

FIRST AID POLICY

March 2026

The Health and Safety (First-Aid) Regulations 1981 apply to all workplaces, including training facilities. This policy establishes the minimum standard that each branch of the Dry Stone Walling Association of Great Britain (DSWA) must follow to ensure suitable first aid arrangements are in place. Its aim is to ensure that employees, volunteers, trainees, and visitors receive prompt and appropriate care if they are injured or become ill while on site or taking part in organisational activities.

Aim

First aid is the immediate care provided to someone who has been injured or has become ill. Its purpose is to preserve life, prevent the condition from worsening, and provide reassurance and support until professional medical assistance can be obtained.

Under the Health and Safety (First Aid) Regulations 1981 (amended 2013), employers are legally required to make suitable arrangements to provide first aid to employees who are injured or taken ill at work. This includes ensuring there are enough appropriately trained first aiders, along with suitable facilities and equipment to deal with workplace accidents, injuries, and illnesses. While the regulations do not extend to non-employees, the Health and Safety Executive (HSE) strongly recommends that members of the public are considered when carrying out first aid needs assessments.

Accidents and incidents can occur at any time, so first aid provision must be available whenever work activities are taking place.

What is considered “adequate and appropriate” first aid provision will depend on the nature of the work being carried out and the level of risk involved. Risk assessments should therefore be undertaken to determine the level of first aid cover required, taking into account the hazards present and the working arrangements.

All walling sites used by the DSWA, including branches, must have a current, site-specific risk assessment in place, and first aid provision should be included as part of that assessment.

First Aid Risk Assessment

The risk assessment should consider:

- The nature of the work being carried out (branch activities can vary and do not always include walling).
- Hazards.
- Size of group.
- Location and terrain.
- History of any accidents or injuries that have occurred previously. What lessons can be implemented to prevent further instances?
- How remote the site is from emergency medical services.
- The experience of Wallers.
- Any known disabilities or health conditions.
- Recording and confidentiality.

Site Risk Assessment

The site risk assessment should record:

- The location of the nearest hospital with an Accident and Emergency Department.
- The location of the nearest defibrillator.
- That a first aider must be on site at all times.
- Details of how all persons on site, whether a DSWA member or not, shall be informed of the first aid arrangements.
- The Branch should ensure there is a sufficient number of trained first aid personnel on site, based on the first aid risk assessment. Should no first aider be present, activities should be stopped, and rescheduled if possible.

The location of the hospital and defibrillator should be recorded by full postal address, 6 figure grid reference and what3words. This is to ensure that the emergency services can find the site.

First Aid Requirements

A person who wants to be considered for the role of First Aider must hold a valid and current certificate in First Aid at Work, Emergency First Aid at Work or a higher qualification.

They will:

- Provide first aid to any person injured or falling ill whilst on DSWA events.
- Check first aid box contents and expiry dates and replenish as required. Out of date items should be safely disposed of once they reach their expiry date.
- Take charge of the casualty until a satisfactory recovery is achieved, or appropriate medical personnel have taken over.
- Call the emergency Services, if needed.
- Record all actions and communications in the Accident Book.

All DSWA instructors are required to hold a valid and current first aid certificate.

That there is a sufficient number of trained first aid personnel on site, based on the risk assessment.

Each Branch must maintain an up-to-date record of its qualified First Aiders, including certification expiry dates. The DSWA Office may also maintain a central record, provided the relevant information is submitted by each Branch.

Incident Definition and Reporting

A **near miss** is an unplanned event which has the potential to cause harm but did not on this occasion.

A **reportable incident** is an incident requiring medical intervention (e.g. pharmacist, GP, hospital urgent treatment centre, clinic or dentist) or involving emergency service rescue or damage to third-party property.

National reporting: Contact the DSWA Office immediately if an incident happens. If out of hours, leave a message with your name, telephone number and the nature of the incident.

Local reporting: Get in touch with your Branch Chair as soon as possible.

Key points:

- **Do** keep calm and ask for support where needed. Don't try and handle things on your own
- **Do** keep a record of any actions and communications, including details of others who may have seen what has happened.
- **If appropriate**, take pictures of the location sensitively to help record what has happened. This will help you remember the details and assist with learning.
- **Don't** be concerned about establishing fault.
- **Do** refer all news and social media posts to the DSWA Office and seek support from the Office before talking to the media.
- **Don't** initiate contact with the news media or social media or post on social media and discourage others from doing so.
- **If you have any safeguarding concerns**, which includes adults and young people, please contact the DSWA Office.
- **Keep the records safe.** They may be used to support safety learning reviews or requested after the incident.

Issue / Revision	Date	Description/Comments	Prepared By	Checked By
Rev A	March 2026	New Policy	H Lewis	P Clayton

GUIDELINES FOR BRANCH DEFIBRILLATORS

March 2026

These guidelines focus on accessibility, regular maintenance and staff training to ensure the device is effective during a cardiac emergency. Whilst it is not a legal requirement for branches to have one, having an Automated External Defibrillator (AED) is considered best practice and highly recommended to improve survival rates.

Branches should conduct a risk assessment to determine the need for an AED before purchasing one. It should look at, but is not limited to, the following factors:

- Number of people using the site.
- Age of people using the site – adults and children.
- Nature of the activity.
- Accessibility – ideally it should not take more than 2 minutes to access.
- Storage whilst not being used at a Branch event.

If it is determined that an AED is required, the branch should inform the DSWA Office and confirm they have their own policy for the owning and usage of the defibrillator following these guidelines.

Maintenance and Safety

- Two people should be appointed as the 'guardians', responsible for regular, documented checks of the device in line with manufacturers guidelines.
- An inspection checklist should be completed to ensure the device is functional, the battery is charged and the pads are in-date.
- A reporting system should be in place so that any malfunction or usage can be reported to the designated guardians, to ensure it is back in service as soon as possible.

Training and Usage

- No training is required for use due to their design, as they provide audio and visual prompts.
- It is recommended that first aiders and instructors receive training in its use, even though it is not mandatory. It is often incorporated into the First Aid at Work or Emergency First Aid at Work courses.
- It should be clearly stated in the Branch Defibrillator Policy that anyone, whether trained or untrained, can use the AED in an emergency.

AED Legal Requirements UK: Are You Liable During Cardiac Arrest?

- There is no specific UK law forcing all businesses to have an AED, but "Duty of Care" under health and safety legislation often makes it a practical necessity.
- The Social Responsibility and Heroism (SARAH) Act 2015 provides strong legal protection for those acting in good faith during an emergency.
- Liability risks are significantly higher for *failing* to maintain a device than for actually using one to try and save a life.
- Modern AEDs are designed to prevent accidental shocks, effectively eliminating the risk of negligence claims for lay rescuers.

Post-Incident Procedure

- After use, the device data should be downloaded and the device serviced.
- Replace used pads and, if necessary, the battery immediately.

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