

A2E First Aid Training

Health & Safety Policy

A2E First Aid Training HEALTH & SAFETY ON COURSES

1. Introduction
 - 1.1 First Aid courses are a combination of indoor theoretical and practical sessions followed by scenarios, possibly outside, where students play the role of rescuers and casualties.
 - 1.2 This Centre understands the key role it has for Health & Safety on all training courses. All training staff will be inducted to the Health & Safety procedures listed in this document.
 - 1.3 [A2E First Aid Training](#) requires trainers and assessors to observe the Health & Safety policies and risk assessments at the course venue.
 - 1.4 Unfamiliar venues have potential hazards and must be risk-assessed by the Trainer on the day. Appendix 1, 2 and 3 are provided by this Centre for the guidance of trainers.

2. This Centre requires the trainer to assess the course venue to confirm it as a safe place of work, prior to course commencement:
 - 2.1 Venue tick list:
 - Fire escapes are clearly marked and adequately maintained and not obstructed.
 - Fire fighting equipment is clearly marked and placed and fire marshals nominated.
 - Access to training rooms is clear and safe.
 - Lighting, heating and ventilation is adequate
 - Computers/projectors (if provided) for training have been PAT tested and/ or leads and electrical equipment look in good condition.
 - Washing and toilet facilities are adequate and appropriate for gender mix.
 - First aid and accident reporting procedures are in place.
 - Any other relevant matters coming to trainer's attention

 - 2.3 Actions by trainer:
[A2E](#) will support the trainer when a decision is made to cancel a course if the venue is deemed unsafe. The trainer should inform [Cara Allison](#) as soon as is practicable in this case.

 - 2.4 Trainer conduct:
 - Trainer (or venue personnel) should brief clients on fire procedures, exits, muster points etc. In case of alarm Lead Trainer to bring register in order to check off all course members (and trainers/ assessors)
 - Consider wearing gloves when stripping/cleaning/removing manikin lungs and faces

- Consider students wearing gloves according to gender mix when doing secondary surveys
- Use kneeling mats to protect knees in all demonstrations on prone casualties, and set good example to students.
- Show professional judgement and courtesy and respect clients' wishes when selecting or asking for volunteers as casualties from the group.
- Ensure all practical exercises are carried out in a safe manner. No demonstrations or rehearsals of CPR on LIVE casualties. No real back slaps nor abdominal thrusts when demonstrating or practicing choking scenarios. Choking vest to be used on manikins only.
- Ensure pocket size or dry type hand cleanser is present in training. Good practice would be for trainer to use hand gel before each hands on demo. Hand gel available for use by clients between practicals.
- A choice of manikin cleaning materials should be available to candidates and/ or each candidate to have their own manikin face for use on a course. Face shields should also be made available to clients. Ratio of one manikin to two users. Manikin airways should be replaced regularly – ideally after every course, particularly if candidates are known to have colds, for example, or manikins have sustained heavy use.
- Trainer should brief clients clearly re Risks and good practice both indoors and out:- clothing; trips, slips, falls; hygiene; behaviour; manual handling; potential site hazards; personal safety and comfort
- Where clients have potentially contagious illnesses (colds, flu, cold sores, etc.) trainer to emphasise and try to enforce good practice in clients regarding hygiene e.g. use of hand gel, not coughing or sneezing on others, use of own manikin faces or face shields. Consider providing dust masks for candidates with colds.
- Please confirm safe arrival home after course by phone, text or email to allow us to comply with the essence of lone worker regulations.

3. Joining instructions

- JIs should make it clear to potential clients the practical nature of the first aid training and expectations of the candidates in terms of mobility and personal contact with others. If an outdoor course then warn candidates in advance to wear/bring suitable outdoor clothing, footwear and possibly sunscreen, etc
- Ask candidates if they have any infectious illness to consider attending on an alternative date if unwell due to the nature of first aid training and risk of spreading germs...and have systems in place / flexibility so that candidates can join on another date if appropriate. Or ask candidates in advance if they would be prepared to wear face masks during practical sessions.
- Advise candidates of the need to follow good practise on courses for the health and safety of both themselves and others.

4. Policy Renewal

4.1 This policy will be reviewed annually

4.2 A Health & safety log will be maintained to record all occurrences

Reviewed March 2014

Manikin cleaning log instigated Jan 2014

Risk assessments forms completed prior to each course if new venue. Stored in folder.

Accident/incident report forms available on all courses. Sent to trainers with course paperwork. To be signed after each course to confirm no incident or accident or details completed with witness signatures if there is an accident. Near misses to be reported to A2E manager and any appropriate third party e.g. venue manager

Next review due April 2015

Reviewed March 2015

Manikin cleaning logs maintained. Risk assessments recorded and stored in folder

Reviewed March 2016

Additions made re manikin hygiene and choking.

Logs / records maintained.

Next review due: March 2017

Reviewed April 2017 Additions made to Risk Assessment control measures in App 2 below.

Template to be shared with A2E trainers.

Logs and records maintained, as above.

No incidents reported nor near misses.

Trainers asked to ensure that razors in AED kits are taped and/or warnings given to candidates (email early 2017). Candidates also to be warned not to 'kiss' the manikins too hard to avoid bruising of lips (advice to be given to clients shared with RC Jan 2016)

Next review due March 2018

Reviewed Feb 2018

Additions made re Fire Alarm briefing and procedures (trainer) and availability of face shields for manikins.

All maintenance and usage logs maintained, as above.

All Incidents/ accidents/ near misses to be looked into and report forms securely stored.

Next review due March 2019

Reviewed March 2019. Additional statements added to do with hygiene and spread of germs following on from verbal feedback from a client in February 2019. Amended policy to be shared with Centre trainers.

Next review due March 2020

Reviewed Feb 2020. Minor amendments to wording re use of hand gel by trainer (best practice).

Appendix 1: Carrying out a Risk Assessment

Start with a risk assessment chart

Risk - 1 2 3
 Hazard - A B C

	A	B	C
1	Unacceptable	Urgent	Must receive attention
2	Urgent	Should receive attention	Low priority
3	Must receive attention	Low priority	Low priority

Unacceptable = Sort immediately
 Urgent = ASAP (this day)
 Must risk assess = Reduce hazard or risk within week
 Should risk assess = Reduce hazard or risk within month
 Low priority = Monitor situation

First identify and rate the hazard according to severity and consequence

A = death, major injury, major damage or loss of property/equipment
 B = over 3 days absence, damage to property/equipment
 C = minor injury/minor damage to property/equipment

Then rate the risk

1 = extremely likely
 2 = frequent/often/likely
 3 = slight chance

The steps to risk assessment having drawn the chart are

- Look for/identify hazards
- Decide who could be harmed – groups, numbers, vulnerable people
- Evaluate the risk – use chart, severity, frequency, exposure, current controls
- Record and evaluate – current controls, recommendations of competent person, and the additional controls/information/training.
- Monitor – always check that everything is being complied with, new equipment, past accident, young children, new staff etc.
- Review – Go through the process again and modify.

Where there are 5 or more employees, the employer must record

(a) Significant findings (b) Groups at risk. Identified by the risk assessment process.

Hierarchy of controls

Eliminate activity
 Substitute activity
 Control at source by separation/isolation
 Follow safe working procedures
 Training supervision and instruction
 Personal protection
 Welfare/first aid/emergency procedures
 Disciplinary action

Appendix 2: Example Risk Assessment for 'Outdoor First Aid' Scenarios

Hazards

- Darkness
- Slips, trips, falls
- Environment – weather, hot, cold, wet
- Moving and/or lifting simulated casualties
- Cuts, grazes, stings
- Pathogens – soil, rubbish, needles, dogs

People at risk

- Course participants
- Training staff
- The public

Evaluate risk

Look at identified hazards sequentially

Darkness

It can be a hazard in its own right; it may contribute to increased risk for all other hazards listed.

Frequency, typically on courses from November to February

Current controls, casualties pre-briefed, scenario area checked in daylight by Trainer.

Work within Centre grounds so cannot get lost. Re arrange course programme if appropriate to avoid working in darkness. Be especially aware of darkness in woodlands. Take torch(es).

Risk Rating C3

Slips, trips and falls

Severity, major injury possible, slipping on mud, wet grass, snow, tripping over terrain. Equipment put down and lost. Stepping in to holes.

Frequency, typically every outdoor scenario on every course.

Current controls. Scenario area checked beforehand for hazards. Scenarios not to occur on steep banks, dense undergrowth, public roads. Clear casualty briefing, including boundaries and aims/objectives of exercise. Access to First Aid kit. Check candidates comfort levels/abilities.

Every course, every time!

Risk Rating B2

Cold/wet/environment

Severity depends upon weather conditions. Extremes of temp/weather in high summer or mid winter. Hypothermia and heat exhaustion possible.

Frequency most courses.

Current controls. Ensure everyone has, waterproofs, hats, gloves, and sunscreen as appropriate. Have spare clothing available. Modify length of scenario. Warm area close by for clothes to dry. Main training area to be heated and ventilated.

Risk Rating B3

Moving/lifting casualties

Severity, if uncoordinated, unplanned lifting is attempted, casualties and students could get hurt. Problems increase on various types of terrain.

Frequency; not often, unless group require specific training in use of stretchers and improvised carriers.

Current controls. Demonstrate and practice good principles before any scenarios. Ensure no one has injury problems with, knees/back/neck. If they have, caution them on limiting their activities. Position casualties where there is reasonable access. Restrict movement to rolling, sliding or turning the casualty.

Risk Rating B2

Cuts, grazes, stings

Severity, mainly uncomfortable unless student is anaphylactic.

Frequency, one would think quite likely, however because of thick outdoor protective clothing and the experience of course members has proven to hardly ever occur.

Current controls, scenario area swept before exercise. Real First Aid kit close by in training room and carried by trainer outdoors. Students asked at beginning of course for pre-existing medical conditions.

Risk Rating B3

Pathogen infection

Severity, if pathogen infection occurs it could be life threatening.

Frequency, potentially every scenario, casualties lying on ground, students kneeling every scenario.

Current controls, area swept beforehand, minimise using public parks and outdoor areas where drug users congregate, rubbish is left or there is lots of dog mess. Use the grounds of outdoor venues where course is delivered. Trainer to carry cleaning wipes, water, anti bac.

Risk Rating A3

Implementation of Controls

Students to read 'please read' in front of ITC manual or on Power point.

Trainers to use pre-course check list covering hazards.

Students briefed prior to each outdoor scenarios.

Trainer to maintain professional vigilance at all times

Appendix 3: Glossary

First Aid courses are a combination of indoor theoretical and practical sessions followed by scenarios, perhaps outside, where students play the role of rescuers and casualties.

Accident

Unplanned, uncontrollable, unforeseen event/s that could result in injury, loss or damage to persons, property and equipment.

Risk Assessment

Reasonably practical steps (money, time, effort constraints) are taken to identify hazards and risks.

Hazard

Anything with potential to cause harm.

Risk

Likelihood of harm being realised or caused by hazard.

Competent Person

Someone with knowledge of work and environment, who can communicate and is aware of health and safety concerns

Control measures

Evaluations are made and measures are introduced e.g. changing the way something is done, providing a piece of equipment and training in that equipment.

Areas of concern

- Management of Health and Safety at Work Regulations.
- Workplace H, S & W – pests, toilets, temperature etc.
- Safe use of working equipment – portable appliance testing, training etc.
- Manual Handling – loads, people.
- Control of substances hazardous to health.
- First Aid Regulations
- Personal protective equipment
- Fire Regulations.
- Accidents could occur in any of the above areas.

POPMAR - One way of carrying out a Risk Assessment is to follow POPMAR

- Policy
- Organise
- Plan
- Monitor
- Audit
- Review

Produce a health and safety policy, organise risk assessments, plan training, monitor this in progress, audit what has been done and review to find any changes.