

Shimpling Village Hall - Emergency Procedures

This document is for guidance of village hall hirers and users in the event of an emergency. They indicate the actions to be taken, identify locations where equipment and facilities are located and outline responsibilities. They do not provide details of medical treatments.

Responsibilities

- It is the responsibility of the Village Hall Management Committee to ensure that the hall is suitably equipped for typical emergencies that could reasonably be expected to occur during normal circumstances. It is also the Village Hall Management Committee's responsibility to ensure all equipment is fully operational and complete.
- It is the responsibility of the person or group hiring the hall to nominate a responsible person to take charge, should an emergency arise. The person reserving the hall is the default actioner.
- It is the responsibility of the person hiring the facilities to ensure they are used correctly so as not to cause injury to a person or property.

General Notes

1. The hall does not have a telephone installed and there is no public telephone box near the hall.
2. The hall has Wi-Fi to enable mobile phones to be used within the hall and car parking perimeter.
3. There is a defibrillator installed outside the public house – The Bush at the eastern end of The Street Shimpling.
4. The hall is provided with a First Aid kit which is in the kitchen
5. The hall is equipped with firefighting equipment: a water extinguisher in the storeroom, a fire blanket and CO2 extinguisher in the kitchen, one water extinguisher in the main hall and one water extinguisher in the entrance lobby,
6. A plan of exits and equipment is by the fire panel in the lobby on the Management Notice board.
7. The hall is equipped with Emergency lights. If power fails, they come on automatically giving sufficient light to locate exits.
8. ALL INCIDENTS MUST BE RECORDED IN THE ACCIDENT BOOK in the kitchen or to the responsible person who if relevant will complete a Riddor form – procedure at end of section.
9. FIRE incidents must also be recorded in the Fire monitoring book in the lobby.

Type of Emergency / Actions to be taken / Comments / warnings

Minor cuts and abrasions	Use First Aid kit to treat wound	First Aid box is in the kitchen Record in accident book
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Serious injury	Use First Aid kit to treat wounds or injury. Make patient comfortable. Call Emergency Services using a mobile phone	Do not move the patient unless it is essential. Record in accident book Complete RIDDOR form
Kitchen burn or scalding	Use First Aid kit to treat wound. Make patient comfortable. Call Emergency Services using a mobile.	First Aid Box is in the Kitchen Record in accident book
Fire	Activate the fire alarm at a fire alarm call point which are near to the fire exits. Vacate the building calmly and safely by the nearest exit to the assembly point. (Notices on the exit doors and in the kitchen) Call Emergency Services using a mobile. Use fire-fighting equipment to put out a small fire if the responsible person considers it is appropriate.	Only attempt to deal with the fire if it is safe to do so. Ensure the correct type of extinguisher is used for the type of fire. Do not wait to take personal belongings. Do not re-enter the building. Report in Fire Incident book
Electrical shock	Turn off power at the mains socket or fuse box located in the Lobby. After power has been switched off call emergency services using a mobile phone. Make victim comfortable.	Do not touch victim directly until power has been switched off Report in accident book
Injury involving structural damage to the hall	Vacate the building to the assembly point. Take First Aid kit and treat any injuries as indicated above. Call Emergency Services using a mobile.	Do not re-enter the building. Report in accident book
Medical emergency	Make patient comfortable. Call Emergency Services using a mobile.	Report in accident book

RIDDOR

“The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013, often known by the acronym RIDDOR, is a 2013 statutory instrument of the Parliament of the United Kingdom. It regulates the statutory obligation to report deaths, injuries, diseases and “dangerous occurrences”, including near misses, that take place at work or in connection with work.”

Although the village hall is not a place of work, it is considered good practice to report any injuries, or dangerous occurrences occur within the village hall, surrounding land / car park. For most types of incidents, including:

- accidents resulting in the death of any person
- accidents resulting in specified injuries to workers
- non-fatal accidents requiring hospital treatment to non-workers
- dangerous occurrences

the responsible person must notify the enforcing authority without delay, in accordance with the reporting procedure (Schedule 1). This is most easily done by [reporting online](#). Alternatively, for fatal accidents or accidents resulting in specified injuries to workers **only**, you can phone 0345 300 9923.

NB: A report must be received within 10 days of the incident.

Reportable injuries

The following types of injury must be reported under RIDDOR.

The death of any person

With the exception of suicides, the death of any person must be reported if it resulted from a work-related accident.

If a person suffers a reportable work-related injury and dies due to that injury within one year (365 days), this must be reported as a work-related fatality.

There is no requirement to report the death of a self-employed person when it occurs in premises where they are the sole owner or occupier.

Specified, reportable injuries to workers

Regulation 4 of RIDDOR lists ‘specified injuries’ which must be reported:

- fractures (other than to fingers, thumbs, and toes)
- amputation of an arm, hand, finger, thumb, leg, foot or toe
- any injury likely to cause permanent blinding or reduction in sight in one or both eyes
- any crush injury to the head or torso causing damage to the brain or internal organs in the chest or abdomen
- serious burns (including scalding) which:
 - cover more than 10% of the body
 - cause significant damage to the eyes, respiratory system, or other vital organs
- any scalping requiring hospital treatment
- any loss of consciousness caused by head injury or asphyxia
- any other injury arising from working in an enclosed space which:
 - leads to hypothermia or heat-induced illness
 - requires resuscitation or admittance to hospital for more than 24 hours