



## MEDISOLVE

Medical Solutions - in a bag - "The Grab Bag"

Taking First Aid Beyond Compliance  
Preparing the Way for the Arrival of the Professionals  
Providing Genuine Response Capabilities

Working Together - Responding Faster - Safeguarding Lives - Everywhere

### Introduction

Investors, employees and the public rely upon and to a certain extent, take for granted that lessons have been learned from previous natural disasters, serious incidents and terrorist attacks.

They assume preparations will have been made and planned for in advance of certain foreseeable events occurring. In this regard this means that the emergency services and large public and private organisations will be equipped and ready to respond professionally so as to assist survivors and minimise the risk of further injury or death occurring.

This is very much a part of the daily business of the emergency services known as *Category 1 Responders*. By statute law they are required to have plans in place covering a number of major incident response scenarios.

Other organisations such as the public utilities (water, gas, electric, telecommunications etc.) and the public transport organisations (all known as *Category 2 Responders*), are not mandated by statute to have such plans in place. However, there is a very clear expectation by the Category 1 Responders that in order for their plans to be fully effective, then the Category 2 Responders will, none-the-less, have planned ahead and will be ready to respond to incidents which can be readily foreseen, in a manner which will mutually support the emergency services at the site of an incident.

### Developing Response Capabilities - Category 3

Through the deployment of Grab-Bags and by encouraging its clients to develop mutually supporting networks of emergency aid, MediSolve is adding to our collective response capability. MediSolve has formed a network of "Category 3 Responders" with businesses to better serve their local communities and support the emergency services.

## Justification and the Legal Requirement

Many companies face industry specific risks. Nevertheless, organisations such as high street retailers, landlords of multi-tenanted buildings, hoteliers, airports and other land-based mass transport companies have one thing in common - they all operate in an environment where there is an ever-changing population mix.

With many thousands of people travelling through these businesses every day, the law demands that such companies make “adequate” provision for “the safety and security” of their customers, in addition to statutory safety obligations relating to their own employees.

## The Reality

Where there is a continuous and ever-changing flow of people, Emergency Planners must take into account that very few people in their company will be experienced in knowing what to do in an emergency. The professional emergency services will respond rapidly when called, but until their arrival the reality is that customers, the general public and the majority of permanent staff will need to rely upon a small number of internally trained people with very basic equipment to come to their aid in the first instance.

In order to comply with the law it is clear that when it comes to purchasing First Aid equipment, many organisations merely follow the HSE guidelines. This is not wrong - they are complying with what are referred to as ‘adequate’ supplies. In doing so, expense is kept to a minimum and this shows a better return for investors in their company. But what is it that being simply compliant actually buys and what is the level of its real usefulness to those who may need it?

Inside an “off the shelf” - 50-person HSE compliant First Aid kit will typically be:

60 washproof plasters;

16 dressings;

6 eye pads;

8 triangular bandages;

3 pairs of vinyl gloves;

20 antiseptic wipes;

12 safety pins; and

1 First Aid leaflet

## The Likely Situation

Injuries that result in severe loss of blood are likely to use all of the dressings and bandages in a 50-person HSE compliant First Aid kit on just one or two casualties. With multiple casualties, multiple incidents and traffic chaos hindering the speed with which the emergency services can arrive at the scenes, is it acceptable that the First Aid kit provision is merely 'adequate'?

Enhancing that 'adequacy' will not only enable organisations to better cope with any demands of this nature from an internal perspective but it will also provide for a capability to mutually support the emergency services via the pooling of resources during the more significant events.

## Terrorist Ingenuity

Recent operations to defeat attempts by terrorists to mount attacks on airports, mid-air attacks and plans for attacks on our railways and underground systems show that the likelihood of such an event as occurred in July 2005 can all too easily happen again.

Terrorists have recognised the open-goal offered by air and rail terminal buildings and services. At any time we can see thousands of un-inspected baggage items lying around or being carried about at will. It does not take much imagination to see the ease with which quite large explosive devices could be brought into our airports - train stations and other transport hubs- without the need to pass any security checks - and then be simultaneously detonated.

Our complex rail network, public transport systems and the businesses operating within them make them a 'target rich' environment and the openness of our stations make them fill the terrorist target selection criteria perfectly.

Terrorist attacks can affect not just the target itself, but can also cause collateral damage to adjacent buildings and people within and around them, thus extending the consequential impact of the event itself.

## Police and Emergency Services Response

How the police and other emergency services would react to an attack or the threat of an attack was revealed during the 7 July bombings in London. Their response reflected the implementation of an existing plan, as well as *ad hoc* decision making by senior commanders reacting to often confusing and complex information from a wide and diverse range of sources.

The police post-incident analysis shows that the 'paralysis principle' of halting road, rail and even pedestrian movement, as was implemented in London that day, via the use of cordons, road blocks and other forms of area access denial at the scenes of the attacks or threats, will remain a key first line response strategy for future incidents.

The application of such a response in a major city or to a part of our transport system - an obvious target for any terrorist group seeking either mass casualties, maximum disruption and maximum publicity - would, given the nature of the transport and communications links, lead to an effective lock-down on any form of coherent movement within much of the surrounding area for the duration of the response and rescue phases of the emergency at least.

## The Problem

The London Assembly Report on the 7 July bombings stated that *very little was available by way of local First Aid resources*. If the law requires businesses to provide 'adequate' First Aid facilities for employees and given that the bombings took place in the vicinity of numerous businesses, why then was there a lack of available First Aid equipment from within those businesses?

An evaluation of the events of 7 July 2005 by MediSolve led us to conclude the following:

- Many of the First Aid supplies we found were in cabinets, firmly fixed to walls and were left behind during emergency evacuations;
- First Aid supplies came in a variety of shapes, sizes and colours, but more worryingly, the contents were less than 'adequate' and not up-to-date;
- Most First Aid kits catered for simple cuts and grazes, not extreme situations;
- Unlike fire extinguishers, First Aid equipment wasn't visible and people were not familiar with its location;
- There was no local co-ordination of effort and no mutually supporting network of emergency supplies, not only from building to building, but not even between tenancies within the same building;
- Many organisations relied solely on the efforts of others;
- Many of those charged with the responsibility for the procurement of First Aid equipment had little or no knowledge or experience in First Aid matters.

A question needs to be asked: are we taking it too literally when interpreting HSE regulations based on *“Health and Safety is about preventing people from being harmed or becoming ill through work”*. Are we omitting other impact factors?

How do we interpret for instance, *“The employer should therefore ensure that an employee who is injured or taken ill at work receives immediate attention”*? - both the foregoing quotes are from HSE Regulations around Health and Safety at Work. Are we relying solely on the efforts of others? e.g. the Ambulance Services, for if we are, then we have clearly failed to take into consideration that on 7 July, the emergency services themselves had great difficulty getting to the scenes of the explosions because of traffic congestion hindering their progress.

The simple question is *“have we carefully considered the probability of an attack and all of its consequential effects on both employees - customers and investors”*?

First Aid capabilities therefore, need to refocus on the ‘consequential effects’ of a crisis event based upon all the information at our disposal and not just on ‘normal working conditions’.

## The Solution

During late 2005 and into 2006 MediSolve worked with British Transport Police (BTP) to evaluate their existing First Aid capability and capacity, integrity and replenishment practices.

The BTP already had, however, an excellent fatality response haversack, available and maintained at every police station and within most uniform patrol vehicles, providing specialist equipment that allowed them to deal with fatal incidents on site quickly, effectively and professionally, in advance of other services arriving at the scene with appropriate equipment.

MediSolve were able to provide a complementary set of extensive First Aid equipment to deal with persons who have suffered injuries from whatever causes and survivors of larger scale incidents. This equipment, in variety of sizes and content, is packed in bright orange backpacks known as ‘Grab-Bags™’. The BTP now have in excess of 500 MediSolve Grab-Bags deployed across the UK.

Grab-Bags are highly visible, portable and are packed with essential First Aid supplies based on extensive research and advice from senior paramedics and our own knowledge base. In the event of a terrorist attack or other major incident, Grab-Bags can be quickly ‘grabbed’ from a convenient location within a building, office (or vehicle perhaps) and taken to a scene so as to be readily available for use or in mutual support of other professional services (even for use by them where equipment replenishment fails to meet needs at the site).

Grab-Bags come in a variety of sizes according to needs, environment, risk and budget.

Moving away from the standard and very basic HSE compliant First Aid kits to the Grab-Bag will enable organisations to have a more positive impact in terms of their readiness and genuine response capability and will more than meet stakeholder and shareholder expectations.

## Conclusions

Responsibilities for 'care' extend beyond that of employees alone and the Grab-Bag will extend the capacity to cope with the consequences of incidents such as those that took place on 7 July 2005.

Grab-Bags are extensively used by BTP, Fire and Rescue Services, Hotel and Restaurant Chains, Borough Councils, Schools and a wide range of commercial organisations.

The London Assembly Report on the 7 July bombings comments that First Aid wasn't available locally, thus creating an expectation that organisations will respond positively to that comment and take remedial action.

Grab-Bags will provide a genuine response capability and provide mutual support to others.

## Recommendations

It is recommended that a pragmatic evaluation of existing capability and capacity for First Aid provision takes place in terms of:

What equipment is currently available and where;

Its effectiveness and usefulness beyond attending to minor cuts and abrasions;

Taking into account employee and public needs and investor expectations in the event of a major incident;

Current ability to offer any meaningful mutual support to the emergency services at times when they and their equipment will be fully stretched.

That consideration is given to inviting representatives from MediSolve to present their range of innovative medical solutions.

For further information please visit: [www.medi-solve.com](http://www.medi-solve.com)

Or contact us on + 44 (0) 20 8446 9139 a member of our team will answer any questions you may have.

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