

# YMCA Lakeside First Aid Risk Assessments 2019

## FIRST AID

Activity Description	Foreseeable Hazard	Who might be harmed and how?	L	S	R	Control measures	L	S	R
Office and Admin Staff functions	Unforeseeable accident incorrect use of equipment human error	10 members off office staff any unforeseen accident	2	2	4	4 members off staff first aid trained and certified access to first aid room and kit	1	1	2
Equipment and Stores staff	Tools manual handling human error unforeseeable hazard	3 members of staff accident unforeseen in the stores or working on the centre site	2	2	4	2 stores staff first aid trained and certified no lone working allowed	1	2	3
Maintenance Staff	Tools manual handling unsafe operating process human error	1 members of staff any accident use of machinery or tools on the site or in the workshop	3	2	5	First aider and equipment available possible lone working radio and mobile phone carried	2	2	4
Catering Department	Incorrect use of equipment human error	15 members of staff work place related accidents	2	2	4	First aid kit provided immediate access to trained first aiders	2	2	4
Activity Instructors	Unsafe working practices human error accident	35 Instructors providing adventure outdoor activities on and off the centre site	2	2	4	35 Instructors all first aid trained and certified all carry first aid kit	2	2	4

Key: L – Likelihood, S – Severity, R – Risk

Risk Score 1- 2 = Low 3- 4 = Medium 5- 6 = High

Reviewed by Mike Margeson Chief Instructor December 2016

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## First Aid Ratios and Provision provided for employees and visitors

It is recognized that we have a large site up 300 visitors on site and 60 – 70 staff during our most busy summer periods.

A risk assessment shows that we have situations of low level of hazards to our office staff and areas of medium and even high level hazards for maintenance staff with the use of some tools and plant and work at height, additionally some Activity Instruction for example work at height and remote work in the mountains, is quite clearly in the high risk category.

Health and Safety (first aid) regulations 1981 state for high risk 1: 50 ratios of trained certified first aid holders. We therefore have a much higher ratio of trained and certified staff than the minimum recommendations with between 30 and 40 first aid qualified staff employed.

It is also noted that we are in a remote location and 20 minutes from ambulance arrival at the site on average. We also have through our local ambulance service located AED defibrillators in both our reception areas.

Medications, under 18s fall under the locus Parent us arrangements where by visiting teachers leaders are responsible for administration of any medicines. All groups are required to bring with them individual students medical forms so that our course director and instructional team can be fully briefed and prepared for any medical issues. The arrangements for unaccompanied children on our summer Day Camp Programmes are different. The parents on booking fill in medical forms and these details are checked each week by Day Camp coordinators and group leader and instructors with each group. All Instructors are first aid qualified and our Day Camp leaders receive a one day first aid training course as part of their induction prior to the start of day camps.

Our two first aid rooms (one at each of our main residential areas) are also well stocked and we also have one a medical bag, stretcher, vacuum mattress and casualty bag to safely bring a casualty from any remote part of the site to an awaiting ambulance or the first aid room.

First aid records are kept of all accidents requiring first aid, whether staff or visitors on our courses. These are recorded and reviewed. Over the last five years numbers of recorded accidents have been remarkably consistent at around 300 incidents recorded a year.

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The vast majority of these are very minor resulting in a short delay for treatment before continuing with the activity. These occur across all activities but are especially prevalent in the unsupervised play of children. We consider these to be the usual bumps and scrapes that every child will experience when growing up and that the benefits of the play far outweigh the risks of the harm caused. About a half a dozen a year are more significant and result in a RIDDOR report being made. These are most often associated with trips and falls that cannot be guarded against (play type activities) but also during adventurous activities. They have been typically ankle or arm fractures.

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