

First Aid at Work Policy

Department / Service:	Health & Safety	
Originator:	Julie Noble	Health & Safety Manager
Accountable Director:	Paul Brennan	Chief Operating Officer
Approved by:	Health and Safety Committee JNCC	
Date of Approval:	21 st April 2022	
Review Date:	21 st April 2025	
	This is the most current document and should be used until a revised version is in place	
Target Organisation(s)	Worcestershire Acute Hospitals NHS Trust	
Target Departments	All	
Target staff categories	All	

Purpose of this document:

The statutory requirements for first aid in the workplace are detailed in the Health and Safety (First Aid) Regulations 1981, interpreted by the 2013 Guidance (L24, amended 2018) issued by the HSE. This policy sets out the requirement for first-aiders in the workplace and issues to be considered when assessing provisions.

Key amendments to this Document:

Date	Amendment	By:
July 2009	2 yearly review of policy	Paul Graham
September 2011	Biennial review - no changes other than the addition of the Trust Risk Assessment as an appendix	Paul Graham
December 2013	2 yearly review of policy – minor changes to further clarify the use of doctors and nursing staff as first aiders	Paul Graham
March 2016	Document extended for 12 months as per TMC paper approved on 22 nd July 2015	TMC
May 2017	Biennial review with changes to reflect the requirements of the workplace	Paul Graham
Jan 2020	Document extended for 12 months whilst in the process of appointing a new Health and Safety Manager.	Samantha Reid
February 2021	Document extended as per Trust agreement 11.02.2021	Trust agreement
March 2022	Review of policy: new author, addition of HSE / L24 reference, amended definitions in 3.1. for clarity; added reference re contents of FA boxes in high risk areas.	Julie Noble

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1. Introduction

Worcestershire Acute Hospitals NHS Trust will carry out risk assessments to decide how many first-aiders are required in the workplace in compliance with the Regulations. Based on these assessments, first-aiders will be nominated and trained and the training updated as required. Where appropriate equipped first-aid boxes will be provided and the location of first-aiders advertised. If the first aid injury is such that it requires an immediate emergency response then staff can contact Ext 2222 and ask for medical assistance. If such an event takes place in the grounds of the hospital then staff would need to dial 999 in order to alert the ambulance services.

2. Scope of the Policy

This policy applies to all staff working and caring for patients in Worcestershire Acute Hospitals NHS Trust.

3. Definitions

First-Aider: This is a member of staff who is trained to deal with first aid situations and holds a current first aid certificate. NB: A first aider can also undertake the duties of an appointed person. First aiders are deemed trained, if they hold a current Emergency First Aid at Work certificate (1 day course with certification lasting 3 years) or a First Aider at Work certificate (3 day course with certification lasting 3 years)

In addition other members of staff can act as First Aiders provided they can demonstrate current knowledge and skills in first aid, are trained and have experience. Due to their level of competency the following staff groups can administer first aid in the workplace without the need to hold a First Aid at Work or Emergency First Aid at Work or equivalent qualification:

- doctors registered and licensed with the General Medical Council;
- nurses registered with the Nursing and Midwifery Council;

Appointed person: If you decide you don't need a first-aid in your workplace, you should appoint someone to take charge of first-aid arrangements. The role of this appointed person includes looking after first-aid equipment and facilities and calling the emergency services when required. Appointed persons do not need first-aid training, though emergency first-aid courses are available.

4. Responsibility and Duties

4.1 Managers

Managers are responsible for conducting a risk assessment to determine the level of first aid cover required in their area of responsibility.

Where a number of managers have responsibilities for part of an area within a particular location, a joint approach may be adopted by the managers to determine the level of first aid cover required for the location.

Managers should ensure that those staff that they have nominated as either a *designated first aider* or an *appointed* person receives training according to the level of their responsibilities. A formal record should be kept of the names of first-aiders, the

dates of training and training renewal dates. Once training is complete, each first-aider or appointed person should be provided with first aid equipment as listed in 5.2. In work areas where one or more first aiders have been identified it would only be necessary to provide a sufficient number of boxes to meet the local requirements. First aid boxes must be ordered via the Supplies Department.

The location and name of first-aiders and appointed persons should be communicated to those in the vicinity and this may be further emphasised by the prominent display of a notice or poster in the work area.

In areas where it has been assessed that adequate cover can be provided by doctors and/or nurses it is essential that managers ensure that all staff are aware of the level and type of cover in place.

4.2 Staff Duties

Staff should acquaint themselves with the name and location of their nearest first-aider/appointed person or the type of general cover provided by doctors and/or nurses.

Staff should complete an incident report (refer to the Incident Reporting Policy / Datix incident reporting system) and inform their manager of any first aid type injury sustained in the workplace.

4.3 First Aiders Duties

First-aiders should present themselves for update training at the appropriate time.

First-aiders should keep a simple record when first aid is given. This should record the name of the person involved, what first aid was given and the date and time it was given. Details of such treatment should be recorded on the incident report (Datix).

First-aiders/appointed persons will be responsible for ensuring that the first aid boxes are fully equipped at all times as listed in 5.2.

5. Policy Detail

5.1 Risk Assessment

Risk assessments will take into account various work situations and the many tasks within the organisation, whose risks may vary from low to high depending on the work undertaken. As part of the assessment different work patterns will be taken into account such as work being undertaken away from normal base location; shift work; 24 hour cover; proximity of medical care etc.

Staff working in areas outside of the main hospital buildings may need to dial 999 in order to obtain medical assistance via the ambulance service. This should be considered as part of the local risk assessment and staff made aware of the need for this course of action. A first aider will be required to oversee the maintenance of the sick person until the ambulance arrives.

Staff who work alone in isolated locations, particularly if their job is high risk, may need to receive first-aider training and be provided with emergency first aid equipment.

Staff absence should be taken into account when calculating the required number of first-aiders. If for example a first-aider is required at all times, it may be necessary to designate a number of staff in order to make sure there is cover at lunchtimes, during leave etc.

The Regulations do not require employers to provide first aid for anyone other than their employees, but as the Trust's business involves contact with members of the public and contractors etc; it is advisable that the Trust includes non-staff in any assessment.

Those staff whose work frequently takes them away from the base location are not ideal for the role of designated first-aider for that location, however if they are already trained they may complement the formal provision if desired.

5.2 Contents of First Aid Box

A first aid box should contain the following items only and should not contain drugs of any description

- I. one guidance card
- II. six individually wrapped triangular bandages
- III. twenty individually wrapped sterile dressings (assorted sizes) appropriate to the work environment (detectable for catering)
- IV. six medium sizes individually wrapped sterile unmedicated wound dressings approx 10cm x8cm.
- V. three extra-large sterile individually wrapped unmedicated wound dressings approx 28cm x 17.5cm.
- VI. two large sterile individually wrapped unmedicated wound dressings approx 13cm x 9 cm
- VII. two sterile eye pads with attachment
- VIII. six safety pins

The above list is the HSE recommended list of contents for first aid boxes; if however staff are working in a high risk / remote area then other items may be added. Refer to British Standard BS 8599-1 which provides further information on the contents of workplace first-aid kits.

6. Implementation arrangements

6.1 Plan for implementation

This policy will be implemented by local managers in their respective areas of responsibility.

6.2 Dissemination process

The First Aid at Work Policy will be made available on the Trust Intranet. A Managers Brief will be distributed to all managers for them to in turn inform their staff of the relevant sections of the policy. It will also be communicated to managers and staff-side representatives via the Trust Health and Safety Committee.

6.3 Training and awareness

Managers will arrange training for their nominated first-aiders/appointed persons as required and forward their requests to the Training and Development Manager.

Training can be arranged by contacting the Training Department Extension 33239 or email: wah-tr.CHEC-TrainingTeam@nhs.net.

All staff will be made aware of this policy via the Trust's local induction process.

7 Monitoring and compliance

The Chief Operating Officer will monitor the effectiveness of this policy, as a standard, and the general level of compliance with its requirements.

Managers will be responsible for reviewing their own local first aid at work requirements via the risk assessment process. The Directorate and Divisional Managers will monitor this level of compliance with the policy.

The annual health and safety audits will also take into account first aid at work issues and will provide the Trust with a further overview report of the effectiveness of the health & safety management system.

8 Policy review

This policy will be reviewed by the Health & Safety Committee after 2 years or earlier if there are any significant changes to the workplace, work practice or legislative requirements.

9 References

References:

Code:

Health and Safety at Work, etc Act 1974	
Management of Health and Safety at Work Regulations 1999	
Workplace (Health, Safety and Welfare) Regulations 1992	
Health and Safety (Miscellaneous Amendment) Regulations 2002	
Health and Safety (First Aid) Regulations 1981	
Health and Safety at Work, etc Act 1974	
Approved Code of Practice & Guidance 'First Aid at Work – The Health & Safety (First Aid at Work) Regulations 1981 – L74	
Risk Management Strategy	
Risk Assessment Procedure	
Health & Safety Policy	
Incident Reporting Policy	
COSHH Policy	

10. Background

10.1 Equality requirements

An equality assessment has been performed. There are no equality issues presented by this policy.

10.2 Financial Risk Assessment

A financial risk assessment has been performed. Effecting change as a result of learning may have associated costs although these will be dealt with through individual business cases.

10.3 Consultation Process

The following were consulted in the production of this version of the policy:

- Policy Working Group
- Members of the Health and Safety Committees

10.4 Approval Process

This policy will obtain final approval from the JNCC.

Appendix 1

GUIDANCE ON PROVIDING FIRST AID COVER

Aspects to consider when carrying out an assessment:

1. Are there any specific first aid risks, for example working with;

- **hazardous substances**
- **dangerous tools**
- **dangerous machinery**
- **dangerous loads?**

If so you may need to consider specific training for first aiders, extra first aid equipment and the precise siting of first aid equipment

2. Are there parts of your work area where a different level of risk can be identified?

If so you will probably need to make different levels of provision in different areas.

3. What is your record of accidents?

Consider the number and type of first aid injuries you have needed to deal with.

4. How many staff are employed in your work area?

In low risk work areas (offices) with fewer than 50 employees the suggested number of first aid personnel is at least one appointed person.

In medium to high risk areas it is suggested that at least one first aider be appointed for every 50 employees.

5. Are there inexperienced workers on site or employees with disabilities or special health problems?

Consider the need for specialist provisions.

6. Are the premises spread out e.g. are there several buildings on the site or multi-floor buildings?

You may need to carefully consider where you site your provisions.

7. Is there shift work or out of hours working?

Remember first aid cover needs to be available at all times people are at work.

8. Do you have employees who travel a lot or work alone?

You may need to consider issuing staff with personal first aid kits and training staff in their use.

9. Do any of your employees work at sites occupied by other employers?

You will need to make arrangements with other site occupiers.

10. Do members of the public visit your premises?

You have no legal responsibilities for non-employees however you are strongly advised to include them in your provision.

Appendix 2

RISK ASSESSMENT RECORD – First Aid

Division/Speciality/Ward/Dept Trust-wide		Date of Assessment: March 2022			
HAZARD Give a brief description of the nature of the hazard including the physical location and/or task it relates to.	Staff working in the Trust could be exposed to a number of workplace hazards. These may include: <ul style="list-style-type: none"> • Slips, trips and falls • Collision with objects such as furniture etc. • Use of electrical and mechanical equipment • Use of chemicals • Manual handling • Exposure to needles and other sharps 				
RISK(s) Use the formula: <i>As a result of [definite cause], [risk event] may occur, which would lead to [effect].</i> For example: As a result of inadequate training, staff may fail to correctly use equipment which would lead to patient harm	Exposure to work place hazards may expose individual members of staff, patients, visitors and contractors to the risk of first aid type injuries. Based upon the work involved and the typical types of first aid injuries reported the risks vary depending upon the work area for example: Offices – low risk Workshops – moderate risk Clinical areas – moderate risk Serious injuries may result in RIDDOR reportable cases and even personal liability claims against the Trust.				
EXISTING CONTROL MEASURES Give details of any existing control measures:	<ul style="list-style-type: none"> • Guidance and advice is available in the First Aid at Work Policy. • First Aid training for staff can be provided by the Trust's Education and Training Department • Clinical areas may rely on registered doctors and nurses to provide first aid cover as long as they can demonstrate current knowledge and skills in first aid • Emergency treatment is available via the sites Emergency Departments and Minor Injuries Unit at Kidderminster • First aiders at work will NOT be responsible for administering first aid to any patient, visitor or contractor. If any of these individuals require first aid treatment it will be provided by the Emergency Departments or Minor Injuries Unit at KTC. 				
People affected Please tick	Staff X	Patients X	Visitors X	Contractors X	Others
Are there any groups of individuals that are particularly at risk? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Please give details					
Do the measures meet the requirements of any relevant legislation? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>					
Are there adequate emergency procedures in place to deal with any associated imminent or serious danger? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>					
Is the risk effectively controlled? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>					

Risk Evaluation: (Please use the 5 x 5 scoring matrix to assess consequence and likelihood taking into account the above control measures)

Consequence 1 2 3 **4** 5 **Likelihood** 1 2 **3** 4 5 **Priority** VL L **M** H

Please circle

A. The identified risk is acceptable and does not require any further or improved control measures (Tick as appropriate)

Name of Manager accepting the risk:

Division: Date:

B. The identified risk is unacceptable and requires further or more effective control measures to be implemented (Tick as appropriate)

Further Action(s) Required	By Whom	Time Scale for completion	Completed
Low risk work areas (Offices and other admin areas) must ensure that they have appointed persons in place who are responsible for maintaining any first aid boxes and calling the emergency services if required. Appointed persons are not required to attend any specific training.	Responsible Managers		
Moderate risk work areas (Pathology, Estates workshops and Catering areas) must ensure that they nominate an Emergency First Aid at Work person and arrange for them to be suitably trained.	Responsible Managers & Training Department		
All work areas should consider the need for First Aid boxes and where required arrange purchase.	Responsible Managers		

Resources Required: (Please include cost and recurring costs where applicable)

- Provision of First Aid at Work training
- Budget for the supply and replenishment of First Aid boxes

Now recalculate the risk score with the recommended control measures taken into consideration

Consequence 1 **2** 3 4 5 **Likelihood** 1 2 **3** 4 5 **Priority** **VL** L M H

Details of entry on to the Risk Register	Date placed on Register:N/A..... Initially Approved by: Name of responsible manager: Finally Approved by: Name of manager
Have those individuals at risk been informed of the findings from this risk assessment?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Name: ...Various..... Position: ...Local Managers Date: ...March 2022.....
Date for Review (consider an appropriate review date)	March 2025

On completion this form should be retained for local record keeping purposes

NOTE: Advice on Risk Assessment may be obtained from Health & Safety Manager



**Supporting Document 1 - Equality Impact Assessment Tool Herefordshire &
Worcestershire STP - Equality Impact Assessment (EIA) Form**
 Please read EIA guidelines when completing this form

Section 1 - Name of Organisation (please tick)

Herefordshire & Worcestershire STP	<input type="checkbox"/>	Herefordshire Council	<input type="checkbox"/>	Herefordshire CCG	<input type="checkbox"/>
Worcestershire Acute Hospitals NHS Trust	<input checked="" type="checkbox"/>	Worcestershire County Council	<input type="checkbox"/>	Worcestershire CCGs	<input type="checkbox"/>
Worcestershire Health and Care NHS Trust	<input type="checkbox"/>	Wye Valley NHS Trust	<input type="checkbox"/>	Other (please state)	<input type="checkbox"/>

Name of Lead for Activity	Julie Noble, H&S Manager
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Details of individuals completing this assessment	Name	Job title	e-mail contact
	Julie Noble	H&S Manager	Julie.noble13@nhs.net
	Samantha Reid	H&S Officer	Samantha.reid3@nhs.net
Date assessment completed	03/03/2022		

Section 2

Activity being assessed (e.g. policy/procedure, document, service redesign, policy, strategy etc.)	Title: First Aid at Work Policy			
What is the aim, purpose and/or intended outcomes of this Activity?	To describe the provision, implementation and management of First Aiders for the Trust to ensure legal compliance			
Who will be affected by the development & implementation of this activity?	<input checked="" type="checkbox"/> Service User	<input checked="" type="checkbox"/> Staff		
	<input checked="" type="checkbox"/> Patient	<input type="checkbox"/> Communities		
	<input checked="" type="checkbox"/> Carers	<input type="checkbox"/> Other _____		
	<input checked="" type="checkbox"/> Visitors	<input type="checkbox"/>		
Is this:	<input checked="" type="checkbox"/> Review of an existing activity <input type="checkbox"/> New activity <input type="checkbox"/> Planning to withdraw or reduce a service, activity or presence?			
What information and evidence have you reviewed to help	A review of applicable Worcestershire Royal Acute Hospitals NHS Trust policies, HSE website and UK applicable regulations has been			

inform this assessment? (Please name sources, eg demographic information for patients / services / staff groups affected, complaints etc.	conducted.
Summary of engagement or consultation undertaken (e.g. who and how have you engaged with, or why do you believe this is not required)	Key parties have been provided with this Policy for review / comment (e.g. H&S committee). The H&S manager has ensured this policy meets legal obligations.
Summary of relevant findings	No impact to others from this document; this is a continual improvement process.

Section 3

Please consider the potential impact of this activity (during development & implementation) on each of the equality groups outlined below. **Please tick one or more impact box below for each Equality Group and explain your rationale.** Please note it is possible for the potential impact to be both positive and negative within the same equality group and this should be recorded. Remember to consider the impact on e.g. staff, public, patients, carers etc. in these equality groups.

Equality Group	Potential <u>positive</u> impact	Potential <u>neutral</u> impact	Potential <u>negative</u> impact	Please explain your reasons for any potential positive, neutral or negative impact identified
Age	√			
Disability	√			
Gender Reassignment	√			
Marriage & Civil Partnerships	√			
Pregnancy & Maternity	√			
Race including Traveling Communities	√			
Religion & Belief	√			
Sex	√			
Sexual Orientation	√			
Other Vulnerable and Disadvantaged Groups (e.g. carers;	√			

Equality Group	Potential positive impact	Potential neutral impact	Potential negative impact	Please explain your reasons for any potential positive, neutral or negative impact identified
care leavers; homeless; Social/Economic deprivation, travelling communities etc.)				
Health Inequalities (any preventable, unfair & unjust differences in health status between groups, populations or individuals that arise from the unequal distribution of social, environmental & economic conditions within societies)	√			

Section 4

What actions will you take to mitigate any potential negative impacts?	Risk identified	Actions required to reduce / eliminate negative impact	Who will lead on the action?	Timeframe
How will you monitor these actions?				
When will you review this EIA? (e.g in a service redesign, this EIA should be revisited regularly throughout the design & implementation)				

Section 5 - Please read and agree to the following Equality Statement



1. Equality Statement

1.1. All public bodies have a statutory duty under the Equality Act 2010 to set out arrangements to assess and consult on how their policies and functions impact on the 9 protected characteristics: Age; Disability; Gender Reassignment; Marriage & Civil Partnership; Pregnancy & Maternity; Race; Religion & Belief; Sex; Sexual Orientation

1.2. Our Organisations will challenge discrimination, promote equality, respect human rights, and aims to design and implement services, policies and measures that meet the diverse needs of our service, and population, ensuring that none are placed at a disadvantage over others.

1.3. All staff are expected to deliver services and provide services and care in a manner which respects the individuality of service users, patients, carer's etc, and as such treat them and members of the workforce respectfully, paying due regard to the 9 protected characteristics.

Trust Policy

Signature of person completing EIA	 Samantha Reid
Date signed	08/03/2022
Comments:	
Signature of person the Leader Person for this activity	 Julie Noble
Date signed	08.03.2022
Comments:	



Supporting Document 2 - Financial Risk Assessment

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

	Title of document:	Yes/No
1.	Does the implementation of this document require any additional Capital resources	NO
2.	Does the implementation of this document require additional revenue	NO
3.	Does the implementation of this document require additional manpower	NO
4.	Does the implementation of this document release any manpower costs through a change in practice	NO
5.	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff	NO

If the response to any of the above is yes, please complete a business case which is signed by your Finance Manager and Directorate Manager for consideration by the Executive Team before progressing to the relevant committee for approval