

First Aid Policy

(HSP 06)

V5.0

April 2025

Summary

Purpose of the Document

Outline the Trust arrangements for the management of First Aid. Furthermore, to provide information on the practical management of First Aid within the Trust.

Posts with specific responsibilities identified:

- Chief Executive Officer.
- Chief Operating Officer.
- Director of Personnel and Organisational Development.
- Senior Leadership Team.
- Director of Estates.
- First Aiders.
- First Aid Appointed Persons.
- Healthcare Professionals.
- Learning and Development Team.
- Health and Safety Committee.

Key points in the Document

The Health and Safety (First Aid) Regulations 1981 (as amended) place a statutory duty on the Royal Cornwall Hospitals NHS Trust (the Trust) to make first aid provision for those people who fall ill or are injured at work.

First Aid can save lives, by providing medical treatment promptly in the workplace and preventing minor injuries becoming major ones.

There is no formal statutory obligation for an employer to provide first aid for non-employees whilst on premises controlled by the Trust. However, it is argued that there is a moral, ethical obligation to assist a non-employee who sustains an injury or becomes ill whilst on the premises.

The purpose of this Policy and Guideline is to document the Statement of Commitment to Health and Safety by the Trust Board, to identify the organisational responsibilities and arrangements for First Aid.

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Data Protection Act 2018 (UK General Data Protection Regulation – GDPR) Legislation.

The Trust has a duty under the Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 to ensure that there is a valid legal basis to process personal and sensitive data. The legal basis for processing must be identified and documented before the processing begins. In many cases we may need consent; this must be explicit, informed, and documented. We cannot rely on opt out, it must be opt in.

Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 is applicable to all staff; this includes those working as contractors and providers of services.

For more information about your obligations under the Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 please see the Information Use Framework Policy or contact the Information Governance Team.

Royal Cornwall Hospital Trust rch-tr.infogov@nhs.net

1. Introduction

- 1.1. The Health and Safety (First Aid) Regulations 1981 (as amended) place a statutory duty on the Royal Cornwall Hospitals NHS Trust (the Trust) to make first aid provision for those people who fall ill or are injured at work.
- 1.2. First Aid can save lives, by providing medical treatment promptly in the workplace and preventing minor injuries becoming major ones.
- 1.3. There is no formal statutory obligation for an employer to provide first aid for non-employees whilst on premises controlled by the Trust. However, it is argued that there is a moral, ethical obligation to assist a non-employee who sustains an injury or becomes ill whilst on the premises.
- 1.4. This version supersedes any previous versions of this document.

2. Purpose of this Policy/Procedure

The purpose of this Policy and Guideline is to document the Statement of Commitment to Health and Safety by the Trust Board, to identify the organisational responsibilities and arrangements for First Aid.

3. Scope

This Policy and Guideline applies to all staff working for or on behalf of the Trust including Students, Locums, Agency supplied staff regardless of contracted hours or length of contract.

4. Definitions/Glossary

The Trust	The Royal Cornwall Hospitals NHS Trust.
Trust sites	All areas, sites, buildings or premises owned, occupied or controlled by the Trust.
First Aid	Treatment for the purpose of preserving life and minimising the consequences of injury and illness until help from a medical practitioner or nurse is obtained and/or treatment of minor injuries which would otherwise receive no treatment or which do not need treatment by a medical practitioner or nurse.
Appointed Person	An appointed person is a person who takes charge of the first aid arrangements in a work area including first aid information, first aid equipment and calling the emergency services. An appointed person does not need to be a first aider.
First Aider	A person trained and in the possession of current first aid qualifications delivered by a competent provider. The level of First Aid training they have completed will define the limitations of first aid care the First Aider is qualified to give.

First Aid Box	A first aid box should be green and marked with a white cross. This should be accessible at all times and contain contents that are in-date and appropriate to the risks in the work area (see summary on page two). For clinical areas, an appropriately stocked top-up store can be deemed as the first aid box.
Personal First Aid kits	For those persons employed who are required to travel as a significant part of their job, a personal first aid kit will be provided and kept in the vehicle. These are first aid kits which can be used to treat themselves in the event of an injury or illness.
First Aid Equipment	First aid equipment is any item (e.g. bandage, micropore tape, sling) that may be used in the event of an injury requiring first aid. A list of suggested first aid equipment can be found in Appendix 3 and a First Aid sign as Appendix 4 . A local assessment should determine the need for extra items of first aid equipment for the first aid box/ store. All first aid equipment must be kept in the first aid box and be replaced when it expires or is used.
Assessment	The assessment of risk, specific to an area or environment to determine the level of first aid cover and equipment required for the location based on, but not restricted to, the activities, personnel, environment and equipment in use.
Regulations	The Health and Safety (First Aid) Regulations 1981 as amended.
ACoP	The Approved Code of Practice to the Regulations as issued by the Health and Safety Executive, Ref L74.
Datix	The Trusts' electronic incident and risk assessment tool accessed via the Trust intranet site.
Staff	All persons who are employed by the Trust whether on permanent or temporary contracts (Written or implied), paid or unpaid, and shall include persons employed through recruitment and employment agency providers to assist the Trust in delivery of services, but excluding contractors and third parties undertaking works for or on behalf of the Trust.
Contractors	Any person employed by or working for a third party organisation working for or acting on behalf of the Trust.

Unless otherwise stated any reference within this document, including any appendices, to the masculine shall include the feminine and the singular the plural and vice-versa.

5. Ownership and Responsibilities

5.1. Role of The Chief Executive

- Trust's Chief Executive is accountable for the overall compliance with statutory duties and obligations in relation to all health and safety legislation.

- Responsibility for day-to-day and functional implementation of these duties is delegated through the organisational management structure.

5.2. Role of the Chief Operating Officer

- The Chief Executive is the named executive for Health and Safety.
- Within this function the Chief Operating Officer will ensure:
 - Sufficient resources are provided for the adequate and efficient delivery of requirements of this document.
 - Liaise with the Trust Board in matters relating to health and safety; in particular first aid.
 - Ensure that the Trust has in place a clearly defined policy and relevant supporting procedures.
 - Undertake appropriate training to allow the fulfilment of the role.

5.3. Role of Heads of Nursing or Care Group equivalent

The Heads of Nursing or Care Group equivalent are to:

- Be aware of the Trust's Health and Safety Strategy and Policies.
- Support the department manager in promoting a Health and Safety culture within your working environment, ensuring participation and involvement when requested.
- Identify potential risks and Health and Safety issues that may impact on the Trusts ability to achieve its objectives, and report concerns through your line management structure.
- Take due care at work, report any accidents, incidents or untoward occurrences and comply with the Trust's Health and Safety Policies in order that the Trust can fulfil its Health and Safety responsibilities.

5.4. Role of Senior Leadership Team

For the purpose of this document 'senior leaders' will include the following:

- Directors.
- Associate Directors / Care Group General Managers.
- Head of Service.
- Any role with direct reporting to a member or the Trust Board, an Executive Director or Director.
- Senior Leaders will ensure:
 - A suitable and sufficient assessment of the first aid requirements are

undertaken for all areas of their responsibility.

- Suitable personnel are identified and trained, where appropriate to meet the requirements of this document.
- That sufficient resources are provided for the delivery of first aid when required.
- That suitable and sufficient equipment is available within the locality to facilitate the appropriate level of first aid administration when required.
- Care Group, Departmental and local arrangements for first aid, including the findings of the assessment are communicated to all personnel within the area.

5.5. Role of the Managers

Line managers are responsible for ensuring:

- The risk assessment is undertaken for the area of responsibility.
- Local staff with designated roles are released for training, including refresher training, as and when required.
- First aid provision, as identified in the First Aid Assessment, is available during all operational hours.
- When additional activities are undertaken within the area and within the control of the manager, additional risks with the potential to impact upon the identified first aid arrangements are identified and the first aid arrangements amended accordingly.
- Nominated persons to act as the first aid appointed person, to maintain the first aid kit to take charge in the event of a first aid emergency. This must be documented and displayed in staff areas.
- Any contractors brought in by line managers to work on site must ensure that their risk assessments and method statements (RAMS) must include information on first aid arrangements. These arrangements cannot default to attending the Emergency Department for low level, first aid requirements. The Emergency Department must be reserved for true ED presentable conditions and is not to be treated as a first aid station.

5.6. Role of Director of Estates and Facilities

The Director of Estates and Facilities will ensure that contractors taking possession of a site, or part of have identified and implemented suitable and sufficient arrangements for first aid without increasing demand on existing Trust resources and services.

5.7. Role of First Aiders

All persons undertaking the role of First Aider must:

- Attend appropriate initial First Aid training (First Aid at Work (FAW) or Emergency First Aid at Work (EFAW) Training delivered by a competent provider Ref L74).
- In accordance with the HSE recommendations update/complete first aid refresher training annually.
- Participate in additional training for first aid practices to address risks arising from specific hazards within the area of responsibility.
- Maintain information about First Aid arrangements in their work area.
- Ensure First Aid equipment is available in a designated and marked First Aid Container in their work area.
- Provide First Aid to colleagues in the workplace following First Aid guidelines and good practice learnt at training.
- Retrain or requalify before the expiry date on their current first aid certificate. If this is not completed, they are no longer considered competent to act as a first aider in the workplace.

5.8. Role of First Aid Appointed Persons

All appointed persons must:

- Maintain information about First Aid arrangements in their work area.
- Ensure First Aid equipment is available in a First Aid Container in their work area.
- In accordance with the HSE recommendations update/complete refresher first aid training annually.
- Direct individuals with First Aid needs to the most appropriate local provision Urgent Care Centre, Minor Injuries Unit, Health Drop-in Centre or Emergency Ambulance depending on the severity of injury or condition. The Emergency Department must not be used as the default option for first aid and must be reserved for genuine emergencies.
- In an emergency make the individual comfortable and assist them to access emergency services either through advising on local provisions or calling the emergency services.

5.9. Role of Healthcare Professions

Provided they can demonstrate current knowledge and skills in first aid, the training and experience of the following qualify them to administer first aid in the workplace without the need to hold a FAW or EFAW or equivalent qualification.

- Doctors registered and licensed with the General Medical Council.
- Nurses, Midwives and Nursing Associates registered with the Nursing and Midwifery Council.
- Paramedics registered with the Health and Care Professions Council.

5.10. Role of Learning and Development Team

The Learning and Development Team will facilitate all First Aid related training in accordance with the training matrix and will:

- Maintain records of first aid training within the Trust system.
- Participate in “Train the Trainer” training as required.
- Facilitate training for staff nominated to undertake First Aid Training, Appointed Person Training and annual refresher training.
- Provide regular reports on first aid training compliance to the Health and Safety Committee in accordance with the Terms of Reference.

5.11. Role of Staff

All staff are responsible for:

- Ensuring that they are familiar with this document, local first aid procedures and arrangements.
- Participating in first aid assessments where applicable.
- Reporting deficiencies in first aid arrangements to Line Managers.
- Reporting all incidents of injury or harm requiring first aid and any incidents of failure of first aid arrangements in accordance with Trust incident reporting procedures.

5.12. Role of Health and Safety Committee

- The Health and Safety Committee will receive periodic reports associated with first aid training attendance as part of training reports to the committee.
- Care Groups will include significant events, concerns and comments regarding first aid arrangements within the allocated reporting structure.
- The committee shall make recommendations and report significant concerns and issues to Trust Quality Assurance Committee and the Trust Board.

6. Standards and Practice

6.1. First Aid Assessment

- 6.1.1 All areas of the Trust will be subject to a First Aid Assessment (See [Appendix 5](#)), undertaken by a trained member of the local staff at intervals not exceeding 12 months.
- 6.1.2 The assessment process will identify actions that fall into two primary categories:
 - The need for first aiders and or appointed persons (personnel required to undertake the role of a first aider or appointed person).
 - First aid equipment and facilities (equipment and facilities required to provide suitable and sufficient first aid when required).
- 6.1.3 The assessment process must consider risks specific to the area concerned, the number and type of person(s) present, operational times, requirements for specific equipment and additional specialist resources along with potential response times for emergency services.
- 6.1.4 Actions arising from the risk assessment process will be monitored at Care Group level and reported to the Health and Safety Committee.
- 6.1.5 Staff undertaking the assessment will be provided with additional support from the Trust Health and Safety Advisors.
- 6.1.6 Risk assessments should be held within the Datix system and used to compile the Risk Registers. Datix risk entries will be supplemented with additional information and evidence detailing the controls and actions taken. Complex entries will also include breakdown of assessments using the Trust Risk Assessment Templates. First Aid Risk Assessment ([Appendix 5](#)).

6.2. Communal and non-specific areas of Trust Sites

- 6.2.1. In communal areas of the Trust sites first aid will be provided by the closest trained first aider or appointed person. Following initial first aid treatment the injured person should be referred / taken for further treatment/ assessment at the Healthcare premises nearest to your location.
- 6.2.2. Where a person is injured or unwell in an external area of the site, i.e. car park, roadway, etc. emergency ambulance assistance may be required to transport the patient to the Emergency Department.
- 6.2.3. In the event of requiring emergency first aid outside of a staffed area contact the Switchboard on the Emergency No. Ext: 4444, from any internal telephone, who will arrange further assistance and the ambulance service if necessary.

- 6.2.4. All members of staff attending these incidents must ensure that relevant information is recorded and the incident reported on Datix.
- 6.2.5. At RCH, the Cardiac Arrest Team will attend all 2222 calls to all areas in and around the Trust, the road surrounding the hospital is considered the boundary and outside these areas e.g. Diabetic Centre the staff should dial 999. ([Appendix 6](#) and [7](#) denotes boundary area).
- 6.2.6. The responsibility for moving and handling a casualty from the floor and the transferring to clinical services for treatment as a patient lays with the Non-clinical Response Team. First aiders are not trained in lifting techniques through their first aid training and should not complete this activity. The [Cardiopulmonary Resuscitation Policy](#) details the actions taken by the response team to transfer casualties to clinical departments.
- 6.2.7. For any medical emergency outside of clinical areas where the cardiac arrest team would normally be expected to attend, dial 4444 and request the non-clinical area response team who will come and assist (not for cardiac arrests).

6.3. Mobile, on-call staff and Lone Workers

- 6.3.1 It is important that all employees, including Lone Workers, those travelling and/or working remotely are clear on arrangements for the provision or access to First Aid should they need it.
- 6.3.2 Managers will need to consider:
- Access to personal first aid kits.
 - Access to mobile phones and/or how an individual can raise the alarm if they need assistance.
 - Health care provisions that can be accessed within the communities in which staff are working (e.g. Minor Injuries Units, walk in centres, Emergency Departments).
 - Departments must show they have considered the needs of Lone Workers within their Department First Aid and Lone Working Risk Assessments and that the arrangements for accessing First Aid are clear.

6.4. First Aid Training

- 6.4.1 First Aid training will be provided to nominated staff and delivered in accordance with the requirements of the regulations.
- 6.4.2 New and temporary staff will be provided local Health and Safety information, including first aid arrangements at commencement of the first shift or period in the area.
- 6.4.3 Location specific training will be provided for staff undertaking first aid roles in areas with specific first aid requirements – for example handling, use and storage of hazardous substances.

6.5. Contractors

- 6.5.1 Contractors will be provided with a copy of the Contractors Guide/Site Rules and are required to confirm receipt and understanding of the information. Major contractors employing sub-contractors will ensure that each person is inducted to both the Trust and contractors sites.
- 6.5.2 In accordance with the Trust's policy for the management of contractors and the Contractors Guide, all contractors are required to ensure that they maintain their own arrangements for first aid without imposing additional demand on Trust resources etc.
- 6.5.3 The Trust will not provide first aid equipment or resources for contractors except in cases of emergency.

6.6. First Aid Boxes/ Kits

- 6.6.1 First aid kits will be contained in approved packages that are marked clearly with a white cross on a green background, in accordance with the statutory requirements.
- 6.6.2 There is no standard list of items that must be put into a First Aid box. It will always depend on the result of your Risk Assessment. Where there are specific risks in the area, particular first aid items should be included in the first aid kit. Contents of first aid kits should be sufficient to deal with the likely first aid emergencies.
- 6.6.3 Guidance for the contents of a first aid kit, based on the recommendations of the Health and Safety Executive, can be found at [Appendix 3](#) of this document.

6.7. First Aid Signage

- 6.7.1. Signage to identify the location of the first aid kit will be displayed clearly above the first aid kit.
- 6.7.2. Further signage will be displayed in staff areas (i.e. kitchens, staff rooms, and noticeboards) to provide the location of the first aid kits and the names and contact numbers of local first aiders.
- 6.7.3. Example of the above signage are provided in [Appendix 4](#) of this document.

6.8. Training

Training courses and content must be approved by the Health and Safety Department. It is important that there is a mechanism (ESR) to ensure relevant staff are educated and training in respect of the requirements of any documents, policies and associated procedures that affect them in their work.

6.9. Education and Training Plan

Education and training plan	Resources	Responsibility	Date / Frequency
Local Induction Training - all staff to be made aware of local First Aid Arrangements:	Department.	Managers.	Following recruitment.
First aid at Work Training (Full three day course).	Competent Provider (H and S). Course and Content approved by Health and Safety Department.	Managers.	Every three years.
Emergency First Aid at Work Training (formerly appointment person training).	Competent Provider (L and D). Course and Content approved by Health and Safety Department.	Managers.	Every three years.

7. Dissemination and Implementation

- 7.1. This document will be stored in the Trusts online Document Library with free access to all staff and the general public.
- 7.2. Awareness of this document will also be raised through existing mandatory training sessions.

8. Monitoring compliance and effectiveness

The Named Executive for Health and Safety is responsible for the implementation of this policy.

The Trust Health and Safety Committee will monitor the delivery of the implementation plan that supports the introduction of this First Aid Policy.

Copies of this policy will be made available via the Trusts intranet. Copies of the policy will be provided to Staff on request.

Information Category	Detail of process and methodology for monitoring compliance
Element to be monitored	Compliance with the undertaking of First Aid Assessment Form.
Lead	Health and Safety Committee.
Tool	Care Group Reports to the Health and Safety Committee.
Frequency	Quarterly – Health and Safety Advisors report and Care Group reports to the Health and Safety Committee.
Reporting arrangements	Reports received by the Health and Safety Committee as detailed above and reported in accordance with the committee Terms of Reference.
Acting on recommendations and Lead(s)	Health and Safety Committee will request action from Care Group Representatives and escalate to Governance Committee as required.
Change in practice and lessons to be shared	The document will be distributed via the Health and Safety Committee with request that it is raised at Care Group board, governance and/ or local meetings. This document will be stored on the document library for free access.

9. Updating and Review

- 9.1. This document will be subject to a full review not later than the review date shown in the Meta Data below.
- 9.2. This policy has been agreed by Trust management and the staff and management side of the Health and Safety Committee.
- 9.3. This policy will be reviewed every 3 years or earlier in view of developments which may include legislative changes, national policy instruction (NHS or Department of Health) or Trust Board decision. This will be carried out by the Health and Safety Committee assisted by the Trust Health and Safety Advisors.
- 9.4. Revisions can be made ahead of the review date when the procedural document required updating. Where the revisions are significant and the overall policy is changed, the document will be subject to consultation with the Health and Safety Committee.
- 9.5. Where the revisions are minor, e.g. amended job titles or changes in the organisational structure, approval can be sought from the Chair or Vice Chair of the Health and Safety Committee and can be re-published accordingly without having gone through the full consultation and ratification process.

- 9.6. Any revision activity is to be recorded in the Version Control Table as part of the document control process.

10. Equality and Diversity

- 10.1. This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement which can be found in the [Equality Diversity And Inclusion Policy](#) or the [Equality and Diversity website](#).

- 10.2. Equality Impact Assessment

The Initial Equality Impact Assessment Screening Form is at Appendix 2.

Appendix 1. Governance Information

Information Category	Detailed Information
Document Title:	First Aid Policy (HSP 06) V5.0.
This document replaces (exact title of previous version):	First Aid Policy (HSP 06) V4.0.
Date Issued/Approved:	April 2025.
Date Valid From:	April 2025.
Date Valid To:	April 2028.
Author/Owner:	Gavin Griffiths, Head of Health, Safety, Moving and Handling.
Contact details:	01872 252976.
Brief summary of contents:	Outline the Trust arrangements for the management of First Aid. Furthermore, to provide information on the practical management of First Aid within the Trust.
Suggested Keywords:	First Aid, accident, injury, emergency, health and safety, First Aid Kit.
Target Audience:	RCHT: Yes CFT: No CIOB ICB: No
Executive Director responsible for Policy:	Chief Operating Officer.
Approval route for consultation and ratification:	Health and Safety Committee.
Manager confirming approval processes:	Gavin Griffiths, Head of Health, Safety, Moving and Handling.
Name of Governance Lead confirming consultation and ratification:	Gavin Griffiths, Head of Health, Safety, Moving and Handling.

Information Category	Detailed Information
Links to key external standards:	Health and Safety at Work etc. Act 1974. The Health and Safety (First-Aid) Regulations 1981. L74 Approved Code of Practice. CQC Essential Standards Outcome 10 - Safety and Suitability of Premises.
Related Documents:	Including but not restricted to: Health and Safety General Policy. Risk Assessment and Management Strategy Policy. Patient Safety Incident Investigation Report. Lone Working Policy. Cardiopulmonary Resuscitation Policy.
Training Need Identified:	Yes.
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet and Intranet
Document Library Folder/Sub Folder:	Chief Operating Officer / Health and Safety.

Version Control Table

Date	Version Number	Summary of Changes	Changes Made by
Nov 2013	V1.0	New Document.	J. Robin Gatenby Health and Safety Manager.
Oct 2015	V2.0	Minor changes for clarity and conformity.	Paul Freeman, H and S Auditor.
Sept 2018	V2.1	Minor changes for clarity and conformity (logos, job titles etc.).	Natasha Quick H and S Advisor.
Dec 2018	V3.0	Minor changes for corporate conformity and equality.	Natasha Quick Senior H and S Advisor.
Aug 2019	V3.1	Three yearly review.	Natasha Quick Senior H and S Advisor.

Date	Version Number	Summary of Changes	Changes Made by
Feb 2021	V4.0	Full three-year review and updates to corporate conformity.	Natasha Quick, Service Improvement and Business Lead (Health).
Sep 2024	V5.0	Full three-year review and updates to policy to ensure corporate conformity.	Gavin Griffiths, Head of Health, Safety, Moving and Handling.

All or part of this document can be released under the Freedom of Information Act 2000.

All Policies, Strategies and Operating Procedures, including Business Plans, are to be kept for the lifetime of the organisation plus 6 years.

This document is only valid on the day of printing.

Controlled Document.

This document has been created following the Royal Cornwall Hospitals NHS Trust [The Policy on Policies \(Development and Management of Knowledge Procedural and Web Documents Policy\)](#). It should not be altered in any way without the express permission of the author or their Line Manager.

Appendix 2. Equality Impact Assessment

Section 1: Equality Impact Assessment (EIA) Form

The EIA process allows the Trust to identify where a policy or service may have a negative impact on an individual or particular group of people.

For guidance please refer to the Equality Impact Assessment Policy (available from the document library) or contact the Equality, Diversity, and Inclusion Team
richt.inclusion@nhs.net

Information Category	Detailed Information
Name of the strategy/policy/proposal/service function to be assessed:	First Aid Policy (HSP 06) V5.0.
Department and Service Area:	Chief Operating Officer/ Health, Safety, Moving and Handling.
Is this a new or existing document?	Existing.
Name of individual completing EIA (Should be completed by an individual with a good understanding of the Service/Policy):	Gavin Griffiths, Head of Health, Safety, Moving and Handling.
Contact details:	01872 252976.

Information Category	Detailed Information
1. Policy Aim - Who is the Policy aimed at? (The Policy is the Strategy, Policy, Proposal or Service Change to be assessed)	To outline the Trust arrangements for the provision of emergency first aid.
2. Policy Objectives	To ensure suitable first aid provision is maintained across the Trust estate.
3. Policy Intended Outcomes	To provide a suitable level of first aid provision on all sites.
4. How will you measure each outcome?	Reduction in severity in injuries, assessment of risk and training of nominated staff.
5. Who is intended to benefit from the policy?	All Trust stakeholders.

Information Category	Detailed Information
6a. Who did you consult with? (Please select Yes or No for each category)	- Workforce: Yes - Patients/visitors: No - Local groups/system partners: No - External organisations: No - Other: No
6b. Please list the individuals/groups who have been consulted about this policy.	Please record specific names of individuals/ groups: Health and Safety Committee.
6c. What was the outcome of the consultation?	Approved 19 March 2025 and 08 April 2025.
6d. Have you used any of the following to assist your assessment?	National or local statistics, audits, activity reports, process maps, complaints, staff, or patient surveys: None.

7. The Impact

Following consultation with key groups, has a negative impact been identified for any protected characteristic? Please note that a rationale is required for each one.

Where a negative impact is identified without rationale, the key groups will need to be consulted again.

Protected Characteristic	(Yes or No)	Rationale
Age	No	This Policy does not impact on Age.
Sex (male or female)	No	This Policy does not impact on Sex.
Gender reassignment (Transgender, non-binary, gender fluid etc.)	No	This Policy does not impact on Gender Reassignment.
Race	No	This Policy does not impact on Race.
Disability (e.g. physical or cognitive impairment, mental health, long term conditions etc.)	No	This Policy does not impact on Disability.
Religion or belief	No	This Policy does not impact on Religion or Belief.
Marriage and civil partnership	No	This Policy does not impact on Marriage and Civil Partnership.

Protected Characteristic	(Yes or No)	Rationale
Pregnancy and maternity	No	This Policy does not impact on Pregnancy and Maternity.
Sexual orientation (e.g. gay, straight, bisexual, lesbian etc.)	No	This Policy does not impact on Sexual Orientation.

A robust rationale must be in place for all protected characteristics. If a negative impact has been identified, please complete section 2. If no negative impact has been identified and if this is not a major service change, you can end the assessment here.

I am confident that section 2 of this EIA does not need completing as there are no highlighted risks of negative impact occurring because of this policy.

Name of person confirming result of initial impact assessment: Gavin Griffiths, Head of Health, Safety, Moving and Handling.

If a negative impact has been identified above OR this is a major service change, you will need to complete section 2 of the EIA form available here:

[Section 2. Full Equality Analysis](#)

Appendix 3. Guide to the Contents of a First Aid Kit

- Managers may wish to refer to British Standard BS 8599 which provides further information on the contents of workplace first-aid kits.
- 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.
- As a guide, and where there is no special risk in the workplace, a minimum stock of first aid items would be:-
 - A leaflet giving general guidance on First Aid e.g. HSE leaflet 'Basic Advice on First Aid at Work' available on the HSE [www](http://www.hse.gov.uk) site.
 - 20 individually wrapped sterile adhesive dressings (assorted sizes).
 - Two- sterile eye pads.
 - Four - individually wrapped triangular bandages.
 - Six - safety pins.
 - Six - medium sized (12cm x 12cm approx.) individually wrapped sterile un-medicated wound dressings.
 - Two- large (18cm x 18cm approx.) individually wrapped sterile un-medicated wound dressings.
 - A pair of disposable gloves (latex free).

Tablets, Medication and Plasters must not be provided in the First Aid Box.

Where a specific hazard requiring specialist equipment is present this should be provided with the first aid kit.

Appendix 4. First Aid Signage



Your First Aid Kit is located

First Aiders for this area are:

_____ Tel: _____

_____ Tel: _____

Appendix 5. First Aid Assessment Form

HEALTH AND SAFETY DEPARTMENT

First Aid Assessment Form

Workplace	Click here to enter text.	Assessor	Click here to enter text.	Date	Click here to enter a date.
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Step 1 – Assessment of First Aid Needs							
Taking account of the guidelines in the Trust First Aid Policy what is the degree of hazard associated with your work activities?				Click here to enter text.			
How many staff are covered by this assessment so as to determine the level of provision required?				Click here to enter text.			
Are there any particular hazards/risk associated with your activities or work environment?				Click here to enter text.			
Do employees work alone, have a means of summoning help and a welfare check system in place? (Lone Working Policy)				Click here to enter text.			
Are there staff who might be at a greater risk? (young workers, trainees, people with disabilities, etc.)				Click here to enter text.			
Do staff who are mobile, travelling within the community carry a mobile first aid kit and means of emergency communication?				Click here to enter text.			
Step 2 – First Aid Personnel Required				Number Required			
Appointed Person				☐	Click here to enter text.		
First Aider				☐	Click here to enter text.		
First Aider with specific hazard training				☐	Click here to enter text.		
Specify hazard(s) Click here to enter text.							
Needs can be provided by healthcare professionals WHO HAVE RELEVANT TRAINING							
Ensure cover is provided for all operational times							
Step 3 – Providing First Aid Personnel to Meet the Identified Need							
Are sufficient personnel trained to meet your identified needs?				Yes ☐		No ☐	
If "No" what is the shortfall level and how is this shortfall being addressed?				Click here to enter text.			
Step 4 – Provision of Facilities and Equipment							
First Aid Kit	☐	Number in Place	Click here to enter text.	Travelling First Aid Kit	☐	Number in Place	Click here to enter text.
Not Required				Number Required	Click here to enter text.		
Specialist requirements:				Click here to enter text.			
Is the first aid kit location clearly signed?				Click here to enter text.			
Are the names of first aiders displayed?				Click here to enter text.			
Where provided eye wash facilities are provided, signed and checked/maintained regularly?				Click here to enter text.			
Are first aid kits stocked and maintained?				Click here to enter text.			
Named person responsible for checking the box(es)?				Click here to enter text.			

Author: Head of Health and Safety

Reviewer: Health Advisor

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Review Date: Nov 2027

File Name: First Aid Risk Assessment

HEALTH AND SAFETY DEPARTMENT

First Aid Assessment Form

Step 5 – First Aid Training Certificates				
Name of First Aider / Appointed Person	Date of Training	Expiry Date	Re-certification Date	Annual Refresher Date Attended
Click here to enter text.	Click here to enter a date.	Click here to enter a date.	Click here to enter a date.	Click here to enter a date.
Click here to enter text.	Click here to enter a date.	Click here to enter a date.	Click here to enter a date.	Click here to enter a date.
Click here to enter text.	Click here to enter a date.	Click here to enter a date.	Click here to enter a date.	Click here to enter a date.
Click here to enter text.	Click here to enter a date.	Click here to enter a date.	Click here to enter a date.	Click here to enter a date.

SAMPLE
 Available on PFES Drive

First Aid Assessment Form

Checklist for assessment of first-aid needs

Hazards (use the findings of your risk assessment and take account of any parts of your workplace that have different work activities/hazards which may require different levels of first-aid provision)		
Consider:	Impact on First Aid Provision	Notes:
Does your workplace have low-level hazards such as those that might be found in offices and shops?	The minimum provision is: - an appointed person to take charge of first-aid arrangements; - a suitably stocked first-aid box	Click here to enter text.
Does your workplace have higher level hazards such as chemicals or dangerous machinery? Do your work activities involve special hazards such as chemicals or confined spaces?	You should consider: - providing first-aiders; - additional training for first-aiders to deal with injuries resulting from special hazards; - additional first-aid equipment; - precise siting of first-aid equipment; - providing a first-aid room; - informing the emergency services.	Click here to enter text.
Employees		
How many people are employed the area/site?	Where there are small numbers of employees, the minimum provision is: - an appointed person to take charge of first-aid arrangements; - a suitably stocked first-aid box. Where there are large numbers of employees you should consider providing: - first-aiders; - additional first-aid equipment; - a first-aid room.	Click here to enter text.
Are there inexperienced workers on site, or employees with disabilities or particular health problems?	You should consider: - additional training for first-aiders; - additional first-aid equipment; - local siting of first-aid equipment. Your first-aid provision should cater for any work experience or special needs.	Click here to enter text.
Accidents and ill health records		
What is your record of accidents and ill health? What injuries and illness have occurred and where have they happen?	Ensure your first-aid provision will cater for the type of injuries and illness that might occur in your workplace. Monitor accidents and ill health and review your first-aid provision as appropriate.	Click here to enter text.
Working arrangements		
Do you have staff who travel a lot, work remotely or work alone?	You should consider: - issuing personal first-aid kits; - issuing personal communicators/mobile phones to employees.	Click here to enter text.
Do any of your employees work shifts or work out of hours?	You should ensure there is adequate first-aid provision at all times people are at work.	Click here to enter text.
Are the premises spread out, e.g. are there several buildings on the site or multi-floor buildings?	You should consider provision in each building or on each floor.	Click here to enter text.
Do any of your employees work at sites occupied by other employers? (i.e. schools, other healthcare providers premises)	You should make arrangements with other site occupiers to ensure adequate provision of first aid. A written agreement between employers is strongly recommended.	Click here to enter text.
Do you have sufficient provision to cover absences of first-aiders or appointed persons?	You should consider: - what cover is needed for annual leave and other planned absences; - what cover is needed for unplanned and exceptional absences.	Click here to enter text.

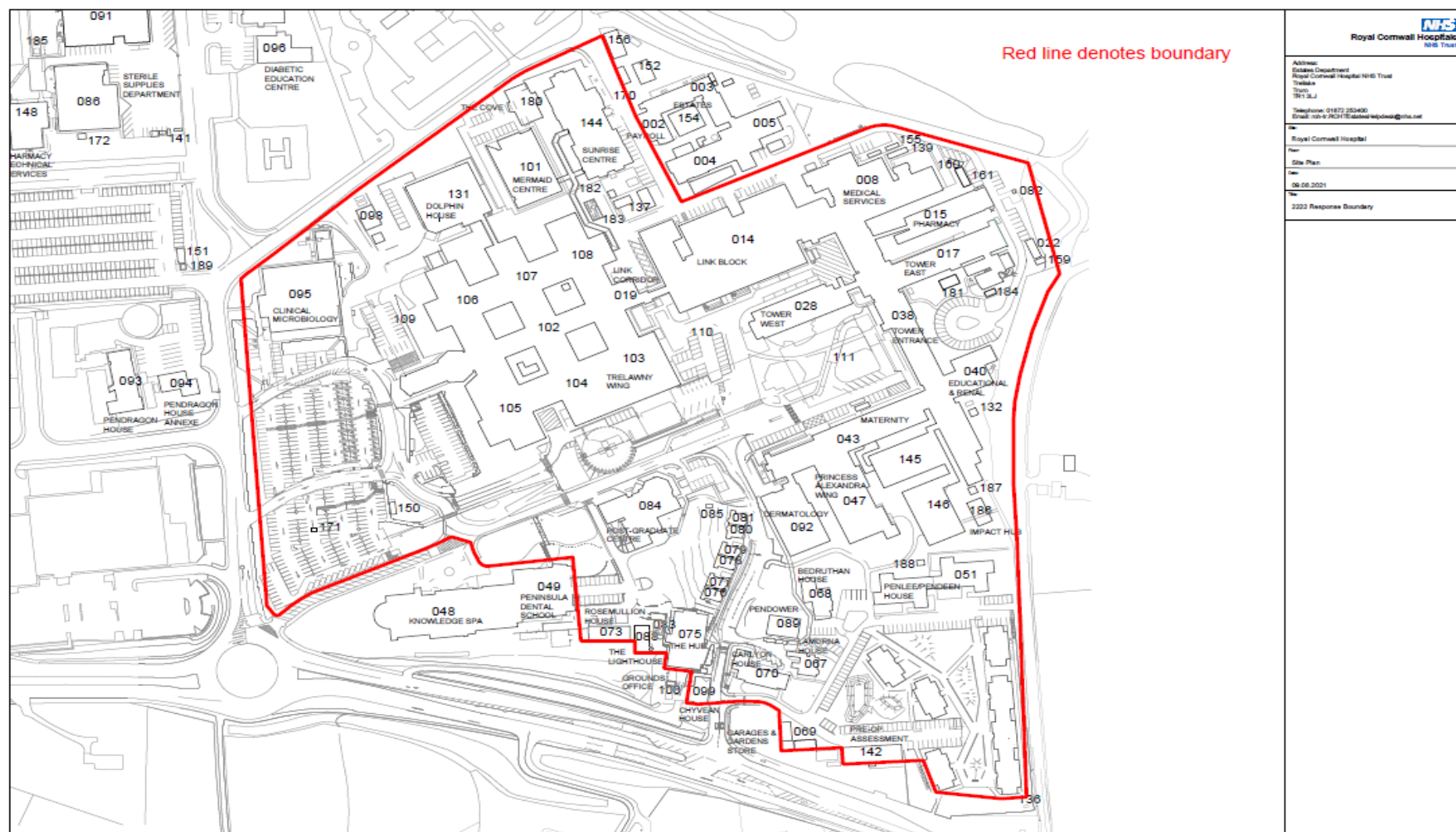
Appendix 6. First Aid and Medical Emergency Situations



In the event of a patient, visitor or member of staff becoming unwell or sustaining an injury that requires emergency transfer to ED, whilst in remote buildings see boundary plan (Appendix 7) E.G:

- Kedhlow Building.
 - Central Sterile Services Department (CSSD).
 - Diabetic Centre.
 - Mobility Centre.
 - The Beacon.
 - Health, Safety, Moving and Handling Department.
 - Pharmacy Technical Services (PTSU).
 - Pendragon House and Pendragon Annex.
 - Estates and Facilities.
 - Knowledge Spa.
 - Occupational Health.
 - Overflow Car park and surrounding car parks.
- An emergency ambulance should be called via a (9)-999 call.
 - Administer first aid and call an ambulance as appropriate.
 - When providing the details of the casualty/incident to the emergency controller It is helpful if the caller is with or has direct communications with the first aider/casualty. You must ensure that you clearly state the location name, AND that the location is a remote building. The RCH postcode is TR1 3LJ.
 - The call will then be triaged in accordance with normal ambulance procedures depending on the calls occurring at the time.
 - Ensure that someone is detailed to wait outside the entrance to meet the ambulance crew and take them to the casualty.
 - Complete a Datix report with full details of what happened and details all those who were involved (casualty, staff, first aiders, witnesses, etc.).

Appendix 7. First Aid Remote Building – Demarcation Line



Appendix 8. AED Locations

The following locations have been identified as a site housing an AED. However, please be aware that clinical activities may have occurred and required such a device. This may have resulted in temporary relocation or unavailability of device.

Royal Cornwall Hospital, Truro

- Cardiac Catheter Laboratory.
- CLIC Unit/Harlyn.
- Clinical Technology.
- CIU Radial Lounge.
- Dermatology Unit.
- Diabetes And Endocrine Centre.
- Discharge Lounge.
- Endoscopy Unit.
- ESU Assessment Bay.
- Eye Unit.
- Gwithian Unit.
- Gynaecology and Antenatal Clinics.
- Haematology/Oncology Clinic.
- Headland Unit.
- Hydrotherapy - Dolphin House.
- Knowledge Spa.
- Mermaid Centre.
- Med Physics.
- MRI Department.
- Nuclear Medicine.
- Outpatients Department (OPD).
- Pendennis Ward.
- Pre-Assessment Clinic.
- Reception – Trelawny.
- Resuscitation Department.
- Same Day Medical Assessment.
- Sunrise Centre-Clinical Oncology.
- Switchboard.
- Sterile Services Department.
- Tenvennek Unit.
- The Cove Macmillan Support Centre.
- The Hub (Contraception and Sexual Health).
- The Lighthouse (OPD).
- Therapies (PAMW) – Outpatient.
- Tower X-Ray.
- Trauma Assessment Unit.
- Trauma Unit 1.
- Tremennel Blood Management.
- Tremennel Frailty Unit.
- Wheal Coates.
- Wheal Fortune Ward.
- Wheal Prosper Ward.
- Wheal Rose Ward.
- Zennor Ward.

St Michaels Hospital, Hayle

- Outpatients Department – SMH.
- Marie Therese House Rehabilitation.
- Hand Clinic – SMH.
- St. Michael's Ward.

West Cornwall Hospital, Penzance

- Medical Unit 1.
- Medical Unit 2.
- Outpatients Department (OPD).
- Penlee Unit.
- Renal Unit.
- Surgical Unit.
- X -Ray / CT Imaging.

Truro Health Park

- Rheumatology.