|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Details** | | | | | | |
| Business Unit |  | | | | | |
| Location(s) |  | | | | | |
| Number(s) covered |  | | | | | |
|  |  |  | | | |  |
| **Factors to consider** | | **Please tick as appropriate** | | | | **Required first-aid provision, if yes** |
| Nature of the work and workplace hazards, considering typical numbers of staff, students and others at risk | Low Level (Offices, libraries, classrooms, PS hubs) | Yes |  | No |  | <50 Minimum provision 1 EFAW or 1 FAW unless able to share with nearby building/section  >50 1 FAW for first 100 + EFAW for every 100 employed  Minimum 1 medium sized first aid kit. |
| High level (labs, workshops, kitchens) | Yes |  | No |  | <50 Minimum 1 FAW + 1 FAW for every 50 employed  Minimum 1 medium sized first aid kit. |
| Specific e.g. cyanide, HF acid, confined spaces, machinery | Yes |  | No |  | Minimum 1 specifically trained person, dependent on scale of work |
| Off-site working/Fieldwork | Yes |  | No |  | Minimum 1 specifically trained person, dependent on location, numbers and type of activity. Type of training needs to be relevant to nature of injury/ill-health expected in the field |
| Clinical Setting | Yes |  | No |  | Identify whether sufficient suitable medical staff are identified (see Section 5a First Aid COP) |
|  | | | | | | |
| **Incident Types** | | **Please complete** | | | | **Required first-aid provision** |
| Potential types of incidents | Typical number of incidents per year |  | | | |  |
| Potential type of injury/illness (refer to activities risk assessments) |  | | | | FAW covers severe burns/scalds, fractures/dislocations, poisoning, anaphylactic shock, over and above EFAW. |
|  |  |  | | | |  |
| **First Aid Arrangements** | | **Please tick as appropriate** | | | | **Additional first-aid provision, if yes** |
| Working Arrangements | Normal core hours only | Yes |  | No |  | No additional provision needed |
| Absence cover in place | Yes |  | No |  | Sufficient first aid cover for foreseeable absence |
| Shift working covered | Yes |  | No |  | Ensure cover is always available |
| Lone working – out of hours covered | Yes |  | No |  | First Aid provision must be established |
| Spread of locations | Yes |  | No |  | Consider additional first aiders/equipment (e.g. Defibrillators, suitable communications) and special arrangements |
| Remote locations on university campuses/property | Yes |  | No |  |
| Travelling (fieldwork) staff/students | Yes |  | No |  | Consider travel first aid equipment provision |
| Off-site working under university control | Yes |  | No |  |
| Other situations (e.g. in-experienced, young, employees with specific health requirements, numbers of students in area) | Yes |  | No |  | Give details: |
|  | | | | |
|  |  |  |  |  |  |  |
| Key | **EFAW** – Emergency First Aid trained (1-day course) | | | | | |
| **FAW** – First Aid at Work trained (3-day course) | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **First Aid Provision** | | **Please tick as appropriate** | | | | **Number/Details** | |
| EFAW first aiders required | | Yes |  | No |  |  |  |
| FAW first aiders required | | Yes |  | No |  |  |  |
| First aid notices required (minimum of one per location) | | Yes |  | No |  |  |  |
| Location of first aid notice(s) | |  | | | | |  |
| First aid boxes – standard | | Yes |  | No |  |  |  |
| Location of first aid box(es) | |  | | | | |  |
| Additional equipment (e.g. foil blankets, antidotes) | | Yes |  | No |  |  |  |
| Travel first aid kits | | Yes |  | No |  |  |  |
| Defibrillator in building | | Yes |  | No |  | If No, location of nearest device: |  |
| Consider special arrangements with the emergency services (e.g. working in remote sites) | | Yes |  | No |  |  |  |
| Additional procedures (eg. Signing in at a reception for first aiders) please state below: | | | | | | |  |
|  | | | | | | |  |
|  |  |  | | | |  | |
| **Completed by** | | | | | | | |
| Name |  | Signature | | | |  |  |
| Date |  | Review Date | | | |  |  |