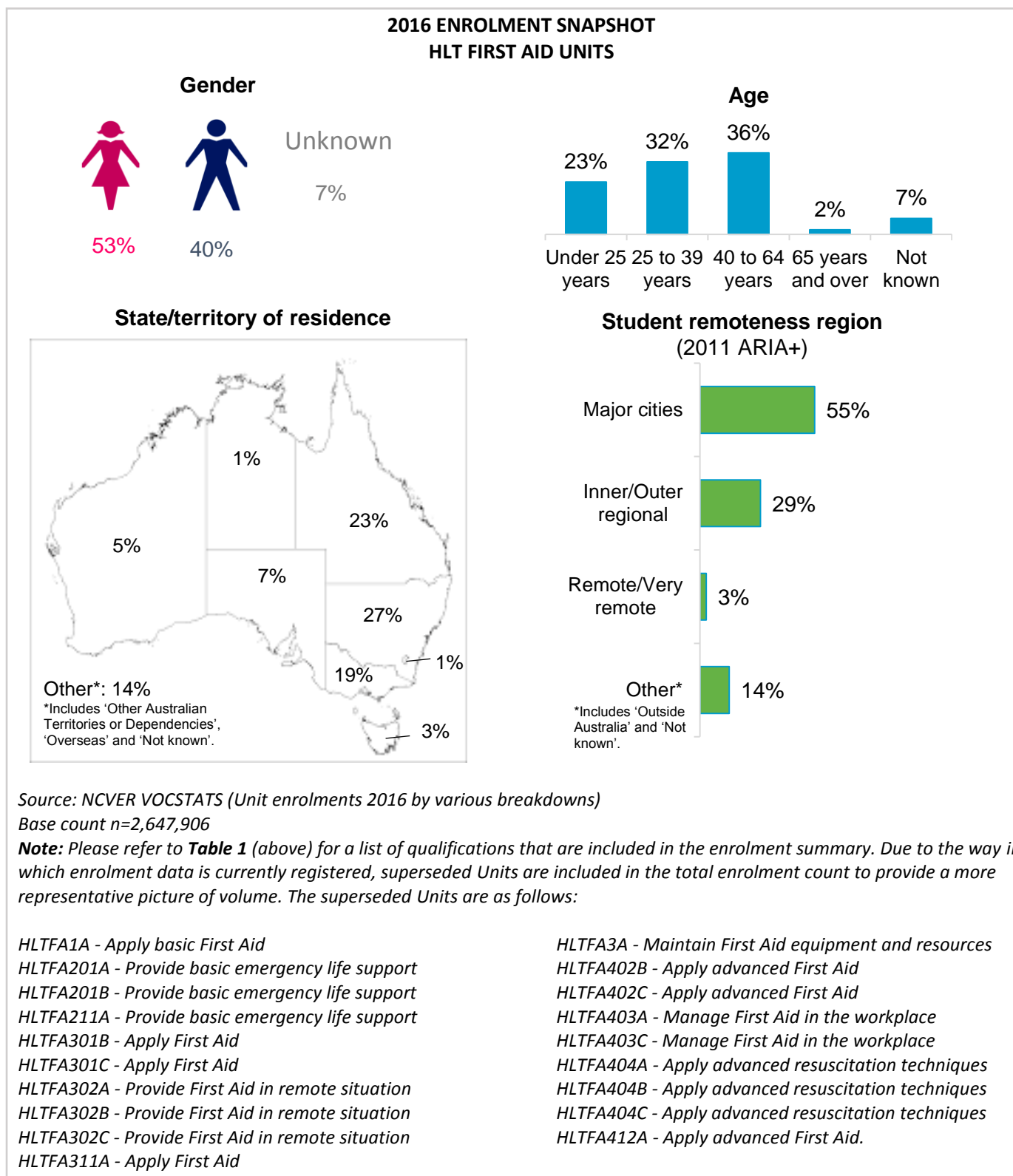
In addition, there are First Aid Units of Competency in industry-specific Training Packages:

- *CHCECE002 - Ensure the health and safety of children*
- *AVIF0002 - Provide First Aid in an aviation environment*
- *MARF013 - Provide medical First Aid on board a vessel*
- *MEM13001B - Perform emergency First Aid*
- *MSAPMOHS220A - Provide initial First Aid response*
- *PMAWHS221 - Maintain First Aid resources and records*
- *PMAWHS321 - Provide First Aid response in remote and/or isolated area*
- *PMAWHS320 - Provide advanced First Aid response*
- *PMAWHS420 - Develop First Aid procedures and manage resources*
- *PUAEME001B - Provide emergency care (Release 3)*
- *PUAEME002C - Manage injuries at emergency incident (Release 2)*
- *PUAEME003C - Administer oxygen in an emergency situation (Release 2)*
- *PUAEME004A - Provide emergency care for suspected spinal injury (Release 3)*
- *PUAEME005A - Provide pain management (Release 3)*
- *RIIERR205D - Apply initial response First Aid*
- *SISOOPS305A - Provide First Aid in a remote location*
- *UEENEEE101A - Apply Occupational Health and Safety regulations, codes and practices in the workplace*
- *UETTDRRF10B - Provide First Aid in an ESI* environment (*Electricity Supply Industry).*

HLT Unit Enrolments

In 2016, there were over 2,647,000 enrolments registered across all HLT First Aid Units. The most popular Units in 2016 included *HLTAID001 Provide cardiopulmonary resuscitation* (approximately 1.1 million enrolments) and *HLTAID003 Provide First Aid* (839,000 enrolments).

An overview of key traits regarding the learner cohort enrolled in First Aid Units for 2016 is provided below, followed by a breakdown of enrolments for individual Units.



General notes on statistics:

1. The data presented in this report is shown for indicative purposes only.
2. Enrolment data is sourced from NCVER VOCSTATS (Subject enrolments 2014 – 2016), accessed October 2017.
3. Changes in the reporting process have affected the results presented. From 2014 the requirement for RTOS other than public RTOS to report enrolments came into effect and in part accounts for the difference in results for 2014 and 2015.
4. From 2018, **all** training providers will be required to submit data, and the current discrepancies noted in the national NCVER figures versus actual attendance should therefore be minimal in future releases.
5. Figures reflect public and private RTO data.⁸

All Student Units – Enrolments

First Aid Units (HLT)	2014	2015	2016	Total
HLTAID001 - Provide cardiopulmonary resuscitation	17,3061	599,804	1,106,657	1,879,522
HLTAID002 - Provide basic emergency life support	33,941	206,470	465,145	705,562
HLTAID003 - Provide First Aid	243,888	573,827	839,096	1,656,813
HLTAID004 - Provide an emergency First Aid response in an education and care setting	53,432	108,666	126,992	289,088
HLTAID005 - Provide First Aid in remote situations	1,000	2,838	4,639	8,473
HLTAID006 - Provide advanced First Aid	5,474	10,500	16,309	32,281
HLTAID007 - Provide advanced resuscitation	6,572	19,719	31,785	58,080
HLTAID008 - Manage First Aid services and resources	985	1,817	3,635	6,436

⁸ Safe Work Australia 2016 FIRST AID IN THE WORKPLACE Code of Practice, <https://www.safeworkaustralia.gov.au/doc/model-code-practice-first-aid-workplace>

Stakeholders

National Peak Bodies and Key Industry Players

The following list represents a range of organisations involved in the regulation, promotion, training and/or support of First Aid.

- Government departments and agencies
 - Department of Defence
 - NT Worksafe
 - SafeWork NSW
 - SafeWork SA
 - Workplace Health and Safety Queensland, Office of Industrial Relations
 - WorkSafe ACT
 - WorkSafe Tasmania
 - WorkSafe Victoria
 - WorkSafe WA
- Peak and industry associations
 - Australian Emergency Care Providers
 - Australian Resuscitation Council
 - Australasian Society of Clinical Immunology and Allergy
 - Council of Ambulance Authorities
- Employee associations
 - Health Services Union
- Large and small employers across metropolitan, regional, rural and remote areas, who include:
 - Australian Red Cross
 - Royal Life Saving Society Australia
 - St. John Ambulance Australia
 - Surf Life Saving Australia.

Challenges and Opportunities

- First Aid Units of Competency are widely used. Under jurisdictional law, either relating to Work Health and Safety or Occupational Health and Safety, First Aid responsibilities are required to be met by every organisation. In the HLT Health Training Package, Units coded HLTAID generally provide a framework for meeting those First Aid requirements (including refresher training at regular intervals) for a range of job roles.
- The current HLT Units have been in place since 2013. This has been sufficient time to enable the identification of content that could be improved in terms of quality and consistency in application, as well as determining how well the Units cater to a diverse range of sectors.

Updating First Aid Units of Competency across Training Packages

There are instances where a person may be trained in First Aid, but his or her training does not align to the most up-to-date requirements. This may occur in instances where a qualification is conferred, but the listed First Aid Unit of Competency in that qualification is not the most current. When content changes are made to a Unit of Competency to align it with the most up-to-date industry requirements, and which require that Unit to be given a new code and title, it is a failure of the system that the Unit is not quickly updated across all qualifications where it is listed. This has been especially challenging within the First Aid sector. There are many occasions where a superseded Unit is still listed within the qualification despite there having been multiple updates of the Unit subsequent to the release of the qualification.

First Aid Units (HLT) Superseded - Enrolments	2014	2015	2016	Total
HLTFA1A - Apply basic First Aid	220	18	20	257
HLTFA201A - Provide basic emergency life support	2,224	2,411	860	5,495
HLTFA201B - Provide basic emergency life support	653	142	91	889
HLTFA211A - Provide basic emergency life support	41,757	13,148	11,521	66,424
HLTFA301B - Apply First Aid	12,808	2,701	1,283	16,790
HLTFA301C - Apply First Aid	23,189	4,627	2,076	29,890
HLTFA302A - Provide First Aid in remote situation	93	54	5	156
HLTFA302B - Provide First Aid in remote situation	41	0	2	45
HLTFA302C - Provide First Aid in remote situation	902	146	124	1,171
HLTFA311A - Apply First Aid	165,341	60,151	35,751	261,239
HLTFA3A - Maintain First Aid equipment and resources	0	0	-	0
HLTFA402B - Apply advanced First Aid	445	19	27	498
HLTFA402C - Apply advanced First Aid	556	59	4	619
HLTFA403A - Manage First Aid in the workplace	1	0	-	1
HLTFA403C - Manage First Aid in the workplace	502	94	41	636
HLTFA404A - Apply advanced resuscitation techniques	432	19	1	451
HLTFA404B - Apply advanced resuscitation techniques	107	72	15	190
HLTFA404C - Apply advanced resuscitation techniques	5,289	637	745	6,672
HLTFA412A - Apply advanced First Aid	2,944	1,418	1,082	5,445

Quality

Quality can be a challenge due to the breadth and diversity of both the recipients of First Aid and the settings in which it is performed, as well as the variations within the jurisdictional framework.

1. Regulations can be inconsistent

Despite there being a national jurisdictional framework there can be variations in both the legal implications of the state/territory laws and also the regulations relating to implementation.

These variations can lead to confusion in the marketplace when people don't have a clear understanding of the differences between the various Training Package products, or the knowledge to compare the different outcomes attributed to them. For example, it can be difficult for employers to determine which programs are best suited to their sector and which criteria are the best indicators of programs that meet their needs.

There is additional ambiguity due to the fact that some medications are not recognised in legislation and yet are sometimes required for the administration of First Aid.

Further anomalies exist in the sector. The Department of Defence, for example, is bound by Commonwealth law, and yet the locations of its training centres and workplace postings mean that state jurisdictional requirements are often also applicable.

Industry Best Practice

It is imperative that Training Package products keep pace with industry best practice. This is especially critical in the area of First Aid, in order to ensure the best possible responses and outcomes in terms of treatment and care.

The Australian Resuscitation Council (ARC) conducts a major review every five years, and these reviews often lead to changes in protocols. The next review is scheduled for 2020.

There can be areas of contention between the ARC protocols and other bodies' protocols in relation to more specific circumstances where First Aid is indicated, such as, for example, drowning, bleeding, and the use of compressions. This can create complications in defining industry best practice, as well as the knowledge and performance evidence required for the accurate assessment of Units of Competency.

2. Number of RTOS

There are significant numbers of RTOs with First Aid Units on scope. The combination of increased competition and the wide application of the competencies trainees acquire has led to the creation of an environment where RTOs have attempted to gain a competitive advantage by reducing their costs via the compression of both training and assessment periods. This means that there are now significant numbers of short courses available.

Where First Aid Units are delivered as part of a broader qualification, many RTOs now outsource the training and assessment of those Units to a RTO that specialises in this area.

This can be challenging in terms of managing quality and consistency in the application of standards.

3. Diversity in workplace application (Regulation 42)

The application of First Aid in workplaces must take into account:

- the nature of the work being carried out at the workplace
- the nature of the hazards at the workplace
- the size, location and nature of the workplace, and
- the number and composition of the workers at the workplace.

All of these factors, both on their own and collectively, present a plethora of possibilities. St John Ambulance Australia, for example, is able to call upon 10,000 event health service volunteers.⁹

In terms of other international environments in which First Aid skills are required there are several critical programs which deliver assistance to people in war zones, and which deal with the adverse consequences of various kinds of trauma, including human trafficking.¹⁰

Psychological First Aid (PFA), which is a technique designed to reduce the occurrence of post-traumatic stress disorder, has a recognised role in supporting people affected by disaster and has been the subject of United Nations' Working Groups and in particular the Sphere Project, which was launched in 1997 by a group of humanitarian agencies. It has application in Australia in disaster and emergency circumstances such as floods and bushfires.¹¹ It is humane, caring and compassionate and addresses emotional and practical needs and concerns above all else.¹²

4. Volunteers vs paid workforce

The application of First Aid Units applies to both the voluntary and remunerated workforces, from the smallest to even a very large scale, e.g. Surf Life Saving Australia, which has many thousands of volunteers.

5. Diversity of application (recipients of First Aid)

The recognition of different cohorts as the recipients of First Aid has also led to the recognition of different training needs, often targeted towards particular circumstantial factors or the characteristics of recipients. Training Package products need to be reviewed to determine whether the existing standards prescribed adequately accommodate these requirements. There is a question around whether the existing products can be contextualised to the cohorts evidenced in the operating environment, or whether additional Units or references are needed to address specific skills and knowledge requirements for First Aiders. The nature of these risks requires the First Aider to be able to identify whether there is a need for intervention, and, if so, the precautions that need to be taken (for example in certain conditions, anaphylaxis/allergies and asthma, and particular community groups such as children and the elderly).

Regulatory bodies may specify the type of First Aid training that is accepted within a particular industry in relation to the characteristic of a cohort. For example, under the *Education and Care Services National Law*, the Australian

⁹ <http://stjohn.org.au/volunteers>

¹⁰ https://www.unodc.org/documents/human-trafficking/TIP_1st_AidKit_English_V0981429.pdf

¹¹ Psychological First Aid, An Australian guide to supporting people affected by disaster, 2nd Edition, Australian Red Cross 2013 Accessed from - <https://www.redcross.org.au/getmedia/23276bd8-a627-48fe-87c2-5bc6b6b61eec/Psychological-First-Aid-An-Australian-Guide.pdf.aspx>

¹² Psychological First Aid, An Australian guide to supporting people affected by disaster, 2nd Edition, Australian Red Cross 2013

Children's Education and Care Quality Authority (ACECQA) must publish a list of approved First Aid qualifications, anaphylaxis management training and emergency asthma management training.

In Australia, First Aid training delivery to vulnerable groups is recognised. The Red Cross, for example, has developed specific programs and delivery methods for young people and people with learning difficulties or language and literacy issues. There is also increased recognition of the effects of drug and alcohol and the sequelae relating to overdoses. Additionally, programs to help normalise and reduce the stigma of mental health in the workplace have also been developed.¹³

Emerging Technologies

Automation is having an impact on the provision of First Aid. First Aid mobile apps provide quick and easy-to-follow instructions for providing First Aid and may also have videos and images to assist in an emergency. The development of these apps gives any individual access to the most up-to-date First Aid information anywhere, at any time.

However, it is important to note that many practical hands-on elements remain essential to the practice of First Aid, and technological aids such as these apps should therefore be used to complement formal First Aid training rather than to replace it. In addition the integrity and quality of the information in different apps can be open to question and not readily verified without knowing who is supporting the material. As apps are a feature in the industry consideration needs to be given to guidance for users in identifying a good product.

Use of Automated External Defibrillators (AEDs)

Automated External Defibrillators (AEDs) and other equipment used in the provision of First Aid have automated instructions for use and step-by-step instructions to assist users in times of emergency. Again, the use of these aids should not be considered as a replacement for formal training. It is also recommended that people trained in CPR should be on-site where AEDs are located. Their training should include learning how to recognise cardiac arrest, when to call 000 (Triple Zero) and how and when to perform CPR (chest compressions and rescue breaths). Providing CPR helps maintain blood flow and the supply of oxygen to the brain and other vital organs, and can also contribute to helping restore an effective heartbeat during defibrillation.¹⁴

¹³ For further information: <https://www.redcross.org.au/get-involved/learn/first-aid/streetwise-first-aid> <https://www.redcross.org.au/about-us/how-we-help/save-a-matehttps://www.redcross.org.au/mental-health-matters>

¹⁴ Statement - A Guide to AED's, July 2017, Australian Resuscitation Council

Key Generic Skills – Ranked in Order of Importance

Generic Workforce Skills Ranked in Order of Importance by the First Aid IRC

Note: The 12 generic skills listed below, including the descriptors, were provided by the Department of Education and Training for ranking purposes. For the 2018 ranking exercise, an 'Other' generic skill option was included in the list to capture any additional key skills for an industry. Please note in this case, no other generic skills were identified.

1	COMMUNICATION / COLLABORATION / SOCIAL INTELLIGENCE	Ability to understand/apply principles of creating more value for customers and collaborative skills. Ability to critically assess and develop content with new media forms and persuasive communications. Ability to connect in a deep and direct way.
2	CUSTOMER SERVICE / MARKETING	Ability to interact with another human being, whether helping them find, choose or buy something. Ability to supply customers' wants and needs. Ability to manage online sales and marketing. Ability to understand and manage digital products.
3	TECHNOLOGY AND APPLICATION	Ability to create/use of technical means, understand their interrelation with life, society, and the environment. Ability to understand/apply a scientific or industrial processes, inventions, methods. Ability to deal with mechanisation/ automation / computerisation.
4	LEARNING AGILITY / INFORMATION LITERACY / INTELLECTUAL AUTONOMY	Ability to identify a need for information. Ability to identify, locate, evaluate, and effectively use and cite the information. Ability to develop a working knowledge of new systems. Ability to work without direct leadership and independently.
5	DESIGN MINDSET/ THINKING CRITICALLY / SYSTEM THINKING / PROBLEM SOLVING	Ability to adapt products to rapidly shifting consumer tastes and trends. Ability to determine the deeper meaning or significance of what is being expressed via technology. Ability to understand how things that are regarded as systems influence one another within a complete entity, or larger system. Ability to think holistically.
6	MANAGERIAL / LEADERSHIP	Ability to effectively communicate with all functional areas in the organisation. Ability to represent and develop tasks and processes for desired outcomes. Ability to oversee processes, guide initiatives and steer employees toward achievement of goals.
7	STEM Science, Technology, Engineering and Maths (STEM)	Sciences, mathematics and scientific literacy.
8	LANGUAGE, LITERACY & NUMERACY (LLN)	Foundation skills of literacy and numeracy.
9	DATA ANALYSIS	Ability to translate vast amounts of data into abstract concepts and understand data-based reasoning. Ability to use data effectively to improve programs, processes and business outcomes. Ability to work with large amounts of data.
10	FINANCIAL	Ability to understand and apply core financial literacy concepts and metrics, streamlining processes such as budgeting, forecasting, and reporting, and stepping up compliance. Ability to manage costs and resources, and drive efficiency.
11	ENTREPRENEURIAL	Ability to take any idea and turn that concept into reality / make it a viable product and/or service. Ability to focus on the next step / closer to the ultimate goal. Ability to sell ideas, products or services to customers, investors or employees etc.
12	ENVIRONMENTAL / SUSTAINABILITY	Ability to focus on problem solving and the development of applied solutions to environmental issues and resource pressures at local, national and international levels.

Key Drivers for Change and Proposed Responses

Changes in Industry Best Practice

Considering the length of time since the previous review and the necessity for the content of these Training Package products to remain current and appropriate, a full review of these Units of Competency has been scheduled for the 2018–19 year. Technology, experience and evolving circumstances over time lead to changes in best practice and consequently to changes to the skills and knowledge required of people administering First Aid.

Diversity in Scope and Breadth of First Aid

As these First Aid Units are used so broadly across so many industries it is imperative that regular updates ensure that contextualisation remains appropriate. The incidence of asthma and anaphylaxis has had a rapid and continuing rise and is part of a National Allergy Strategy. Existing First Aid Units of Competency explicitly refer to these conditions in the Unit *HLTAID004 Provide an emergency First Aid response in an education and care setting*. However, recent and continuing trends suggest that there is a need for broader recognition in the First Aid Units.

Increase Clarity and Uniformity Wherever Possible

Opportunities to reduce confusion resulting from ambiguity in jurisdictional frameworks or within industries need to be regularly investigated given that peak bodies have differing requirements. The Australian Resuscitation Council, Royal Life Saving and Surf Life Saving all have different intervention requirements around drowning and resuscitation, for example. We need to ensure that Training Package products keep pace with current industry best practice and ensure that all Units are fit for purpose.

Increased Recognition of the Role of Mental Health Support in the Provision of First Aid

Skills in recognising and providing First Aid to those requiring mental health support are becoming increasingly important. Content around this area should be added to appropriate Units, or consideration should be given to the development of a new Unit to address this area.

The necessary skills would be those required to identify behaviours associated with acute mental health issues and those needed to provide appropriate responses. This is an evolving area of support. There is also the possibility that some complex physiological elements in some existing Units should be removed and that content introducing the topic of mental health should instead be developed. It is important to ensure that all Units can continue to be contextualised for different industry requirements.

Proposed Schedule of Work

2018-19 Project Details

Year	Project Title	Description
2018-19	Update First Aid	<ul style="list-style-type: none">• Changes in best practice• Use of AEDs and associated responsibilities in various contexts – worksites, public spaces, shopping centres (refer to page 11)• Consideration of changes to the cohorts of First Aid recipients, taking into account the incidence of underlying issues such as mental health (refer to pages 10 -11)• The impact of changes in legislation and regulations

		<ul style="list-style-type: none"> The tracking of trends in superseded HLT Units that have been imported into other Training Packages (refer to page 8)
Year	Project Title	Description
2019-20	First Aid	Develop new Units where the need is identified in the 2018-19 update.
2020-21	First Aid	Update First Aid Units, including knowledge and performance evidence requirements, in accordance with the ARC (Australian Resuscitation Council) protocols. The ARC review is scheduled for completion in 2020

2018-19 Project Details

Project Title	First Aid
Description:	Update First Aid Training Package products in the HLT Training Package
Rationale:	<p>The HLT Units have not been the subject of a full review since 2013 and it is vital that the content remain current and appropriate.</p> <p>Existing Units have been in place for sufficient time to have tested suitability and to have identified where improvements can be made. Advancements in treatments, increasing technological developments and changes in protocols (both national and international) have implications for the skills standards for First Aid. The Units are used broadly across all Training Packages.</p> <p><i>Specific issues are as follows:</i></p> <p>These Units have been intended for use across various industry sectors. The update should consider their application in both existing and additional or potentially new industries, and consider in what ways the Units can be contextualised to meet specific needs.</p> <p>The Units have been customised to enhance their potential use across Training Packages.</p> <p>Asthma and anaphylaxis need to be covered in the First Aid Units and could potentially require a new Unit. There are a number of accredited courses and state regulations in respect to these conditions and the potential for a new Unit need to be investigated.</p> <p>There remain superseded HLT First Aid Units in use as evidenced in the enrolment statistics. This is an issue which needs to be addressed. The review should identify and address mechanisms to strengthen the quality and consistency of the application of the First Aid Training Package products.</p> <p>The current HLT First Aid Units of Competency relate to Automated External Defibrillators (AEDs). We need to consider the impact of an expired accredited course in Victoria (22101VIC) which previously provided training in relation to the proper care and maintenance of the AEDs to ensure they are operational when required. The potential gap that has been identified relates to the maintenance and checking of, as well as hazards and risks associated with, AEDs.</p> <p>Knowledge and performance evidence need to be updated to ensure contextualisation can address issues relating to mental health, vulnerable groups, and at-risk cohorts. Where justified, new Units may be required.</p> <p>Best practice standards to include in the CVIG to promote quality in the outcomes of First Aid training need to be identified.</p>
Minister's Priorities Addressed:	<p>This project will:</p> <ul style="list-style-type: none"> • identify and remove obsolete Training Package products from the system, i.e. the jurisdictional framework • ensure First Aid skills continue to be portable across multiple sectors and identify unnecessary duplication

	<ul style="list-style-type: none"> consider the role of additional skill sets in addressing specific industry needs.
Consultation Plan:	<p>An update of the HLT First Aid Training Package products currently in use needs to be carried out.</p> <p>National consultation workshops need to be undertaken, including industry-specific forums where there are significant differences in requirements. Webinars and focus groups can be used to supplement the workshops. The use of an online feedback tool is well established and will be employed.</p>
Scope of Project:	First Aid HLT Units
Number of Qualifications:	N/A
List of Qualifications:	N/A
Number of Skill Sets:	4
List of Skill Sets:	<ul style="list-style-type: none"> <i>HLTSS00027 Occupational First Aid Skill Set</i> <i>HLTAID006 Provide advanced First Aid</i> <i>HLTAID007 Provide advanced resuscitation</i> <i>HLTAID008 Manage First Aid services and resources</i>
Number of Units of Competency:	9
List of Units of Competency:	<ul style="list-style-type: none"> <i>HLTAID001 Provide cardiopulmonary resuscitation</i> <i>HLTAID002 Provide basic emergency life support</i> <i>HLTAID003 Provide First Aid</i> <i>HLTAID004 Provide an emergency First Aid response in an education and care setting</i> <i>HLTAID005 Provide First Aid in remote situations</i> <i>HLTAID006 Provide advanced First Aid</i> <i>HLTAID007 Provide advanced resuscitation</i> <i>HLTAID008 Manage First Aid services and resources</i> <p>(as well as potential new Units).</p>

IRC Sign-off

The 2018 Industry Skills Forecast will be signed off by the IRC Chair prior to submission to the AISC.