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**University Occupational Health and Safety Form**

# First Aid Needs Assessment

Persons who undertake a First Aid Needs Assessment must have a level of competence and knowledge of the buildings/premises, staff demographic, likely hazards, and working arrangements within their department. It is the responsibility of each Head of Department / School / Director to ensure that staff conducting such an assessment are competent to do so. Where a department has staff based in more than one building a separate assessment should be conducted for each location. Refer to the University Standard for First Aid Standard prior to completing this form.

**SECTION 1.**

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| **1.1 ACTIVITY** | | |
| **Title:** | Departmental Assessment of Physical and Mental Health First Aid Needs | |
| **Department:** | | *First Aid provisions are to be shared, please also detail with which departments* |
| **Location:** | |  |
| **Additional notes:** | | |

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| **1.2 PERSON(S) CONDUCTING THIS ASSESSMENT** | | | | |
| **Name(s):** |  | | **Signature(s):** |  |
| **Date assessment undertaken:** | |  | | |

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| **1.3 ASSESSMENT REVIEW HISTORY**  This assessment should be reviewed immediately if there is any reason to suppose that the original assessment is no longer valid. Otherwise, the assessment should be reviewed, at least every 3 years. The responsible competent person must ensure that this assessment remains valid. | | | | |
|  | **Review 1** | **Review 2** | **Review 3** | **Review 4** |
| **Due date:** |  |  |  |  |
| **Date conducted:** |  |  |  |  |
| **Conducted by:** |  |  |  |  |

**SECTION 2A. DETERMINATION OF FIRST AID PROVISIONS**

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| **FACTORS TO CONSIDER** | **NOTES** | **FIRST AID PROVISIONS** |
| **HAZARDS:** Use general risk assessments to inform the First Aid requirements, consider types of activities/hazards and the levels of first-aid provision required | | |
| Does the workplace have low level hazards e.g. those found in an office? | Yes / No | Minimum provisions:  An Appointed Person  A First Aid box |
| Does the workplace have high level hazards e.g. those found in a lab or mechanical workshops? Consider hazards such as toxic substances, explosives, pathogens, high voltages, manual handling, machinery, fieldwork in remote areas. | Yes / No | Consider providing:  First Aiders  Additional specialist First Aid training  A First Aid box  Additional First Aid equipment  A First Aid room |
| *Additional factors to consider:* |  |  |
| *Additional factors to consider:* |  |  |
| **Staff:** Consider the number of staff and those staff that may be higher at risk | | |
| How many people work in the department? |  | See Section 3 |
| Are there staff on site that may be at higher risk? Consider inexperienced workers, those with existing health problems, young persons, new and expectant mothers, disability etc. | Yes / No | Consider providing:  Additional specialist First Aid training  Additional First Aid equipment |

**SECTION 2A. CONT’D.**

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| *Additional factors to consider:* |  |  |
| *Additional factors to consider:* |  |  |
| **ACCIDENT HISTORY/RECORDS:** | | |
| What types of accidents and injuries have previously occurred? |  | Ensure that First Aid provisions will cover the type of injuries that have occurred in the past in addition to those that are foreseeable. |
| *Additional factors to consider:* |  |  |
| *Additional factors to consider:* |  |  |
| **WORKING ARRANGEMENTS:** | | |
| Do staff/post-graduates work alone? | Yes / No | Ensure access to First Aid kit  Ensure communications lines are accessible e.g. mobile phone |
| Do any staff/post-graduates work shift or out of hours? | Yes / No | Ensure there is sufficient First Aid cover |
| Does the department occupy more than one building or operate on multiple floors? | Yes / No | Consider First Aid provisions in each building/floor |
| Are there times when the First Aider might be on holiday/absent? | Yes / No | Ensure sufficient First Aid provisions during holiday periods/unexpected staff absences |

**SECTION 2A CONT’D.**

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| Do any staff/post-graduates travel i.e. drive as part of work commitments? | Yes / No | Ensure mobile First Aid kits are provided  Consider providing additional specialist First Aid |
| Do any staff/post-graduates conduct work off campus, e.g. fieldwork, where specialist First Aid may be required? | Yes / No | Consider providing:  Specialist First Aid kits  Additional specialist First Aid training |
| *Additional factors to consider:* |  |  |
| *Additional factors to consider:* |  |  |
| **NON-EMPLOYEES:** | | |
| Do members of the public, visitors, contractors, students, school children visit your Faculty/ Directorate/School/department? | Yes / No | It is strongly advised that First Aid provisions are made for non-employees that are on site |
| **EMERGENCY SERVICES:** | | |
| What is the proximity to closest hospital? |  |  |

**Section 2b. MENTAL HEALTH FIRST AID PROVISIONS**

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| **FACTORS TO CONSIDER** | **NOTES** | **FIRST AID PROVISIONS** |
| Have incidents associated with mental health previously occurred? |  | Consider:  Appointing a Mental Health First Aider |
| Is there a degree of sick leave/absenteeism that is associated with mental health issues? |  | Consider:  Appointing a Mental Health First Aider |
| *Additional factors to consider:* |  |  |

**Section 3.** Suggested number of First Aid personnel to be available at all times people are at work. Please refer to the First Aid Standard for Appointed Person (AP), Emergency First Aid at Work (EFAW) and First Aid at Work (FAW) syllabus.

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| **LEVEL OF RISK**  (Informed by general risk assessments) | **NUMBER OF PERSONNEL\*** | **NUMBER OF FIRST AIDERS REQUIRED**  (as suggested by the HSE) |
| **Low risk** | <25 | At least **1 Appointed person** |
| 25-50 | At least **1 EFAW** trained First Aider |
| >50 | At least **1 FAW** trained First Aider for every 100 (or part thereof) |
| **High risk** | <5 | At least **1 Appointed person** |
| 5-50 | At least **1 EFAW** trained First Aider (consider the type of injuries that may occur) |
| >50 | At least **1 FAW** trained First Aider for every 50 (or part thereof) |

\*The HSE strongly advise that arrangements for First Aid provisions also take into account non-employees that may be on site.

**SECTION 4.** Utilise the guidance in Section 2 and the table in Section 3 to determine your First Aid requirements in the workplace.

Where a building/floor is shared with another department with similar hazards consideration should be given to sharing First Aid resources.

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| **FIRST AID PERSONNEL** | **REQUIRED YES/NO** | **NUMBER REQUIRED** |
| Appointed person | Yes / No |  |
| EFAW First Aider | Yes / No |  |
| FAW First Aider | Yes / No |  |
| First Aider with additional training (please specify) | Yes / No |  |
| **FIRST AID EQUIPMENT AND FACILITIES** | **REQUIRED** | **NUMBER REQUIRED** |
| Damp and dust proof First Aid container | Yes / No |  |
| Contents of First Aid Box |  |  |
| Additional equipment | *Detail* |  |
| Travelling First Aid kit | *Detail* |  |
| First Aid room | Yes / No | *Detail location, type of room, sole use or can the room be vacated easily and quickly* |
| Shower | Yes / No |  |
| **MENTAL HEALTH FIRST AID PERSONNEL** | **REQUIRED YES/NO** | **NUMBER REQUIRED** |
| Mental Health First Aider | Yes / No |  |