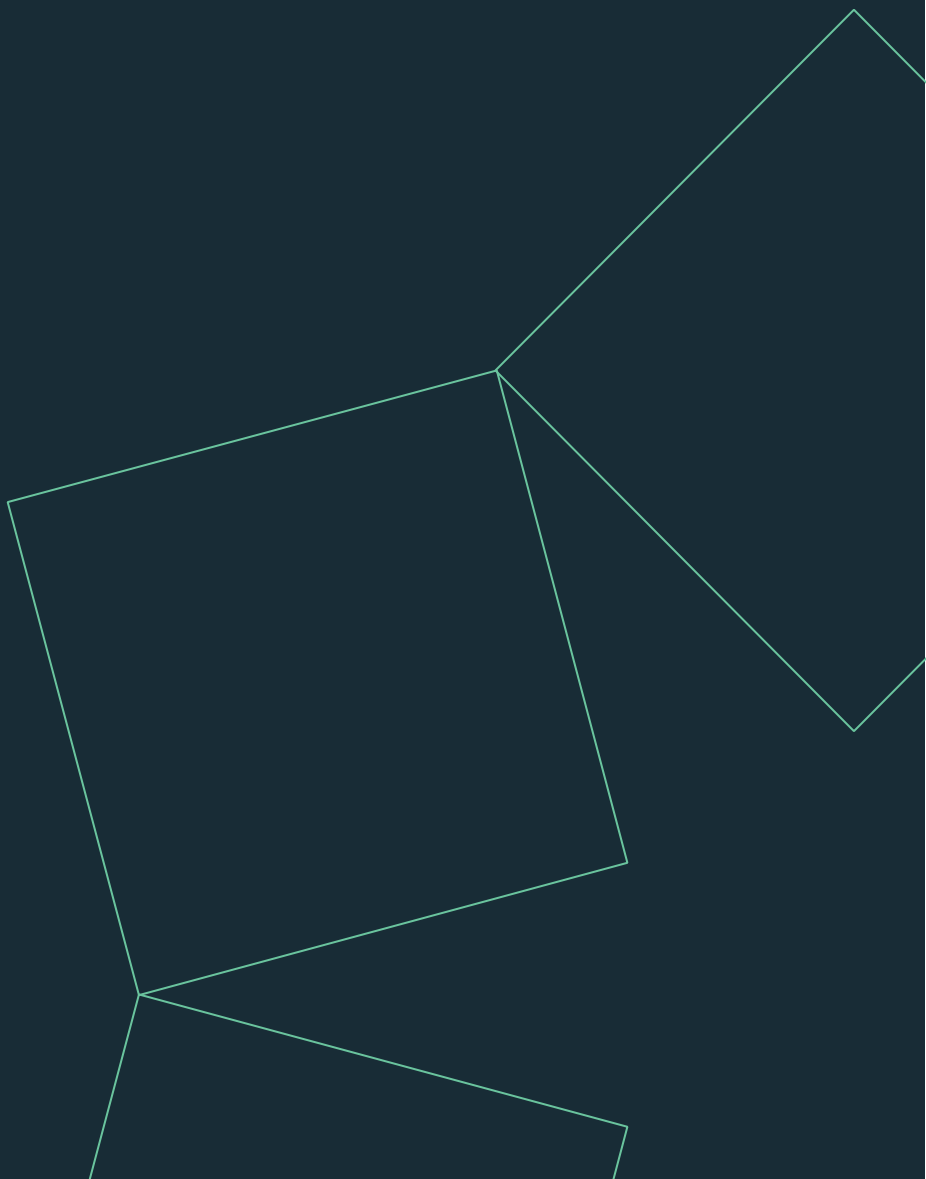
OFG Education

First Aid Policy

Policy Folder: Health & Safety



OFG Education

FIRST AID POLICY

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1.0 INTRODUCTION

Outcomes First Group Limited (OFGL) recognises that prompt first aid/emergency aid treatment is instrumental in reducing the effects of injury or illness suffered at work and will comply fully with the provisions of The Health and Safety (First-Aid) Regulations 1981, and associated HSE Guidance.

The organisation's Policy therefore is to provide adequate and appropriate equipment, facilities and trained personnel to enable first aid to be given to employees if they are injured or become ill at work. The organisation is therefore committed to:

- Providing, on all company premises (and non-company premises where the Company is legally "in control", where staff are employed), sufficient numbers of trained personnel, equipment and information available to ensure that someone competent in basic first aid or emergency aid techniques can rapidly attend to an incident.
- Ensuring that appropriate first aid arrangements are made for peripatetic employees.
- Ensuring that appropriate first aid arrangements are made for the people we support and other members of the public (e.g. visitors and contractors).
- To provide information to employees on first aid arrangements.

Compliance: This policy complies with all relevant regulations and other legislation as detailed in the *Compliance with Regulations & Legislation Statement*.

2.0 LEGISLATION

Under The Health and Safety (First-Aid) Regulations 1981 employers have a duty to provide adequate first aid equipment, facilities and suitable personnel to render first aid to employees.

The HSE Regulations do not require employers to provide first aid for anyone other than their own employees. However, it is strongly recommended that employers include non-employees in their assessment of first-aid needs and make provision for them. This may require first-aiders to receive additional training above the legal minimum requirement so that they are able to act competently, for example additional training in paediatric first aid within early years school settings.

3.0 DEFINITIONS

First aid is defined as:

The provision of treatment for the preservation of life and minimising the consequences of injury and illness until medical help is obtained, and the treatment of minor injuries which would otherwise receive no treatment, or which does not require professional medical treatment."

A first-aider is

Someone who has undertaken suitable training and has an appropriate First Aid qualification and remains competent to perform their role. This means that they must hold a valid certificate of competence in either:

- First Aid at Work (FAW), issued by an accredited training organisation or recognised awarding body; or
- Emergency First Aid at Work (EFAW), issued by an accredited training organisation or a recognised awarding body, or
- Paediatric First Aid (early years provision), issued by an accredited training organisation or a recognised awarding body.

Appointed Person is

A person who's role is to oversee first aid equipment (e.g. checks and, as appropriate, replenishing the first aid boxes and defibrillator), calling the emergency services when required, reporting incidents in accordance with local arrangements, and whilst they do not

provide first aid themselves they support trained first aiders and manage the situation until help arrives. Typically, an appointed person would be used in low-level hazards areas such as those that might be found in offices and shops.

An appointed person is not required to have any formal training.

4.0 ORGANISATION & MANAGEMENT

Board of Directors

The Board of Directors have ultimate responsibility for ensuring that the Company meets its statutory obligations and that effective arrangements for the management of health and safety are put in place and are therefore responsible for setting and approving policy direction

Chief Executive Officer

The Chief Executive has overall responsibility for ensuring that the Company meets its statutory obligations and that effective arrangements for the management of health and safety are put in place.

Managing Directors of specific services

The Managing Directors have executive responsibility to manage Health and Safety including compliance with Health and Safety at Work Act, etc. 1974 and other relevant legislation, best practice guidance and Company policies to meet legal and organisational requirements

Regional Directors/Heads of Service/Operational Managers

Regional Directors/Heads of Service/Operational Managers are responsible for the ensuring the provision of arrangements in relation to first aid are in place and for ensuring that the company's policy is implemented for their respective services.

Head of Health and Safety

The Head of Health and Safety is responsible for advising on appropriate measures to meet legal and organisational requirements as required.

Managers (Registered Managers, Principals, Head Teachers)

Managers are responsible for

- Undertaking the first aid risk assessment to ensure that adequate first aid can be provided during all work hours including assessing the first aid requirements for off-site activities where there may be an increased risk of injury
- Ensuring provision of relevant and adequate first aid supplies stored in suitable containers
- Ensuring the provision of adequate number of staff trained in first aid (FAW/EFAW/Paediatric first aid/Appointed persons) throughout the times that the premises are in use.

- Sufficient notices are displayed at appropriate places indicating the location of first aid equipment and trained first aiders so that assistance can be quickly summoned. These should be reviewed and amended regularly.
- Adequate access to a telephone is always available to call emergency services when required.
- Ensuring that all employees are aware of first aid arrangements in the event of an accident or illness.
- A suitable first aid room is available when the need is identified.
- Visitors and contractors are provided with information regarding first aid procedures and how to access first aid provision prior to commencing work, if this will be available to them whilst working on-site.
- Records are maintained of:
    - checking of first aid boxes and defibrillators by nominated person;
    - all first aid administered must be recorded as part of the relevant electronic accident/incident reporting system.
- Maintaining details of Certified First Aiders, Appointed Persons, their training records, and training renewal dates.

First Aiders

First aiders are responsible for

- Administering first aid to employees in accordance with their training, when required to do so, and to refer staff for specialist help, when required.
- To record all treatment provided, including the nature of first aid given, together with the date and time it was given.
- To present themselves for training at the appropriate time.

Other Nominated Persons

- Nominated person(s) (e.g. Appointed Persons) are responsible for maintaining stocks of first aid kits and appropriate signage is in place as directed by the site Managers.

5.0 FIRST AID ARRANGEMENTS

First Aid Provision

At all Outcomes First Group workplaces, there must be adequate and appropriate provision of first aid equipment, facilities and appropriately trained staff to enable first aid to be administered to employees and non-employees if they become injured or ill.

The actual level of first aid provision at each workplace will be decided based on an assessment of need.

Where the work activity at any service involves particular risks, for example work with hazardous substances or working with dangerous tools or machinery, first aid needs will be greater and managers may need to increase the number of first aiders and associated controls within the assessment of first aid needs.

It is important to ensure that first aid provision is adequate and appropriate during all working hours, so planned annual leave and/or maternity leave of first aiders must be covered.

6.0 ASSESSMENT OF FIRST AID PROVISION

The Health and Safety (First-Aid) Regulations 1981, require employers to assess the needs for first aid with regard to the workplace, the location, the numbers and needs of employees and the activities taking place.

When deciding the level of First Aid required it should be borne in mind that the facilities and equipment should enable immediate assistance to be given to employees suffering from potential injuries or illness associated with the specific undertaking rapid summoning of an ambulance or medical assistance.

Typically, first-aiders will hold a valid certificate of competence in either First Aid at Work (FAW), Emergency First Aid at Work (EFAW), or Paediatric First Aid. These qualifications enable a first-aider to give emergency first aid to someone who is injured or becomes ill whilst at work.

The Regulations do not prescribe the level of First Aid facilities an employer must provide, because every workplace has different hazards. The level of service provided must be appropriate to the risks identified in the workplace assessment, and separate assessments may be required for various parts of the premises, and off-site activities dependent on the operations undertaken.

In determining the nature and extent of first aid provision within our sites, the factors to be considered and which should therefore be recorded if a record is desired, include:

- the nature of the work and workplace hazards and risks;
- The amount of staff and their locations.
- the sites history of accidents;
- the size of the site;
- the needs of travelling, remote, and lone workers;
- work patterns/shifts;
- the distribution of the workforce;
- the remoteness of the site from emergency medical services;
- employees working on shared or multi-occupied sites;
- cover for annual leave and other absences of first-aiders and appointed persons;
- first-aid provision for non-employees.

7.0 LEVELS OF FIRST AID PROVISION

The findings of the first-aid needs assessment will help to determine how many first-aiders/appointed persons are required. There are no standard rules on exact numbers as it should be determined by the needs assessments taking into account all the relevant circumstances of each individual workplace.

Following completion of the first aid needs assessment/checklist, the associated flowchart (*Appendix 1*: taken from L74 the guidance on the regulations) serves as a general guide on how many first-aiders or appointed persons might be needed. The numbers quoted are suggestions only as all relevant information should be taken into account to make a valid judgement.

A First Aider (FAW) is someone who has undergone an approved training course in First Aid at Work and who holds a current First Aid at Work Certificate. Their role involves:

- undertaking first aid treatment in accordance with their training,
- summoning an ambulance or other external medical services,
- maintain the first aid container to the required level as listed on the standard list of contents
- record all cases treated via the appropriate online reporting system (e.g. Info Exchange, Sleuth).

An Emergency First Aider (EFAW) is someone who has undergone an approved Emergency First Aid at Work training course (of minimum one-day duration) and who holds a current Emergency First Aid at Work Certificate. They are normally used in low hazard locations; their role involves:

- Undertaking basic emergency first aid in accordance with their training,
- Summoning the assistance of a First Aider where available,
- Summoning an ambulance or other medical services
- Maintain the first aid container to the required level as listed on the standard list of contents
- Record all cases via the appropriate online reporting system (e.g. Info Exchange, Sleuth).

A Paediatric First Aider is someone who has undergone an approved training course in Paediatric First Aid and who holds a current certificate. Their role involves:

- undertaking first aid treatment in accordance with their training,
- summoning an ambulance or other external medical services,
- maintain the first aid container to the required level as listed on the standard list of contents
- record all cases treated via the appropriate online reporting system (e.g. Info Exchange, Sleuth).

Insurance

All suitably trained staff providing first aid are covered by the insurance arrangements for the Company.

8.0 FIRST AID MATERIALS, EQUIPMENT & FACILITIES

When the assessment of first-aid requirements has been completed, the materials, equipment and facilities needed should be provided to make sure that the level of cover identified as necessary will be available to employees and others at all relevant times. This will include ensuring that first-aid equipment is suitably marked, easily accessible, and is available in all places where working conditions require it.
There is no mandatory list of items to be included in a first-aid container. The decision on what to provide will be determined by the findings of the first-aid needs assessment.

As a guide, where work activities involve low hazards, a minimum stock of first-aid items might be:

- a leaflet giving general guidance on first aid (for example, HSE's leaflet Basic advice on first aid at work)
- 20 individually wrapped sterile plasters (assorted sizes), appropriate to the type of work (hypoallergenic plasters can be provided if necessary);
- two sterile eye pads;
- two individually wrapped sterile triangular bandages;
- six safety pins;
- two large, sterile, individually wrapped unmedicated wound dressings;
- six medium-sized sterile individually wrapped unmedicated wound dressings;
- at least three pairs of disposable gloves (latex free and non-powdered).

Travelling first-aid kit contents

There is no mandatory list of items to be included in first-aid kits for travelling workers. They might typically contain:

- a leaflet giving general guidance on first aid (for example HSE's leaflet Basic advice on first aid at work);
- six individually wrapped sterile plasters (hypoallergenic plasters can be provided, if necessary);
- two individually wrapped triangular bandages, preferably sterile;
- two safety pins;
- one large, sterile, unmedicated dressing;
- individually wrapped moist cleansing wipes;
- two pairs of disposable gloves (latex free, non-powdered).

First aid kits can be purchased which comply with British Standard BS 8599 however, 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 assessment.

Each workplace should have at least one first aid box supplied with a sufficient quantity of first-aid materials suitable for the particular circumstances, and if necessary a body spills kit.

Large sites will require more than one first-aid box, and suitable quantities of body spills kits. All first aid boxes must be identified by a white cross on a green background.

First-aid boxes should be easily accessible and located where possible near to hand washing facilities. First aid boxes must only be used to store first aid materials, and nothing else. They must not contain tablets, medications, creams etc.

First Aiders & Emergency First Aiders must inspect the contents of first-aid containers on a monthly basis (contents must be re-stocked as soon as possible after use).

Automated External Defibrillators (AEDs)

All OFG sites must have an Automated External Defibrillator (AED) available to use in the case of an emergency cardiac situation, and that this provision is formally documented within their Assessment of First Aid Needs.

An AED should also be accompanied by an emergency response kit, containing items such as a pair of tough cut shears, preparation razor, nitrile gloves (non-latex), wipes, a towel, and a face shield.

Although persons do not need to undertake any formal training to use an AED, it is an integral part of the syllabus within the FAW, EFAW, and Paediatric training courses.

9.0 ACCIDENT / INCIDENT REPORTING

Any events where attention is required by an appointed person, First Aider or qualified person to deliver first aid must be reported following the accident/incident reporting policy and report via the appropriate online reporting system (i.e. Info Exchange, Sleuth).

10.0 TRAINING

There are 3 levels of training courses to consider:

- Emergency First Aid at Work (EFAW) training enables a first-aider to give emergency first aid to someone who is injured or becomes ill while at work.

- First Aid at Work (FAW) training includes the same content as EFAW, and also equips the first-aider to apply first aid to a range of specific injuries and illnesses.
- Paediatric First Aid – specifically for child related incidents

On completion of the first aid at work (FAW) training, successful candidates should be able to:

- understand the role of the first-aider, including reference to:
  - the importance of preventing cross infection;
  - the need for recording incidents and actions;
  - use of available equipment;
- assess the situation and circumstances in order to act safely, promptly and effectively in an emergency;
- administer first aid to a casualty who is unconscious (including seizure);
- administer cardiopulmonary resuscitation and use an automated external defibrillator;
- administer first aid to a casualty who is choking;
- administer first aid to a casualty who is wounded and bleeding;
- administer first aid to a casualty who is suffering from shock;
- provide appropriate first aid for minor injuries (including small cuts, grazes and bruises, minor burns and scalds, small splinters).
- administer first aid to a casualty with:
  - injuries to bones, muscles and joints, including suspected spinal injuries;
  - chest injuries;
  - burns and scalds;
  - eye injuries;
  - sudden poisoning;
  - anaphylactic shock;
- recognise the presence of major illness (including heart attack, stroke, epilepsy, asthma, diabetes) and provide appropriate first aid.

On completion of an emergency first aid at work (EFAW) course, successful candidates should be able to:

- understand the role of the first-aider, including reference to:
  - the importance of preventing cross infection;
  - the need for recording incidents and actions;
  - use of available equipment;
- assess the situation and circumstances in order to act safely, promptly and effectively in an emergency;
- administer first aid to a casualty who is unconscious (including seizure);
- administer cardiopulmonary resuscitation and use an automated external defibrillator;
- administer first aid to a casualty who is choking;
- administer first aid to a casualty who is wounded and bleeding;
- administer first aid to a casualty who is suffering from shock;

- provide appropriate first aid for minor injuries (including small cuts, grazes and bruises, minor burns and scalds, small splinters).

Note: an 'Appointed Person' is not required to have any formal training.

11.0 INFECTION CONTROL

Those most at risk of infection are, in theory, first aiders attempting to give resuscitation or trying to stop bleeding. As a precautionary measure a suitable resuscitation mask or shield should be provided where a risk of infection may occur.

To minimise risk of cross contamination/ infection whilst administering first aid, first-aid personnel must cover all exposed cuts/abrasions on their own bodies with a waterproof dressing before administering treatment.

They must also wash their hands before and after applying dressings.

Disposable nitrile/vinyl gloves and aprons must be worn whenever blood, or other body fluids are handled

First aiders must comply with all infection prevention and control policies and procedures for the company, for example in cleaning up spilt blood or other bodily fluids.

If contact is made with any other person's body fluids the area should be washed immediately and medical advice sought.

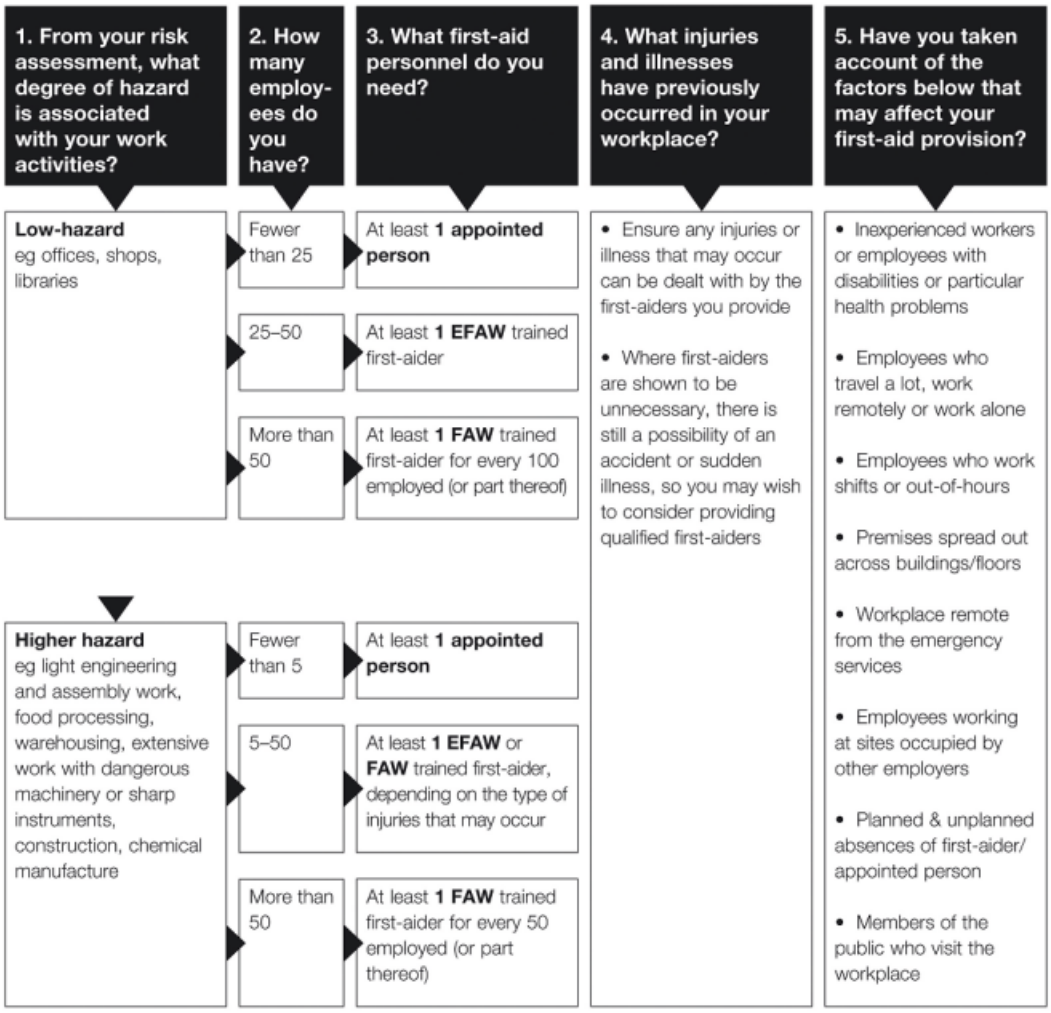
Further advice on infection control is available in the Control of Infection Policy

Any injuries incurred whilst providing first aid (including sharps injuries) must be reported via the appropriate online reporting system (i.e. Info Exchange, Sleuth).

12.0 MONITORING & REVIEW

This policy will be reviewed every 2 years, unless changing circumstances require an earlier review.

13.0 APPENDIX 1



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