The purpose of this procedural guideline is to set out the processes for how First Aid is undertaken within the Trust.

Employers are expected to provide or ensure that equipment and facilities are provided that are adequate and appropriate in the circumstances for enabling first-aid to be rendered to employees if they are injured or become ill at work.

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 (HSE, 1981). 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 working patterns, to:

- Give immediate assistance to casualties with both common injuries or illnesses and those likely to arise from specific hazards at work;
- Summon an ambulance or other professional help.
The Trust monitors the implementation of and compliance with this procedure in the following ways

This Policy has been identified as medium risk and will be monitored by the Risk Management Department. The results of this monitoring will be reported to the corporate Health, Safety and Security Committee for scrutiny and agreement of any actions required, including escalation to the Quality and Governance Steering Committee and ultimately Trust Board if required.

This Policy will be reviewed by the Risk Management Department every three years or where changes in current legislation require a policy review earlier.

Any changes to the Policy and Procedure will be notified to staff via Staff Briefings and will be held on the intranet for access by staff.

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The Director responsible for monitoring and reviewing this policy is Executive Director of Corporate Governance
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APPENDICES

APPENDIX 1: Risk Assessment
1.0 INTRODUCTION

1.1. First-Aid provision is governed by the Health and Safety (First-Aid) (amendment) Regulations 1981 and the Health & Safety Executives Approved Code of Practice and Guidance.

1.2. This document gives guidance on provision of First-Aid materials, First-Aiders and First-Aid training for employees within Essex Partnership University NHS Foundation Trust (EPUT).

1.3. This procedure applies to all Trust employees whether on a permanent contract, or temporary staff.

2.0 DUTIES

2.1. Chief Executive Officer

The Chief Executive Officer is responsible for ensuring the implementation of the Health & Safety (First-Aid) (amendment) Regulations 1981.

They will:

2.1.1. Ensure that there is an appropriate Policy for first-aid within in the Trust and that this is effectively implemented.

2.1.2. Nominate a Board Director who will undertake responsibility for health and safety first aid matters throughout the Trust.

2.2. Nominated Director

The nominated Board Director is the Executive Director of Corporate Governance who, supported by the Director of Compliance and Assurance, will undertake responsibility for health & safety first aid matters throughout the Trust.

They will:

2.2.1. Set and oversee implementation of the policy, approved by the Trust Board, for first-aid across the Trust.

2.3. Service Directors

Service Directors are responsible for ensuring that adequate First-Aid coverage and facilities have been provided for areas under their direct control.
2.4. **Managers**

Managers will ensure this procedure and policy is implemented under their direct control by:

2.4.1. Selecting and arranging placement of competent First-Aiders or Appointed Persons at work.

2.4.2. Ensuring a first aid risk assessment is under-taken based on the Trust’s pro-forma contained within this policy (Appendix 1). A copy of the risk assessment will be maintained by the manager and reviewed annually.

2.4.3. Ensuring arrangements are made for adequate numbers of First Aiders or Appointed Persons to undertake accredited training where required following completion of the risk assessment (Appendix 1).

2.4.4. Booking appointed person/first aider training – details held on the Trust intranet under training/health and safety, (funding is from local budget).

2.4.5. Ensuring that an up to date list of first aid personnel is maintained within their service area.

2.4.6. Ensuring all members of staff are made aware of the first aid arrangements within their current workplace by completion of First Aid Posters. The First Aid Posters contain names and location of first aiders and appointed persons and are available through stationary supplies.

2.4.7. Facilitating access to support for first aiders through supervision.

2.5. **Risk Management Team**

The Risk Management Team will:

2.5.1. Complete Health & Safety Inspections - yearly for Inpatient areas, every 18 months for Community Clinics/where patients are seen and every 2 years for Staff only areas.

2.5.2. The inspections monitor that there are:

- Sufficient numbers of well stocked and in date first aid boxes.
- First aid boxes in relevant locations on site.
- Eye irrigation systems, if relevant.
- Up to date lists of first aid personnel held on a notice board (First Aid Posters).
2.6. **Workforce Development & Training Department**

The Workforce Development and Training Department will:

2.6.1. Provide appropriate first aid training courses within the organisation.

2.6.2. Maintain a list of personnel who have been first aid trained. However, each individual will be responsible for ensuring their certificate does not lapse by booking onto a training course to undertake a first aid refresher.

2.7. **First-Aiders**

A **First-Aider** is defined as a person in possession of a valid “First-Aid at Work” (FAW) or “Emergency First Aid at Work” (EFAW) certificate of competence obtained by attendance and qualification at a Health and Safety Executive (HSE) approved course.

They will:

- Administer first aid as appropriate to the situation and to their training and skills.
- Ensure that the appropriate first-aid supplies / equipment are available in their area/s of responsibility.
- Check their local first aid box/es on a monthly basis (Appendix 2) and re-order any stock required from purchasing via the eproc system.
- Report incidents in which they have administered first-aid onto Datix, incident reporting system.
- Ensure that their First Aid at Work certificate remains current by undertaking the HSE approved Training [4 days] and a refresher course [2 days] prior to expiry of the certificate [3 years].
- Assessing the situation where first aid may be required and without placing themselves in danger, ensuring the area is safe.
- Ensuring equipment is replaced when used or before expiry date is reached.

2.7.1. All first aiders are required to undertake a three year refresher training course to ensure that they maintain their competencies in delivering first aid throughout the organisation. Additional first aid provision, within the Trust, can be provided by doctors who are registered with the General Medical Council, nurses registered with the Nursing and Midwifery Council and paramedics registered with the Health Professions Council, providing they have current knowledge and skills in first aid.

2.7.2. The Community services will not be required to have a trained first aider on site and will identify an appointed person for the purposes of checking the first aid box and contacting the emergency services.

2.7.3. Qualified physicians and nurses can act as fully qualified First Aiders without having to attend specific training courses. They must be in current clinical practice and maintain competency in resuscitation techniques.
2.8. Appointed Person

An Appointed Person is identified as a competent person who should be provided at each workplace, where the Trust assessment of first-aid needs identifies that a first-aider is not necessary. The minimum requirement on the organisation is to appoint a person to take charge of the first-aid arrangements, including:

- Where first aid is needed taking charge when someone falls ill including calling for the appropriate medical assistance.
- Checking and replenishing first aid boxes at a minimum monthly.
- Making sure the first aide box contains only the equipment on the contents list.
- Ensuring equipment is replaced when used or before expiry date is reached.
- Ensuring food preparation areas have detectable plasters (blue) available for use.

Arrangements should be made for an “appointed person” to be available to undertake these duties at all times when people are at work. The person identified will not be required to undertake first aid training for this role.

2.9. All Employees (including permanent, temporary and bank staff)

All employees must:

- Make themselves aware via the ‘Local Health & Safety Information Sheet’ of the people in their working area who have been nominated as a “First-Aider” or an “Appointed Person” (see section 4 below for further information).
- Report any usage of first aid supplies from the First Aid boxes to their First Aider / Appointed Person. The replenishing of first aid supplies will be the responsibility of the service manager to source. Managers will order replacement first aid boxes through the purchasing eproc system.
- Abide by the First Aid at Work policy and any decisions arising from its implementation.

3.0 IMPLEMENTATION AND COMPLIANCE

3.1. The Trust will ensure that adequate and appropriate first-aid equipment and facilities are provided for its employees (in accordance with Regulation 3(1) of the Health & Safety (First Aid) (amendment) Regulations 1981).

3.1.1. First Aid facilities must be readily accessible to employees at all times, and should be controlled by the First-Aiders or Appointed Person(s) where possible.

3.1.2. At least one first aid box has to be readily available in a building whilst the building is occupied. In large buildings, or where a building is occupied by more than one department, each department should maintain its own box, unless a single box is held at a staffed reception desk for the building and can be quickly delivered to an incident.
3.2. **First Aid Boxes**

3.2.1. First-Aid boxes will be procured via the eproc system and will be made of a suitable material designed to protect the contents from damp and dust and will be clearly identified as First-Aid containers. The markings used should be a WHITE CROSS on a GREEN background in accordance with the Health and Safety (Safety Signs and Signals) Regulations 1996.

3.2.2. The decision on what to include in a First Aid Box will be influenced by the findings of the first-aid needs risk assessment Appendix 1. As a guide (HSE 1981), where work activities involve low hazards, a minimum stock of first-aid items might be, Appendix 2:

- A leaflet giving general guidance on first aid (for example, HSE's leaflet http://www.hse.gov.uk/pubns/indg347.htm);
- Individually wrapped sterile plasters (assorted sizes), appropriate to the type of work (hypoallergenic plasters can be provided if necessary);
- Sterile eye pads;
- Individually wrapped triangular bandages, preferably sterile;
- Safety pins;
- Large sterile individually wrapped unmedicated wound dressings;
- Medium-sized sterile individually wrapped unmedicated wound dressings;
- Disposable gloves (for advice on latex gloves please see http://www.hse.gov.uk/skin/employ/latex-gloves.htm)

3.2.3. First-Aid boxes must contain only those items as noted on the identified contents list. It is the responsibility of the First-Aider or Appointed Person for the area to ensure that the First Aid box contains the relevant contents and that the following are also available where appropriate:

- Where tap water is not readily available for eye irrigation, sealed containers with 900mls of sterile water or sterile normal saline (0.9%) must be provided in the first-aid box.
- Soap and water and disposable drying materials should be provided or, where not available, individually wrapped moist cleansing wipes, which are NOT impregnated with alcohol, may be used and must be provided in the first aid box.
- Disposable aprons and disposable resuscitation aids must be provided near the First-Aid materials. These should be checked regularly.
- Blunt ended stainless steel scissors (minimum length 12.7cm) must be available where there is a possibility that clothing might have to be cut away. These should be kept alongside items of protective clothing (see paragraph above).
- Plastic disposable bags for soiled or used first-aid items must be provided in all areas.
3.2.4. For further reference please refer to British Standard BS 8599 which provides further information on the contents of workplace first-aid kits.

Whether using a first-aid kit complying with BS 8599 or an alternative kit, the contents should reflect the outcome of the first-aid needs risk assessment. It is recommended that tablets and medicines are not kept in the first-aid box.

3.2.5. Any usage of First-Aid equipment/stock must be reported by the member of staff using the equipment to the First-Aider or Appointed Person to re-order the stock that has been used.

3.2.6. The condition and contents of the First-Aid box will be checked weekly by the First-Aider or Appointed Person and a record maintained to provide evidence of the check taking place.

3.3. **Mobile Employees – First Aid Kits**

3.3.1. The HSE, Health and Safety (First-Aid) Regulations 1981, First aid at work states “Employers are responsible for meeting the first-aid needs of their employees working away from the main site, for example those who travel regularly or who work elsewhere. An assessment should determine whether those who travel long distances or are continuously mobile should carry a first-aid kit. Organisations with employees who work in remote areas should consider making special arrangements such as issuing personal communicators and providing additional training. Where employees work alone, other means of summoning help, such as a mobile phone, may be useful to call for assistance in an emergency”.

3.3.2. For those staff who travel regularly the completion of Appendix 1 will determine if staff will need to carry a First Aid Kit.

3.3.3. When anticipating the provision of such kits, the following should be considered:

- The nature of work to be undertaken, including specific hazards associated with the work activity.
- Degree of isolation of the work place.
- Number of staff involved.

3.3.4. Where a group of employees use a vehicle to journey to a workplace and then work from that vehicle, the vehicle will be supplied with a travelling First-Aid kit under the control of the driver.

3.3.5. A travelling First-Aid Kit should contain:

- One guidance card.
- 6 individually wrapped sterile adhesive dressings.
- One large sterile un-medicated wound dressing.
- 2 triangular bandages (sterile).
- 2 safety pins.
- Individually wrapped moist cleaning wipes.
- Plastic gloves, aprons and suitable protective clothing should also be provided.

3.3.6. It is the responsibility of the staff member to ensure that travelling first-aid kits contain these contents and to order any missing/used items from the Purchasing Department on a timely basis.

3.3.7. Workers who are travelling or Lone-workers should also have a means to summon help should the need arise, This will be identified in the requisite Risk Assessment (Appendix 1) and appropriate action taken by the worker / manager to meet this requirement (e.g. mobile phone / lone worker device)

3.4. **Provision of First-Aiders**

3.4.1. In *low risk areas*, such as offices, it is recommended that there should be one First-Aider for every 50 employees during normal working hours or, an Appointed Person at any location where there is less than this number.

3.4.2. In *high risk areas* where patients and service users are provided care as in-patients, a trained First Aider will be required to be present during the time that the service is operational.

3.4.3. The *community clinics* will be subject to a suitable and sufficient workplace risk assessment to determine the level of first aid provision that is required.

3.4.4. Where shift-work is carried out, it must be ensured that each shift has adequate and appropriate First-Aid provision in accordance with the above requirements.

3.4.5. In exceptional circumstances, during the temporary absence of a First-Aider an Appointed Person(s) must be provided. Foreseeable absences, such as planned annual leave, are not considered to be “exceptional and temporary circumstances” in this respect and thus suitable arrangements for a first-aider to be present in accordance with the above requirements must be put in place; or a nominated appointed person.

3.5. **Recruitment and Selection of First-Aiders/Appointed Persons**

3.5.1. Line Managers are responsible for the identification, provision and coordination of First-Aiders /Appointed Persons in line with the above requirements.

3.6. **Training**

3.6.1. All *first aiders* are required to undertake a three year refresher training course to ensure that they maintain their competencies in delivering first aid throughout the organisation.

3.6.2. *Qualified Doctors and Nurses in the Community* are not required to undertake first aid training as an appointed person will be identified.
3.6.3. First Aid training is provided by the EPUT Workforce Development and Training Department. It is the responsibility of line managers and First-Aiders to monitor when their three yearly update is due and to book onto an appropriate course.

3.7. **Undertaking a first-aid needs risk assessment**

3.7.1. The manager will ensure that a first-aid needs risk assessment is undertaken to identify the number of trained first aiders and appropriate number of first aid boxes are required in each area, Appendix 1.

3.7.2. It is for each Manager to assess their first aid needs in the light of their particular department/teams circumstances. However, it is important to consider that First Aiders/Appointed Persons are trained to provide first aid cover not only to their own department but also to others within the local vicinity or where the need arises e.g. visiting personnel. This is particularly relevant in multi-occupancy buildings which accommodate several departments. Therefore the assessment should consider sites/buildings not just departments.

3.7.3. For Community Service areas, or where the majority of staff work remotely from their team base, the level of first-aid provision will be governed by the circumstances of each workplace. To assist in this process a suitable and sufficient risk assessment (Appendix 1) should be undertaken. The information gathered will act as a guide to determine the level of first-aid requirements for each area.

3.7.4. The risk assessment should consider the following:

- The size and nature of the workforce.
- Incident statistics and trends for the area being assessed.
- Accessibility to external emergency facilities and services, e.g. peripatetic working.
- Contingency arrangements for covering absences of trained/ or designated first aid personnel.
- Nature of the work undertaken and the hazards associated with the work.
- Number of personnel trained in resuscitation/basic life support techniques.

The level of risk will determine if a qualified First Aider is required or an Appointed Person is required.

The risk assessment will determine the numbers of first aid trained staff for the area, taking into account shift work, holidays, sickness and number of working days.

3.8. **Informing employees of the arrangements for first-aid**

3.8.1. The Trust will ensure that employees are informed of the arrangements the Trust has made in connection with first aid.

3.8.2. All employees will be informed of the location of First-Aid equipment, personnel and facilities when they first join the Trust by their Line Manager as part of their local induction.
3.8.3. There will be at least one notice posted on the Health & Safety notice board in all workplaces with the following information:

- Locations of nearest First-Aid equipment
- Name(s) and location(s) of First-Aid personnel
- Trust telephone numbers for obtaining emergency assistance
- Arrangements for obtaining help outside normal hours

3.8.4. The responsibility for keeping this updated rests with the individual with allocated responsibility for the Health and Safety Notice Board.