First aid at work
The Health and Safety (First-Aid) Regulations 1981
Approved Code of Practice and guidance

This is a free-to-download, web-friendly version of L74 (Second edition, published 2009). This version has been adapted for online use from HSE's current printed version.

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The Health and Safety (First-Aid) Regulations 1981 apply to all workplaces in Great Britain, including those with less than five employees, and to the self employed. This Approved Code of Practice (ACOP) and guidance is aimed at all industries, although guidance on first aid in mines, diving and offshore is given in separate publications.

It sets out the aspects of first aid that employers need to address, offering practical advice on what they need to do, and aims to help employers understand and comply with the Regulations.

This second edition provides details of a new training regime for first-aiders in the workplace. It has been revised to give employers greater flexibility in determining their first-aid provision and to recommend annual refresher training for first-aiders to help maintain their skills.
Approved Code of Practice

This Code has been approved by the Health and Safety Commission, with the consent of the Secretary of State. It gives practical advice on how to comply with the law. If you follow the advice you will be doing enough to comply with the law in respect of those specific matters on which the Code gives advice. You may use alternative methods to those set out in the Code in order to comply with the law.

The Code of Practice in this book was approved in 1997.

Guidance

However, the Code has a special legal status. If you are prosecuted for breach of health and safety law, and it is proved that you did not follow the relevant provisions of the Code, you will need to show that you have complied with the law in some other way or a Court will find you at fault.

This guidance is issued by the Health and Safety Executive. Following the guidance is not compulsory and you are free to take other action. But if you do follow the guidance you will normally be doing enough to comply with the law. Health and safety inspectors seek to secure compliance with the law and may refer to this guidance as illustrating good practice.
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Notice of Approval

By virtue of section 16(4) of the Health and Safety at Work etc Act 1974 and with the consent of the Secretary of State for the Environment, the Health and Safety Commission has on 29 January 1997 approved the revised Code of Practice entitled *First Aid at Work*.

The revised Approved Code of Practice gives practical guidance with respect to the Health and Safety (First-Aid) Regulations 1981 (SI 1981 No 917).

The revised Approved Code of Practice comes into effect on 14 March 1997 and on that date the 1990 edition of the Code of Practice shall cease to have effect.

Signed

T A GATES  
Secretary to the Health and Safety Commission  
29 January 1997

The Health and Safety Commission (HSC) and the Health and Safety Executive (HSE) merged on 1 April 2008 to form a single national regulatory body. From that date, the Health and Safety Executive became responsible for approving Codes of Practice, with the consent of the Secretary of State.
Introduction

1. The Health and Safety (First-Aid) Regulations 1981 set out the essential aspects of first aid that employers have to address. This publication will help employers to understand and comply with the Regulations. It offers practical advice on what employers need to do. Employers may also find it useful to look at HSE’s ‘First aid at work’ website (see ‘Further information’). Practical guidance on first aid in mines is given in a separate publication (see ‘Further reading’). These Regulations apply to all workplaces, including those with less than five employees, and to the self-employed.

2. This publication contains the Regulations, Approved Code of Practice and guidance. The regulations are shown in italics, the Code of Practice is shown in bold, and the guidance on regulations is in plain text.

Regulation 1 Citation and commencement

These Regulations may be cited as the Health and Safety (First-Aid) Regulations 1981 and shall come into operation on 1st July 1982.

Regulation 2 Interpretation

(1) In these Regulations, unless the context otherwise requires –

“first-aid” means –

(a) in cases where a person will need help from a medical practitioner or nurse, treatment for the purpose of preserving life and minimising the consequences of injury and illness until such help is obtained, and
(b) treatment of minor injuries which would otherwise receive no treatment or which do not need treatment by a medical practitioner or nurse;

“mine” means a mine within the meaning of Section 180 of the Mines and Quarries Act 1954.

(2) In these Regulations, unless the context otherwise requires, any reference to –

(a) a numbered Regulation or Schedule is a reference to the Regulation of, or Schedule to, these Regulations bearing that number;
(b) a numbered paragraph is a reference to the paragraph bearing that number in the Regulation in which the reference appears.

(a) 1954 c.70; relevant amending instrument is SI 1974/2013.

Guidance

3. Employers have a legal duty to make arrangements to ensure their employees receive immediate attention if they are injured or taken ill at work. It doesn’t matter whether the injury or illness is caused by the work they do. What is important is that they receive immediate attention and that an ambulance is called in serious cases. First aid can save lives and prevent minor injuries becoming major ones. First aid at work covers the arrangements that need to be made to manage injuries or illness suffered at work. The Regulations do not prevent staff, who are specially trained, from taking action beyond the initial management stage.
Regulation 3 Duty of employer to make provision for first-aid

(1) An employer shall provide, or ensure that there are provided, such equipment and facilities as are adequate and appropriate in the circumstances for enabling first-aid to be rendered to his employees if they are injured or become ill at work.

(2) Subject to paragraphs (3) and (4), an employer shall provide, or ensure that there are provided, such number of suitable persons as is adequate and appropriate in the circumstances for rendering first-aid to his employees if they are injured or become ill at work; and for this purpose a person shall not be suitable unless he has undergone –

(a) such training and has such qualifications as the Health and Safety Executive may approve for the time being in respect of that case or class of case, and
(b) such additional training, if any, as may be appropriate in the circumstances of that case.

(3) Where a person provided under paragraph (2) is absent in temporary and exceptional circumstances it shall be sufficient compliance with that paragraph if the employer appoints a person, or ensures that a person is appointed, to take charge of –

(a) the situation relating to an injured or ill employee who will need help from a medical practitioner or nurse, and
(b) the equipment and facilities provided under paragraph (1) throughout the period of any such absence.

(4) Where having regard to –

(a) the nature of the undertaking, and
(b) the number of employees at work, and
(c) the location of the establishment,

it would be adequate and appropriate if instead of a person for rendering first-aid there was a person appointed to take charge as in paragraph (3) (a) and (b), then instead of complying with paragraph (2) the employer may appoint such a person, or ensure that such a person is appointed.

Assessment of need

4 An employer should make an assessment of first-aid needs appropriate to the circumstances of each workplace.

5 The aim of first aid is to reduce the effects of injury or illness suffered at work, whether caused by the work itself or not. First-aid provision must be ‘adequate and appropriate in the circumstances’. This means that sufficient first-aid equipment, facilities and personnel should be available:

(a) to give immediate assistance to casualties with both common injuries or illness and those likely to arise from specific hazards at work;
(b) to summon an ambulance or other professional help.
Where an employer provides first-aiders in the workplace, they should have a valid certificate of competence in either first aid at work (FAW) or emergency first aid at work (EFAW). EFAW training enables a first-aider to give emergency first aid to someone who is injured or becomes ill while at work. FAW training includes EFAW and also equips the first-aider to apply first aid to a range of specific injuries and illness (see paragraphs 52–66).

If an employer decides a first-aider is not required in the workplace, a person should be appointed to take charge of the first-aid arrangements. The role of this appointed person includes looking after the first-aid equipment and facilities and calling the emergency services when required. They can also provide emergency cover where a first-aider is absent due to unforeseen circumstances (see paragraphs 67–70).

How much first-aid provision an employer has to make depends on the circumstances of each workplace. There is no fixed level but each employer needs to assess what equipment, facilities and personnel are appropriate. Where employers have an occupational health service or access to other occupational health advice, they might wish to delegate to them the responsibility for carrying out the assessment and advising on first-aid provision.

There is no requirement for the assessment of first-aid needs to be formal or written down although it may be useful for employers to record the results. Employers might need to justify their level of first-aid provision.

In assessing their needs, employers should consider:

(a) the nature of the work and workplace hazards and risks;
(b) the size of the organisation;
(c) the nature of the workforce;
(d) the organisation’s history of accidents;
(e) the needs of travelling, remote and lone workers;
(f) work patterns;
(g) the distribution of the workforce;
(h) the remoteness of the site from emergency medical services;
(i) employees working on shared or multi-occupied sites;
(j) annual leave and other absences of first-aiders and appointed persons;
(k) first-aid provision for non-employees.

Appendix 1 contains a checklist to help employers assess their needs and record relevant information. Appendix 2 can act as a record of first-aid provision.

Nature of the work

The Management of Health and Safety at Work Regulations 1999 require employers to make an assessment of the risks to health and safety of their employees at work, to identify what measures they need to take to prevent or control these risks. Information gathered from the risk assessment can help the employer carry out their assessment of first-aid needs, if preventive or control measures fail. Identifying the likely nature of an accident or injury will help the employer work out the type, quantity and location of first-aid equipment, facilities and personnel to provide.

To help employers, Table 1 gives examples of a number of hazards commonly found in the workplace, the causes of accidents that might occur in working with them and the injuries that might arise. It is not intended to cover all hazards that may be present in the workplace or all injuries that might occur. It should also be remembered that an employee might become ill at any time. An assessment of
first-aid needs should consider this possibility, whether or not an illness is caused by work. More detailed information on workplace hazards, risk assessment and how to prevent work-related injuries and illness is available on HSE’s website (see ‘Further information’).

**Table 1** Hazards commonly found in the workplace

<table>
<thead>
<tr>
<th>Hazard</th>
<th>Causes of accidents</th>
<th>Examples of injury requiring first aid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chemicals</td>
<td>Exposure during handling; spillages; splashing; leaks</td>
<td>Poisoning, loss of consciousness, burns, eye injuries</td>
</tr>
<tr>
<td>Electricity</td>
<td>Failure to securely isolate electrical systems and equipment during work on them; poorly maintained electrical equipment; contact with overhead power lines, underground power cables or mains electricity supplies; using unsuitable electrical equipment in explosive atmospheres</td>
<td>Electric shock, burns</td>
</tr>
<tr>
<td>Machinery</td>
<td>Loose hair or clothing becoming tangled in machinery; being hit by moving parts or material thrown from machinery; contact with sharp edges</td>
<td>Crush injuries, amputations, fractures, lacerations, eye injuries</td>
</tr>
<tr>
<td>Manual handling</td>
<td>Repetitive and/or heavy lifting, bending and twisting; exerting too much force; handling bulky or unstable loads; handling in uncomfortable working positions</td>
<td>Fractures, lacerations, sprains and strains</td>
</tr>
<tr>
<td>Slip and trip hazards</td>
<td>Uneven floors; trailing cables; obstructions; slippery surfaces due to spillages; worn carpets and mats</td>
<td>Fractures, lacerations, sprains and strains</td>
</tr>
<tr>
<td>Work at height</td>
<td>Overreaching or overbalancing when using ladders; falling off or through a roof</td>
<td>Head injury, loss of consciousness, spinal injury, fractures, sprains and strains</td>
</tr>
<tr>
<td>Workplace transport</td>
<td>Hit by, hit against or falling from a vehicle; being hit by part of a load falling from a vehicle; being injured as a result of a vehicle collapse or overturn</td>
<td>Crush injuries, head injury, fractures, sprains and strains</td>
</tr>
</tbody>
</table>

14 The type of work performed will help determine the identifiable hazards in the workplace and the possible harmful consequences for employees, and therefore the level of first-aid provision. For example, in organisations such as offices or shops, employers may only need to provide an appointed person to take charge of first-aid arrangements, and a clearly identified and suitably stocked first-aid box. However, even in these circumstances it is still possible for an accident or sudden illness to occur and employers may wish to consider having a qualified first-aider available.

15 Where the work involves hazards such as chemicals or dangerous machinery, or special hazards such as hydrofluoric acid or confined spaces, first-aid requirements will be greater. Employers may then need to:

(a) provide a sufficient number of qualified first-aiders so that someone is always available to give first aid immediately following an incident;
(b) provide additional training for first-aiders to deal with injuries resulting from special hazards;
(c) consider additional first-aid equipment;
(d) provide one or more first-aid rooms;
(e) inform the local emergency services, in writing, of the site where hazardous substances or processes are in use.

16 In deciding on their first-aid provision, employers will need to take account of different work activities in different parts of an establishment. For example, a work site may contain production and office/administration areas. In such circumstances, it is likely that separate risk assessments will have to be made for individual departments, and the results of these should be carried over to the assessment of first-aid needs. This will mean that first-aid provision could vary between departments or buildings.

**Size of the organisation**

17 Generally, the larger the workforce, the greater the first-aid provision that is required. However, employee numbers should not be the sole basis for determining first-aid needs. A greater level of provision may be required when fewer people are at work but are undertaking tasks such as maintenance work. Employers should provide sufficient cover for the various circumstances that can occur.

18 Even in workplaces with a small number of employees there is still the possibility of an accident or sudden illness. Therefore, employers may wish to consider providing a qualified first-aider.

**Nature of the workforce**

19 The particular needs of young workers, trainees, pregnant workers and employees with disabilities or particular health problems should be addressed. First-aid provision should also be extended to work experience trainees.

**History of accidents**

20 Information collected when investigating previous accidents/incidents should be used when assessing the adequacy of future first-aid provision. For large and/or multi-site organisations this information could be helpful in determining where first-aiders should be located, what geographical area they should be required to cover and what first-aid equipment is necessary.

**Needs of travelling, remote and lone workers**

21 Employers are responsible for meeting the first-aid needs of their employees working away from the main site, for example those who travel regularly or who work elsewhere. The assessment should determine whether those who travel long distances or are continuously mobile should carry a personal first-aid kit. Organisations with employees who work in remote areas should consider making special arrangements such as issuing personal communicators and providing additional training. Where employees work alone, other means of summoning help, such as a mobile phone, may be useful to call for assistance in an emergency.

**Work patterns**

22 First-aid requirements may vary where employees work shifts or out of hours. It is important that sufficient provision is always available when employees are at work, and separate arrangements may have to be made for each shift.
Distribution of the workforce

23 An employer should consider how the size of the premises could affect quick access to first-aid facilities. For example, whether additional first-aid provision is needed on a site with more than one building, or whether the distance between buildings is such that additional provision would be unnecessary. Employers with a multi-floor building should consider how many first-aiders or appointed persons will be required to give adequate provision to employees on each floor. Consideration should also be given to employees who work in self-contained areas, and how their needs are assessed and met.

Remoteness of the site from emergency medical services

24 Where a site is remote from emergency medical services, employers may need to make special arrangements to ensure appropriate transport is available. Employers should inform the emergency services, in writing, of their location and any particular circumstances, including specific hazards.

Employees working on shared or multi-occupied sites

25 On a shared or multi-occupied site, employers can arrange for one employer to take responsibility for providing first-aid cover for all the workers. In these cases, a full exchange of information about the hazards and risks involved should help ensure that the shared provision is adequate. All employers should agree the arrangements and employees should be kept informed. A written agreement between employers is strongly recommended to avoid any misunderstandings.

26 Where an employment business contracts out employees to another employer, the employment business should ensure, by arrangement with the user employer, that these employees have access to first-aid provision.

Annual leave and other absences of first-aiders and appointed persons

27 It is essential that adequate provision is made at all times people are at work. Employers therefore need to ensure there is cover for annual leave and other planned absences of first-aiders or appointed persons. Employers should also consider what cover is needed for unplanned and exceptional absences such as sick leave or special leave due to bereavement.

First-aid provision for non-employees

28 These Regulations do not require employers to provide first aid for anyone other than their own employees. However, many organisations such as schools, places of entertainment, fairgrounds and shops provide a service for others and it is strongly recommended that employers include non-employees in their assessment of first-aid needs and make provision for them.

29 Where first-aid provision is intended to cover both employees and non-employees, employers should check their liability insurance covers all the activities of first-aiders. They should also ensure that:

(a) the level of provision for employees does not fall below the standard required by these Regulations;
(b) the level of provision for non-employees complies with any other relevant legislation and guidance.
Review of first-aid provision

30 Employers should periodically review their first-aid needs, particularly after any operating changes, to ensure provision remains appropriate. To help with this process, it is recommended that a record is kept of the incidents dealt with by first-aiders and appointed persons (see paragraphs 31–32).

Records

31 It is good practice for employers to provide first-aiders and appointed persons with a book in which to record incidents they attend. Any such book should be kept in accordance with the requirements of the Data Protection Act 1998 (see ‘Further reading’). Where there are a number of first-aiders working for a single employer, it would be advisable for one central book to be used, though this may not be practicable on larger, well spread out sites. The information to be recorded should include:

(a) date, time and place of the incident;
(b) name and job of the injured or ill person;
(c) details of the injury/illness and what first aid was given;
(d) what happened to the person immediately afterwards (for example went back to work, went home, went to hospital);
(e) name and signature of the first-aider or person dealing with the incident.

32 This information can help the employer identify accident trends and possible areas for improvement in the control of health and safety risks. It can be used for reference in future first-aid needs assessments. These records may also be helpful for insurance and investigative purposes. The record book is not the same as the statutory accident book (see ‘Further reading’), although the two might be combined.

RIDDOR

33 Employers, self-employed people and those in control of premises have a duty to report some accidents and incidents at work under RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995). You can report an incident quickly, easily and in confidence using the telephone number and online contacts given in ‘Further information’.

First aid materials, equipment and facilities

34 When the assessment of first-aid requirements has been completed, the employer should provide the materials, equipment and facilities needed to ensure that the level of cover identified as necessary will be available to employees at all relevant times. This will include ensuring that first-aid equipment, suitably marked and easily accessible, is available in all places where working conditions require it.

First-aid containers

35 The minimum level of first-aid equipment is a suitably stocked and properly identified first-aid container. Every employer should provide for each work site at least one first-aid container supplied with a sufficient quantity of first-aid materials suitable for the particular circumstances.

36 Depending on the findings of the first-aid needs assessment, more than one first-aid container might be required on large sites. First-aid containers should be easily accessible and preferably placed near to hand washing facilities. They should
only be stocked with items useful for giving first aid and should protect them from
dust and damp. All first-aid containers should be identified by a white cross on a
green background.  

37 There is no mandatory list of items to be included in a first-aid
container. The decision on what to provide will be influenced by the findings of the
first-aid needs assessment. As a guide, where work activities involve low hazards, a
minimum stock of first-aid items might be:

(a) a leaflet giving general guidance on first aid (for example, HSE’s leaflet Basic
advice on first aid at work);  
(b) 20 individually wrapped sterile plasters (assorted sizes), appropriate to the
type of work (hypoallergenic plasters can be provided, if necessary);  
(c) two sterile eye pads;  
(d) four individually wrapped triangular bandages, preferably sterile;  
(e) six safety pins;  
(f) two large sterile individually wrapped unmedicated wound dressings;  
(g) six medium-sized individually wrapped unmedicated wound dressings;  
(h) a pair of disposable gloves (see HSE’s leaflet Latex and you).  

This is a suggested contents list only.

38 The contents of first-aid containers should be examined frequently and
restocked soon after use. Sufficient supplies should be held in stock on site. Care
should be taken to dispose of items safely once they reach their expiry date.

Additional first-aid materials and equipment

39 The needs assessment may indicate that additional materials and equipment
are required, for example scissors, adhesive tape, disposable aprons and
individually wrapped moist wipes. They may be kept in the first-aid container if
there is room or stored separately.

40 If mains tap water is not readily available for eye irrigation, at least a litre of
sterile water or sterile normal saline (0.9%) in sealed, disposable containers should
be provided. Once the seal has been broken, containers should not be kept for
reuse. Containers should not be used beyond their expiry date.

41 There may be a need for items such as protective equipment in case first-
aiders have to enter dangerous atmospheres, or blankets to protect casualties from
the elements. Such items should be stored securely near the first-aid container, in
the first-aid room or in the hazard area, as appropriate. Access to them should be
restricted to people trained in their use.

Tablets and medication

42 First aid at work does not include giving tablets or medicines to treat illness.
The only exception to this is where aspirin is used when giving first aid to a casualty
with a suspected heart attack in accordance with currently accepted first-aid
practice.  It is recommended that tablets and medicines should not be kept in the
first-aid container.

43 Some workers carry their own medication that has been prescribed by their
doctor (e.g. an inhaler for asthma). If an individual needs to take their own prescribed
medication, the first-aider’s role is generally limited to helping them do so and
contacting the emergency services as appropriate.
Automated external defibrillators

44 Where an employer decides to provide a defibrillator in the workplace, it is important that those who may use it are appropriately trained (see “Further information”). HSE does not specify the content of this training and organisations providing it do not need HSE approval.

Travelling first-aid kits

45 There is no mandatory list of items to be included in first-aid kits for travelling workers. They might typically contain:

(a) a leaflet giving general guidance on first aid (for example HSE’s leaflet Basic advice on first aid at work);
(b) six individually wrapped sterile plasters (hypoallergenic plasters can be provided, if necessary);
(c) two triangular bandages;
(d) two safety pins;
(e) one large sterile unmedicated dressing;
(f) individually wrapped moist cleansing wipes;
(g) a pair of disposable gloves (see HSE’s leaflet Latex and you).

This is a suggested contents list only.

46 Suitable arrangements should be in place for restocking kits.

First-aid rooms

47 Employers should provide a suitable first-aid room or rooms where the assessment of first-aid needs identifies this as necessary. The first-aid room(s) should contain essential first-aid facilities and equipment, be easily accessible to stretchers and be clearly signposted and identified. If possible, the room(s) should be reserved exclusively for giving first aid.

48 A first-aid room will usually be necessary where there are higher hazards such as in chemical industries or on large construction sites, and in larger premises at a distance from medical services. A designated person should be given responsibility for supervising it. The room(s) should be clearly signposted and identified by white lettering or symbols on a green background.

49 First-aid rooms should:

(a) be large enough to hold an examination/medical couch, with enough space at each side for people to work, a chair and any necessary additional equipment;
(b) have washable surfaces and adequate heating, ventilation, and lighting;
(c) be kept clean, tidy, accessible and available for use at all times when employees are at work;
(d) be positioned as near as possible to a point of access for transport to hospital;
(e) display a notice on the door advising of the names, locations, and if appropriate, telephone extensions of first-aiders and how to contact them.

50 Typical examples of the equipment and facilities a first-aid room may contain are:

(a) a sink with hot and cold running water;
(b) drinking water with disposable cups;
(c) soap and paper towels;
(d) a store for first-aid materials;
(e) foot-operated refuse containers, lined with disposable yellow clinical waste bags or a container suitable for the safe disposal of clinical waste;
(f) an examination/medical couch with waterproof protection and clean pillows and blankets (a paper couch roll may be used that is changed between casualties);
(g) a chair;
(h) a telephone or other communication equipment;
(i) a record book for recording incidents attended by a first-aider or appointed person (see paragraphs 31–32).

51 If the first-aid room(s) cannot be reserved exclusively for giving first aid, employers need to make sure that the first-aid facilities can be made available quickly if necessary. For example, they should consider the implications of whether:

(a) the activities usually carried out in the room can be stopped immediately in an emergency;
(b) the furnishings and equipment can be moved easily and quickly to a position that will not interfere with giving first aid;
(c) the storage arrangements for first-aid furnishings and equipment allow them to be made available quickly when necessary.

First-aid personnel

First-aiders

52 Where the first-aid assessment identifies a need for people to be available for rendering first aid, the employer should ensure that they are provided in sufficient numbers and at appropriate locations to enable first aid to be administered without delay should the occasion arise. Where 50 or more people are employed, at least one such person should be provided unless the assessment justifies otherwise.

How many first-aiders are needed?

53 The findings of the first-aid needs assessment will help the employer decide how many first-aiders are required. There are no hard and fast rules on exact numbers as employers will need to take into account all the relevant circumstances of their particular workplace.

54 After completing the checklist in Appendix 1, the flow chart in Appendix 3 serves as a general guide on how many first-aiders or appointed persons might be needed. The numbers quoted in Appendix 3 are suggestions only. The employer should take into account all relevant information to make a valid judgement.

What factors should be considered when selecting someone to be a first-aider?

55 When selecting someone to take up the role of a first-aider, a number of factors need to be taken into account, including an individual’s:

(a) reliability, disposition and communication skills;
(b) aptitude and ability to absorb new knowledge and learn new skills;
(c) ability to cope with stressful and physically demanding emergency procedures;
(d) normal duties. These should be such that they may be left to go immediately and rapidly to an emergency.
What training and qualifications are needed to become a first-aider in the workplace?

56 Before taking up first-aid duties, a first-aider should have undertaken training and have a qualification that HSE approves. This means that they must hold a valid certificate of competence in either:

(a) first aid at work (FAW), issued by a training organisation approved by HSE; or
(b) emergency first aid at work (EFAW), issued by a training organisation approved by HSE or a recognised awarding body of Ofqual/Scottish Qualifications Authority.

57 Lists of suitable training providers and awarding bodies are available from HSE’s Infoline (see ‘Further information’).

58 Providing they have current knowledge and skills in first aid, the training and experience of the following qualify them to administer first aid in the workplace:

(a) doctors registered with the General Medical Council;
(b) nurses registered with the Nursing and Midwifery Council;
(c) paramedics registered with the Health Professions Council.

59 The contents of FAW and EFAW courses are listed in Appendices 4 and 5, respectively. When arranging training, employers should let the training organisation know of any particular hazards at their workplace so if possible, training can be tailored to meet these needs.

60 The findings of the assessment of first-aid needs can be used to help employers decide whether their first-aiders should be trained in FAW or EFAW. If the needs of the workplace require FAW-trained first-aiders to be provided, it is not acceptable to provide EFAW-trained first-aiders instead. As a guide, the flow chart in Appendix 3 suggests the first-aid personnel to provide under different circumstances.

61 Additional training of first-aiders may be necessary to cover special hazards so they can deal with particular problems that might arise. For example, more in-depth training would be advisable in cases where work activities involve the use of hydrofluoric acid or working in confined spaces. Similarly, further training would be required for personnel who may need to use a defibrillator (see paragraph 44). The content of these additional training courses is not specified by HSE. It may be undertaken as an extension to FAW/EFAW training or as a stand-alone course and any certificate should be issued separately from the FAW/EFAW certificate. Organisations offering additional training do not need HSE approval for this purpose.

62 FAW and EFAW certificates are valid for three years. Employers need to arrange retraining before certificates expire. Where first-aiders attend the relevant course within three months prior to certificate expiry, the new certificate will take effect from that date of expiry. Retraining can be undertaken earlier than this three-month period, in which case the new certificate will take effect from the date the course is completed. Where retraining has not been undertaken before certificate expiry, it should be completed no more than 28 days beyond the expiry date. The new certificate will be dated from the expiry date of the previous certificate. If retraining is not completed by the end of this 28-day period, the individual will need to undertake a full FAW course or EFAW course, as appropriate, to be re-established as a first-aider.
63. HSE strongly recommends that first-aiders undertake annual refresher training (see Appendix 6 for course content) during any three-year FAW/EFAW certification period. Although not mandatory, this will help qualified first-aiders maintain their basic skills and keep up to date with any changes to first-aid procedures.

64. The training organisations referred to in paragraph 56 can also run annual refresher courses. Where available, in-house occupational health professionals (a doctor registered with the General Medical Council or nurse registered with the Nursing and Midwifery Council) can run annual refresher training in the workplace, providing they have current experience of first-aid skills, are competent to train and are familiar with the current standards HSE accepts for the first-aid management of injuries and illness in the workplace.

65. Employers should also encourage first-aiders to regularly review their course manual and other material, and where possible, allocate them time to do this. It will further help to maintain their first-aid skills.

66. Employers may find it useful to keep a record of first-aiders and certification dates to help with the timely arrangement of further training.

Appointed persons

67. Where an employer’s assessment of first-aid needs identifies that a first-aider is not necessary, the minimum requirement on an employer is to appoint a person to take charge of the first-aid arrangements, including looking after the equipment and facilities, and calling the emergency services when required. Arrangements should be made for an appointed person to be available to undertake these duties at all times when people are at work.

68. Even in small, low-hazard organisations where first-aiders are considered unnecessary, there is always the possibility of an accident or sudden illness. Therefore, it is important that someone is always available to take charge of the first-aid arrangements, including looking after the equipment and facilities and calling the emergency services when required. In the absence of first-aiders, employers should appoint a person for this purpose, though appointed persons are not necessary where there is an adequate number of first-aiders.

69. To fulfil their role, appointed persons do not need first-aid training, though emergency first-aid training courses are available. Therefore, it is important to remember that appointed persons are not first-aiders and should not attempt to give first aid for which they have not been trained. Given this and the remaining possibility of an accident or sudden illness, rather than providing appointed persons, employers may wish to consider providing qualified first-aiders.

70. The Regulations allow for a person to be appointed to provide emergency cover in the absence of first-aiders but only where the absence is due to exceptional, unforeseen and temporary circumstances. Absences such as annual leave do not count. If the first-aid needs assessment indicates that first-aiders are required, they should be available whenever the need arises.
Regulation 4 Duty of employer to inform his employees of the arrangements made in connection with first-aid

An employer shall inform his employees of the arrangements that have been made in connection with the provision of first-aid, including the location of equipment, facilities and personnel.

Information for employees

71 First-aid arrangements operate efficiently in an emergency only where everyone in the workplace is aware of them, and understands and accepts them. One way to achieve this is to develop procedures for informing staff in consultation with employees or safety representatives. They should detail first-aid provision and explain how employees will be informed of the location of first-aid equipment, facilities and personnel. The procedures should also identify who will provide relevant first-aid information to new and transferred employees.

72 A simple method of keeping employees informed is to display first-aid notices. The information needs to be clear and easily understood by all employees. Employers should also take steps to cater for those with reading or language difficulties. At least one notice in a prominent position at each site, including the base for travelling employees, should give enough opportunity for employees to see them. The inclusion of first-aid information during induction training will help ensure new employees are made aware of first-aid arrangements.

Regulation 5 Duty of self-employed person to provide first-aid equipment

A self-employed person shall provide, or ensure there is provided, such equipment, if any, as is adequate and appropriate in the circumstances to enable him to render first-aid to himself while he is at work.

Duties of self-employed persons

73 The systematic approach to assessment, set out in paragraphs 4–33, may also be valid for deciding how much first-aid provision is needed by the self-employed. Those who carry out activities involving low hazards (such as clerical work) in their own homes would not be expected to provide first-aid equipment beyond their normal domestic needs.

74 Where the self-employed work on premises under the control of an employer or with other self-employed workers, they are each responsible for making their own first-aid provision. However, as indicated in paragraphs 25–26, joint arrangements can be made with other occupiers to provide common cover.

Regulation 6 Power to grant exemptions*

Regulation 7 Cases where these Regulations do not apply

These Regulations shall not apply –

(a) where the Diving at Work Regulations 1997\(^{(a)}\) apply;
(b) where the Merchant Shipping (Medical Scales) (Fishing Vessels) Regulations 1974\(^{(b)}\) apply;
(c) where the Merchant Shipping (Medical Stores) Regulations 1986\(^{(c)}\) apply;
(d) on vessels which are registered outside the United Kingdom;
(e) to a mine of coal, stratified ironstone, shale or fireclay;\(^{(d)}\)
(f) in respect of the armed forces of the Crown and any force to which any provision of the Visiting Forces Act 1952\(^{(e)}\) applies;
(g) where the Offshore Installations and Pipeline Works (First-Aid) Regulations 1989\(^{(f)}\) apply.

(a) SI 1997/2776.
(b) SI 1974/1192.
(c) SI 1986/14.
(d) Paragraph (e) is revoked by the Management and Administration of Safety and Health at Mines Regulations 1993 (SI 1993/1897) regulation 44 (1), (2)(a), in so far as it applies to mines and mining operations.
(e) 1952 c.67.
(f) SI 1989/1671

Regulation 8 Application to mines

In their application to mines not excluded from these Regulations by Regulation 7(e), Regulations 3 and 4 shall have effect as if the manager for the time being of any such mine were an employer and as if the persons employed were his employees\(^{(a)}\).

(a) Regulation 8 is modified by the Management and Administration of Safety and Health at Mines Regulations 1993 (SI 1993/1897), regulation 44 (1), (2)(a), in so far as it applies to mines and mining operations where it is substituted with:

*Regulation 8

(1) Subject to Paragraph (2), in their application to mines, regulations 3 and 4 shall have effect as if the owner of the mine were the employer and as if all persons for the time being employed at the mine were his employees.

(2) Paragraphs (3) and (4) of regulation 3 shall not apply in relation to mines."

Regulation 9 Application offshore

Subject to Regulation 7, these Regulations shall apply to and in relation to any premises or activity to or in relation to which sections 1 to 59 of the Health and Safety at Work etc. Act 1974 apply by virtue of Articles 6 and 7(a), (b) and (d) of the Health and Safety at Work etc. Act 1974 (Application outside Great Britain) Order 1977\(^{(a)}\) (which relate respectively to mines extending beyond Great Britain and to certain activities concerning vessels and construction works in territorial waters).

(a) Revoked and replaced by SI 1989/840. SI 1989/840 was revoked and replaced by SI 1995/263, which was revoked and replaced by SI 2001/2127.
Regulation 10 Repeals, revocations and modification

(1) The enactments mentioned in column (1) of Schedule 1 are hereby repealed to the extent specified opposite thereto in column (3) of that Schedule.

(2) The Orders and Regulations mentioned in column 1 of Schedule 2 are hereby revoked to the extent specified opposite thereto in column (3) of that Schedule.

(3) Section 91(1) of the Mines and Quarries Act 1954 shall be modified by after the words “every mine” inserting the words “of coal, stratified ironstone, shale or fireclay”.

(a) Regulation 10(3) is revoked by the Management and Administration of Safety and Health at Mines Regulations 1993 (SI 1993/1897), regulation 44 (1), (2)(a), in so far as it applies to mines and mining operations.
### Schedule 1 Repeals

**Regulation 10(1)**

<table>
<thead>
<tr>
<th>(1)</th>
<th>(2)</th>
<th>(3)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Short title</strong></td>
<td><strong>Chapter</strong></td>
<td><strong>Extent of repeal</strong></td>
</tr>
</tbody>
</table>
| The Mines and Quarries Act 1954. | 1954 c. 70; relevant amending instrument is SI 1974/2013. | In section 115, the words “section ninety-one (save in so far as it relates to persons employed below ground)” and in paragraph (a) the words “and ninety-one”.

### Schedule 2 Revocations

**Regulation 10(2)**

<table>
<thead>
<tr>
<th>(1)</th>
<th>(2)</th>
<th>(3)</th>
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</thead>
<tbody>
<tr>
<td><strong>Regulations or Order</strong></td>
<td><strong>Reference</strong></td>
<td><strong>Extent of revocation</strong></td>
</tr>
<tr>
<td>The Horsehair Regulations 1907.</td>
<td>SR &amp; O 1907/984.</td>
<td>Regulation 9(d).</td>
</tr>
<tr>
<td>The Hides and Skins Regulations 1921.</td>
<td>SR &amp; O 1921/2076.</td>
<td>Regulation 1.</td>
</tr>
<tr>
<td>The Chemical Works Regulations 1922.</td>
<td>SR &amp; O 1922/731; relevant amending instruments are SI 1961/2435, 1981/16.</td>
<td>Regulations 10(a), 12, 13, 14 and 17(2)(g).</td>
</tr>
</tbody>
</table>
## Schedule

<table>
<thead>
<tr>
<th>Regulations or Order</th>
<th>Reference</th>
<th>Extent of revocation</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Herring Curing (Scotland) Welfare Order 1926.</td>
<td>SR &amp; O 1926/535; to which there are amendments not relevant to these Regulations.</td>
<td>Articles 3 and 4.</td>
</tr>
<tr>
<td>The Docks Regulations 1934.</td>
<td>SR &amp; O 1934/279; to which there are amendments not relevant to these Regulations.</td>
<td>Regulations 4 to 8.</td>
</tr>
<tr>
<td>The Quarries (General) Regulations 1956.</td>
<td>SI 1956/1780.</td>
<td>Regulation 38.</td>
</tr>
<tr>
<td>The Agriculture (First Aid) Regulations 1957.</td>
<td>SI 1957/940.</td>
<td>The whole Regulations.</td>
</tr>
<tr>
<td>The First-aid Boxes in Factories Order 1959.</td>
<td>SI 1959/906; relevant amending instrument is SI 1961/1250.</td>
<td>The whole Order.</td>
</tr>
<tr>
<td>The Docks (First-aid Boxes) Order 1959.</td>
<td>SI 1959/2081.</td>
<td>The whole Order.</td>
</tr>
<tr>
<td>Regulations or Order</td>
<td>Reference</td>
<td>Extent of revocation</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------</td>
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</tr>
<tr>
<td>The Shipbuilding and Ship-repairing Regulations 1960.</td>
<td>SI 1960/1932, to which there are amendments not relevant to these Regulations.</td>
<td>Regulation 79 and Schedule 3.</td>
</tr>
<tr>
<td>The Offices, Shops and Railway Premises First Aid Order 1964.</td>
<td>SI 1964/970; relevant amending instrument is SI 1974/1943.</td>
<td>The whole Order.</td>
</tr>
<tr>
<td>The Offices and Shops in Factories (First Aid) Regulations 1964.</td>
<td>SI 1964/1321.</td>
<td>The whole Regulations.</td>
</tr>
<tr>
<td>The Offices in Electrical Stations (First Aid) Regulations 1964.</td>
<td>SI 1964/1323.</td>
<td>The whole Regulations.</td>
</tr>
<tr>
<td>The Construction (Health and Welfare) Regulations 1966.</td>
<td>SI 1966/95, amended by SI 1974/209.</td>
<td>In Regulation 3(2), the words from “certificate in first-aid” does not” to “or over” and from “training organisation” to “of these Regulations”. In Regulation 4(2), the figures “5, 8, 9”. Regulations 5 to 10. The Schedule.</td>
</tr>
<tr>
<td>The Ionising Radiations (Unsealed Radioactive Substances) Regulations 1968.</td>
<td>SI 1968/780; to which there are amendments not relevant to these Regulations.</td>
<td>Regulation 44(2).</td>
</tr>
<tr>
<td>Regulations or Order</td>
<td>Reference</td>
<td>Extent of revocation</td>
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<td>----------------------------------------------------------------------------------------------------------</td>
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<td>---------------------------------------------------------</td>
</tr>
</tbody>
</table>
# Appendix 1 Checklist for assessment of first-aid needs

<table>
<thead>
<tr>
<th>Factor to consider</th>
<th>Space for notes</th>
<th>Impact on first-aid provision</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Hazards</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(use the findings of your risk assessment and take account of any parts of your workplace that have different work activities/hazards which may require different levels of first-aid provision)</td>
<td>The minimum provision is: - an appointed person to take charge of first-aid arrangements; - a suitably stocked first-aid box.</td>
<td></td>
</tr>
<tr>
<td>Does your workplace have low-level hazards such as those that might be found in offices and shops?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does your workplace have higher level hazards such as chemicals or dangerous machinery?</td>
<td>You should consider: - providing first-aiders; - additional training for first-aiders to deal with injuries resulting from special hazards; - additional first-aid equipment; - precise siting of first-aid equipment; - providing a first-aid room; - informing the emergency services.</td>
<td></td>
</tr>
<tr>
<td>Do your work activities involve special hazards such as hydrofluoric acid or confined spaces?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Employees</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How many people are employed on site?</td>
<td>Where there are small numbers of employees, the minimum provision is: - an appointed person to take charge of first-aid arrangements; - a suitably stocked first-aid box.</td>
<td>Where there are large numbers of employees you should consider providing: - first-aiders; - additional first-aid equipment; - a first-aid room.</td>
</tr>
<tr>
<td>Are there inexperienced workers on site, or employees with disabilities or particular health problems?</td>
<td>You should consider: - additional training for first-aiders; - additional first-aid equipment; - local siting of first-aid equipment.</td>
<td>Your first-aid provision should cover any work experience trainees.</td>
</tr>
<tr>
<td><strong>Accidents and ill health record</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What is your record of accidents and ill health?</td>
<td>Ensure your first-aid provision will cater for the type of injuries and illness that might occur in your workplace. Monitor accidents and ill health and review your first-aid provision as appropriate.</td>
<td></td>
</tr>
<tr>
<td>What injuries and illness have occurred and where did they happen?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Working arrangements
| Do you have employees who travel a lot, work remotely or work alone? | You should consider:  
- issuing personal first-aid kits;  
- issuing personal communicators/mobile phones to employees. |
| Do any of your employees work shifts or work out of hours? | You should ensure there is adequate first-aid provision at all times people are at work. |
| Are the premises spread out, e.g., are there several buildings on the site or multi-floor buildings? | You should consider provision in each building or on each floor. |
| Is your workplace remote from emergency medical services? | You should:  
- inform the emergency services of your location;  
- consider special arrangements with the emergency services. |
| Do any of your employees work at sites occupied by other employers? | You should make arrangements with other site occupiers to ensure adequate provision of first aid. A written agreement between employers is strongly recommended. |
| Do you have sufficient provision to cover absences of first-aiders or appointed persons? | You should consider:  
- what cover is needed for annual leave and other planned absences;  
- what cover is needed for unplanned and exceptional absences. |
| **Non-employees** | |
| Do members of the public visit your premises? | Under the Regulations, you have no legal duty to provide first aid for non-employees but HSE strongly recommends that you include them in your first-aid provision. |
### Appendix 2 Record of first-aid provision*

<table>
<thead>
<tr>
<th>First-aid personnel</th>
<th>Required</th>
<th>Number needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>First-aider with a first aid at work certificate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First-aider with an emergency first aid at work certificate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First-aider with additional training (specify)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appointed person</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>First-aid equipment and facilities</th>
<th>Required</th>
<th>Number needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>First-aid container</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Additional equipment (specify)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travelling first-aid kit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First-aid room</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* The minimum first-aid provision for each worksite is:

(a) an appointed person to take charge of first-aid arrangements;
(b) a suitably stocked first-aid box;
(c) information for employees about the first-aid arrangements.
What injuries and illness have previously occurred in your workplace?

4

What first-aid personnel do you need?

3

How many employees do you have?

2

From your risk assessment, what degree of hazard is associated with your work activities?

1

Ensure any injuries and illness that might occur can be dealt with by the first-aid personnel you provide.

■ Inexperienced workers or employees with disabilities or particular health problems

■ Employees who travel a lot, work remotely or work alone

■ Employees who work shifts or out of hours

■ Premises spread out across buildings/floors

■ Workplace remote from emergency medical services

■ Employees working at sites occupied by other employers

■ Planned and unplanned absences of first-aiders/appointed persons

■ Members of the public who visit the workplace

Appendix 3 Suggested numbers of first-aid personnel to be available at all times people are at work

Low hazard
e.g. offices, shops, libraries

Less than 25

At least one appointed person

25–50

At least one first-aider trained in EFAW

More than 50

At least one first-aider trained in EFAW or FAW depending on the type of injuries that might occur

Higher hazard
e.g. light engineering and assembly work, food processing, warehousing, extensive work with dangerous machinery or sharp instruments, construction, chemical manufacture

Less than 5

At least one appointed person

5–50

At least one first-aider trained in EFAW or FAW for every 50 employed (or part thereof)

More than 50

At least one first-aider trained in FAW for every 100 employed (or part thereof)
Appendix 4 Content of a first aid at work course

On completion of training, successful candidates should be able to:

(a) provide emergency first aid at work (see Appendix 5);
(b) administer first aid to a casualty with:
   (i) injuries to bones, muscles and joints, including suspected spinal injuries;
   (ii) chest injuries;
   (iii) burns and scalds;
   (iv) eye injuries;
   (v) sudden poisoning;
   (vi) anaphylactic shock;
(c) recognise the presence of major illness and provide appropriate first aid.
Appendix 5 Content of an emergency first aid at work course

On completion of training, successful candidates should be able to:

(a) understand the role of the first-aider including reference to:

   (i) the importance of preventing cross-infection;
   (ii) the need for recording incidents and actions;
   (iii) use of available equipment;

(b) assess the situation and circumstances in order to act safely, promptly and effectively in an emergency;

(c) administer first aid to a casualty who is unconscious (including seizure);

(d) administer cardiopulmonary resuscitation;

(e) administer first aid to a casualty who is choking;

(f) administer first aid to a casualty who is wounded and bleeding;

(g) administer first aid to a casualty who is suffering from shock;

(h) provide appropriate first aid for minor injuries.
Appendix 6 Content of an annual refresher course

Candidates should demonstrate their competence to:

(a) assess the situation in an emergency;
(b) administer first aid to a casualty who is unconscious (including seizure);
(c) administer cardiopulmonary resuscitation;
(d) administer first aid to a casualty who is wounded and bleeding;
(e) administer first aid to a casualty who is suffering from shock.
References and further reading

References


Further reading


Basic advice on first aid at work Poster HSE Books 2006 ISBN 978 0 7176 6195 4

Further information

Information on first aid at work is available on HSE’s ‘First aid at work’ website at: www.hse.gov.uk/firstaid/index.htm.

For lists of first-aid training organisations and awarding bodies, and for information about health and safety, ring HSE’s Infoline Tel: 0845 345 0055 Fax: 0845 408 9566 Textphone: 0845 408 9577 e-mail: hse.infoline@natbrit.com or write to HSE Information Services, Caerphilly Business Park, Caerphilly CF83 3GG.

Information on health and safety is also available on HSE’s website at: www.hse.gov.uk.

To report an accident or incident under RIDDOR, call the HSE Incident Contact Centre on 0845 300 9923 or to report on-line or by e-mail visit: www.hse.gov.uk/riddor/index.htm.

Information on training in the use of automated external defibrillators is available from the Resuscitation Council (UK) at: www.resus.org.uk/siteindx.htm.

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