

11. FIRST AID, ACCIDENTS AND NEAR-MISS REPORTING

11.1.1 Contents:

| | |
|--|---------|
| Aim | 11.2.1 |
| Introduction | 11.3.1 |
| Policy | 11.4.1 |
| Legal obligations | 11.5.1 |
| Notification of accidents, occupational ill health, dangerous occurrences or incidents | 11.6.1 |
| On-line accident reporting | 11.7.1 |
| Notification of “near-miss” occurrences | 11.8.1 |
| Accident investigation | 11.9.1 |
| Reporting occupational ill-health | 11.10.1 |
| Genetically modified organisms | 11.11.1 |
| First aid | 11.12.1 |
| Counselling and mental health | 11.13.1 |
| Needle-stick ad medical/laboratory sharps injuries | 11.14.1 |
| Training | 11.15.1 |
| Further information | 11.16.1 |
| ANNEXES | |
| Template for first aid signage | Annex A |

11.2.1 Aim: To describe arrangements for first aid in University buildings on the Edinburgh bioQuarter campus, and explain the importance of accident and “near miss” reporting and how to submit an accident report using the on-line reporting system.

11.3.1 Introduction: With the best will in the world, despite comprehensive pre-training, compliance with safe working practices, appropriate supervision, the application of preventative mechanisms, and due diligence by both workers and their managers, accidents do occasionally happen. It is very important that on each and every occasion, the circumstances and consequences are reported so that management may properly study these, learn from the events and, if appropriate, take steps to prevent a recurrence. “Near miss” occurrences need to be reported too in order that the possibility of a recurrence, possibly with more serious consequences, might be prevented.

11.3.2 Procedures for management of casualties are summarised in the Emergency Actions checklist to be found at the front of this Manual.

11.4.1 Policy: All accidents and near-miss occurrences *must* be reported. In some cases, this may be a statutory obligation; but, even where it is not, the future safety of staff, students and visitors stands to be enhanced by reviewing the circumstances giving rise to such events and by aiming to ensure that they do not occur again.

11.5.1 Legal Obligations: All accidents, instances of occupational ill health, fires and dangerous occurrences *must* be reported to the University’s Health & Safety Department, as soon as possible after the occurrence, and in any case within seven days, so that the requirements of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations may be met. No accident should be considered too trivial to

report. In some cases, the University's centrally-based Health & Safety Department may be obliged to inform the Health & Safety Executive of the circumstances and consequences of an occurrence.

11.6.1 Notification of Accidents, Occupational Ill Health, Dangerous Occurrences or Incidents: If you have an accident or "near-miss", or if you have a case of suspected occupational ill-health, you *must* tell your School/Area Safety Adviser and/or your immediate line manager as soon as possible. This will enable management to take any necessary remedial action as appropriate to ensure the accident does not re-occur. (*e.g.* revise procedures, repair equipment, *etc.*)

11.7.1 On-line Accident Reporting: A form is available to complete on-line from the University's Health & Safety Department web campus at:

<https://www.ed.ac.uk/health-safety/accident-reporting>

11.7.2 Alternatively use may be made of a QR code to call-up the reporting system:



11.7.3 Please complete the form as fully and as accurately as possible. You can use the link above to quickly access the relevant section(s) of the accident/incident form. The on-line form can either be completed by the injured person or someone acting on their behalf.

11.7.4 Please provide a clear and comprehensive account of what happened and how? This may include details of:

- The circumstances that led to the accident/incident;
- What the injured person was doing at the time;
- Any hazards involved (chemicals, materials, physical, *etc.*);
- Who else was involved;
- What personal protective equipment was being worn (where applicable);
- The injury;
- Any immediate first aid treatment given;
- Any emergency services that were in attendance;

- If the injured person was taken to hospital immediately following the accident; or attended hospital at a later date;
- Treatment received at hospital; and
- Action taken by the School/Department *etc* to prevent a reoccurrence.

11.7.5 Reports may, under certain circumstances, be used as evidence in dealing with claims arising out of an accident, incident or case of occupational ill health (see Paragraph 11.10.1). Care should, therefore, be taken to ensure that entries are as complete and accurate as possible.

11.7.6 The University's on-line reporting system does not provide for a copy of the report to be sent automatically to the injured person's supervisor or the local health and safety organisation for Edinburgh bioQuarter buildings. The person reporting an injury, dangerous occurrence or "near miss" is, therefore, strongly encouraged to copy the report to his or her supervisor and to the Health and Safety Manager for UofE buildings on the EbQ campus. Only by doing so will line managers be made aware in each and every case of occurrences that may require to be investigated and considered, with the aim of ensuring that there is no repetition with the potential to affect another person.

11.8.1 Notification of "Near-Miss" Occurrences: If you personally experience or observe a near-miss incident, the same form referred to in the previous paragraph should be completed. Gathering near-miss information is essential, as this may direct remedial action that will serve to prevent an actual injury or loss at some future time.

11.9.1 Accident Investigation: Where an injury or serious loss has occurred, and in some near-miss situations, laboratory managers and health and safety specialists may convene to review the circumstances, examine evidence, and possibly take statements from people involved, with a view to compiling a report containing recommendations geared to minimising the potential for a reoccurrence.

11.10.1 Reporting Occupational Ill-Health: Cases of confirmed or suspected occupational ill health must be reported to the Occupational Health Unit. A form is available to complete on-line from the University's Health & Safety Department web campus at:

<https://www.ed.ac.uk/health-safety/occupational-health/ill-health-accident-reporting/ill-health-reporting>

11.11.1 Genetically Modified Micro-Organisms: There is an explicit requirement in the GM (Contained Use) Regulations to *immediately* report to the Health & Safety Executive any accident or incident involving Class 2 or Class 3 GMMOs (including genetically modified micro-organisms). Researchers are not however expected, indeed should not, contact the Health and Safety Executive themselves, as any notifications required to the HSE should always be done by the University's Health and Safety Department; clearly this requires that the University's Health and Safety Department be informed as quickly as possible after an accident or incident.

11.11.2 An accident is defined as any incident involving a significant or unintended release (outside of primary containment) of a GMMO which presents a hazard, immediate or delayed, direct or indirect, to either human health and safety, or the environment. This therefore includes any occasion when a person is exposed, or

potentially exposed, to a Class 2 or 3 GMMO, or a significant spillage of a Class 2 or 3 GMMO within the lab.

11.11.3 The immediate priority following any accident or incident is appropriate first aid treatment and, where necessary, additional medical treatment. The area should also be made safe and decontaminated as necessary to prevent any further exposures. Following these actions the University's Health & Safety Department should be contacted by telephone as soon as possible. To do so, phone the Biological Safety Adviser on 0131 651 4245; or, alternatively, phone the Director on 0131 651 4257 or the Deputy Director on 0131 657 4258, informing the Health & Safety Department of the incident, in order that an immediate notification can be phoned through to the HSE should this be required. Completion of an electronic University accident report should not be regarded as an alternative to phoning as the reporting system is not monitored at all times, although a written report should also be prepared and sent as soon as possible after the occurrence.

11.11.4 In all cases where an individual may have been exposed to a Class 2 or 3 GMMO, irrespective of the availability of immediate prophylactic treatment or likelihood of infection, the person must make contact with the Royal Infirmary's Accident & Emergency Department and obtain independent medical advice on immediate action to be taken and for any follow-up. Whilst researchers may instinctively seek advice from colleagues with specialist expertise in the particular organism involved, this should not be regarded as an alternative to contacting the NHS.

11.11.5 See Paragraph 11.13.1 *et seq* for specific guidance relating to injuries involving medical and laboratory sharps such as hypodermic needles and microtome blades.

11.11.6 Details of the accident notification requirements outlined above are described in guidance at:

<https://www.ed.ac.uk/health-safety/biosafety/accident-reporting>

11.12.1 First Aid: First aid is the skilled provision of treatment for a casualty or any person suddenly taken ill, using the facilities and materials available, to save life and prevent deterioration in the condition of that person while awaiting the arrival of qualified medical assistance (typically an ambulance).

11.12.2 The proximity of University buildings on the Edinburgh bioQuarter campus to the Royal Infirmary's Accident & Emergency Department, as well as the presence of numerous qualified medical and nursing personnel working within the buildings, will be of considerable benefit in the event of injuries having been sustained.

11.12.3 Injuries tending towards the trivial end of the spectrum should be well within the capabilities of trained First Aiders normally based within the buildings, using the equipment that is available.

11.12.4 The most serious emergencies may rely on people trained in cardio-pulmonary resuscitation techniques; in addition to the complement of comprehensively trained First Aiders available within our buildings, there are numbers of Emergency First Aiders who have undergone shorter duration training, but which has focussed on teaching relevant skills.

11.12.5 Automatic external defibrillators are available in University buildings on the Edinburgh bioQuarter campus (usually within Reception areas), and several members of staff have received training in their correct use.

11.12.6 Injuries falling between these two extremes may be managed best by containing the injury and taking the casualty directly to the Royal Infirmary's Accident & Emergency Department. Wheelchairs are available in the QMRI and CRM buildings, and patient transport chairs can be taken from the Infirmary's main atrium close to the ground floor corridor linking the Infirmary with the Chancellor's Building.

11.12.7 Please note that while dialling "2222" is correct for fire emergencies affecting any building on the campus (see Section 5 – Fire Procedures – of this Manual), doing so will not result in a "crash team" (or, in fact, any medical assistance) being deployed from the Infirmary into one of the University buildings. To summon help in the event of a first aid emergency, dial (9)999 from any extension (or 999 directly from a mobile telephone) and summon a paramedic ambulance. Report the precise location of the casualty, and send someone to Reception to guide attending Paramedics to the casualty.

11.12.8 Where it is feasible to do so, poison victims should be taken immediately to the Royal Infirmary's Accident & Emergency Department. A report of the circumstances and substances involved should also be made to medical staff within the Infirmary, and a copy of all relevant material safety data sheets and COSHH risk assessments should be sent together with the casualty.

11.12.9 In some very specific circumstances, the conventionally prescribed first aid response to exposure to certain chemical substances may be supplemented by administration of specific antidotes, the need for which should have been directed by preparation (in advance of commencement the work, or even before the first introduction into our buildings of the substances concerned) of a suitable and sufficient risk assessment. Possible examples may include the application of calcium gluconate gel available to skin burns resulting from contact with hydrogen fluoride, and use of polyethylene glycol for management of skin burns resulting from contact with phenol. Where such antidotes and specific treatments may be required, first aiders in the areas where particularly hazardous chemicals are being use, should be pre-briefed regarding how these treatments are to be applied, and the use of these prior to the arrival of medical support should be communicated to attending paramedics and doctors.

11.12.10 The Health & Safety (First Aid) Regulations 1981 (as amended) sets out various requirements for the provision of suitably trained First Aiders in the workplace. Appendix 6 to this Manual contains a full and regularly updated list of people trained and currently qualified to act as First Aiders and Emergency First Aiders (formerly known as Appointed Persons), and people who have received training in the correct use of a defibrillator. On-line access to Appendix 6 may be restricted on some computer networks for purposes of maintaining the security of personal details. Hard-copy of the lists is available upon request from the H&S Manager for UofE buildings on the EbQ campus.

11.12.11 Annex A to this Section represents a template for use as signage within all areas, indicating the names and contact details of First Aiders and Appointed Persons, and the location of first aid boxes.

11.12.12 Report *all* accidents (*and* all near-miss incidents), whether dictating administration of first aid or not, using the on-line available at the University's Health & Safety Department web site:

<https://www.ed.ac.uk/health-safety/accident-reporting>

11.13.1 Counselling and Mental Health: In respect of potential needs for an acute response to mental health emergencies and/or counselling services, information highlighted in the following paragraphs may prove helpful.

11.13.2 The first port of call for any student struggling with their mental health/wellbeing is the Student Support team. Information concerning student counselling services is contained within:

<https://www.ed.ac.uk/student-counselling>

11.13.3 Staff members struggling with their mental health/wellbeing should first speak to their line manager or supervisor, their HR team or the Head of their School/Deanery - whichever they feel most comfortable with. If you are looking for further support, the University's HR - Health and Wellbeing and Occupational Health sites describes information and services available to staff across the University community. Information concerning staff counselling services is contained within:

<https://www.ed.ac.uk/counselling-services/staff>

11.13.4 Several members of staff have completed the training course to become Mental Health First Aiders (MHFAs). The aim of this training is to look at ways to help in the event that anyone develops a mental health problem, experiences a worsening of an existing mental health problem, or is in a mental health crisis, until appropriate professional help is received or the crisis resolves. MHFAs are there to listen, to understand, and to signpost where appropriate. Reaching out to any MHFA is strictly confidential; and if, for any reason, a MHFA is required to share your information, it would not be done without your permission.

11.13.5 The University is committed to promoting a positive culture in which all members of the University community treat each other with dignity and respect, and where bullying, harassment and discrimination are known to be unacceptable.

11.13.6 To support this commitment, the University also provides a network of staff known as Dignity and Respect Advisors (DRAs) who are trained to work with staff who feel they have been subject to, or have been accused of bullying, harassment, or discrimination.

11.13.7 Contact telephone numbers for MFHAs and DRAs can be obtained from Reception teams within each of our buildings.

11.14.1 Needlestick and Laboratory/Medical Sharps Injuries: In the event of sustaining an accident resulting in a wound:

- Immediately and liberally, wash the wound using soap and water but without scrubbing;
- Gently encourage free bleeding of puncture wounds, but do not suck the wound;

- Dry the area, and apply a waterproof dressing; and
- Do not use antiseptics and skin washes - There is no evidence of their efficacy, and their effect on local biological defences is unknown.

11.14.2 In the event of contamination of skin, conjunctivae or mucous membranes:

- Immediately and liberally irrigate the area with water; and
- In the case of eye contamination, irrigate both eyes (sterile eye wash preferred) before and after removing any contact lenses.

11.14.3 It is important that medical personnel assess the possibility that prophylactic treatment or health surveillance may be necessary; this will be done on a case-by-case basis. The casualty should, therefore, attend the Accident and Emergency Department/Minor Injuries Unit of the local hospital as soon as possible after sustaining a needle-stick injury, and **A copy of all relevant COSHH risk assessments should be sent together with the casualty.**

11.14.4 It may be necessary to inform/remind attending medical staff within the Infirmary that the injury was sustained within Medical School, and that there is a pre-existing agreement that NHS Occupational Health support will be provided also to University workers.

11.14.5 It must be clearly understood that the University's own Occupational Health Unit is not the correct first-line responder for injuries involving medical and laboratory sharps, not least because that is not a 24/7 service. Neither should the injured person's General Medical Practitioner be contacted first, since it is important that medical attention be sought as a matter of some immediacy.

11.14.6 All injuries involving medical and laboratory sharps should also be reported using the on-line form referenced in Paragraph 11.12.11.

11.14.7 These points will be made also during initial induction training and subsequent refresher/continuation training.

11.14.8 Further information on accident procedures related to needle-stick injuries can be accessed at:

<https://www.ed.ac.uk/health-safety/guidance/laboratories-workshops/sharps-and-glass-infection-risk>

11.14.9 An on-line training presentation related to needle-stick injury avoidance is contained within:

<https://www.ed.ac.uk/medicine-vet-medicine/staff-and-current-students/cmvm-health-and-safety/little-france/training-presentations>

11.15.1 Training: First aid training courses are available through the University. Further information may be found at:

<https://www.ed.ac.uk/health-safety/training/first-aid>

1.16.1 Further information: General information on procedures for accident reporting appears on the University's Health and Safety web pages:

<https://www.ed.ac.uk/health-safety/accident-reporting>

11.16.2 Further information regarding first aid is available at:

<https://www.ed.ac.uk/health-safety/guidance/workplaces-general/first-aid>

Template for First Aid Signage



The image shows a template for a first aid sign. It features a green background with a white cross in the center. Below the cross, the words "FIRST AID" are written in white capital letters. The sign contains several white rectangular boxes for text entry, including instructions on how to call a first aider, an emergency first aider, and an ambulance, as well as information on where to find the nearest first aid box and how to report accidents.

FIRST AID

In the event of illness or injury, call a First Aider

**INSERT NAME(S), OFFICE/LAB LOCATION,
AND TELEPHONE NUMBER(S)**

or an Emergency First Aider

**INSERT NAME(S), OFFICE/LAB LOCATION,
AND TELEPHONE NUMBER(S)**

The nearest First Aid box is located at:

INSERT LOCATION

To call an Ambulance, dial (9)999 from any extension at a safe location and report *the precise location* of the casualty (**INSERT BUILDING NAME AND FULL POSTAL ADDRESS**), and send someone to Reception to guide attending Paramedics to the casualty

Report all accidents using the on-line form at
<http://www.ed.ac.uk/schools-departments/health-safety/accident-reporting/reporting-form/form>

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