



Government of Nepal



## First Aid Kit Guidelines

Rural Access Programme (RAP)  
Phase 3



## Management and Distribution of First Aid Kits

March 2016



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## Abbreviations

CMS	Contract Management Specialist
DTL	District Team Leader
FAK	First Aid Kit
IoW	Inspector of Works
OM	Office Manager
NGO	Non-Government organisation
NoL	No objection Letter
RAP	Rural Access Programme
STS	Senior Technical Supervisor
SAME	Sub-asset Management Engineer
SM	Social Mobilizer
TMO	Technical and Management Office



## 1.0 Introduction:

### 1.1 First Aid

First aid is the assistance given to any person suffering a sudden injuries with care provided to preserve life, prevent the condition from worsening, and/or promote recovery. It includes initial intervention in a serious condition prior to professional medical help being available as awaiting stretcher as well as the complete treatment of minor conditions, such as applying a plaster to a cut or wound.

The key aims of first aid (It is also known as 'the three P's):

- **Preserve life:** the overriding aim of all medical care, including first aid, is to save lives and minimize the threat of death.
- **Prevent further harm:** also sometimes called prevent the condition from worsening, or danger of further injury, this covers both external factors, such as moving a patient away from any cause of harm, and applying first aid techniques to prevent worsening of the condition, such as applying pressure to stop a bleed becoming dangerous.
- **Promote recovery:** first aid also involves trying to start the recovery process from the illness or injury, and in some cases might involve completing a treatment, such as in the case of applying a plaster to a small wound.

### 1.2 First aid kit:

First aid kit is a collection of supplies and equipment for use in giving first aid, and can be put together for the purpose by an individual or organization.

#### 1.2.1 Typical contents of First Aid Kit:

- Adhesive Tape:
- Bandages: non-stick dressing gauge/gauze roller bandages for securing dressings, not necessarily sterile/ absorbent and breathable.
- Antiseptic fluid/Tincture iodine: is an antiseptic in the form of liquid can be used for cleaning and disinfecting a wound for reducing the risk of infection in abrasions or around cuts/wounds.
- Soap: use with water to clean superficial wounds once bleeding is stopped
- Handy Plast: for small cuts.
- Thermometer: for temperature record

#### 1.2.2 How to Use a First Aid Kit:

Make sure that you know how to properly use all of the items in your kit. Trained person should train others in the group to use the kit. You may be the one who needs first aid. Keep the first aid materials in a protective box. Check the kit regularly and replenish every month as required.

#### 1.2.3 Where to keep first aid kit:

- Keep the first aid kit close to the work site.
- The First Aiders should keep the kit safely.
- A first aid kit for everyday use at work site.



First aid kits can be assembled in almost any type of container, the type of container will vary depending on availability at markets. It is recommended that all kits are stored in a clean, waterproof container to keep the contents safe. Kits should also be checked regularly (once a month) by SAME/loWs of Supervision Consultant team and Social Mobilisers (SMs) and report to the Office Manager of District Technical Assistance Team (DTA) in order to proceed with replenishment if any items are damaged or are out of date or deficit.

### 1.3 First Aid Training:

First aid is generally performed by the layperson, many people trained in providing basic levels of first aid, and others willing to do so from acquired knowledge. There are many situations which may require mandatory first aid training. These are usually undertaken to fulfill the demands of the work. The first aider is also likely to be trained in dealing with cuts or injuries. They may be able to deal with the situation to maintain the condition of injured person, until the next stage of definitive care. However, to provide effective, life-saving first aid interventions requires practical training. This is especially true where it relates to potentially fatal illnesses and injuries, such as those that require to minimize risk of further injury to the patient. As with any training, it is more useful if it occurs before an actual emergency. First aid training is often available through the District Red Cross Society, if they are not well equipped there, Health Posts personnel can also deliver training. This training is most common and important for workers to perform first aid in their workplace.

- *The training organized through District Red Cross office.*
- *If Red Cross is not in position to do so, Health post can deliver training.*
- *Representatives of RBG/RMG/SBG/SMG must complete training course and equipped with First Aid box prior to start works.*
- *The first aid materials in the first aid box are provided only for treatment of minor injuries held during road construction.*
- *The duration of the first aid training course is three days as prescribed by Nepal Red Cross society.*

### 1.4 Field level Application:

Road Building Group (RBG), Road Maintenance Group (RMG), Special Building Group (SBG) and Special Maintenance Group (SMG) have to select two person (one female and one male and in case of SBG only male) from each group for first aid training. Selected representatives will go on practical first aid training delivered through District Red Cross Society. If there is no required human resources in Red Cross office in the district, required quality training will have to be organized in coordination with Health posts. Each group shall get the “First Aid Kit” distributed prior to the start of construction works. The first aid materials are provided only for treatment of minor injuries suffered during road construction and not medication. To do these SMs with the help of Office Manager should ensure the following :

- Train two persons from each groups (one female member and one male member) on first aid.
- Arrange one stretcher in each Local Road Users Committee or 12-15 groups of RBGs/ SBGs / SMGs, it depends upon distance. If health post is nearby, there is no need of stretcher.
- Arrange one “First Aid Kit” in each Group.
- Replenish the materials in first aid kit as per need.
- First Aid box should be checked once a month during construction / maintenance period by SMs in new construction districts and by SAME/loW in maintenance districts and report requirement to the Office Manager. RBG / SBG / SMG Sahajkarta shall report to SM / loW / SAME if any interim shortages arises.



**First Aid Kit Guideline**

- The responsibility to procure and distribute materials to the field lies with Office Manager in case of new construction districts and DDC with the help of DTL and OM in case of Maintenance districts.
- SMs will collect first aid materials from OM and replenish materials as required by the groups in their jurisdiction (12-15 RBGs per SM).
- Assist groups to develop a system in order to establish a “First Aid Fund” even during the season when road construction/maintenance is stopped.
- Do not store the medicines that are taken orally or injected in the first aid box.
- In case of major accidents, the SM will make arrangements for rescue and treatment.

During the time of road construction/maintenance, records of all accidents as well as the first aid treatment provided will have to be recorded. SM should raise awareness on the conditions of likely accidents and organise discussions on health and safety issues such as the use of helmets, gumboots, glasses, gloves, masks, sanitation even beyond RAP groups.

**2.0 RAP3 First Aid Kit contents:**

SN	Item	Unit	Quantity	Remarks
1	Triangular Bandage	No	5	White cotton
2	Roller Bandage	No	3	2"
3	Roller Bandage	No	3	3"
4	Roller Bandage	No	3	4"
5	Sterile gauge pad	No	5	
6	Forceps	No	1	Steel
7	Scissor (Small)	No	1	Steel
8	Hoop pin (small)	No	12	
9	Dettol	Bottle	1	50 ml
10	Soap (Dettol/Savlon)	No	1	
11	Mask	No	2	Medicated
12	Rubber gloves	No	2	Medicated
13	Towel (small)	No	1	
14	Handiplast	No	12	
15	Betnovet	Bottle	1	100ml
16	Adhesive Tape	No	1	2"
17	Crepe Bandage	Roll	2	4"
18	Note-book	No	1	Small
19	Pencil	No	1	
20	Pencil cutter	No	1	
21	Thermometer	No	1	
22	Jeevan Jal	Packet	4	For rehydration
23	First Aid box	No	1	As per need
24	Carrying Bag	No	1	To carry attendance register and First Aid box.

*(Source: Nepal Red Cross Society except # 24)*



### 3.0 Procurement and distribution of First Aid Kit:

Earlier, the First Aid Materials were procured and distributed through local NGOs and could not ensure timely replenishment of first aid materials. The distribution and regular replenishment of materials has been realized urgent need of the project. Therefore, RAP3 management has decided to procure materials on its own and distribute them through the Social Mobilisers.

To go with this new approach, RAP3 procurement guideline should be followed to expedite procurement process of first aid materials. The main responsibility lies with the Office Manager. Two sets of flow charts are shown in content no. 4 and 5 below, which defines clearly the responsibilities of all concerned staff.

#### 3.1 For New construction districts:

Two series of procurement has been planned in such a way that for one, the immediate problems can be addressed and the other for normal circumstances. Noting the immediate address of the problem, this year we need to replenish materials as per district needs, therefore, DTA with the support of Regional Logistic Office shall procure and replenish materials based on list given in table above till mid July 2016. For normal circumstances, bulk procurement has been planned and DTA should submit demand list to CMS, TMO based on this years' experience by **April end** for next year's supply. The bulk procurement shall be done by Nepalgunj Office following RAP3 procurement guideline/process and distribute to the districts as per their demand. It is advisable to not procure first-aid materials for longer periods because of the possibility of becoming outdated. The SM shall be responsible and ensure that first aid boxes will neither be deficient of medicines nor be stocked with outdated stuffs.

#### 3.2 For maintenance districts:

First aid kits has been procured through DDC. SM (wherever deployed) and SAME/loW in respective districts would collect the field requirements for procurement and replenishment of FAK items and submit a complied list to the DTL. The DTL would then inform the status and requirement to the DDC. DTL and OM will be responsible for making the estimate and BoQ in order to purchase the stock through DDC. DTA however should seek NoL from TMO before signing the contract of value more than NRs. 75,000 for goods supply contract. The SM shall be responsible (loWs / SAME if no SM deployed in the district) that first aid boxes will neither be deficient of medicines nor be stocked with outdated stuffs.





### 4.0 Delivery of first aid materials in New Construction Districts:

<b>Responsibilities</b>		<b>Responsible Parties</b>
Demand Collection from the field inspection / worker demand	→	SM and RBG / SBG / SMG Sahajkarta
↓		
Compile the demand list made by field staff to be submitted to DTL	→	OM
↓		
Priorities compiled list and proceed for procurement	→	DTL and Office Manager
↓		
Send procurement list to Contract Management Specialist in TMO	→	DTL and OM via Regional Office
↓		
Make Bid Documents available to Regional Office to carry out procurement process	→	CMS-TMO
↓		
Follow RAP3 procurement guideline and procure First Aid materials	→	OM, Regional Office
↓		
Dispatch materials to the districts under DTL/OM's request , OM to issue GRN	→	OM, Regional Office
↓		
Ensure required materials are in place and dispatch materials to the site stores	→	OM, DTA
↓		
Check the First Aid kits on monthly basis and report to OM for replenishment of deficit items.	→	SM
↓		
Replenish First Aid Materials as required in First Aid kit. Ensure that the out dated materials are replaced and required items are there in the box in their areas	→	SMs
↓		
Check the First Aid kits on monthly basis and report to OM to replenish deficit items	→	SM
DTL/EO/SEDO/RE/ARE should check first aid materials during their field visit and ensure that they are stocked well in the box. OM should visit field regularly and ensure that deficit items are replenished on monthly basis.		



### 5.0 Delivery of First Aid Materials in RAP3 Maintenance districts:

Responsibilities		Responsible Parties
Demand Collection from the field inspection / worker demand	→	SM/SAME/IoWs and RBG / SBG / SMG Sahajkarta
↓		
Compile the demand list made by field staff to be submitted to DTL	→	OM
↓		
Inform DDC / DTO about the status of first aid Kit and submit procurement plan	→	DTL and Office Manager
↓		
Submit estimate, prepare bid documents and approved from DTO / DDC to carry out procurement	→	DTL ( or EO)
↓		
Follow DDC and RAP3 procurement guideline and procure First Aid materials	→	DTA, DTO / DDC
↓		
Seek NoL from RAP, TMO before signing contract for contract price > NRs 75,000.	→	DTA, DTO / DDC
↓		
Check with respect to TMO Confirmation Form, if okay issue NoL (PM's letter) from RAP, TMO before signing the contract	→	RAP, TMO
↓		
Replenish First Aid Materials as required in First Aid kit Ensure out dated materials are replaced and required items are there in the box in their areas	→	SMs/IoWs
↓		
Check the First Aid kits on monthly basis and report to OM to replenish deficit items	→	SM/SAME/IoW
DTL/EO/SEDO/RE/ARE should check first aid materials during their field visit and ensure that they are well stocked in the box. OM should visit field regularly and ensure that the deficit items are replenished on a monthly basis.		



## 6.0 The coordination with Health Posts:

District Team Leader should assess the situation of health posts and sub-health posts and their immediate requirements to support communities and RAP beneficiaries. Based on the assessment the DTL should come with a support proposal to TMO.