

Guidance on First Aid Arrangements

All services

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First Aid Needs Assessment

A first aid needs assessment is an assessment carried out by a competent individual. It is used to determine how many first aiders are required, what level of qualification they should hold, and whether any additional facilities or equipment needs to be provided.

The Health and Safety (First Aid) Regulations 1981 is a key piece of legislation regarding first aid. It outlines the responsibility placed on employers to ensure that any necessary facilities, equipment and personnel are 'adequate and appropriate'.

Determining what is classed as 'adequate and appropriate' will depend on the nature of the workplace itself.

There are several factors to consider, regardless of industry or how many people are employed by the business, health and safety regulations in respect to first aid assessments and provisions are always applicable.

The history of injuries can help to create a more informed picture of which incidents are most likely to occur and what kind of first aid provisions are required to deal with them. Control measures should always be in place to reduce any potential risks and prevent accidents and injuries at work, but should these fail, first aid assistance may be necessary.

Of course, along with accidents, there is always the risk of unexpected medical episodes occurring at any time.

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. 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.



How much first-aid provision is required depends on the circumstances i.e. the hazards and risks of each workplace. For example, a first aid needs assessment should consider:

- the nature of the work and workplace hazards and risks
- the nature of the workplace
- the organisation's accident history
- the size of the organisation
- the needs of travelling, remote and lone workers
- work patterns
- the distribution of the workforce
- the remoteness of the site from emergency medical services
- employees working on shared or multi-occupied sites
- annual leave and other absences of first-aiders and appointed persons
- first-aid provision for non-employees

Service Managers and Principals are well placed to determine the level of hazard and risk as they will be familiar with the exact circumstances of their workplace or school including the buildings; the activities taking place; staffing; and working arrangements, etc. This knowledge can be used to assess the first-aid equipment; facilities and personnel that are appropriate and to demonstrate how the level of provision was decided.

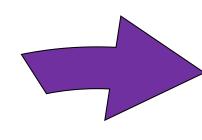
Where a service area or school is based in more than one building a separate assessment should be conducted for each location.

<u>Note!</u> Refer to the Health & Safety Executive (HSE) document 'First aid at work Guidance on Regulations': https://www.hse.gov.uk/pubns/priced/l74.pdf and the information located at https://www.hse.gov.uk/firstaid/index.htm



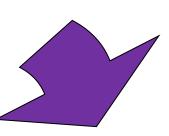
put the provis arrange equipm

Step 6
put the identified first-aid
provisions in place, e.g.
arrange training; purchase
equipment; put up signage
etc.



Step 1

Background information, injury history etc



Step 5
Using the information from
STEPS 2, 3 & 4 identify the
details of your additional firstaid requirements

STEPS TO FIRST AID ASSESSMENT

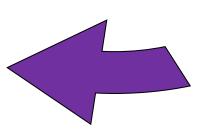
The assessment can be a dynamic assessment and does not need to be recorded, however, it is good practice. A template to aid the formation of the assessment is available here.

Step 2 Identify existing first-aiders, and details of existing first aid equipment and facilities



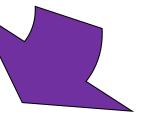
Step 4

Identification of the basic minimum first-aid provision that must be available



Step 3

Determine the first aid provision based on the types of activities and hazards that could be present





How many First Aiders should I have?

No. of employees

Number of first aid personnel (minimum)

Fewer than 25

1 appointed person

25 to 50

1 EFAW trained first aider

50+

1 FAW trained first aider per 100 people (or part thereof)

Schools

It is recommended that every school should have at least one qualified first aider and one designated appointed person

Schools must also ensure the children's health and safety first.

Therefore, at least one person must have a current paediatric first aid (PFA) certificate.

This will give the school confidence in protecting the children's mental health and well-being

Supported Living/Residential

A residential site should ideally have at least one first aider per shift on site, meaning there would be one first aider available for all residents during that time period, regardless of the number of resident's present; however, the exact number may vary depending on the risk level of the facility and the number of residents.

In a low-risk care home with a small number of residents, one first aider per shift might be sufficient.

For high-risk situations, like a home with residents requiring significant medical support, more than one first aider per shift might be necessary.

Day Centres

The number of first aiders needed in a day centre depends on the size of the centre, the activities taking place, and the risk assessment conducted, but generally, at least one trained first aider is recommended for most day centres, with additional first aiders considered for larger facilities or high-risk activities; a good rule of thumb is to have one first aider for every 50 people present.

Offices

In a low-risk workplace such as an office, the number of first aiders will depend on how many employees are present every work day.

The possible hazards in areas like this are primarily injuries, particular health problems

One appointed person is the minimum legal requirement for every workplace with 25 employees.

If you have more than 50 employees, only one first aider for every 100 employees is the guidance, so if you have 101 employees, you need at least two first aiders.

All events regardless of size, should have some form of first aid provision in place for the duration

If you anticipate an attendance of fewer than 500 people, we recommend at least two qualified first aiders. Events with more than 500 and up to 2,000 attendees should have four trained first aiders and the consideration of a qualified healthcare professional



First Aid Kit Requirements

Basic first aid items

As a minimum, the following items are to be available, in date, and intact:

- A first aid container that protects the contents of a first aid box from damp and dust
- 20x individually wrapped sterile adhesive dressings of varying sizes (the combination of sizes will depend on your own needs)
- Detectable blue dressings (if food handlers are employed)
- 2x sterile eye pads
- 4x individually wrapped triangular bandages
- 6x safety pins
- 6x medium-sized individually wrapped sterile un-medicated wound dressings (roughly 12cmx12cm)
- 2x large sterile individually wrapped un-medicated wound dressings (roughly 18cmx18cm)
- 1x pair of disposable gloves
- A leaflet giving general guidance on first aid (e.g. HSE leaflet "Basic advice on first aid at work")

Extra first aid items

Where identified by the findings of the first aid needs assessment, the following items provided:

- Extra plasters for environments where sharp tools are used
- Scissors
- Tape
- Individually wrapped moist wipes (useful for dusty areas, such as workshops)
- Foil Blankets
- Sterile water or saline in a sealed, disposable container
- Burns gel
- AED

Travelling first aid kit inventory – basic items

- 6x individually wrapped sterile adhesive dressings
- 2x triangular bandages
- 1x large sterile un-medicated dressing (roughly 18cmx18cm)
- 2x safety pins
- Individually wrapped moist cleansing wipes
- 1x pair of disposable gloves
- A leaflet giving general guidance on first aid (e.g. HSE leaflet "Basic advice on first aid at work")

Travelling first aid kit – extra items

Where identified by the findings of the first aid needs assessment:

- Tweezers
- Tube of antiseptic cream
- Waterproof plasters
- Insect repellent
- Foil blanket





The **British Standard BS 8599** provides guidance on the recommended size and number of workplace first aid kits you should have, as well as their contents, based on the nature of work being carried out and size of the workforce.

For low-level hazard workplaces:

- If there are less than 25 employees: provide one small kit.
- If there are 25 100 employees: provide one medium-sized kit.
- If there are more than 100 employees: provide one large kit per every 100 employees.

For higher-level hazard workplaces:

- If there are less than 5 employees: provide one small kit.
- If there are 5-25 employees: provide one medium-sized kit.
- If there are more than 25 employees: provide one large kit per every 25 employees.

The number of first aid kits you have in your workplace should also depend on the size of your workplace, even if you only have a small number of employees. If your workplace is very large – for example consisting of several floors or sites – it's best practice to provide a first aid kit for each of these areas.

These kits should be easy to identify and access so that first aiders don't need to waste precious time searching for them.

A grab and go bag could be issued to First Aiders.

Schools are required to have travel first aid kits for any excursions from the main site. It is advisable that for all other outings in Adult Services, National Programmes a travel first aid kit is an essential item for the journey.



First Aid Room

The following minimum facilities and equipment should be provided in first-aid rooms:



 Sink with running hot and cold water always available.



Suitable waste and hazardous waste facilities.



Drinking water and disposable drinking vessels.



 A couch (with a waterproof surface) and frequently cleaned pillow and blankets.



A suitable store for first-aid equipment and materials.



10. A chair.



4. First-aid equipment.



11. A bowl or basin.



5. Smooth topped working surfaces.



Clean protective garments for use by first-aiders.



Soap.



A first-aid treatment record book.



Paper towels.



FIRST AID



YOUR NEAREST FIRST AID BOX IS:

YOUR FIRST AIDERS ARE

*	NAME: Location: Contact:	*	NAME: Location: Contact:
*	NAME: Location: Contact:	*	NAME: Location: Contact:
*	NAME: Location: Contact:	*	NAME: Location: Contact:

THE NEAREST AUTOMATIC EMERGENCY DEFIBRILATOR IS LOCATED:

YOUR MENTAL HEALTH FIRST AIDER IS



^{*} Denotes AED trained Delete if not applicable



FIRST AID KIT CHECKLIST & ORDERING

	NITL	IV	\sim U		/ ПСТ
MU			СП	EUI	/LI31

SM - Small kit 1-10 persons, Med – Medium Kit 25-50 persons, LRG – Large Kit up to 100 persons, TV - Travel kit

Building Name Location/ ID.....

ITEM	MINIMUM LEVEL PER KIT SIZE	QUANTITY?				Package in Tact (INSERT TICK)			Product in Tact (INSERT TICK)				Reorder QTY				Date Ordered	
		SM	MED	LRG	TV	SM	MED	LRG	TV	SM	MED	LRG	TV	SM	MED	LRG	TV	
Conforming Bandage	Sm: 1 , Med: 2, Lrg: 2																	
Burn Dressing	Sm: 1, Med: 2, Lrg: 2																	
First Aid Leaflet	1																	
Foil Blanket	Sm: 1, Med: 2, Lrg: 3																	
Pair of Nitrile Gloves	Sm: 6, Med: 9, Lrg: 12																	
Microporous Tape	Sm: 1, Med: 2, Lrg: 3																	
Washproof Plasters	Sm: 40, Med: 60, Lrg: 100																	
Resusciade Face Shield	Sm: 1, Med: 1, Lrg: 2																	
Blunt-ended Scissors	1																	
Triangular Bandage	Sm: 2, Med: 3, Lrg: 4																	
Saline Wipes	Sm: 20, Med: 30, Lrg: 40																	
Eye Wound Dressing	Sm: 2, Med: 3, Lrg: 4																	
Finger Wound Dressing	Sm: 2, Med: 3, Lrg: 4																	
Large Wound Dressing	Sm: 1, Med: 2, Lrg: 4																	
Medium Wound Dressing	Sm: 2, Med: 4, Lrg: 6																	
Insert other item																		
Insert another item																		



Types of first aid personnel

Appointed person

- An appointed person is someone who's in charge of first aid arrangements. They take care of first aid equipment and facilities, and are responsible for calling the emergency services if needed. They do not need to be a trained first aider, but for added safety we would recommend that they are.

Emergency First Aider

According to the HSE, someone who holds an EFAW certification is "qualified to give emergency first aid to someone who is injured or becomes ill while at work." An EFAW course must be held for six hours, with the content covered across one day. This includes time for an assessment at the end, as well as the opportunity to practice the skills you are learning.

According to the UK's Regulatory Qualification Framework, an emergency first aid at work certification is regarded as a level 2 qualification.

An EFAW qualification is considered less comprehensive than a full FAW course as it will only cover the first aid training required for the most serious of medical emergencies

- Role and responsibilities of the first aider
- Bleeding (minor and severe)
- Casualty movement
- Choking (adult)
- CPR (adult) including the use of an AED
- Fainting
- Primary survey
- Seizures (adult)
- Shock
- Treating an unresponsive casualty

FAW trained first aider

First Aid at Work course lasts for three days, with six hours a day of training. Again, this includes an assessment at the end. More content covered on FAW training, but you will also have more opportunities to have first-hand practical experience in the skills you are learning.

FAW is also considered a level 3 qualification. This makes it an equivalent qualification to an A-Level. In addition to topics in EFAW also includes training on

- Burns
- Allergic reaction (including anaphylaxis)
- Asthma
- Bone, muscle and joint injuries
- Chest pains (including heart attack)
- Eye injuries, head injuries, spinal injuries
- Low blood sugar
- Poisons
- Sprains and strains
- Stroke



First aiders standard precautions for infection control

First aiders should take standard precautions to avoid becoming ill and exposing others to illness when handling blood or body substances.

Standard precautions are work practices that are applied to all patients and their blood and body substances, regardless of their infectious status, to ensure a basic level of infection prevention and control.

Standard precautions include

- hand hygiene,
- use of personal protective equipment,
- appropriate handling and disposal of sharps and waste,
- cleaning techniques and managing spills of blood and body substances.

Providing first aid safely

Before providing first aid to an injured or ill person, first aiders should assume they could be exposed to infection.

First aiders should wash their hands with soap and water or apply alcohol-based hand rub before and after administering first aid.

First aiders should also wear personal protective equipment to prevent contact with blood and body substances, including disposable gloves.

Eye protection, a mask and protective clothing may also be necessary if splashes of blood or body substances are likely to occur.

You should establish procedures to avoid workers becoming ill and exposing others to illness when handling blood or body substances.

Procedures could include:

- proper hand hygiene practices
- how to handle and dispose of sharps
- how to clean surfaces and reusable equipment
- how to manage spills and handle and clean soiled laundry
- how to handle and dispose of waste
- when to use personal protective equipment, for example, using resuscitation masks for cardiopulmonary resuscitation.

First aiders should be aware of what to do if they have accidental contact with blood or body substances, a sharps injury or contact with a person known to have a contagious illness.

Any part of the body that comes in contact with blood or body substances should be washed with soap and water immediately.

Prompt medical advice should be obtained.

All first aiders should be offered hepatitis B virus vaccination.



Contaminated items

All items that are soiled with blood or body substances should be placed in plastic bags and tied securely.

Waste disposal should comply clinical waste procedures.

Sharps, including scissors and tweezers, that have become contaminated with blood or body substances should be disposed of in a rigid-walled, puncture-resistant sharps container by the person that used them.

If a first aider sustains a sharps injury or thinks they are at risk of infection from blood or bodily fluid contamination, they should seek prompt medical advice.

Cleaning spills

Cleaning should commence as soon as possible after an incident involving blood or body substances has occurred.

First aiders should wear disposable gloves when cleaning spills and if splashes of blood or body substances may occur, additional protective equipment such as eye protection, plastic aprons and masks should be worn.

Surfaces that have been contaminated with blood or body substances should be wiped with paper towelling and cleaned with warm soapy water.

It is generally unnecessary to use sodium hypochlorite (chlorine bleach) for managing spills but it may be used in specific circumstances, for example if the surface is hard to clean

AED's - automated external defibrillators

There is no legal requirement for services to install a defibrillator but many locations may choose to do so based on their need's assessment or local community initiatives. It is considered best practice for Schools to have an AED on site, further guidance is available in the Defibrillators (AEDs) Guidance for schools

Defibrillator installation

It's best to install your defibrillator outside on a public building, somewhere that's visible and easy to get to.

Usually, you don't need planning permission to install one. However, if a building is listed, you should check that installing a defibrillator is allowed.

You'll need an electricity supply to keep your defibrillator above 0°Celsius. An electrician can install this for you.

Indoor defibrillators

If you keep your defibrillator indoors, you can choose between an alarmed cabinet and a simple bracket.

Brackets are cheaper – prices start at around £20. But sometimes they're not suitable. For example, in a public place or if there's a chance children will tamper with it, we recommend an alarmed cabinet instead.



Locked or unlocked cabinets?

We recommend an unlocked outdoor cabinet so that your defibrillator is easy to get in an emergency.

If you choose a locked cabinet, you can add the access code when you register your defibrillator on The Circuit, the nationwide defibrillator map.

Registering a defibrillator with The Circuit, the national defibrillator network, will ensure anyone can use it in an emergency.

It means the ambulance service can see the access code and give it to the person who makes the 999 call.

Helping people find your defibrillator

Wherever you put your defibrillator, you can get signs to help people find it.

Buying a sign to let people know where the defibrillator is can save vital time in an emergency.

Defibrillator registration

You should register all defibrillators with the national defibrillator network, The Circuit. The Circuit aims to map every defibrillator throughout the UK. When you register with The Circuit, ambulance call handlers can see vital information in an emergency, including:

- the precise location of a defibrillator
- the defibrillator's availability (24/7, office hours, weekdays only)
- whether it's in a locked cabinet and, if so, the access code.

You can join The Circuit even if your defibrillator is not publicly accessible. The Circuit also helps you look after a defibrillator. It can:

- remind you when to check your defibrillator
- tell you when defibrillator pads or batteries need replacing
- alert you when a defibrillator has been used in an emergency

Defibrillator maintenance

Every defibrillator comes with a guide booklet telling you how to look after it.

Why should I check my defibrillator?

Checking your defibrillator will ensure that you are aware of:

- when the electrode pads expire
- whether your defibrillator has been used
- where it has a fault, e.g., the battery is low.

If you register your defibrillator on The Circuit, the national defibrillator network, you will receive regular reminders to record your checks. The Circuit can send you notifications to replace your electrode pads. If you have not already, you can register your defibrillator on The Circuit now.



How often should a defibrillator be checked?

All defibrillators from the British Heart Foundation offer daily, weekly and monthly checks. If your device was purchased elsewhere then we would recommend referring to the user manual. Our team can also support if you're having trouble finding the information. It is important that your device is kept with the battery and a set of pads equipped and ready to use otherwise these tests will not run. If a device fails a self-test then it may make a noise, flash and/or display an error on the display. It is a good idea to familiarise yourself with the user manual to understand what your specific device will do. Not all devices conduct the same daily self-tests, if you're looking to purchase a device which conduct more comprehensive daily checks then our team will be happy to advise.

In addition to the self-tests, you will also need to physically check your defibrillator. We advise doing these physical checks weekly and have included the details below. When positioning a defibrillator, it is a good idea to place it somewhere visible such as the entrance to a building so that the device can be checked in passing.

How do I check my defibrillator?

Here are the basic steps you need to follow to check your defibrillator.

- 1. Your defibrillator should tell you if something is wrong. Defibrillators have a status display on the front of the device. This will usually be lit up green if the defibrillator is ok. Look out for beeping, flashing or an x on the display, these are usually signs that a device has failed its self-test. The icons are usually obvious on defibrillators sold in the UK but check your user manual if you're not sure.
- 2. Check the rest of your defibrillator for any obvious signs of damage or use.
- 3. Check to see if the items that are usually stored with it are still there like a first response kit.
- 4. Check the expiry date on the sticky pads. If they are out of date, replace them. You will want to ensure that a set of replacement pads are available when the current set nears expiry. You'll may have to open the defibrillator case to do this. When you do, you may hear the defibrillator give instructions on how to use it you can safely ignore these when you're checking the defibrillator. When you close the case, the defibrillator will switch off automatically. Avoid switching the defibrillator on needlessly as this can drain the battery.
- 5. You may wish to give the defibrillator or cabinet a wipe with a damp cloth to prevent the build-up of dirt.

When you've carried out these steps, you can return your defibrillator to its shelf or cabinet.