



Non-patient first aid at work policy

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Type of document	Policy
Target audience	All CWP staff
Document purpose	This policy describes the process for implementing the requirements of the Health and Safety (First Aid at Work) Regulations 1981, the Health and Safety (Miscellaneous Amendments) Regulations 2002, and of all associated Approved Codes of Practice and Guidance relating to the protection of those staff, and others, who are, or could be in the future, injured or taken ill at work

Approving meeting	Health Safety and Well Being Sub Committee	Date 3-Nov-14
Implementation date	17-Jun-15 followed by an annual compliance review	

CWP documents to be read in conjunction with	
HR6	Mandatory Employee Learning (MEL) policy
GR2	Health and safety arrangements and responsibilities
GR1	Incident reporting and management policy
CP24	Cardio Pulmonary Resuscitation (CPR)
CP10	Adult safeguarding policy
CP40	Children safeguarding policy
HR14	Guidance on accessing staff support and counselling
HR3.5	Managing attendance and procedures

Document change history	
What is different?	<ol style="list-style-type: none"> 1. HSE no longer approve first aid training courses 2. Inclusion of guidance on size of first aid boxes 3. Inclusion of minimum contents for each first aid box 4. Inclusion of checking of first aid boxes 5. Appendices for inpatient and community service users removed 6. Flowchart for first aid incidents for staff moved into main body of policy
Appendices / electronic forms	Appendices for inpatient and community service users removed
What is the impact of change?	

Training requirements	Yes - Training requirements for this policy are in accordance with the CWP Training Needs Analysis (TNA) with Learning and Development (L&D)
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Financial resource implications	Yes
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External references
<ol style="list-style-type: none"> 1. Health and Safety (First Aid at Work) Regulations 1981 2. Health and Safety (First Aid at Work) Regulations 1981 Approved Code of Practice and guidance 3. Health and Safety (First Aid at Work) Regulations 1981 Guidance on Regulations L74 (Third Edition) 2013

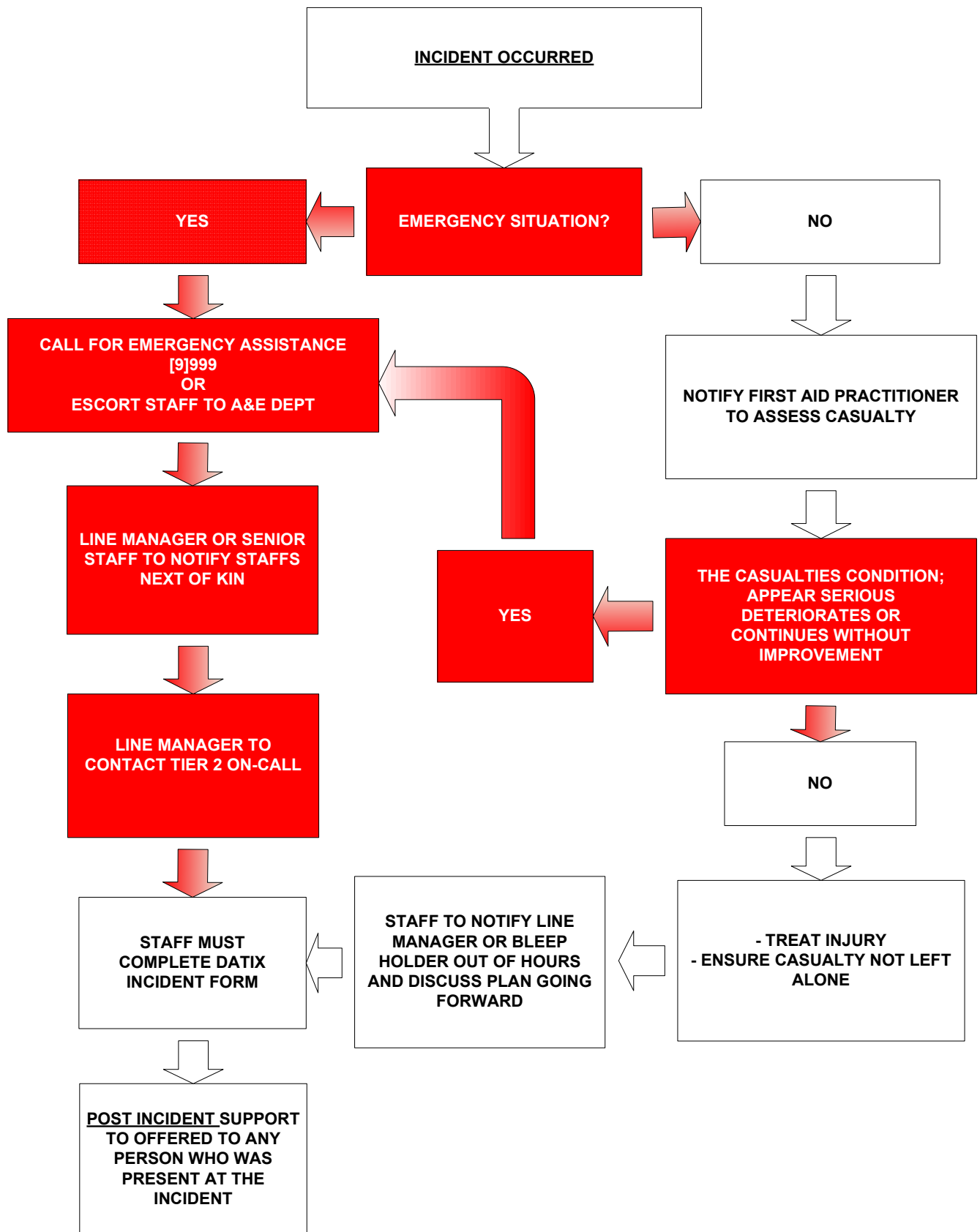
Equality Impact Assessment (EIA) - Initial assessment	Yes/No	Comments
Does this document affect one group less or more favourably than another on the basis of:		
- Race	No	
- Ethnic origins (including gypsies and travellers)	No	
- Nationality	No	
- Gender	No	
- Culture	No	
- Religion or belief	No	
- Sexual orientation including lesbian, gay and bisexual people	No	
- Age	No	
- Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
Is there any evidence that some groups are affected differently?	No	
If you have identified potential discrimination, are there any exceptions valid, legal and/or justifiable? N/A		
Is the impact of the document likely to be negative?	No	
- If so can the impact be avoided?	N/A	
- What alternatives are there to achieving the document without the impact?	N/A	
- Can we reduce the impact by taking different action?	N/A	
Where an adverse or negative impact on equality group(s) has been identified during the initial screening process a full EIA assessment should be conducted.		
If you have identified a potential discriminatory impact of this procedural document, please refer it to the human resource department together with any suggestions as to the action required to avoid / reduce this impact. For advice in respect of answering the above questions, please contact the human resource department.		
Was a full impact assessment required?	No	
What is the level of impact?	Low	

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Quick reference flowchart for procedure in the event of a First Aid at Work (FAW) incident

For quick reference the guide below is a summary of actions required.



1. Introduction

This policy describes the process for implementing the requirements of the Health and Safety (First Aid at Work) Regulations 1981, the Health and Safety (Miscellaneous Amendments) Regulations 2002, and of all associated Approved Codes of Practice and Guidance relating to the protection of those staff and others who are or could be in the future injured or taken ill at work. Consideration of NHS Litigation Authority standards, Care Quality Commission registration requirements and equality and diversity issues have been made when implementing the requirements of this policy. Cheshire and Wirral Partnership NHS Foundation Trust (CWP) acknowledges its legal and moral responsibilities and is fully committed to ensuring suitable and sufficient levels of first aid provision including adequate and appropriate equipment facilities and staff to enable first aid to be immediately rendered to staff and non-patient others where appropriate who are or could be in the future injured or taken ill whilst at work.

Although there is no legal requirement contained within the Health and Safety First Aid at Work (FAW) Regulations 1981 to ensure suitable and sufficient levels of first aid provision are afforded to members of the public third parties or otherwise, CWP acknowledges its duty of care as a healthcare provider and will offer the provision where practicable. Designated first aid practitioners and or appointed persons are covered by the NHS Public Liability Insurance Scheme for any first aid administered to staff and other where appropriate whilst on premises owned by CWP. It is anticipated that good health and wellbeing practices and a proactive safety culture at work will have a positive effect contributing towards the reduced likelihood of risks of staff being injured outside of work.

2. Definitions

First Aid	Treatment for the purposes of preserving life and minimizing consequences of injury and illness
Appointed Person	Any member of staff who takes charge of a situation in the absence of a First Aid Practitioner should serious illness or injury occurs and ensures that processes are in place to manage the situation.
First Aid Practitioner	A member of staff who undertakes first aid duties and holds a valid certificate of competence in first aid at work following successful completion of an approved course.
Risks	The likelihood and severity of harm arising from a hazard.
Casualty	Injured or wounded staff
Medical staff	A registered doctor employed by CWP

3. Procedure

This policy specifically refers to the management of first aid provision for all CWP staff and non-patient persons only. This policy does not include the use of lotions or the prescribing or administration of medication.

The aim for any first aider (Appointed Person or First Aid Practitioner) attending any incident is to preserve life, prevent the situation from worsening and to promote recovery:

- To preserve life for both the casualty and the first aider who responds. Staff must assess the danger to themselves as well as to the casualty and must not take any unnecessary risks which will compromise the safety of any person or persons;
- To prevent the situation from worsening a skilled first aider must take action which may include the removal of dangerous items as well as acting to prevent the casualty from deteriorating;
- To promote recovery the actions of a first aider should after preventing things from deteriorating help the casualty to recover from their illness or injury.

3.1 First Aid at Work (FAW) risk assessment process

CWP recognises the benefits of managing and controlling risks that may present themselves within the workplace and of ensuring that the health, safety and wellbeing of all staff and of others.

This remains of paramount importance to ensure the protection of those staff and others who are or could be in the future injured or taken ill at work a series of risk control measures have been developed to be used for this purpose.

All assessments / output reports and recommended actions are initially monitored locally via the Local Health and Safety meetings and all outstanding risks are fed up to the Sub Committee for monitoring via the risk register. Annually an audit of all buildings which have been risk assessed is compiled by the Health and Safety team which is then inputted into the annual Corporate Performance Report which will go to the Corporate Board.

3.2 Selection of First Aid Practitioners

The guidance from the Health and Safety Executive (HSE) advises the appropriate numbers of first-aid personnel to be available at all times people are at work. These recommendations must be further enhanced when selecting first aid practitioners, whereby consideration should be given to an individual's:

- Reliability, disposition and communication skills:
- Aptitude and ability to absorb new knowledge and learn new skills:
- Ability to cope with potentially stressful and physically demanding emergency procedures:
- Normal duties. These should be such that they may be left to go immediately and rapidly to an emergency.

The Education CWP competent first aid trainer will monitor, advise and support each service manager as to how many first aid practitioners will be required. Service managers will need to identify and consider sufficient numbers of first aid practitioners to cover all eventualities and once individual staff have been identified for selection to undertake training they should be booked by the manager onto an appropriate course, either a 1 day Emergency First Aid at Work course or a 3 day First aid at Work course. Individual staff members can request to be considered for training.

The numbers of first aid practitioners required will be dependent on the total number of employees in the organisation and the result of the first aid risk assessment.

In accordance with national guidance CWP would be considered as low risk, therefore the suggested numbers are given below.

Less than 25 staff	At least one appointed person
25 – 50 staff	At least one first-aider trained in Emergency First Aid at Work (EFAW)
5 - 50 staff	At least one first-aider trained in EFAW or First Aid at Work (FAW) depending on the type of injuries that might occur
More than 50 staff	At least one first-aider trained in FAW for every 100 employed (or part thereof)

3.3 Procedure in the event of a FAW incident

See quick [reference flowchart](#)

3.4 When to call for an ambulance for staff incidents

A paramedic / 999 response must be summoned for all cases of serious injury and potentially life threatening conditions and these will include:

- Any incident where there are unknown risks to life;
- Any incident where the casualty has lost consciousness;
- Where there are serious circulation difficulties, including severe blood loss;

- Any condition where there is a high risk of complications occurring whilst being transported e.g. electric shock, extensive burns, poisoning and suspected medical conditions such as diabetes, epilepsy, angina, stroke or heart attack;
- Any condition where the ability to walk is severely restricted e.g. serious trauma, lower limb injuries and open fractures;
- Any incidents involving the potential for serious internal or hidden trauma including falls on a level or at height and crushing;
- Where a staff is complaining of chest pains or;
- Any incident in which staff feels a paramedic / 999 response is required.

To summon an ambulance for staff based on the main inpatient sites responders must;

- Dial (9)999
- Inform the Emergency Services of your exact location and a paramedic response is required urgently;
- Commence and maintain appropriate first aid/life support in accordance with CWP policy until emergency services have arrived.

All community staff not attached to a main site staff must:

- Dial 999 or (9)999 (CWP IP phone system only);
- Inform the Emergency Services of your exact location and a paramedic response is required urgently;
- Commence and maintain appropriate first aid/life support in accordance with CWP policy until emergency services have arrived.

For CWP staff working in local authority, acute trust or third party premises must:

- Familiarize themselves with their policies in response to first aid incidents;
- Apply duty of care as a common sense approach to all first aid incidents.

3.5 Transporting casualties with non-life threatening conditions

Decisions to transport an ill or injured staff by means other than an ambulance should be taken by competent first aid practitioners or other medically qualified staff and should be based upon an assessment of the conditions of the casualty, the need for specialist medication or treatment and potential traffic conditions.

If a decision is taken to transport a staff casualty in either a CWP vehicle or private vehicle, in the interests of safety the person administering first aid should not be the driver of the vehicle. Should there be any uncertainty about how to transport the staff casualty, advice should be sought from medically qualified staff or NHS Direct on 111 who will assist in the decision making process.

3.6 Post incident reporting

Following any incident which has involved any known or suspected injury a trust Datix incident form must be completed by the senior nurse on the ward or in the community team setting. All Datix will be required to be signed off by the senior lead, an investigation or event held and learning points identified within the report.

3.7 Post incident support

All staff involved in an incident where first aid has been implemented, must on conclusion of any incident be offered support in accordance with CWP policy guidance on accessing staff support and counselling service.

Any service users who may also have involved or observed the incident itself must also be offered post incident support by the staff and this must be documented into the service users care notes.

3.8 Training

- The trusts accredited training course can be accessed through Education CWP training, all course dates are detailed with the trust mandated learning programme;

- When assessing the number of first aid at work staff who would be required to be trained, using first aid at work regulations CWP is classed as a low risk organisation and should have at least one first-aider trained for every 100 employed (or part thereof). In order to render first aid to those staff and others where appropriate who are or could be in the future injured or taken ill at work, an individual must have passed the examination of an approved course and hold a valid certificate of competence;
- Under the First Aid at Work regulations each first aid practitioner certificate is valid for a period of three years. Each accredited first aid practitioner must attend annual refresher courses within the three year period;
- Requalification training for individuals wishing to maintain the qualification should be undertaken at least three months prior to the expiry of a current certificate, with new certificates taking effect from the date of expiry of the previous certificate. Steps should be taken by first aid practitioners to maintain the knowledge and competence they acquired on their first aid at work training course.

3.9 Minimum requirements of all first aid boxes

Under Health and Safety law all employers have a responsibility to ensure that first aid provision in a work place is sufficient. This includes providing sufficient first aid boxes and equipment for the work place. It is recommended that all staff areas have the appropriate number of first aid boxes in accordance with British Standard for work place first aid kits, BS8599 which was introduced in 2011. The number and contents of a first aid kits are not mandatory this will be dependent on the first aid risk assessment and total number of employees in each area.

Size of the first aid box required will be dependent on the result of the risk assessment and the total staff in each area. All first aid boxes will indicate the size of box and/or recommended intended number of staff provision. British Standard recommendations for work place first aid kits states;

Category of Hazards	Number of staff	Size of first aid kits
Low Hazards	Less than 25	Small
	25 – 100	Medium
	More than 100	Large (1 per 100 employees)

3.10 Recommended First Aid box contents

Where there is a first aid box provided the minimum contents required per box must comply with British Standard BS8599.

Items	Small	Medium	Large	Travel (Lone Workers)
Guidance leaflet	1	1	1	1
Contents list	1	1	1	1
Medium size sterile dressing	4	6	8	1
Large size sterile dressing	1	2	2	1
Triangular bandage	2	3	4	1
Safety pins	6	12	24	2
Sterile eye pad	2	3	4	1
Waterproof plasters	40	60	100	10
Sterile saline wipes	20	30	40	4
Microporous tape	1	1	1	1
Nitrile gloves (pairs)	6	9	12	1
Sterile finger dressing	2	3	4	0
Resuscitation face shield	1	1	2	1
Foil blanket	1	2	3	1
Sterile eye wash (150ml)	0	0	0	1
Hydrogel burns dressing	1	2	2	1
Scissors	1	1	1	1
Conforming bandages	1	2	2	1

In areas where mains tap water is not readily available for eye irrigation, at least a litre of sterile water or sterile normal saline (0.9%) in sealed, disposable containers should be provided. Once the seal has been broken, containers should not be kept for reuse. Containers should not be used beyond their expiry date. There may be a need for items such as protective equipment in case first aid practitioners have to enter dangerous atmospheres, or blankets to protect casualties from the elements. Such items should be stored securely near the first aid container, in a first aid or treatment room or in the hazard area, as appropriate. Access to them should be restricted to people trained in their use.

3.11 Checking of First Aid Boxes

- First aid boxes on in-patient areas must be checked as part of the existing weekly emergency trolley and grab bag checks and recorded on the checklist in [appendix 1](#);
- All first aid boxes in none inpatient or community areas must be checked by a competent first aid practitioner who has attended CWP first aid training and recorded on the checklist in [appendix 1](#);
- All replenishment of stock requirements must be ordered and financed through individual service line budgets;
- The responsibility within each service line/community team to ensure that first aid boxes comply with policy and BS8599 will be with the line manager who must be the budget holder;
- Education CWP competent first aid trainer will monitor CWP first aid boxes and will report bi-annually to the Health, Safety and Wellbeing Sub Committee (HSWSC).

Each work site should have at least one first aid container supplied with sufficient quantity of first aid materials suitable for the particular circumstances and for the number of employees in each work area. First aid containers should only be stocked with items useful for giving first aid and should protect them from dust and damp. All first aid containers should be easily identified by a white cross on a green background. The contents of first aid containers should be examined frequently and restocked soon after use. Sufficient supplies should be held in stock on site. Care should be taken to dispose of items safely once they reach their expiry date.

3.12 Monitoring and reporting

To support this all CWP buildings where a service or team functions from will be risk assessed on an annual basis for safety and security of that building and its assets. The monitoring of the First Aid provision each area will be included into each assessment undertaken. The risk assessments will be carried out by the key individuals identified within an annual schedule plan which is monitored by the Health Safety & Wellbeing Sub Committee (HSWSC).

The Education CWP competent first aid trainer will develop an annual report to detail compliance with this policy and report annually to the Health, Safety and Wellbeing Sub Committee. Any first aid issues, problems or concerns identified locally must be raised with each local health and safety group.

This process does not include the monitoring of identified lone worker first aid boxes carried in vehicles. Where there are identified lone worker first aid boxes it is the responsibility of the individual to ensure that the contents of the boxes are checked on a regular basis and that all stock is replaced or replenished in accordance with this policy.

Appendix 1 - Checklist for first aid box contents for inpatient and community services

Contents	Small	Medium	Large
Guidance leaflet	1	1	1
Contents list	1	1	1
Medium size sterile dressing	4	6	8
Large size sterile dressing	1	2	2
Triangular bandage	2	3	4
Safety pins	6	12	24
Sterile eye pad	2	3	4
Waterproof plasters	40	60	100
Sterile saline wipes	20	30	40
Microporous tape	1	1	1
Nitrile gloves (pairs)	6	9	12
Sterile finger dressing	2	3	4
Resuscitation face shield	1	1	2
Foil blanket	1	2	3
Sterile eye wash (150ml)	0	0	0
Hydrogel burns dressing	1	2	2
Scissors	1	1	1
Conforming bandages	1	2	2

Appendix 2 – Weekly first aid box checks list and staff signature

Date checked	Staff signature	Comments