

First-aid at work

The Health and Safety (First-Aid) Regulations (Northern Ireland) 1982



FIRST-AID AT WORK

THE HEALTH AND SAFETY (FIRST-AID) REGULATIONS (NORTHERN IRELAND) 1982

APPROVED CODE OF PRACTICE AND GUIDANCE

2011 REVISED GUIDANCE



The Health and Safety (First-Aid) Regulations (Northern Ireland) 1982 apply to all workplaces in Northern Ireland, including those with less than five employees, and to the self-employed. This Approved Code of Practice (ACOP) and guidance is aimed at all sectors, although guidance on first-aid in mines, diving and offshore is given in separate publications.

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

This revised guidance provides details of a new training regime for first-aiders in the workplace. It also gives employers greater flexibility in determining their first-aid provision. It recommends annual refresher training for first-aiders to help maintain their skills.

Approved Code of Practice (ACoP)

This ACoP 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.

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.

The Code of Practice in this book was approved in 2000.

Guidance

This guidance is issued by the Health and Safety Executive for Northern Ireland (HSENI). 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. The revised guidance will take effect from 1 September 2011.

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Any enquiries regarding the copyright of this document should be addressed to us at:

The Health and Safety Executive for Northern Ireland
83 Ladas Drive
Belfast
BT6 9FR
Telephone 028 9024 3249
Facsimile 028 9023 5383

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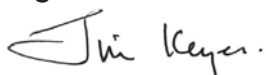
Notice of Approval

By virtue of Article 18(4) of the Health and Safety at Work (Northern Ireland) Order 1978, after consultation in accordance with Article 18(2) of that Order and with the consent of the Department of Enterprise, Trade and Investment, being the Department concerned, the Health and Safety Executive for Northern Ireland has on 20 June 2000 approved the revised Code of Practice entitled "*First-Aid at Work in Northern Ireland*".

The revised Approved Code of Practice gives practical guidance with respect to the Health and Safety (First-Aid) Regulations (Northern Ireland) 1982 (S.R. 1982 No. 429) and replaces the Approved Code of Practice which was issued in 1991.

The revised Approved Code of Practice comes into operation on 9 October 2000.

Signed



T.J. Keyes

Chief Executive of the Health and Safety Executive for Northern Ireland

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Introduction

1 The Health and Safety (First-Aid) Regulations (NI) 1982 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 the first-aid at work section of the Health and Safety Executive for Northern Ireland's (HSENI) website (see Further Information). These regulations apply to all workplaces, including those with less than five employees, and to the self-employed. This new guidance takes account of and mirrors changes introduced by the Health and Safety Executive in Great Britain (HSEGB) to its guidance including that on first-aid at work training.

2 This publication contains the Regulations, Approved Code of Practice (ACoP) and guidance. Boxes containing dark shading denote Regulation (italicised) and boxes with light shading denote ACoP. Guidance is contained in numbered paragraphs without shading.

Regulation 1

Citation and commencement

Regulation

1

These Regulations may be cited as the Health and Safety (First-Aid) Regulations (Northern Ireland) 1982 and shall come into operation on 1st July 1983.

Regulation 2

Interpretation

Regulation

2

In these Regulations, "the Executive" means the Health and Safety Executive for Northern Ireland;

"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 156 of the Mines Act (Northern Ireland) 1969.^{(a)(b)}

(a) 1969 c. 6 (N.I.), (b) Regulation 2 was amended by SR 1999 No. 150

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DEFINITION OF FIRST-AID ATWORK

3 Employers have a legal duty to make arrangements to ensure their employees receive immediate attention if they are injured or become

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ill at work. It is important to give them immediate attention and call an ambulance in serious cases whether the injury or illness is caused by the work they do or not. 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 have the competences and skills to take action beyond the initial management stage.

Regulation 3

Duty of employer to make provision for first-aid

Regulation

(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 is 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 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

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Regulation

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may appoint such a person, or ensure that such a person is appointed.

(5) Any first-aid room provided pursuant to this regulation shall be easily accessible to stretchers and to any other equipment needed to convey patients to and from the room and be sign-posted, and such sign to comply with regulation 4 of the Health and Safety (Safety Signs and Signals) Regulations (Northern Ireland) 1996^(a) as if it were provided in accordance with that regulation.^(b)

(a) S.R. 1996 No. 119, (b) Regulation 3 was amended by S.R. 1999 No. 150 and S.R. 2003 No. 423

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ASSESSMENT OF NEED

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

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

- to give immediate assistance to casualties with injuries or illnesses including those likely to arise from specific hazards at work;
- to summon an ambulance or other professional help.

5 Where an employer provides **first-aiders** in the workplace (see paragraphs 48 – 61), they should have a valid certificate of competence in either first-aid at work (FAW see Appendix 4) or emergency first-aid at work (EFAW see Appendix 5). 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 illnesses (see paragraphs 48-61).

6 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 62- 64).

7 The first-aid provision an employer has to make will be dictated by the circumstances of each workplace (see Appendix 3). 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 the responsibility for carrying out the assessment and advising on first-aid provision to them.

8 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

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record the results. Employers might need to justify their level of first-aid provision.

9 In assessing their needs, employers should consider:

- the nature of the work and workplace hazards and risks;
- the size of the organisation;
- the nature of the workforce;
- the organisation's history of accidents;
- the needs of travelling, remote and lone workers;
- work patterns;
- the distribution of the workforce;
- the remoteness of the site from emergency medical services;
- employees working on shared or multi-occupied sites;
- annual leave and other absences of first-aiders and appointed persons;
- first-aid provision for non-employees.

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

Nature of the work

11 The Management of Health and Safety at Work Regulations (NI) 2000 require employers to make an assessment of the risks to health and safety of their employees at work and to identify those measures they need to take to prevent or control these risks.^{1,2} 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 determine the most appropriate type, quantity and location of first-aid equipment, facilities and personnel to provide.

12 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 these hazards and the injuries that might arise. The Table is not intended to be comprehensive. It does not cover all hazards that may be present in the workplace or all injuries that might occur. It should also be remembered that an employee may become ill at any time. A "first-aid needs assessment" should consider this possibility, whether or

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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 HSENI's website (see Further Information).

Table 1 Hazards commonly found in the workplace

| Hazard | Causes of accidents | Examples of injury requiring first-aid |
|-----------------------|--|--|
| Chemicals | Exposure during handling; spillages; splashing; leaks. | Poisoning, loss of consciousness, burns, eye injuries. |
| Electricity | 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. | Electric shock, burns. |
| Machinery | Loose hair or clothing becoming tangled in machinery; being hit by moving parts or material thrown from machinery; contact with sharp edges. | Crush injuries, amputations, fractures, lacerations, eye injuries. |
| Manual handling | Repetitive and/or heavy lifting, bending and twisting; exerting too much force; handling bulky or unstable loads; handling in uncomfortable working positions. | Fractures, lacerations, sprains and strains. |
| Slip and trip hazards | Uneven floors; trailing cables; obstructions; slippery surfaces due to spillages; worn carpets and mats. | Fractures, lacerations, sprains and strains. |
| Work at height | Overreaching or overbalancing when using ladders; falling off or through a roof. | Head injury, loss of consciousness, spinal injury, fractures, sprains and strains. |
| Workplace transport | 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. | Crush injuries, head injury, fractures, sprains and strains. |

13 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

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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.

14 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.

15. In deciding on their first-aid provision, employers will need to take account of the 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. The results of these separate assessments need to be carried over in the assessment of first-aid needs. This will mean that first-aid provision could vary between departments or buildings.

Size of the organisation

16 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.

17 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

18 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.³

Guidance**History of accidents**

19 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 what first-aid materials and equipment are necessary, where first-aiders should be located, what geographical area they should be required to cover etc.

Needs of travelling, remote and lone workers

20 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

21 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

22 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 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

23 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

24 On a shared or multi-occupied site, employers can arrange for

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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 misunderstanding.

25 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 appropriate first-aid provision.

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

26 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 (see also paragraphs 9 & 18)

27 These regulations do not oblige employers to provide first-aid for anyone other than their own employees. Indeed, regulations requiring first-aid provision for members of the public cannot be made under the Health and Safety at Work (NI) Order 1978. 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.

28 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:

- the level of provision for employees does not fall below the standard required by these Regulations;
- the level of provision for non-employees complies with any other relevant legislation and guidance.

Review of first-aid provision

29 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 30 to 31).

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Records

30 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 Information). 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:

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

31 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 accident book (see Further Information), though the two might be combined.

RIDDOR

32 Employers, self-employed people and those in control of premises have a duty to report some injuries and incidents at work under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (NI) 1997 (RIDDOR).⁴ Such incidents should be reported to your local enforcement authority (HSENI, online through the HSENI website or the local District Council).

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FIRST-AID MATERIALS, EQUIPMENT AND FACILITIES

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

The minimum level of first-aid equipment is a suitably stocked and

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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.

Guidance

33 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.⁵

34 **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 would be:

- a leaflet giving general guidance on first-aid (for example, HSE’s leaflet: *Basic advice on first-aid at work* ⁶);
- 20 individually wrapped, sterile adhesive dressings (assorted sizes), appropriate to the type of work (hypoallergenic plasters can be provided, if necessary; dressings may be of a detectable type for food handlers);
- two sterile eye pads;
- four individually wrapped triangular bandages, preferably sterile;
- six safety pins;
- two large sterile individually wrapped unmedicated wound dressings;
- six medium sized individually wrapped sterile unmedicated wound dressings;
- a pair of disposable gloves (see HSE’s free leaflet: *Latex and you* ⁷).

This is a suggested contents list only – equivalent but different items will be considered acceptable.

35 The contents of first-aid containers should be examined periodically and restocked as soon as possible 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

36 The needs assessment may indicate that additional materials and equipment are required, for example scissors, adhesive tape, disposable

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aprons and individually wrapped moist wipes. They may be kept in the first-aid container if there is room, but they may be stored separately as long as they are available for use if required.

37 In particular circumstances the assessment might identify a need for items such as protective equipment, in case, for example, first-aiders have to enter dangerous atmospheres; or blankets to protect casualties from the elements. These additional items should be securely stored near the first-aid container, in the first-aid room or in the hazard area, as appropriate. It is important that access to these items is restricted to people trained in their use.

38 Where mains tap water is not readily available for eye irrigation, at least one litre of sterile water or sterile normal saline (0.9%) in sealed, disposable containers should be provided. Once the seal has been broken, the containers should not be kept for re-use. Sterile eye irrigation liquids should not be used beyond their expiry date.

Tablets and medication

39 The administration of tablets and other types of medicines is not a provision under first-aid at work. 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.⁸ It is recommended that tablets and medicines should not be kept in the first-aid container.

40 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-aiders' role is generally limited to helping them do so and contacting the emergency services as appropriate.

Automated external defibrillators

41 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). HSENI does not specify the content of this training and organisations providing it do not need HSENI approval.

Travelling first-aid kits

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

- a leaflet giving general guidance on first-aid (for example HSE's leaflet: *Basic advice on first-aid at work* ⁶);
- six individually wrapped, sterile adhesive dressings (hypoallergenic plasters can be provided, if necessary; dressings may be of a detectable type for food handlers);

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- two safety pins;
- two triangular bandages;
- one large sterile unmedicated dressing;
- individually wrapped moist cleansing wipes;
- a pair of disposable gloves (see HSE's free leaflet: *Latex and you*⁷).

This is a suggested contents list only – equivalent but different items will be acceptable.

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43 Suitable arrangements should be in place for restocking kits.

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First-aid rooms

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.

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44 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 the room. The room(s) should be clearly signposted and identified by white lettering or symbols on a green background.⁹

45 First-aid rooms should:

- 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;
- have washable surfaces and adequate heating, ventilation, and lighting;
- be kept clean, tidy, accessible and available for use at all times when employees are at work;
- be positioned as near as possible to a point of access for transport to hospital;
- display a notice on the door advising of the names, locations, and if appropriate, telephone extensions of first-aiders and how to contact them.

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46 Typical examples of the equipment and facilities a first-aid room may

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contain are:

- a sink with hot and cold running water;
- drinking water with disposable cups;
- soap and paper towels;
- a store for first-aid materials;
- foot-operated refuse containers, lined with disposable yellow clinical waste bags or a container suitable for the safe disposal of clinical waste;
- an examination/medical couch with waterproof protection and clean pillows and blankets (a paper couch roll may be used that is changed between casualties);
- a chair;
- a telephone or other communication equipment;
- a record book for recording incidents attended by a first-aider or appointed person (see paragraphs 30-31).

47 If the first-aid room(s) cannot be reserved exclusively for providing 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:

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

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FIRST-AID PERSONNEL**First-aiders**

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.

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How many first-aiders are needed?

Guidance

48 The findings of the “first-aid needs assessment” (paragraphs 4-31) will help employers to 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.

49 After completing the checklist in Appendix 1, the flowchart in Appendix 3 serves as a 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?

50 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:

- reliability, disposition and communication skills;
- aptitude and ability to absorb new knowledge and learn new skills;
- ability to cope with stressful and physically demanding emergency procedures;
- 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?

51 Before taking up first-aid duties, a first-aider should have undertaken training and have a qualification that HSENI/HSEGB approves (a memorandum of understanding exists between HSENI and HSEGB to allow mutual recognition of FAW qualifications ¹⁰). This means that they must hold a valid certificate of competence in either:

- **first-aid at work (FAW)**, issued by a training organisation approved by HSENI or a recognised Awarding Body of the Office of Qualifications and Examinations Regulation (Ofqual/ Scottish Qualifications Authority) ;
- **emergency first-aid at work (EFAW)**, issued by a training organisation approved by HSENI or a recognised Awarding Body of the Office of Qualifications and Examinations Regulation (Ofqual/ Scottish Qualifications Authority).

52 A list of approved training organisations and Awarding Bodies is available from the HSENI website.

53 Providing they have current knowledge and practical skills in first-

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aid, including resuscitation and are familiar with the current standards that HSENI accepts for the first-aid management of injuries and illness, the training and experience of the following qualify them to administer first-aid in the workplace:

- registered doctors holding a licence to practise issued by the General Medical Council;
- nurses registered with the Nursing and Midwifery Council;
- paramedics registered with the Health Professions Council.

54 The findings of any needs assessment (see Appendix 1) can be used to help employers decide whether their first-aiders should be trained in FAW or EFAW. If an assessment indicates that first-aiders should be trained to FAW standard, it is not acceptable to provide first-aiders with a certificate to EFAW standard. As a guide, the flow chart in Appendix 3 suggests the first-aid personnel to provide under different circumstances.

55 The contents of FAW and EFAW courses are listed in Appendices 4 and 5. Training courses offer a basic curriculum. When arranging training, employers should let the training organisation know of any particular hazards at work so that, if possible, the training can be tailored to their needs.

56 Additional training may be necessary to cover less common risks so that first-aiders can cope with particular problems. For example, more in-depth specific training would be advisable in cases where first-aid may need to be given because of risks from hydrofluoric acid or work in confined spaces. Similarly, further training would be required for personnel who may need to use a defibrillator (see paragraph 41). The content of these additional training courses is not specified by HSENI. 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 HSENI approval for this purpose.

Certificates

57 FAW and EFAW certificates are valid for three years. Employers need to arrange retraining prior to the certificate expiry date. 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.

Guidance

58 An employee's competence will decline over time if skills are not used regularly and therefore training needs to be repeated periodically to ensure competence.¹¹ HSENI strongly recommend 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 and protocols.

59 Employers should encourage first-aiders to regularly refresh their first-aid training through the use of the course manual and other relevant material and where possible should allocate them time to do this. It will further help to maintain their first-aid skills.

60 Any training organisation approved by HSENI or a recognised Awarding Body of Ofqual can run annual refresher courses. A list of relevant training organisations and Awarding Bodies is available from HSENI's website. Where available, in-house occupational health professionals (a registered doctor holding a licence to practise issued by the General Medical Council or a nurse registered with the Nursing and Midwifery Council) can run annual refresher training in the workplace, provided they can demonstrate that they have competence in practical first-aid skills, are competent to train and are familiar with the current standards HSENI accepts for the first-aid management of injuries and illness in the workplace.

61 Employers are advised to keep a record of first-aiders and certification dates to help with the timely arrangement of further training.

3

ACoP

Appointed persons

Where an employer's assessment of first-aid needs identifies that a first-aid 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 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.

3

Guidance

62 Even in organisations with comparatively low health and safety risks where first-aiders are considered unnecessary, there is always the possibility of an accident or sudden illness. It is important, therefore, that someone is always available to take immediate action such as calling the emergency services when required and to take charge of other first-aid arrangements, such as oversight of equipment and facilities. 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.

63 To fulfil their role, appointed persons do not need first-aid training, though emergency first-aid courses are available. It is important to remember that they are not first-aiders and should not attempt to give first-

3

Guidance

aid for which they have not been trained. Given the possibility of an injury or sudden illness, employers may wish to consider providing qualified first-aiders including those trained in emergency first-aid as distinct from appointed persons.

3

64 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). Remember, 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

Regulation

4

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.

Guidance

Information for Employees

65 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. The procedures 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.

66 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. For example:-

- Visually impaired employees could be informed by tape recorded messages or communications in Braille;
- Employees with language difficulties could be informed by means of translated first-aid notices.

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.

4

Regulation 5

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

Regulation

5

A self-employed person shall provide, or ensure that 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.

Guidance

Duties of Self-Employed Persons

67 The systematic approach to assessment, set out in paragraphs 4-31, 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.

68 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 24-25, joint arrangements can be made with other occupiers to provide common cover.

5

Regulation 6

Power to grant exemptions*

Regulation 6

**Revoked by regulation 24 of the Management of Health and Safety at Work Regulations (Northern Ireland) 2000.(S.R. 2000 No.388)*

Regulation 7

Cases where these Regulations do not apply

Regulation 7

These Regulations shall not apply-

(a) where the Merchant Shipping (Medical Scales) (Fishing Vessels) Regulations 1974^(a) apply;

(b) where the Merchant Shipping (Medical Stores) Regulations 1986^(b) apply;

(c) on vessels which are registered outside the United Kingdom;

(d) to a mine of coal, stratified ironstone, shale or fireclay;

(e) in respect of the armed forces of the Crown and any force to which any provision of the Visiting Forces Act 1952^(c) applies;

(f) where the Diving at Work Regulations (Northern Ireland) 2005^(d) apply;

(g) where the Offshore Installations and Pipeline Works (First-Aid) Regulations (Northern Ireland) 1993^(e) apply^(f).

(a) S.I. 1874/1192

(b) SI 1986/144

(c) 1952 c.67

(d) SR. 2005 No.45

(e) SR. 1993 No.323

(f) Regulation 7 was amended by S.R. 1993 No. 323 and S.R. 2005 No. 45

7

Regulation 8

Application to miscellaneous mines

Regulation 8

In their application to mines not excluded from these Regulations by Regulation 7(d). 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.

8

Regulation 9
and Schedules
1 and 2

Regulation
9

Repeals, revocations and modification

Regulation 9 and Schedules 1 and 2 are not reproduced here as they simply repealed, revoked and modified various earlier statutory provisions.

APPENDIX 1

CHECKLIST FOR ASSESSMENT OF FIRST-AID NEEDS

The checklist below will help you assess what first-aid provision you need to make for your workplace.

| FACTOR TO CONSIDER | SPACE FOR NOTES | IMPACT ON FIRST-AID PROVISION |
|---|-----------------|---|
| HAZARDS – use the findings of your risk assessment and take account of any parts of your workplace that have a variety of work activities/ hazards which may require different levels of first-aid provision | | |
| Does your workplace have low hazards such as those that might be found in offices and shops? | | The minimum provision is: <ul style="list-style-type: none"> • an appointed person to take charge of first-aid arrangements; • a suitably stocked first-aid box. |
| Does your workplace have higher hazards such as chemicals or dangerous machinery? Do your work activities involve special hazards such as hydrofluoric acid or confined spaces? | | You should consider: <ul style="list-style-type: none"> • 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. |
| EMPLOYEES | | |
| How many people are employed on site? | | Where there are small numbers of employees, the minimum provision is: <ul style="list-style-type: none"> • an appointed person to take charge of first-aid arrangements; • a suitably stocked first-aid box. <p>Even in workplaces with a small number of employees, there is still the possibility of an injury or sudden illness so you should consider providing a qualified first-aid.</p> <p>Where there are large numbers of employees you should consider providing:</p> <ul style="list-style-type: none"> • first-aiders; • additional first-aid equipment; • a first-aid room. |

| | | |
|---|--|---|
| <p>Are there inexperienced workers on site, or employees with disabilities or special health problems?</p> | | <p>You should consider:</p> <ul style="list-style-type: none"> • additional training for first-aiders; • additional first-aid equipment; • local siting of first-aid equipment. <p>Your first-aid provision should cover any work experience trainees.</p> |
| RECORD OF ACCIDENTS AND ILL HEALTH | | |
| <p>What is your record of accidents and ill health?</p> <p>What injuries and illness have occurred and where did they happen?</p> | | <p>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.</p> |
| WORKING ARRANGEMENTS | | |
| <p>Do you have employees who travel a lot, work remotely or work alone?</p> | | <p>You should consider:</p> <ul style="list-style-type: none"> • issuing personal first-aid kits; • issuing personal communicators to remote workers; • issuing mobile phones to lone workers. |
| <p>Do any of your employees work shifts or work out of hours?</p> | | <p>You should ensure there is adequate first-aid provision at all times people are at work.</p> |
| <p>Are the premises spread out, for example are there several buildings on the site or multi-floor buildings?</p> | | <p>You should consider provision in each building or on each floor.</p> |
| <p>Is your workplace remote from emergency medical services?</p> | | <p>You should:</p> <ul style="list-style-type: none"> • consider special arrangements with the emergency services; • inform the emergency services of your location. |
| <p>Do any of your employees work at sites occupied by other employers?</p> | | <p>You should make arrangements with other site occupiers to ensure adequate provision of first-aid. A written agreement between employers is strongly recommended.</p> |

| | | |
|---|--|---|
| <p>Do you have sufficient provision to cover absences of first-aiders or appointed persons?</p> | | <p>You should consider:</p> <ul style="list-style-type: none"> • what cover is needed for annual leave and other planned absences; • what cover is needed for unplanned and exceptional absences. |
| <p>NON-EMPLOYEES</p> | | |
| <p>Do members of the public visit your premises?</p> | | <p>Under the Regulations, you have no legal obligation to provide first-aid for non-employees but HSENI strongly recommends that you include them in your first-aid provision.</p> |

APPENDIX 2

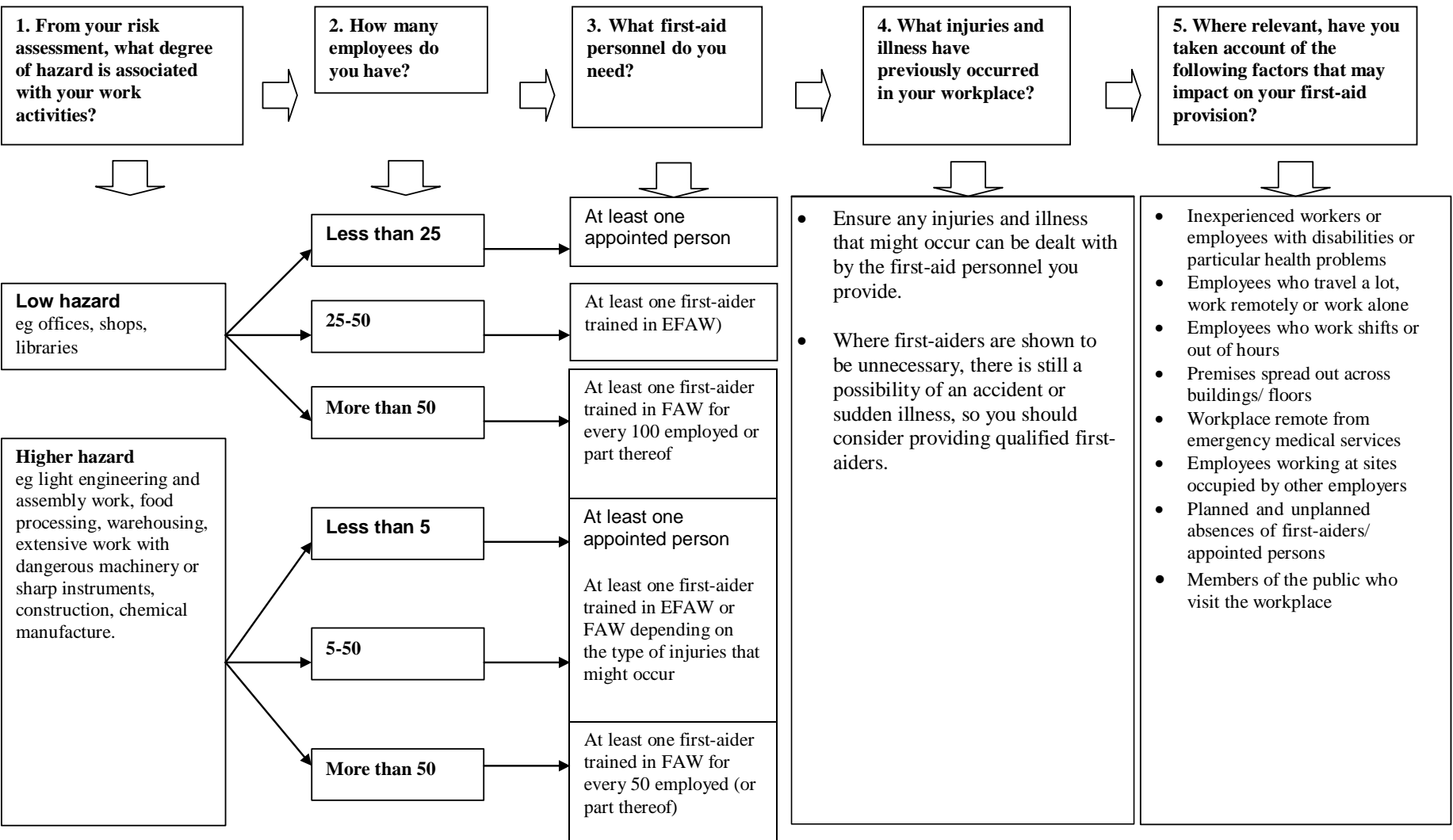
RECORD OF FIRST-AID PROVISION*

| First-aid personnel | Required Yes/No | Number needed |
|---|----------------------------|--------------------------|
| First-aider with a first-aid at work certificate | | |
| First-aider with an emergency first-aid at work certificate | | |
| First-aider with additional training (specify) | | |
| Appointed person | | |
| First-aid equipment and facilities | Required Yes/No | Number needed |
| First-aid container | | |
| Additional equipment (specify) | | |
| Travelling first-aid kit | | |
| First-aid room | | |

* The minimum first-aid provision for each work site is:

- an appointed person to take charge of first-aid arrangements;
- a suitably stocked first-aid box;
- provision of information for employees about the first-aid arrangements.

SUGGESTED NUMBERS* OF FIRST-AID PERSONNEL TO BE AVAILABLE AT ALL TIMES PEOPLE ARE AT WORK. (IRRESPECTIVE OF SIZE – THE MINIMUM REQUIREMENT FOR ANY BUSINESS IS ONE APPOINTED PERSON *)



APPENDIX 4

CONTENT OF A FIRST-AID AT WORK COURSE

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

Provide emergency first-aid at work (see Appendix 5) ie.

- (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 wounded and bleeding;
- (f) administer first-aid to a casualty who is choking;
- (g) administer first-aid to a casualty who is suffering from shock;
- (h) provide appropriate first-aid for minor injuries

and

Administer first-aid to a casualty with:

- injuries to bones, muscles and joints, including suspected spinal injuries;
- chest injuries;
- burns and scalds;
- eye injuries;
- anaphylactic shock;
- sudden poisoning

and

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

- assess the situation in an emergency;
- administer first-aid to a casualty who is unconscious (including seizure);
- administer cardiopulmonary resuscitation;
- administer first-aid to a casualty who is wounded and bleeding;
- administer first-aid to a casualty who is suffering from shock.

REFERENCES AND FURTHER READING

REFERENCES

- 1 The HSE Management of Health and Safety at work approved Code of Practices (ACOP – L21) has been withdrawn.
www.hse.gov.uk/pubns/books/l21.htm A revised and enhanced online version of Managing for Health and Safety (also known as HSG65) can be found on the HSE website. www.hse.gov.uk/pubns/books/hsg65.htm
- 2 Risk assessment simplified – download free from
www.hseni.gov.uk/publications/risk-assessment-simplified
- 3 Guidance on employers' duties in relation to first-aid, charity and voluntary workers is contained in Charity and Voluntary workers: A Guide to Health and Safety at Work. (HSG192) HSE accessible on
www.hse.gov.uk/pubns/priced/hsg192.pdf
- 4 A guide to the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) (NI) 1997. HSENI 1998. ISBN 0-337-11259-1. www.hseni.gov.uk/publications/riddor-ni-97-booklet
- 5 Safety signs and signals. The Health and Safety (Safety Signs and Signals) Regulations (Northern Ireland) 1996. Statutory Rule 1996 No. 119.
- 6 Basic advice on first aid at work INDG347W (rev1). HSE Books. 2006 ISBN 97 807 1766 1930. www.hse.gov.uk/pubns/indg347.pdf
- 7 HSE skin at work web pages
www.hse.gov.uk/skin/employ/gloves.htm
- 8 First-aid training and qualifications for the purposes of the Health and Safety (First-aid) Regulations (Northern Ireland) 1982. A guide for training organisations www.hseni.gov.uk/
- 9 Safety signs and signals. The Health and Safety (Safety Signs and Signals) Regulations (Northern Ireland) 1996. Statutory Rule 1996 No. 119.
- 10 Regulation 13 of the Management of Health and Safety at Work Regulations (Northern Ireland) 2000.
www.legislation.gov.uk/nisr/2000/388/regulation/13/made

FURTHER READING

- First-aid at work: your questions answered. www.hseni.gov.uk/
- Basic advice on first-aid at work (poster). HSE Books. 2006.
ISBN 978 07176 6432 0.
hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717664320
- Electric shock: first-aid procedures (poster). HSE Books. 2011.
ISBN 978 07176 6433 7
hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717664337

FURTHER INFORMATION

Information on many aspects of first-aid at work is available on the first-aid web pages of HSENI's website at: www.hseni.gov.uk/

Information on health and safety is available on HSENI's website at: www.hseni.gov.uk/

HSE issued an Accident Book (BI 150 ISBN 0 7176 2603 2) in 2003, taking into account the requirements of the Data Protection Act 1998 (DPA). More detailed information about DPA can be found on the website of the Information Commissioner's Office at: ico.org.uk/

To report an accident or incident under RIDDOR, please contact HSENI or your local District Council offices (depending on the enforcing authority for your premises).

Information on training in the use of automated external defibrillators is available from the Resuscitation Council UK at <https://www.resus.org.uk/>

Lists of first-aid training organisations and Awarding Bodies are available on the HSENI website: www.hseni.gov.uk/

For enquiries about health and safety at work please ring HSENI's Information and Advice line on 0800 0320 121.

First aid at work

Approved Code of Practice and Guidance

The Health and Safety (First-Aid) Regulations (Northern Ireland) 1982

