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### Quality, Health, Safety, Environmental & Energy Manual:

Document No:SM-19

First Aid

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This document outlines the arrangements in place to ensure the provision of appropriate first-aid treatment to all persons on Toyota Material Handling UK Ltd premises and team members.

#### **Arrangements**

- 1.0 The Depot Responsible Person will have the responsibility for ensuring that all arrangements under this procedure are in place and implemented. This will be supported by the QHSE team.
- 1.1 Arrangements should be made to ensure that all persons on the premises are aware of what measures have been taken for the provision of first-aid treatment.
- 1.2 This information should be displayed and be included on any induction training course.

#### **Risk Assessment**

- 2.0 All depots must conduct a first-aid risk assessment using form Q100.
- 2.1 The results of these assessments will allow adequate and suitable arrangements to be made in respect of first-aid facilities.
- 2.2 Full notice should be taken of any other relevant assessments conducted e.g. those undertaken for the Control of Substances Hazardous to Health (COSHH).
- 2.3 Risk assessments conducted to date have revealed no extraordinary hazards or risks requiring company first-aiders to under-go special, hazard specific, first-aid training.

#### **Minimum Requirement**

- 3.0 Each Depot should have at least one qualified first-aiders and not less than one for every 50 employees.
- 3.1 Where shift working is practised a first-aiders or an "appointed person" must always be in attendance.
- 3.2 The provision of an "appointed person" see para 6.0, should not be considered as a permanent alternative to a qualified first-aiders. However an "appointed person" may be suitable where the location and nature of work involved has no specific hazards and the number of employees is small.
- 3.3 Any depot operating a workshop (even if not full time) must provide a qualified first-aiders or make suitable alternative arrangements for the provision of first-aid.

#### **Depot First-aiders**

- 4.0 First-aiders must be trained and receive their qualification from an authority approved by the QHSE Team.
- 4.1 Certificates of qualification are currently valid for three years, after which a refresher course and re-examination is necessary. However, the company has decided that in order to maintain skill

and knowledge levels they will be required to attend an annual refresher course. The first-aider's team leader is responsible for overseeing the arranging of such annual courses.

- 4.2 It is TMHUK's policy that all company appointed first aiders receive an annual payment, to be paid upon each anniversary of their qualification. This will be instigated by the receipt of their refresher or re-qualification certificate.
- 4.3 First aid courses should be arranged via the Training Coordinator. The Training coordinator will ensure that all such training is entered in the training database in accordance with the RECORDS section below.
- 4.4 Trained first-aiders will provide first-aid to injured team members and visitors as necessary.
- 4.5 All first-aiders and "appointed" persons should be made aware that advice on general first-aid issues is available from the Health and Safety Executive (HSE) approved local Occupational Health Services (if one exists and the company is a member) or the Employment Medical Advisory Service of the HSE.
- 4.6 Note that the advice offered is on general matters of first-aid and not advice on specific treatment.

#### **First-aid Care**

- 5.0 The individual first-aider must not attempt to deliver aid beyond his/her own training level.
- 5.1 The first-aider cannot treat or advise on treatment concerning illness, such cases should be referred to professionals.
- 5.2 All first-aiders are responsible for calling professional assistance when the treatment required exceeds their level of expertise.
- 5.3 They will be responsible for recording all cases of treatment on form Q042 - First Aid Treatment/Injury Record which includes any reported cases of illness and the advice given. e.g. Advised to consult his/her G.P.

#### **Appointed Persons**

- 6.0 In situations where the trained first-aider is absent due to exceptional and temporary circumstances it is acceptable to appoint a person to take charge of:-
  - a) Any situation where an injured or sick person requires attention from a medical practitioner or nurse;
  - b) Any first-aid equipment or facilities.
- 6.1 An "appointed person" should not give any first-aid treatment other than emergency first-aid and then only if specifically trained in these procedures, but should be responsible for arranging professional assistance.
- 6.2 Foreseeable absences of first-aiders, such as planned annual leave, are not considered 'exceptional and temporary circumstances' during which the substitution for a first-aider by an appointed person is justified.

### Equipment and Facilities

- 7.0 First-aid boxes should provide adequate protection for the contents and be clearly marked with a white cross on a green background. They should contain sufficient quantities of suitable first-aid materials and nothing else.
- 7.1 The Quality, Health, Safety & Environmental (QHSE) Manager will advise responsible managers, including the Parts Manager, of any changes initiated by the HSE, to the recommended contents list.
- 7.2 Complete boxes and most, if not all, of the component parts are available from the Parts Department at Leicester. The stores should be the preferred supplier in all cases.

### First-aid Room

- 8.0 Risk assessments conducted to date have revealed that there is a need for a First-aid-Room at our Business Centres incorporating engineering workshops; Warrington Business Centre, Castleford Business Centre, Leicester Business Centre and Fleet Management Centre (FMC).
- 8.1 If any Centre provides a first-aid room it must comply with certain basic requirements. Please refer to the QHSE Team for further advice on this subject.

### Defibrillation Equipment

- 9.0 Defibrillation equipment has been installed at all TMHUK Depots. First aiders should be trained accordingly in its use.

### Depots and Resident Sites

- 10.0 There is no mandatory list of items to be included in a first-aid container. The decision on what to provide will be influenced by the findings of the first-aid needs assessment.

As a guide, where work activities involve low hazards, the **minimum** quantities of first-aid items are:

- a leaflet giving general guidance on first aid (for example, HSE's leaflet *Basic advice on first aid at work*);
- individually wrapped sterile plasters (assorted sizes), appropriate to the type of work (hypoallergenic plasters can be provided if necessary);
- sterile eye pads;
- individually wrapped triangular bandages, preferably sterile;
- safety pins;
- one large sterile individually wrapped unmedicated wound dressings;
- four medium-sized sterile individually wrapped unmedicated wound dressings;
- disposable gloves.

- 10.1 All depots will provide at least one first-aid box and may, if required, equip each qualified first-aiders with their "own" first-aid box.

- 10.2 Where first-aid boxes cater for workshops, full consideration should be given to any hazards that may require additional facilities or equipment. For instance where no mains tap water is readily available, larger eg.500ml containers of sterile water or sterile saline solution may be appropriate.
- 10.3 All centres are required to provide suitable provision for the disposal of blood soaked bandages etc. The preferred route will be via a contracted hygiene services company. It is the responsibility of the person administering any first-aid to ensure that all such waste is disposed of appropriately.
- 10.4 First aiders are responsible for replenishing any used items as soon after use as is practicable.

### **Field Service Personnel Company Vehicles**

- 11.0 All Field Service company vehicles will carry a 'first-aid kit'. There is no mandatory list of items to be included in first-aid kits for travelling workers. The kit provided will meet or exceed the minimum requirement specified by the Health and Safety Executive.

Below are the **Minimum** quantities that should always be available.

- a leaflet giving general guidance on first aid;
- 5 x individually wrapped sterile plasters (hypoallergenic plasters can be provided, if necessary);
- 1 x individually wrapped triangular bandages;
- 1 x sterile un-medicated dressing;
- 1 x self adhesive dressing;
- 1 x sterile burn dressings;
- 1 x foil blanket;
- 1 x resuscitation aid;
- 5 x individually wrapped moist cleansing wipes;
- 2 x disposable gloves;
- 5 x eye wash phials (20ml).

- 11.1 The kit and its constituent parts are available by part number from Leicester stores.

### **Resident Sites**

- 12.0 All sites must be provided with at least one first-aid kit.
- 12.1 Full consideration should be given to any hazards that may require additional facilities or equipment. For instance where no mains tap water is readily available, larger, eg.500ml, containers of sterile water or sterile saline solution may be appropriate.
- 12.2 Each site should have an appointed 'first-aid kit' holder who will be responsible for replenishing any used items as soon after use as is practicable.

**RECORDS**

- 13.0 The Training Department maintains a companywide record of all training delivered including that delivered by external bodies. The Departmental Leader is responsible for notifying the Training Department of all training undertaken by members of his/her department. Statutory retention period of training certificates: 6 years after employment.
- 13.1 Records of Risk Assessments will be maintained in accordance with Procedure SM-21
- 13.2 All completed Q042 forms are to be sent to HR admin and QHSE Team to hold on file. First Aiders are not necessarily accident book holders, the person suffering an injury at work must ensure that such accidents are reported to the appointed accident book holder, see SM-11.
- 13.3 Practising First Aider's are required to maintain either their presentation certificates or the licence style record of qualification available for viewing without prior notice to persons justified in requesting sight of such documents e.g. an auditor or a representative of the HSE or Local Authority.