

## FIRST AID PROCEDURES

The Project has established procedures for dealing with accidents and illness and ensures that both crew members and passengers are aware of these procedures. They will include procedures for :

Carrying out a risk assessment to determine relevant provision

Providing a crew member trained in first aid.

Contacting the emergency services in the event of accidents, which cannot be dealt with on the spot.

Liaising with group leaders to make sure up to date lists are available showing any medical conditions relating to the group, and establishing the groups own level of first aid cover.

Recording and reporting accidents or illness

Providing a first aid container (marked with a white cross on a green background) and near to hand washing facilities. The contents will be regularly assessed and expired items discarded.

Providing a place (Skippers Cabin) where an injured or ill person can be made comfortable whilst perhaps waiting for medical attention

### RISK ASSESSMENT FOR FIRST AID REQUIREMENTS

<b>DATE: 14/02/07</b>	<b>REVIEW DATE: 14/02/08</b>	<b>Assessor(s)</b>	<b>Mike Simmons – Andrew Read</b>		
<b>HAZARDS IDENTIFIED</b>	<b>RISKS</b>	<b>RISK RATING</b>	<b>CONTROL MEASURES</b>	<b>RESIDUAL RISK RATING</b>	<b>Action and date</b>
<b>ACCIDENT WHILST WORKING WITH THE NARROWBOAT PROJECT</b>	<b>PERSONNAL INJURY, DEATH, LOSS OF LIMB, PERMANENT PHYSICAL DAMAGE</b>	<b>INTOLERABLE</b>	<b>ENSURE SAFE ENVIRONMENT, ALL EQUIPMENT ACTIVITIES ARE FULLY RISK ASSESSED, ENSURE ALL SKIPPERS AND CREW ARE EQUIPED TO RESPOND TO EMERGENCIES, ALL SKIPPERS TO BE FULLY FIRST AID TRAINED.</b>	<b>MODERATE</b>	<b>14/2/07</b>
<b>DROP FROM A HEIGHT</b>	<b>PERSONNAL INJURY, DEATH, LOSS OF LIMB, PERMANENT PHYSICAL DAMAGE</b>	<b>INTOLERABLE</b>	<b>ENSURE SAFE ENVIRONMENT, ALL EQUIPMENT ACTIVITIES ARE FULLY RISK ASSESSED. ALL PERSONS INSTRUCTED IN SAFE USE OF LOCKS</b>	<b>MODERATE</b>	<b>14/2/07</b>
<b>HEART ATTACK OR COLLAPSE</b>	<b>DEATH OR LONG TERM PHYSICAL INJURY</b>	<b>MODERATE</b>	<b>ENSURE THAT MINMUM OF 1 CREW MEMBER IS FULLY TRAINED IN CPR AND RESUSITATION, ENSURE A MOBILE IS ALWAYS AVAILABLE TO CONTACT</b>	<b>TOLERABLE</b>	<b>14/2/07</b>

			<b>EMERGENCY SERVICES</b>		
<b>MAJOR TRAUMA</b>	<b>DEATH OR LONG TERM PHYSICAL INJURY</b>	<b>MODERATE</b>	<p><b>ENSURE THAT ONE CREW MEMBER (MIN) IS FULLY FIRST AID TRAINED AND HAS ACCESS TO A FIRST AID BOX , WHICH WILL CONTAIN (MIN)</b></p> <p><b>TRIANGULAR BANDAGE X4</b></p> <p><b>SURGICAL DRESSINGS</b></p> <p><b>SIZE 8 X4</b></p> <p><b>SIZE 6 X 2</b></p> <p><b>SIZE 12X 4</b></p> <p><b>EYE PADS X 4</b></p> <p><b>SURGICAL GLOVES</b></p> <p><b>SCISSORS</b></p> <p><b>SURGICAL TAPE</b></p> <p><b>STERILE WOUND DRESSING</b></p> <p><b>NON ALERGENIC PLASTERS</b></p> <p><b>RESUSS MOUTH GUARD X4</b></p> <p><b>FIRST AID BOX WILL NEED TO BE REFLECTIVE OF WORK SITUATION, FIELD DRESSINGS MAY NEED TO BE MORE AVAILABLE IF IN REMOTE AREAS</b></p> <p><b>*FIRST AID BOX TO SUIT PURPOSE*</b></p>	<b>TOLERABLE</b>	<b>14/2/07</b>
<b>INABILITY TO COPE WITH EMERGENCY</b>	<b>PERSONNAL INJURY, DEATH, LOSS OF LIMB, PERMANENT PHYSICAL DAMAGE</b>	<b>INTOLERABLE</b>	<p><b>QUALIFIED FIRST AIDER ON BOARD</b></p> <p><b>CORRECTLY STORED FIRST AID BOX</b></p> <p><b>CORRECT SIGNAGE AS TO</b></p>	<b>TOLERABLE</b>	<b>14/2/07</b>

			<b>PLACEMENT OF FIRST AID BOX CORRECTLY STOCKED FIRST AID BOX</b>		
<b>ALL ACCIDENTS OCCURRANCES AT THE PROJECT</b>	<b>REACURRANCE OF ACCIDENTS</b>	<b>INTOLERABLE</b>	<b>CREW/USERS TO RECORD USING ACCIDENT BOOK ON BOARD. ALL ACCIDENTS TO BE FULLY INVESTIGATED AND RECOMMENDATIONS NOTED</b>	<b>TOLERABLE</b>	<b>14/02/07</b>

<b>PERSONS AT RISK</b>	<b>SKIPPER AND CREW MEMBERS, USERS,VISITORS,PUBLIC.</b>
<b>PERSONS AT SPECIAL RISK</b>	<b>YOUNG PEOPLE UNDER DUTY OF CARE</b>

<b>GUIDE</b>	<b><i>Slightly harmful</i></b>	<b><i>Harmful</i></b>	<b><i>Extremely Harmful</i></b>
<b>Highly Unlikely</b>	<b>Trivial</b>	<b>Tolerable</b>	<b>Moderate</b>
<b><i>Unlikely</i></b>	<b>Tolerable</b>	<b>Moderate</b>	<b>Substantial</b>
<b><i>Likely</i></b>	<b>Moderate</b>	<b>Substantial</b>	<b>Intolerable</b>

**VALIDATION:**

The controls identified in this assessment comply with applicable statutory requirements and reduce the risk to an acceptable level:

**Name and Position**

**Signed**