The Newcastle upon Tyne Hospitals NHS Foundation Trust

First Aid Policy

1  Introduction

The Trust is committed to providing sufficient numbers of trained first aid personnel and equipment to deal with minor accidents and emergencies in the work place. The Trust recognises its statutory obligations and that first aid can save lives whilst prevent minor injuries becoming major ones. First-aid provision in the workplace covers the arrangements that need to be made to manage injuries or illness suffered at work.

2  Scope

This policy has been drawn up to give managers and employees support and advice relating to the provision of first aid. The policy draws on legislative requirements detailed in the First Aid (Health and Safety at Work) Regulations 2013. This policy applies to all staff working in the Newcastle upon Tyne Hospitals NHS Foundation Trust.

3  Aims

The aim of first aid is to reduce the effects of injury or illness, 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 working patterns. This policy aims to ensure that effective first arrangements are in place and are maintained to meet first aid needs.

4  Duties (Roles and responsibilities)

4.1  The Trust Training and Development Department

Are responsible for arranging first aid training, including recertification and annual refresher training. The Department will maintain a register of certified First Aiders. Selection on the providers of training should take account of HSE Guidance.

4.2  Departmental/Directorate Managers

Must Ensure:
• That suitable first aid personal are appointed in all areas covered under Section 6.2

• There is adequate cover taking in to consideration staff to first aider ratio and to account for leave and shift patterns where appropriate.

• That all First Aiders are provided with the correct training and timely updates, as well as the correct equipment and resources to provide safe first aid.

• That all incidents/accidents are reported as required by the Management and Reporting of Accidents and Incidents Policy.

• If a First Aider for a department leaves, it will be the manager's responsibility to appoint a replacement and arrange alternative first aid cover.

• That the findings of departmental health and safety risk assessments are considered when determining the level of first aid support and equipment required.

• Ensure that staff are aware of first aid arrangements including the identity of first aid trained staff and location of first aid equipment.

4.3 First Aid Personnel

• First aid personnel are employees who have volunteered for the role and who have been assessed by their manager as being suitable for the role.

• First Aiders are personnel who have received training and passed an examination to Health and Safety Executive requirements.

• First aid personnel require retraining at regular intervals in order to ensure that their skills are maintained otherwise their registration will default and they will not be able to practice. First Aid training requirements are covered in section 7.

• First aid personnel must inform the Training and Development Department when their training certification period is nearing expiry so that updates can be arranged.

5 Definitions

First Aid is where a person will need help for the purpose of preserving life and minimising the consequences of injury and illness.
The stated purpose of first aid is to:

- Preserve life.
- Limit the effects of the condition.
- Promote recovery.

6. First Aid Arrangements

6.1 Emergency Protocol

6.1.1 Where a serious injury/medical incident occurs, the injured party should be taken directly to the Accident Emergency Department/EAS/MIU/WIC as soon as possible. If urgent or the patient cannot be moved safely without causing more injury, an ambulance should be called.

6.1.2 Where Cardio-Pulmonary Resuscitation is required within the Trust grounds, the Cardiac Arrest team should be called as outlined in the Trust Cardiopulmonary Resuscitation (CPR) and Training Policy (and if off-site or in a distant site location an emergency ambulance will be required).

6.2 First Aid Needs Assessment

Within the Trust immediate first aid cover is available in all clinical areas.

There are a number of non-clinical areas, which will require first aid cover. Managers who have responsibility for staff covering the following areas must nominate suitable employees to provide first aider support and ensure that first aid equipment is provided:

- Catering Departments
- Pharmacy Departments
- Estates Departments
- Laboratory Medicine
- Medical Physics
- Medical Electronics
- Sterile Services
- Disabled Services Centre
- Supplies
- Other Departments of a similar nature or in an isolated or off site location.

This support must account for leave; varying shift patterns and work across different sites with the overriding aim for first aid to be administered without delay should the occasion arise. Where more than 50 staff operate in a specific department, then more than 1 first aider is likely to be required. Managers should consult with the Health and Safety Team regarding a specific needs assessment. Managers should also consider the appointment of more than one first aider to provide adequate cover during
holiday/leave periods. Where a number of different teams or departments are co-located then coordination between the managers should be undertaken.

6.3 First Aid Equipment

6.3.1 First Aid boxes should be placed in a central location and all staff should be notified of its location. They should also be informed who their named first aider is and where they can contact them.

6.3.2 First aid boxed are located on all of the Main Reception Desks (NVW, LW, FRH, NCCC and IoT) with information relating to where to seek assistance from the nearest clinical area.

6.3.2 Suitable Poster should be located next to the First aid box and other central locations so that employees are aware of their first aiders for that period of duty

6.3.3 The first Aid boxes will contain an inventory of the stock and will be checked on a monthly basis and restocked by the department’s First Aider. A record book should be maintained, signed and dated once the contents have been checked.

6.3.4 The following contents are recommended as a minimum, although this may vary depending on the activity of the department and manpower levels:-

- A general guidance/information card for first aid at work and a stock level checking record.
- 20 individually wrapped sterile adhesive dressings (assorted sizes) appropriate to the work environment (blue-detectable for the Catering Department).
- 2 sterile eye pads, with attachments.
- 2 individually wrapped triangular bandages.
- 6 Safety pins.
- 6 medium sized individually wrapped sterile non-medicated wound dressings (approximately 13cm x 9cm).
- 2 large sized individual wrapped sterile non-medicated wound dressings (approximately 13cm x 9cm).
- 3 extra large individually wrapped sterile non-medicated wound dressing (approximately 28cm x 5cm).
- 3 pairs of non latex disposable gloves

6.3.5 In situations where the main tap water is not readily available for eye irrigation, sterile water or sterile normal saline solution (0.9%) in sealed disposable containers should be provided. Opened they must not be reused. The use of eye baths, cups or refillable containers is not recommended.
6.3.6 Please note that if emergency eye stations are located within a Department, they must be checked as part of the first aid box contents check and a record must be maintained of this process.

6.3.7 Stock for the First Aid box should be ordered via the Trust supplies Department.

6.3.8 Arrangements for Automated External Defibrillators (AED) use is covered under the Cardiopulmonary Resuscitation (CPR) and Training Policy.

6.4 Recording of Incidents

All accidents must be reported, however minor as part of the Management and Reporting of Accidents and Incidents Policy.

7 Training

First Aider training follows an initial 3 day course followed by a 6 hour annual update in year 2 and 3. Requalification is required before expiry of the 3 year certification; this requalification is based on a 2 day programme. Should a qualification have expired greater than 1 month, retraining will be required. Initial training, including requalification and refresher training will be organised by the Training and Development Department.

8 Equality and diversity

The Trust is committed to ensuring that, as far as is reasonably practicable, the way we provide services to the public and the way we treat our staff reflects their individual needs and does not discriminate against individuals or groups on any grounds. This document has been appropriately assessed.

9. Monitoring Compliance

<table>
<thead>
<tr>
<th>Standard / process / issue</th>
<th>Monitoring and audit</th>
<th>Method</th>
<th>By</th>
<th>Committee</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>• All named areas in section 6.2 have a minimum of 1 trained first aider.</td>
<td>Training Report</td>
<td>Training Team</td>
<td>Trust H&amp;S Committee</td>
<td>Annual</td>
<td></td>
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<tr>
<td>• All those first aiders in years 2 and 3 have undertaken refresher training.</td>
<td>Review of Incidents recorded on datix</td>
<td>H&amp;S Team</td>
<td>Trust H&amp;S Committee</td>
<td>Annual</td>
<td></td>
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<tr>
<td>• Content of first aid boxes subject to checks</td>
<td>First Aid reviewed during H&amp;S inspections</td>
<td>H&amp;S Team</td>
<td>Trust H&amp;S Committee</td>
<td>Annual</td>
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</table>
10 Consultation and review

The policy has been circulated to:
- H&S
- Trust Health and Safety Committee
- Laboratory Health and Safety Committee
- Matron for Medical Records and Outpatients
- Senior Resuscitation Officer
- CPG

11 Implementation

A summary of the key changes will be notified to managers following implementation. Further advice and guidance will be available from the Health and Safety Team.

12 References
- Health and Safety at Work Act 1974
- The Management of Health and Safety at Work Regulations 1992/1999

13 Associated documentation
- Health and Safety Operational Policy
- Cardiopulmonary Resuscitation (CPR) and Training Policy
- Management and Reporting of Accidents and Incidents Policy

Author: Health and Safety Lead
<table>
<thead>
<tr>
<th>Policy Title:</th>
<th>First Aid</th>
<th>Policy Author:</th>
<th>Tim White</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does the policy/guidance affect one group less or more favourably than another on the basis of the following: (* denotes protected characteristics under the Equality Act 2010)</td>
<td>Yes/No?</td>
<td>You must provide evidence to support your response:</td>
<td></td>
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<tr>
<td>• Race *</td>
<td>No</td>
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<tr>
<td>• Ethnic origins (including gypsies and travellers)</td>
<td>No</td>
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<td>• Nationality</td>
<td>No</td>
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<tr>
<td>• Gender *</td>
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<td>• Culture</td>
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<td>• Religion or belief *</td>
<td>No</td>
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<td>• Sexual orientation including lesbian, gay and bisexual people *</td>
<td>No</td>
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<td>• Age *</td>
<td>No</td>
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<td>• Disability – learning difficulties, physical disability, sensory impairment and mental health problems *</td>
<td>No</td>
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<td>• Gender reassignment *</td>
<td>No</td>
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<td>• Marriage and civil partnership *</td>
<td>No</td>
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<td>2. Is there any evidence that some groups are affected differently?</td>
<td>No</td>
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<td>3. If you have identified potential discrimination which can include associative discrimination i.e. direct discrimination against someone because they associate with another person who possesses a protected characteristic, are any exceptions valid, legal and/or justifiable?</td>
<td>N/A</td>
<td></td>
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<tr>
<td>4(a). Is the impact of the policy/guidance likely to be negative? (If &quot;yes&quot;, please answer sections 4(b) to 4(d)).</td>
<td>N/A</td>
<td></td>
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<tr>
<td>4(b). If so can the impact be avoided?</td>
<td>N/A</td>
<td></td>
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<tr>
<td>4(c). What alternatives are there to achieving the policy/guidance without the impact?</td>
<td>N/A</td>
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<tr>
<td>4(d). Can we reduce the impact by taking different action?</td>
<td>N/A</td>
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**Comments:**

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<th>Action Plan due (or Not Applicable):</th>
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</thead>
</table>

Name and Designation of Person responsible for completion of this form: .......... Tim White ................................................................. Date: .......... 11.12.13 ..............

Names & Designations of those involved in the impact assessment screening process: .......... Tim White, Health and Safety Lead .................................................................

(If any reader of this procedural document identifies a potential discriminatory impact that has not been identified on this form, please refer to the Policy Author identified above, together with any suggestions for the actions required to avoid/reduce this impact.)