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HS 9

First Aid at Work Policy

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CONTENTS

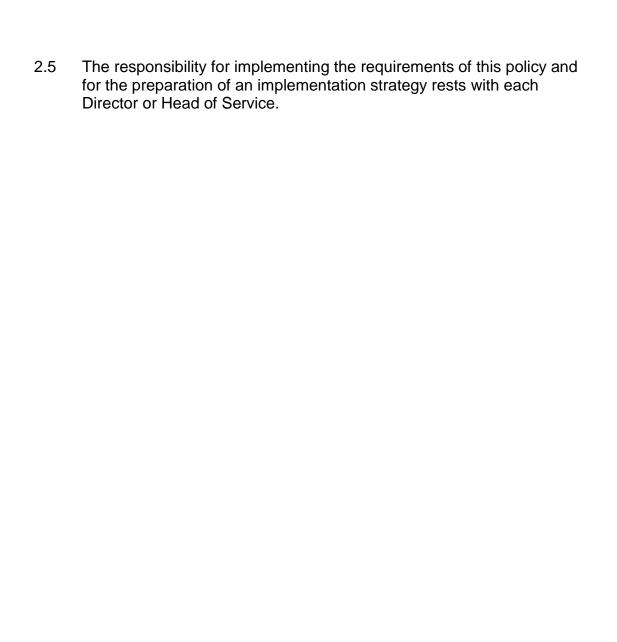
1.	Introduction	1
2.	Policy Statement	1
	Policy Guidance	
3.	Legal Indemnity of First Aid Personnel	3
4.	Needs Assessment	3
5.	First Aid Personnel, Training and Qualifications	5
6.	First Aid Kits/Materials/Equipment	.11
7.	First Aid Rooms	.14
8.	Recording Incidents/Accidents	.16
9.	Information for Employees	.17
10.	Arrangements to Follow	.17
11.	Payments to First Aid Personnel	.18
12.	Advice	.19
	Appendix A - First Aid Needs Assessment Checklist	.20
	Appendix B - Common Workplace Hazards	.24
	Appendix C - Examples of Additional Training Needs	.25
	Appendix D - Record of First Aid Provision	.26
	Appendix E - Suggested Number of First Aid Personnel to be Available	
	at All Times People Are at Work	.27
	Appendix F - Record of Incidents Attended by First Aid Personnel	.28
	Managers Checklist	.30

1. <u>INTRODUCTION</u>

- 1.1 This policy has been produced in response to the Health and Safety (First-Aid) Regulations (hereafter referred to in this policy as the Regulations).
- 1.2 Reference is made in this policy to the Health and Safety Executive (HSE) publication L 74: First Aid at Work: The Health and Safety (First-Aid) Regulations 1981: Guidance on Regulations (hereafter referred to in this policy as L 74).

2. POLICY STATEMENT

- 2.1 The Council recognises that it has a legal duty to make arrangements to ensure that its employees receive immediate attention if they are injured or taken ill at work, irrespective of whether the injury or illness is caused by the work they do, and that an ambulance is called in serious cases.
 - First aid can save lives and prevent minor injuries becoming major ones. The Regulations, L 74 and this policy cover the arrangements that need to be made to manage injuries or illness suffered at work.
- 2.2 The Council is committed to providing adequate and appropriate first aid equipment, facilities and personnel to ensure that its employees can be given immediate help if they are injured or taken ill at work.
 - As part of this commitment, the Council will provide information and training on first aid to employees to ensure that statutory requirements and the needs of the Council are met.
- 2.3 Although there is no obligation on the Council under the Regulations to provide first aid for non-employees, for example pupils in schools, visitors to leisure centres, etc., it is the policy of the Council to do so.
 - Where first aid provision is intended to cover both employees and nonemployees, it must be ensured that:
 - the level of provision for employees does not fall below the standard required by the Regulations;
 - the level of provision for non-employees complies with any other relevant legislation and guidance.
- 2.4 The Council (or school, as appropriate) will pay for all first aid equipment assessed as necessary to comply with the Regulations and this policy.



POLICY GUIDANCE

3. **LEGAL INDEMNITY OF FIRST AID PERSONNEL**

3.1 The Council, through its insurers, will provide indemnity to its first aid personnel who, whilst on duty for the Council, assist employees or non-employees who are injured or become ill.

4. <u>NEEDS ASSESSMENT</u>

- 4.1 The aim of first aid is to reduce the effects of injury or illness suffered at work, whether caused by the work itself or not. First aid provision must be 'adequate and appropriate in the circumstances'. This means that sufficient first aid equipment, facilities and personnel should be available at all times, taking account of alternative work patterns, to:
 - give immediate assistance to casualties with both common injuries or illness and those likely to arise from specific hazards at work;
 - summon an ambulance or other professional help.
- 4.2 The appropriate manager in each workplace must undertake a first aid needs assessment to determine the level of first aid provision required, taking into consideration the circumstances (hazards and risks) of their particular workplace.
 - There is no fixed level each manager needs to assess the equipment, facilities and personnel that are appropriate.
- 4.3 Where the workplace is a low hazard environment, such as offices and libraries, it may be that only an appointed person is required to take care of first aid arrangements, and that a suitably stocked and sized first aid kit be provided.

Where the work involves higher level hazards, such as chemicals or dangerous machinery, or special hazards, such as hydrofluoric acid or confined spaces, first aid requirements will be greater and managers may need to:

- provide sufficient numbers of qualified first aiders so that someone is always available to give first aid immediately following an incident;
- provide additional training for first aiders to deal with injuries resulting from special hazards;
- consider additional first aid equipment;
- provide one or more first aid rooms;
- inform the local emergency services, in writing, of the site where hazardous substances or processes are in use.

- 4.4 Where different work activities are carried out in different parts of the same premises, the relevant manager(s) will need to take into account the different hazards and risks associated with the different work activities when deciding on the level of first aid provision required.
 - For example, a work site may contain both an office area and a workshop area, and the level of first aid provision determined as necessary for the office may not be adequate for the workshop.
- 4.5 When carrying out a first aid needs assessment, managers should consider:
 - the nature of the work and workplace hazards and risks (Appendices A, B and C may be of assistance);
 - the nature of the workforce (consider the particular needs of young workers and trainees, or employees with particular health problems, etc.);
 - the workplace's history of accidents (this can help determine what equipment is necessary, where it should be sited, etc.);
 - the size of the workplace/number of people employed (generally, the larger the workforce, the greater the first aid provision required);
 - the needs of travelling, remote and lone workers (consider travel first aid kits, mobile phones, etc.);
 - work patterns (e.g. shifts and out of hours);
 - the distribution of the workforce (e.g. more equipment may be needed where buildings are spread out over a site or in multi-floor buildings);
 - the remoteness of the site from emergency medical services (it may be advisable to inform the emergency services of the location of the workplace/any specific hazards);
 - employees working on shared or multi-occupied sites (it may be beneficial to share first aid facilities with other employers);
 - annual leave and other absences of first aiders and appointed persons (ensure adequate first aid provision is available at all times people are at work);
 - first aid provision for non-employees (it is the policy of the Council to provide first aid for non-employees if they are injured or taken ill whilst on its premises, e.g. children in schools, visitors to sports centres, etc.).

4.6 Further guidance on first aid needs is contained within the remaining sections and in the Appendices.

Appendix A is an assessment checklist to help assess first aid needs.

Appendix B gives examples of common workplace hazards, causes of accidents linked to those hazards and examples of injuries resulting from such accidents.

Appendix C gives examples of additional training needs.

Appendix E is a flow chart that serves as a general guide on how many first aiders or appointed persons may be needed. The numbers quoted in Appendix E are suggestions only. There are no hard and fast rules and managers should complete a first aid needs assessment, taking into account all relevant information, before making a judgement.

- 4.7 When the first aid needs assessment has been completed, the workplace manager should provide the materials, equipment and facilities needed to make sure that the level of cover identified as necessary will be available to employees at all relevant times. This will include ensuring that first aid equipment, suitably marked and easily accessible, is available in all places where working conditions require it.
- 4.8 Managers should periodically review their first aid needs, particularly after any operating changes, to ensure provision remains appropriate.

5. FIRST AID PERSONNEL, TRAINING AND QUALIFICATIONS

- 5.1 The onus is on the Council to ensure that any training providers used to deliver first aid training to its employees are competent, and that they offer a standard of training with appropriate content, suitable trainers and assessors and relevant and robust quality assurance systems.
- 5.2 One way of doing so is to select a training provider that offers 'regulated qualifications'. Regulated qualifications are nationally recognised and can be obtained from a training centre for an 'awarding organisation' (AO).

These AOs are recognised by qualification regulators (Ofqual, the Scottish Qualifications Authority (SQA) or the Welsh Government), have dedicated policies and quality assurance processes and must approve and monitor their training centres to ensure training meets a certain standard. Regulators stipulate that AOs and their training centres must work in compliance with the Assessment Principles for First Aid Qualifications (which can be found on the Skills for Health

website <u>www.skillsforhealth.org.uk</u>) and other key criteria, including the competence of trainers and assessors and the content of quality assurance systems.

Guidance and assistance in selecting a competent first aid training provider is available on the HSE's first aid web pages.

5.3 Another way of doing so is to obtain training from the Voluntary Aid Societies, who together are acknowledged by the HSE as one of the standard-setters for currently accepted first aid practice as far as they relate to the topics covered in first aid at work (FAW) and emergency first aid at work (EFAW) training courses. The Voluntary Aid Societies work to similar principles of assessment and employ a similar hierarchy of policies and processes to AOs.

These Voluntary Aid Societies are:

- St John Ambulance;
- British Red Cross;
- St Andrew's First Aid.
- 5.4 There are training providers affiliated to other voluntary accreditation schemes, as well as non-affiliated, independent training providers. Where a manager selects such a training provider, he/she will need to be confident that the provider will deliver training with appropriate content (i.e. in line with FAW and EFAW courses, together with any additional training identified as necessary by the first aid needs assessment), will use suitable trainers and assessors, and has relevant and robust quality assurance systems in place.
- 5.5 Training organisations should use training material, and teach the first aid management of injuries and illnesses, as covered by FAW/EFAW training courses and in accordance with:
 - current guidelines published by the Resuscitation Council (UK); and
 - the current edition of the first aid manual of the Voluntary Aid Societies (see 5.3 above); or
 - other published guidelines, provided they are in line with the two above or supported by a responsible body of medical opinion.
- 5.6 Blended learning, which is a combination of electronic distance based and face to face classroom based instruction, is an accepted means by which workplace first aid training can be delivered.

If a manager decides to use this method to provide first aid training to employees, then he/she should first conduct the necessary additional checks (due diligence) to make sure they are satisfied that:

- the individual being trained knows how to use the technology that delivers the training;
- the training provider has an adequate means of supporting the individual during their training;
- the training provider has a robust system in place to prevent identity fraud:
- sufficient time is allocated to classroom based learning and assessment of the practical elements of the syllabus. (Elements of the syllabus requiring practical demonstration of first aid administration is to be assessed by direct observation to ensure the competence of candidates – as is strongly recommended by the HSE);
- the training provider has an appropriate means of assessing the elearning component of the training.

Managers must also ensure that adequate time is set aside during the working day for employees to undertake any first aid training they receive, as required by Regulation 13 of the Health and Safety Management Regulations.

- 5.7 Where a manager decides to provide first aid training using an 'inhouse' training provider, he/she will need to establish that it is appropriate by ensuring that the content reflects the content of the EFAW or FAW qualifications, and that it is delivered in accordance with currently accepted standards for first aid.
- 5.8 In-house employees acting as trainers/assessors should have the necessary skills, qualifications and competence expected of those working for an external training provider.

A quality assurance system is needed to ensure that the competence of trainers/assessors is regularly reviewed by competent 'verifiers'. These systems should be reviewed on an annual basis by a competent person independent of those directly involved in the delivery/assessment of the training.

- 5.9 Managers should document the checks they have undertaken to confirm the competence of a training organisation, and retain a record of those checks so that, if necessary, they can demonstrate to a HSE inspector how they selected a training provider.
- 5.10 Although there may be alternative first aid qualifications available, for the purposes of this policy a 'first aider' is deemed to be someone who has undertaken training and holds a valid certificate of competence in either:
 - first aid at work (FAW); or

emergency first aid at work (EFAW);

as appropriate, and as determined by a first aid needs assessment and delivered by a competent training provider.

- 5.11 If the assessment of first aid needs determines that FAW-trained first aiders are required in the workplace, it is not acceptable to provide EFAW-trained first aiders instead.
- 5.12 When arranging FAW or EFAW training, managers should let the training organisation know of any particular hazards at their workplace so training can be tailored to meet those needs.

Examples of common workplace hazards, causes of accidents linked to those hazards and examples of injuries resulting from such accidents are given in **Appendix B**.

5.13 Managers should ensure that first aiders undertake any training in addition to the FAW/EFAW qualification that is appropriate to the circumstances of their workplace and as identified by the first aid needs assessment.

For example, more in depth training would be advisable in cases where work activities involve the use of hydrofluoric acid, working in confined spaces or working outdoors or in remote locations. Providing training in use of tourniquets and when and how haemostatic dressings are applied when your first aids needs assessment has identified a need for them is another example of additional training, as is providing paediatric first aid training to first aid personnel in schools.

Examples of additional training needs are given in **Appendix C**.

The HSE does not specify the course content or design of additional training courses and they can be undertaken in combination with FAW/EFAW courses or as stand alone courses. Separate certificates for additional training may be issued or combined on a single certificate with FAW/EFAW training. In either case, the certificate should record the detail of any additional training undertaken.

5.14 All first aid training certificates, whether FAW, EFAW or some other appropriate training, are valid for three years and retraining needs to be arranged before certificates expire.

The FAW re-qualification course lasts two days and should cover the same content as he initial FAW course.

If the first aider does not retrain or re-qualify before the expiry date on their current certificate, they are no longer considered competent to act as a first aider in the workplace. They can re-qualify at any time after the expiry date by undertaking the two day re-qualification course. However it may be prudent to complete the three day FAW course, especially where a considerable period – i.e. in excess of one month – has elapsed since the FAW certificate expired. It is for the manager to decide the most appropriate training course to re-qualify the first aider.

An EFAW re-qualification course should be of the same duration and content as the initial EFAW course.

5.15 As is strongly recommended by the HSE, it is the Council's policy that trained first aid personnel undertake annual refresher training during any three year FAW/EFAW certification period.

This will help qualified first aid personnel maintain their basic skills and keep up to date with any changes to first aid procedures.

- 5.16 Managers should keep a record of first aid training certificates for a minimum of three years.
- 5.17 Managers should encourage first aiders to regularly review their course manual and any other instructional materials, and allocate them time to do this. It will further help to maintain their first aid skills.
- 5.18 When selecting someone to take up the role of a first aider, managers need to take into account a number of factors, including an individual's:
 - reliability, disposition and communication skills;
 - aptitude and ability to absorb new knowledge and learn new skills;
 - ability to cope with stressful and physically demanding emergency procedures;
 - normal duties, which should be such that they may be able to respond immediately and rapidly to an emergency.
- 5.19 Provided they can demonstrate current knowledge and skills in first aid, the training and experience of the following qualify them to administer first aid in the workplace without the need to hold a FAW or EFAW or equivalent qualification;
 - doctors registered and licensed with the General Medical Council;
 - nurses registered with the Nursing and Midwifery Council;
 - paramedics registered with the Health and Care Professional Council.

5.20 When your assessment of first aid needs identifies that a first aider is not necessary, an 'appointed person' must be appointed to take charge of first aid arrangements, including looking after first aid equipment and facilities and calling the emergency services when required. This is the minimum requirement for an employer.

In the absence of first aiders, arrangements should be made for an appointed person to be available to undertake the above duties at all times when people are at work (though appointed persons are not necessary where there is an adequate number of first aiders).

5.21 To fulfil their role appointed persons do not need first aid training, though they may benefit from completion of an EFAW course.

Therefore, it is important to remember that appointed persons are not first aiders and should not attempt to give first aid for which they have not been trained.

In view of the above, and the possibility remaining that an accident or sudden illness may occur, then even if your assessment of first aid needs identifies that a first aider is not necessary, but only an appointed person, managers may wish to provide a qualified first aider anyway.

5.22 The Regulations allow for an appointed person to provide emergency cover in the absence of first aiders, but only where the absence is due to exceptional, unforeseen and temporary circumstances. Absences such as annual leave do not count. If the first aid needs assessment indicates that first aiders are required, they should be available whenever the need arises, i.e. at all times during the working day there should be a first aider on duty.

So if, for example, your first aid needs assessment determines that one first aider is required in your workplace plus another one to cover for planned absences such as leave, but due to unforeseen circumstances both are off at the same time, the Regulations allow for a person to be appointed to look after the first aid equipment and call the emergency services for the period of the unforeseen and temporary absence of the first aider(s).

5.23 Managers should keep a register of the names of all first aiders and appointed persons, together with details of their training, so that refresher training/retraining can be arranged as and when required.

6. FIRST AID KITS/MATERIALS/EQUIPMENT

- 6.1 The minimum level of first aid equipment that must be provided in a workplace is at least one suitably sized, stocked and properly identified first aid kit. Each work site should be provided with at least one first aid kit supplied with a sufficient quantity of first aid materials suitable for the particular circumstances.
 - Depending on the findings of the first aid needs assessment, more than one first aid kit may be required on larger sites/in larger buildings.
- 6.2 First aid kits should be easily accessible, preferably placed near to hand washing facilities and be identified by a white cross on a green background.

Notices are to be displayed in prominent positions throughout the workplace and are to contain the following information:

- the location of the first aid kit(s);
- the name of the first aider(s)/appointed person(s), together with their telephone extension numbers (where appropriate).

First aid kits should include a guidance leaflet and a contents list (a suitable guidance leaflet to include in a first aid kit would be the Health and Safety Executive leaflet INDG 347 – Basic advice on first aid at work).

- 6.3 The contents of any first aid kit provided for any workplace must include all items and materials determined as necessary by the first aid needs assessment.
 - This may require the purchase of additional items to those contained in a 'standard' first aid kit obtained from suppliers (which should comply with British Standard BS 8599 1:2011: Workplace First Aid Kits).
- 6.4 Where your first aid needs assessment indicates that additional materials and equipment are necessary, for example disposable aprons, hypoallergenic microporous adhesive tape or sterile disposable tweezers, they may be kept in the first aid kit if there is room, or stored separately.

Furthermore there may be a need for items such as protective equipment if first aiders have to enter dangerous atmospheres, or calcium gluconate for the management of hydrofluoric acid burns. Such items should be stored securely near the first aid kit, in the first aid room (where provided) or in the hazard area, as appropriate, and access to them should be restricted to people trained in their use.

If mains tap water is not readily available for eye irrigation, at least one litre of sterile water or sterile normal saline (0.9% w/v) in sealed, disposable containers should be provided. Once the seal has been broken, containers should not be kept for re-use. Containers should not be used beyond their expiry date.

If your first aid needs assessment has identified a need for tourniquets and/or haemostatic dressings (perhaps for workplaces involved in construction, agriculture, forestry and some aspects of manufacturing), then it must be ensured that the haemostatic dressings are always in date.

6.5 If your first aid needs assessment has identified that it would be advisable to provide an automated external defibrillator (AED) in your workplace, or the Council/an alternative body has done so anyway, then any designated first aider will have received training in its use since such training is now an integral part of the syllabus for FAW and EFAW courses.

However if there is currently no trained first aider in your workplace, then to comply with the Provision and Use of Workplace Equipment Regulations (PUWER), you must at least provide information and written instructions, for example from the manufacturer of the AED, on how to use it.

Alternatively, you may wish to ensure that that there will be a more fully trained and competent user in the workplace and increase your level of first aid provision to include a trained first aider, in addition to any such information and written instructions.

6.6 First aid at work does not include giving tablets or medicines to treat illness. The only exception to this is where aspirin is used when giving first aid to a casualty with a suspected heart attack in accordance with currently accepted first aid practice. It may be, for instance, that someone who has suffered a heart attack previously carries aspirin against the possibility of suffering another. However, should such a situation occur, the first aider's role would generally be limited to helping the person take the aspirin that they carry with them and then contacting the emergency services. It is therefore recommended that tablets and medicines are not kept in a first aid kit.

Some employees may carry their own medication that has been prescribed by their doctor (e.g. an inhaler for asthma). If an individual needs to take their own prescribed medication, the first aider's role would again generally be limited to helping them do so and contacting the emergency services if appropriate.

Medicines legislation restricts the administration of injectable medicines - unless self administered, they may only be administered by or in accordance with the instructions of a doctor (e.g. by a nurse). However, in the case of adrenaline there is an exemption to this restriction, which means in an emergency a layperson is permitted to administer it by injection for the purpose of saving life.

The use of an Epipen to treat anaphylactic shock is another example of an exemption from the restriction imposed by the medicines legislation. Therefore, first-aiders may administer an Epipen if they are dealing with a life-threatening emergency involving a casualty who has been prescribed and is in possession of an Epipen, and where the first-aider is trained to use it.

6.7 First aid kits must be maintained and restocked when necessary by authorised personnel, who should be aware of the procedure for reordering supplies.

Sufficient supplies should be held in stock on site.

Care should be taken to dispose of items safely once they reach their expiry date.

6.8 Travel (portable) first aid kits should be made available for those employees who are required to work away from the normal workplace when access to facilities may be restricted.

Examples of such instances include:

- working with potentially dangerous tools and machinery away from the base location;
- employees travelling in vehicles on a regular basis, e.g. delivery personnel, mobile inspectors etc.;
- employees whose work takes them to isolated or remote locations;
- employees participating in sporting or social events arranged or supported by the Council;
- employees travelling abroad on Council business.

Suitable arrangements should be in place for restocking travel first aid kits.

6.9 The size of the first aid kits to be used in a workplace environment is determined by the number of employees and the category of hazard incurred by the workplace environment – see Table 1 below.

Where there are special circumstances, such as remoteness from emergency medical services, shiftwork or sites with several separate buildings, there might need to be more first aid kits than set out in Table 1.

Table 1: Guidance on First Aid Kit Sizes for a Workplace Environment (from BS 8599 – 1: 2011: Workplace First Aid kits)

Category of Hazard	Number of Employees	Number and Size of First Aid Kit
Low hazard e.g. shops, offices, libraries etc.	Fewer than 25 25 – 100 More than 100	1 small kit 1 medium kit 1 large kit per 100 employees
High hazard e.g. light engineering and assembly work, food processing, warehousing, extensive work with dangerous machinery or sharp instruments, construction, chemical manufacture etc.	Fewer than 5 5 – 25 More than 25	1 small kit 1 medium kit 1 large kit per 25 employees

NOTE: In addition to Table 1 above, **Appendices A, B, C** and **E** of this policy will help you determine the level of first aid provision required for your workplace, and **Appendix D** may be used to record the findings of your first aid needs assessment.

7. FIRST AID ROOMS

7.1 A suitable first aid room(s) should be provided where the assessment of first aid needs identifies this as necessary.

A first aid room will usually be necessary where there are higher hazards, such as in chemical industries or on large construction sites, and in larger premises at a distance from medical services.

7.2 Where possible, the room should be reserved exclusively for giving first aid.

Where this is not the case, managers need to make sure that the first aid facilities can be made available quickly if necessary. For example, they should consider the implications of whether:

- the activities usually carried out in the room can be stopped immediately in an emergency;
- the furnishings and equipment can be moved easily and quickly to a position that will not interfere with giving first aid;
- the storage arrangements for first aid furnishings and equipment allow them to be made available quickly when necessary.
- 7.3 A first aid room should contain essential first aid facilities and equipment, be easily accessible to stretchers, clearly signposted and identified by white lettering or symbols on a green background, and access to it should only be given by authorised personnel.
- 7.4 First aid rooms should:
 - be large enough to hold an examination/medical couch, with enough space at each side for people to work, a chair and any necessary additional equipment;
 - have washable surfaces and adequate heating, ventilation and lighting;
 - be kept clean, tidy, accessible and available for use at all times when employees are at work;
 - be positioned as near as possible to a point of access for transport to hospital;
 - display a notice on the door advising of the names, locations and, if appropriate, telephone extension numbers of first aiders.
- 7.5 Typical examples of the equipment and facilities a first aid room may contain are:
 - a sink with hot and cold running water;
 - drinking water with disposable cups;
 - soap and paper towels;
 - a store for first aid materials;
 - foot-operated refuse containers, lined with disposable yellow clinical waste bags or a container suitable for the safe disposal of clinical waste;
 - an examination/medical couch with waterproofed protection and clean pillows and blankets (a paper couch roll that is changed between casualties may be used);
 - a chair;
 - a telephone or other communication equipment;
 - a record book/sheet for recording incidents attended by first aid personnel (Appendix F of this policy may be used for this purpose).

7.6 All employees, especially new recruits, must be made aware of the location of the first aid room.

8. RECORDING INCIDENTS/ACCIDENTS

8.1 All incidents/accidents, however minor, must be recorded on the Council's 'Incident/Accident Investigation and Injury Record Form – HS5(A)'.

Guidance on completing form HS5(A) is available in the Council document 'HS5(B) – Guidance to the Completion of the Incident/Accident Investigation and Injury Record Form HS5(A)'.

When completed, Forms HS5(A) must be forwarded to the Council's Health and Safety Team at Ty Elai, Williamstown, in accordance with the timeframes set out in the Council guidance document 'Accident Reporting Arrangement Guidelines'.

8.2 First aid personnel must keep a record of the incidents they attend.

Any such record should be kept in accordance with the requirements of the Data Protection Act.

The information to be recorded should include:

- date, time and place of the incident;
- name of the injured person;
- if an employee, their job, or if a member of the public, their status (for example pupil, service user);
- details of the injury/illness and what first aid was given;
- what happened to the person immediately afterwards (for example went back to work, went home, went to hospital);
- name and signature of the person who dealt with the incident.

This information can:

- help maintain first aid supplies;
- help managers identify accident trends and possible areas for improvement in the control of health and safety risks;
- be used for reference in future first aids needs assessments;
- be helpful for insurance and investigative purposes.

Appendix F of this policy may be used to record such information.

9. <u>INFORMATION FOR EMPLOYEES</u>

9.1 Employees should be informed of the first aid arrangements by displaying first aid notices in prominent positions in the workplace, including in the base for travelling employees.

The inclusion of first aid information in induction training will also help ensure that new employees are made aware of the first aid arrangements.

- 9.2 It is important that employees with reading and language difficulties are kept informed of first aid arrangements. For example:
 - visually impaired employees could be informed by recorded messages or communications in Braille;
 - employees with language difficulties could be informed by means of translated first aid notices.

10. ARRANGEMENTS TO FOLLOW

- 10.1 To ensure that suitable and sufficient first aid equipment, facilities and personnel are available at the workplace:
 - undertake an assessment to determine what the first aid needs are;
 - provide the materials, equipment and facilities identified as necessary by the first aid needs assessment and ensure they will be available to employees at all relevant times;
 - where appropriate, select a competent training provider to provide the EFAW or FAW training, together with any additional training you have identified as necessary, to the first aid personnel you have determined are required;
 - keep a first aid register of the names of all first aiders and appointed persons, together with both the issue date and expiry date of their training certificates so that refresher training/retraining can be arranged for them as appropriate;
 - ensure that employees are made aware of the identity/location of their nearest first aider/appointed person, first aid kit and, where applicable, first aid room;
 - display the name(s) and location(s) of first aid personnel and equipment on the first aid kit container, on the door of any first aid room and on notice boards:
 - ensure that all first aid information displayed is updated to reflect any changes in location or personnel that may take place;
 - ensure that the contents of each first aid kit are regularly checked to establish that supplies are sufficient to meet requirements;

- ensure that sufficient supplies are held in stock on site and that replacement supplies are ordered immediately after equipment has been used;
- ensure that there is easy access to first aid equipment and any first aid room at all times;
- ensure that all incidents/accidents are recorded on a suitable record book/sheet, for example **Appendix F** of this policy, and that the Council's incident/accident form HS5(A) is completed and forwarded to the Health and Safety Team in accordance with the timeframes set out in the Council's guidance document 'Accident Reporting Arrangement Guidelines';
- ensure that arrangements are in place to enable professional medical assistance to be immediately summoned when necessary;
- periodically review your first aid needs assessment, particularly after any operating changes, to ensure provision remains appropriate.

11. PAYMENTS TO FIRST AID PERSONNEL

- 11.1 The Council (or school, as appropriate) will pay a nominal annual gratuity to those first aiders who have successfully completed the full three day FAW course, but only where the first aid needs assessment determines that such a first aider is necessary. This money will not be paid in one lump sum, but in instalments at the same time as the employee is normally paid, e.g. monthly.
- 11.2 If there happens to be more fully qualified first aiders in a workplace than is deemed necessary by the assessment, for example as a result of employees being relocated or a decision being taken by the manager to provide a fully qualified first aider even when one is not deemed necessary, then such 'additional' first aiders will not be paid by the Council (or school).
- 11.3 If there are more qualified first aiders in a workplace than is deemed necessary and a dispute arises over who the 'official' first aiders are and therefore who gets paid then it will be the responsibility of the appropriate manager to determine who is an official first aider for that workplace and who is not.
- 11.4 The Council (or school) will not pay any gratuities to appointed persons and/or first aiders who have just the emergency first aid at work (EFAW) qualification for undertaking such duties.
- 11.5 The Council (or school, as appropriate) will pay for all first aid training undertaken by employees on behalf of the Council, including where

managers decide to provide a level of first aid provision over and above that deemed necessary by the first aid needs assessment.

12. ADVICE

12.1 Advice on the implementation of this policy can be obtained from the Health and Safety Team, Human Resources, Tŷ Elai, Williamstown, telephone 01443 425531.

APPENDIX A - FIRST AID NEEDS ASSESSMENT CHECKLIST

The minimum first aid provision for each work site is:

- an appointed person to take charge of first aid arrangements;
- a suitably sized and stocked first aid box;
- information for all employees about the first aid arrangements and what they need to do in an emergency.

When determining the number of first aid personnel required at a workplace, managers must take into consideration both planned absences, such as annual leave, and unplanned absences, such as sick leave.

NAME OF PREMISES:

Factors to Consider	Space for Notes	Impact on First Aid Provision				
Hazards (use the findings of y of your workplace that have did of first aid provision)	Hazards (use the findings of your first aid needs assessment and take account of any parts of your workplace that have different work activities/hazards that may require different levels of first aid provision)					
Does your workplace have low-level hazards such as those found in offices and shops? Does your workplace have		The minimum provision is: an appointed person to take charge of first aid arrangements; a suitably sized and stocked first aid box. You should consider:				
higher level hazards such as chemicals or dangerous machinery, or do your work activities involve special hazards such as hydrofluoric acid or confined spaces?		 providing first aiders; providing additional training for first aiders to deal with injuries resulting from special hazards; providing a suitably stocked first aid box; providing additional first aid equipment; precise location of first aid equipment; providing a first aid room; informing the emergency services of specific hazards etc. in advance. 				
Employees						
How many people are employed on site?		Where there are small numbers of employees, the minimum provision is:				

Factors to Consider	Space for Notes	Impact on First Aid Provision
		 an appointed person to take charge of first aid arrangements; a suitably stocked first aid box. Where there are large numbers of employees, i.e. more than 25, even in low
		 hazard environments, you should consider providing: first aiders; additional first aid equipment; a first aid room.
		Where there are a particularly large number of employees, e.g. more than 100, or in particularly remote areas or areas difficult to reach, then even in low hazard environments you should consider providing a defibrillator.
Are there inexperienced workers on site, or employees with disabilities or particular health problems?		 You should consider: additional training for first aiders; additional first aid equipment; local siting of first aid equipment.
		Your first aid provision should cover any work experience trainees.
Accidents and ill-health reco	rd	
What is your record of accidents and ill health?		Ensure your first aid provision will cater for the type of injuries and illnesses that have
What injuries and illnesses have occurred and where did		occurred in your workplace. Monitor accidents and ill
they happen?		health and review your first aid provision as appropriate.

Factors to Consider	Space for Notes	Impact on First Aid Provision
Working arrangements		1 10 110.10.11
Do you have employees who travel a lot, work remotely or work alone?		You should consider: issuing travel first aid kits; issuing personal communicators/mobile phones to employees.
Do any of your employees work shifts or work out of hours?		You should ensure that there is adequate first aid provision at all times people are at work.
Are the premises spread out, e.g. are there several buildings on the site or multifloor buildings?		You should consider the need for provision in each building or on each floor.
Is your workplace remote from emergency medical services?		You should: • inform the emergency services of your location; • consider special arrangements with the emergency services; • consider emergency transport requirements.
Do any of your employees work at sites occupied by other employers?		You should make arrangements with other site employers to ensure adequate provision of first aid. A written agreement between employers is strongly recommended.
Do you have sufficient provision to cover absences of first aiders or appointed persons?		You should consider: • what cover is needed for annual leave and other planned absences; • what cover is needed for unplanned and exceptional absences.
Non-employees		
Do members of the public or non-employees visit your premises?		Although you have no legal duty under the Regulations to provide first aid for nonemployees, it is the policy of the Council to do so (see Section 2.3). Taking into consideration such factors as the number (e.g.

Factors to Consider	Space for Notes	Impact on First Aid Provision
		large?) and age (e.g. elderly?) of visitors, and the location of the premises (e.g. remote, difficult to reach?) and the activities that take place there (e.g. strenuous?), you should consider providing a defibrillator.

APPENDIX B - COMMON WORKPLACE HAZARDS

Hazard	Causes of Accidents	Examples of Injury Requiring First Aid		
Chemicals	Exposure during handling, spillages, splashing, leaks	Poisoning, loss of consciousness, burns, eye injuries, respiratory problems		
Electricity	Failure to securely isolate systems and equipment during work on them, poorly maintained electrical equipment, contact with overhead power lines, underground power cables or mains electricity supplies, using unsuitable electrical equipment in explosive atmospheres	Electric shock, burns, heart attack		
Machinery	Loose hair or clothing becoming tangled in machinery, being hit by moving parts or material thrown from machinery, contact with sharp edges	Crush injuries, amputations, fractures, lacerations, eye injuries		
Manual handling	Repetitive and/or heavy lifting, bending and twisting, exerting too much force, handling bulky or unstable loads, handling in uncomfortable working positions	Fractures, lacerations, sprains and strains		
Slip and trip hazards	Uneven floors, staircases, trailing cables, obstructions, slippery surfaces due to spillages, worn carpets and mats	Fractures, lacerations, sprains and strains		
Work at height	Overreaching or overbalancing when using ladders, falling off or through roofs	Head injury, loss of consciousness, spinal injury, fractures, lacerations, sprains and strains		
Workplace transport	Hit by, against or falling from a vehicle, being hit by part of a load falling from a vehicle, being injured as a result of a vehicle collapse or overturn	Crush injuries, head injury, fractures, sprains and strains		

APPENDIX C - EXAMPLES OF ADDITIONAL TRAINING NEEDS

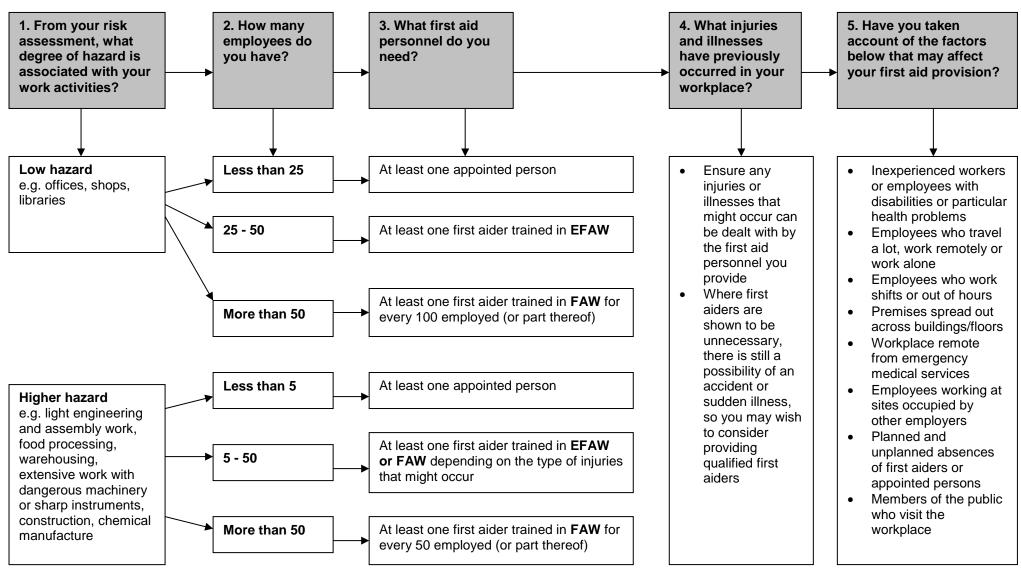
Additional Training	When Additional Training May be Relevant
Management of a casualty suffering from hypothermia or hyperthermia	Extensive exposure to the outdoor environment due to, for example, regular maintenance activity, e.g. trackside rail work, forestry
Management of a casualty suffering from hydrofluoric acid burns	Glass industry, chemical manufacture, or other industries using pickling pastes containing hydrofluoric acid
Management of a casualty suffering from cyanide poisoning	Chemical manufacture
Oxygen administration	Confined space work, for example, tank cleaning operations and working in sewers. Also, where there is a risk of exposure to hydrogen cyanide
Management of a drowning casualty	Swimming pools, fish farms
Application of haemostatic dressings and/or tourniquets	Sectors such as agriculture, forestry and construction
	Employers of people working in hospitality, events or other relevant sectors might wish to consider additional training to prepare for injuries to colleagues or the public, resulting from terrorist acts or other violent incidents
Recognise the presence of major illness and provide appropriate first aid (including heart attack, stroke, epilepsy, asthma, diabetes)	Wherever the environment is low hazard but you have identified a risk, either based on the known health profile, age and number of employees or a need to consider members of the public
Paediatric first aid, as required by the Department for Education or local authorities, which complies with the syllabus produced by OFSTED for first aid provision for children in a school or other childcare setting	Schools and nurseries
Emergency first aid at work (EFAW) training and/or the management of major illness (including heart attack, stroke, epilepsy, asthma, diabetes)	Wherever the environment is low hazard but you have significant exposure to members of the public
Use of Epipens	Where it is known that there are employees/pupils/residents, etc. in the workplace who have severe allergies and can suffer anaphylactic reactions

APPENDIX D - RECORD OF FIRST AID PROVISION

NAME OF PREMISES:

First Aid Personnel	Required (Yes/No) / Comments	Number Needed
Appointed person		
First aider with emergency first aid at work (EFAW) certificate		
First aider with first aid at work (FAW) certificate		
First aider with additional training (specify)		
First aid equipment and facilities	Required (Yes/No) / Comments	Number Needed
Small first aid kit		
Medium first aid kit		
Large first aid kit		
Travel first aid kit		
Additional equipment (specify)		
Defibrillator		
First aid room		

APPENDIX E - SUGGESTED NUMBER OF FIRST AID PERSONNEL TO BE AVAILABLE AT ALL TIMES PEOPLE ARE AT WORK



APPENDIX F - RECORD OF INCIDENTS ATTENDED BY FIRST AID PERSONNEL

NAME OF PREMISES:

Date of Incident	Time of Incident	Name of Injured Person	Job (If Employee)	Status (If Not Employee)	Details of Injury or Illness	Details of First Aid Provided	What Happened to Person Next (e.g. went back to work, went home, went to hospital)	Name of Person Who Dealt With Incident (PRINTED)	Signature of Person Who Dealt With Incident

MANAGERS CHECKLIST

		√ As Appropriate		
		N/A	Yes	No
•	Has a first aid needs assessment been carried out to determine the level of provision required?			
•	Has action been taken as a result of the assessment to ensure that there are suitable and sufficient numbers of first aiders/appointed persons to carry out first aid duty at all times the workplace is in use?			
•	Has action been taken as a result of the assessment to ensure that the first aid equipment/facilities in place in the workplace are suitable and sufficient?			
•	Are arrangements in place to enable professional medical assistance to be summoned?			
•	Where appropriate, have first aid personnel received EFAW/FAW training from a competent training provider?			
•	Has additional training been provided to first aid personnel where the assessment determines that it is necessary?			
•	Is a register being kept with the details of first aid personnel and their training, and is their training being kept up to date?			
•	Are employees familiar with the identity and location of all first aiders and appointed persons, and are suitable first aid notices on display in appropriate locations?			
•	Are employees familiar with the location of the first aid kit and, where applicable, the first aid room?			
•	Are sufficient first aid supplies held in stock on site to enable first aid kits to be replenished?			
•	Are the contents of the first aid kit: - suitable and sufficient? - regularly checked? - replenished as necessary?			
•	Where deemed necessary by the assessment, are travel first aid kits made available to employees who are required to work away from their normal workplace?			
•	Is the Council's incident/accident form HS5(A) completed in each instance and forwarded to the Health and Safety Team in accordance with the timeframes set out in the Council's guidance document Accident Reporting Arrangement Guidelines?			
•	Is a record being kept of incidents attended by first aid personnel?			
•	Is the first aid needs assessment reviewed periodically to ensure the level of provision remains appropriate?			
•	Are there monitoring procedures in place to ensure that the requirements of the policy are being met?			

Completed by: (Signature)	Confirmed by: (Signature	
Name: (Print)	Name: (Print)	
Designation:	Designation	
Date:	Date:	