



Risk Assessment – First Aid Training	
<b>Activity</b>	<b>First Aid Training</b>
<b>What are the hazards?</b>	<b>Cross infection</b> <b>Working in close proximity</b> <b>Size of training venue</b> <b>Latex gloves, plasters and antibacterial Wipes</b> <b>Incorrect use of techniques</b> <b>Slips, trips and falls</b>
<b>Who is at risk?</b>	<b>Staff</b> <b>Learners</b> <b>Visitors</b>
<b>Health and Safety Lead:</b>	<b>Martin Hyland (MD)</b>

Immerse Medical Training LTD aims to provide a safe and healthy working environment for all employees, visitors and learners. We are committed to the safety of employees by ensuring that best practices are employed to minimise risks from all accidents and incidents at work.

## Accidents and Incidents at Work Policy

### 1. Purpose

Immerse Medical Training LTD accepts that:

- Employees should not be subjected to accidents/incidents whilst at work and will take all reasonably practical steps to reduce accidents/incidents at work and is committed to accident/incident reporting and investigation to assist in this process.
- Learners and visitors to our offices will be offered a safe environment as far as is practicable.

## Accidents and Incidents at Work Policy

### 2. Scope

This policy applies to all employees of Immerse Medical Training LTD. The process of recording and reporting will be used also in the event of an accident involving a learner in the premises of Immerse Medical Training LTD or in the premises of a venue that has been hired by Immerse Medical Training LTD.



## Accidents and Incidents at Work Policy

### 3. Roles and Responsibilities

Responsibilities of the differing roles of employees of Immerse Medical Training LTD are discussed in the procedures at point 5. However, the directors have ultimate responsibility for the Health and Safety within the company.

## Accidents and Incidents at Work Policy

### 4. Policy Implementation - Procedures

#### 5.1 Responsibility of the Health and Safety Lead

The Health and Safety Lead is responsible for:

- 5.1.1 Following Immerse Medical Training LTD Health and Safety Policy which includes compliance with all Health and Safety legislation. In this instance the relevant legislation is The Health and Safety at Work Act 1974 and The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).
- 5.1.2 Ensuring accidents and dangerous occurrences are competently investigated, reported and acted upon, ensuring accessibility of the accident report.
- 5.1.3 All interactions with the Health and Safety Executive including reporting of any accident or incident relevant to RIDDOR.
- 5.1.4 Adequate provision of training for all employees on reporting of accidents and incidents in the workplace as part of the induction and on-going training.

#### 5.2 Responsibility of the Managing Director

The Managing Director is responsible for:

- 5.2.1 Investigation of any accident reported by an employee or other person related to work activity by Immerse Medical Training LTD.

5.2.2 Where possible, ensure that any injuries sustained are treated by a first aider and take and necessary steps to make the premises safe.

5.2.3 Where an employee suffers serious injury take steps to inform the next of kin, relative or partner.

5.2.4 Ensure accidents are recorded appropriately and that relevant follow up steps are taken.

### **5.2.5 Notification and investigation of a Fatality or Major Accident**

Where a fatality or major injury accident occurs, as soon as reasonably possible report the accident to the Health and Safety Executive, providing:

- Details of the injured person and injuries sustained.
- Details of the circumstances of the accident.
- Details of the hospital to which the injured person has been sent.
- Confirm that the accident site and any items that will form part of the evidence in an investigation are still available for inspection.

5.2.6 As far as possible not disturbing the accident scene, taking care not to destroy any important evidence relating to a serious accident or incident until the accident investigation is complete.

5.2.7 A report of the investigation with any recommendations they consider to prevent a recurrence. This report should also be sent to the Health and Safety Executive.

## **5.3 Responsibility of the Employee**

Employees responsibilities are to:

5.3.1 Report to their line manager / supervisor as soon as reasonably possible any:

- Accident causing injury at work.
- Suspected injury, however slight it may seem.
- Occupational diseases.
- Dangerous occurrences (e.g. incidents/accidents or near misses where only by good fortune serious injury was avoided)

5.3.2 If it is not possible to report immediately e.g. the employee is taken to hospital or must go directly home, the employee must advise another employee of the circumstances of the accident and their resulting injury.

- 5.3.3 The employee must complete details of their injury and the circumstances into the accident book.
- 5.3.4 If the employee is unable to make an entry into the accident book, they must ask someone to do this on their behalf.
- 5.3.5 When informing their line manager/supervisor that they are unable to work because of sickness, which they feel is a result of an industrial injury or disease, the employee must state this and give full details of their accident or disease. Failure to notify the line manager/supervisor of absence due to industrial injury/disease as soon as is reasonably practicable may result in employee absence being classified as 'normal sickness absence'.
- 5.3.6 If a fellow employee reports that they have had an accident and sustained an injury, then employees should remind them that it must be reported to their line manager/supervisor as soon as reasonable practicable.
- 5.3.7 The employee must co-operate with the manager's investigation into the accident/incident.

#### **5.4 Accident Investigation**

There are many legal and economic reasons for investigating accidents. The results of any investigation should however be used to help prevent a recurrence by indicating modification to procedures, premises, training or supervision.

All accidents should be investigated. Study of incidents producing minor injuries or near misses can often reveal a major hazard. The depth of investigation will depend upon the degree of injury or damage but should primarily depend upon the basic hazard. Action to eliminate the hazard can only be taken when it has been determined following investigation.

#### **5.5 Responsibilities of the Investigating Officer (IO)**

The Health & Safety Lead or suitably trained line manager should investigate any accident. These employees will be referred to as IO.

##### **5.5.1 The Investigation**

The IO should look at:

- The action taken to prevent a recurrence;
- The cause of injury;
- The chain of events leading to the accident, thus allowing the main contributory factor to be identified;
- Whether there was a breach of any statutory requirements under the Health and Safety at Work Act and its regulations;
- Whether there was any breach of Immerse Medical Training LTD safety instructions;
- Whether the investigation has revealed any other hazard or weakness.

The IO should visit the scene of the accident as soon as possible, they should question witnesses, carry out physical checks as necessary and clarify technical queries within his/her competence. When problems arise outside the IO's competence he/she should seek advice from the Managing Director.

It should be made clear to any witness (es) at the commencement of the enquiry that the object is to prevent a recurrence of the accident and not to apportion blame. There is no legal power to compel a witness to answer questions. All witnesses are entitled, if they wish, to be accompanied by anyone of their choice when being questioned. If, during the investigation, any breach of statutory requirements, Immerse Medical Training LTD safety instructions or employee rules is identified remedial action should be taken immediately.

When all enquiries have been completed, the IO should consider what local instructions (if any) are necessary to prevent recurrence of the accident and complete a full report on their investigation, their findings and recommendations.

The Health & Safety Lead will facilitate necessary changes and report to the board of directors.

## **5.6 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) Guidance**

Full guidance is available from the Health and Safety Executive (HSE), the following guidance is not exhaustive and may have been superseded by changes to Health and Safety Law.

### ***What is "an accident"?***

In relation to RIDDOR, an accident is a discrete, identifiable, unintended incident which causes physical injury. This specifically includes acts of non-consensual violence to people at work.

Injuries themselves, e.g. “feeling a sharp twinge,” are not accidents. There must be an identifiable event, external to the body which causes the injury, e.g. being struck by a falling object. Cumulative exposures to hazards which eventually cause injury (e.g. repetitive lifting) are not classed as “accidents” under RIDDOR.

### ***What is meant by “work-related”?***

RIDDOR only requires accidents to be reported if they arise “out of or in connection with work.” The fact that an accident occurs at work premises does not, of itself, mean that the accident is work-related -there must be some indication that the work activity contributed to the circumstances of the accident. An accident should be considered as “work-related” if any of the following factors played a significant role:

- the way the work was carried out;
- any machinery, other plant, substances or equipment used for the work; or
- the condition of the site or premises where the accident happened.

### ***Who reports?***

Only "Responsible Persons" including employers, the self-employed and people in control of work premises should submit reports under RIDDOR.

### **Online**

Responsible persons should complete the appropriate online report form:

- Report of an injury
- Report of a dangerous occurrence
- Report of an injury offshore
- Report of a dangerous occurrence offshore
- Report of a case of disease
- Report of flammable gas incident
- Report of a dangerous gas fitting

The form will then be submitted directly to the RIDDOR database. You will receive a copy for your records.

## Telephone

All incidents can be reported online but a telephone service is also provided for reporting fatal and specified injuries only - call the Incident Contact Centre on 0845 300 9923 (opening hours Monday to Friday 8.30 am to 5 pm).

## Reporting out of hours

The HSE and local authority enforcement officers are not an emergency service.

## What are reportable incidents?

- Deaths and reportable injuries
- Occupational diseases
- Dangerous occurrences
- Gas incidents

## What are “reportable” injuries

The following injuries are reportable under RIDDOR when they result from a work-related accident:

- **The death of any person (Regulation 6)** All deaths to workers and non-workers, with the exception of suicides, must be reported if they arise from a work-related accident, including an act of physical violence to a worker.
- **Specified Injuries to workers (Regulation 4)** The list of ‘specified injuries’ in RIDDOR 2013 replaces the previous list of ‘major injuries’ in RIDDOR 1995. Specified injuries are (regulation 4):
  - fractures, other than to fingers, thumbs and toes;
  - amputations;
  - any injury likely to lead to permanent loss of sight or reduction in sight;
  - any crush injury to the head or torso causing damage to the brain or internal organs;
  - serious burns (including scalding) which:
    - covers more than 10% of the body; or



- causes significant damage to the eyes, respiratory system or other vital organs
  - any scalding requiring hospital treatment;
  - any loss of consciousness caused by head injury or asphyxia;
  - any other injury arising from working in an enclosed space which:
    - leads to hypothermia or heat-induced illness or
    - requires resuscitation or admittance to hospital for more than 24 hours;
- Injuries to workers which result in their **incapacitation for more than 7 days (Regulation 4)** Accidents must be reported where they result in an employee or self-employed person being away from work, or unable to perform their normal work duties, for more than seven consecutive days as the result of their injury. This seven-day period does not include the day of the accident but does include weekends and rest days. The report must be made within 15 days of the accident.
- Injuries to non-workers which result in **them being taken directly to hospital for treatment**, or specified injuries to non-workers which occur on hospital premises. (Regulation 5)

### ***Further guidance on specified injuries.***

#### **Over-three-day incapacitations**

Accidents must be recorded, but not reported where they result in a worker being incapacitated for more than three consecutive days. If you are an employer, who must keep an accident book under the Social Security (Claims and Payments) Regulations 1979, that record will be enough.

#### **Non-fatal accidents to non-workers (e.g. members of the public)**

Accidents to members of the public or others who are not at work must be reported if they result in an injury and the person is taken directly from the scene of the accident to hospital for treatment to that injury. Examinations and diagnostic tests do not constitute 'treatment' in such circumstances.



**There is no need to report incidents where people are taken to hospital purely as a precaution when no injury is apparent.**

If the accident occurred at a hospital, the report only needs to be made if the injury is a 'specified injury' (see above).

Current information at: <http://www.hse.gov.uk/riddor/what-must-i-report.htm>

### **Occupational diseases**

Employers and self-employed people must report diagnoses of certain occupational diseases, where these are likely to have been caused or made worse by their work:

These diseases include (regulations 8 and 9):

- carpal tunnel syndrome;
- severe cramp of the hand or forearm;
- occupational dermatitis;
- hand-arm vibration syndrome;
- occupational asthma;
- tendonitis or tenosynovitis of the hand or forearm;
- any occupational cancer;
- any disease attributed to an occupational exposure to a biological agent.

### **Dangerous occurrences**

Dangerous occurrences are certain, specified near-miss events. Not all such events require reporting. There are 27 categories of dangerous occurrences that are relevant to most workplaces, for example:

- the collapse, overturning or failure of load-bearing parts of lifts and lifting equipment;
- the accidental release of any substance which could cause injury to any person.

A full list can be accessed on HSE.gov.uk – Schedule 2

**Appendix 1 – Accident / Incident Investigation Form**
**Type of event**

Accident	
Ill health	
Near-miss	
Undesired circumstance	

**Actual/potential for harm**

Fatal or major	
Serious	
Minor	
Damage only	

RIDDOR reportable?	Y/N	Date/time reported
Entry in accident book	Y/N	Date entered/reference

**Investigation level**

High level		Low level	
Medium level		Basic	

Initial assessment carried out by:	Date
Further investigation required?	Priority
For investigation by:	



**1 Where and when did the adverse event happen?**

**2 Who was injured/suffered ill health or was otherwise involved with the adverse event?**

**3 How did the adverse event happen? (Note any equipment involved).**

**4 What activities were being carried out at the time?**

**5 Was there anything unusual or different about the working conditions?**

**6 Were there adequate safe working procedures and were they followed?**



**7 What injuries or ill health effects, if any, were caused?**

**8 If there was an injury, how did it occur and what caused it?**

**9 Was the risk known? If so, why wasn't it controlled? If not, why not?**

**10 Did the organisation and arrangement of the work influence the adverse event?**

**11 Was maintenance and cleaning sufficient? If not, explain why not.**



**12 Were the people involved competent and suitable?**

**13 Did the workplace layout influence the adverse event?**

**14 Did the nature or shape of the materials influence the adverse event?**

**15 Did difficulties using the plant and equipment influence the adverse event?**

**16 Was the safety equipment sufficient?**

**17 Did other conditions influence the adverse event?**



**18 What were the immediate, underlying and root causes?**

**Analysis**





---

Signed:

A handwritten signature in black ink, appearing to be 'M. Hyland'.

Date: 09/08/2021

Review due before 09/08/2022

---

#### Reviews

Date	Approved – no changes	Approved – with amendments
01/08/2018	M. Hyland – Managing Director	N/A
05/08/2019	N/A	M. Hyland – Managing Director
03/08/2020	N/A	M. Hyland – Managing Director
09/08/2021	N/A	M. Hyland – Managing Director