



UNIT-5

Basic First Aid

Learning Outcomes

By the end of this unit the learner will be able to:

Unit 5

Basic First Aid

What is first aid at work?

People at work can suffer injuries or be taken ill. It doesn't matter whether the injury or illness is caused by the work they do or not, it is important to give them immediate attention and call an ambulance in serious cases. You should make arrangements to ensure this happens. It can save lives and prevent minor injuries becoming major ones.

The Health and Safety (First-Aid) Regulations 1981 require you to provide adequate and appropriate first-aid equipment, facilities and people so your employees can be given immediate help if they are injured or taken ill at work. What is 'adequate and appropriate' will depend on the circumstances in your workplace and you should assess what your first-aid needs are.

The minimum first-aid provision on any work site is: a suitably stocked first-aid kit an appointed person to take charge of first-aid arrangements; information for employees about first-aid arrangements.

What is an appointed person?

Where your assessment of first-aid needs identifies that a trained first-aider is not required in your workplace, you should appoint someone to take charge of first-aid arrangements. This is the minimum requirement. Even in a small, low-hazard business where first-aiders are not considered necessary, there is always the possibility that an accident or sudden illness may occur. It is therefore important that there is always someone available to take charge of these arrangements. The role of this appointed person includes looking after 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 (annual leave does not count). An appointed person does not need first-aid training. An appointed person is not necessary where there are an adequate number of appropriately trained first-aiders.

What is a first-aider?

A first-aider is someone who has done training appropriate to the level identified in the needs assessment. This may be: first aid at work (FAW); or emergency first aid at work (EFAW); or some other first-aid training appropriate to the particular circumstances of your workplace.

First aid

You need to assess your first-aid requirements to help you decide what equipment and facilities you need, and how many first-aid personnel you should provide. The minimum first-aid provision in any workplace is:

- a suitably stocked first-aid box
- an appointed person to take charge of first-aid arrangements

You also need to put up notices telling your employees where they can find:

- the first-aiders or appointed persons
- the first-aid box

Your assessment may also indicate that you should provide a first-aid room, particularly where your work involves certain hazards, including some of those found in chemical industries and on large construction sites.

If you are self-employed you should have equipment to be able to provide first aid to yourself at work. You should make an assessment of the hazards and risks in your workplace and establish an appropriate level of first-aid provision.

If you carry out low-risk activities (eg clerical work) in your own home, you only need to provide first-aid equipment appropriate to your normal domestic needs. If your work involves driving long distances or you are continuously on the road, your assessment may identify the need to keep a personal first-aid kit in your vehicle.

First-aid equipment

What first-aid equipment should be provided?

Once an assessment of first-aid needs has been carried out, the findings can be used to decide what first-aid equipment should be provided in the workplace. The minimum requirement is a suitably stocked first-aid box, **see FAQ 'First-aid box'**. The assessment may indicate that additional materials and equipment are required such as scissors, hypoallergenic microporous adhesive tape, disposable aprons and individually wrapped, moist wipes. They may be put in the first-aid box or stored separately. If 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. When the seal has been broken, containers should not be kept for reuse. Containers should also not be used beyond their expiry date.

What should a first-aid box in the workplace contain?

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 leaflet giving general guidance on first aid (for example, HSE's leaflet Basic advice on first aid at work);
- individually wrapped sterile plasters (assorted sizes), appropriate to the type of work (hypoallergenic plasters can be provided if necessary);
- sterile eye pads;
- individually wrapped triangular bandages, preferably sterile;
- safety pins;

- large sterile individually wrapped unmedicated wound dressings;
- medium-sized sterile individually wrapped unmedicated wound dressings;
- disposable gloves

How often should the contents of first-aid boxes be replaced?

Although there is no specified review timetable, many items, particularly sterile ones, are marked with expiry dates. They should be replaced by the dates given and expired items disposed of safely. In cases where sterile items have no dates, it would be advisable to check with the manufacturers to find out how long they can be kept. For non-sterile items without dates, it is a matter of judgement, based on whether they are fit for purpose.

First aid for travelling, remote and lone workers

I have employees who travel regularly or work elsewhere, what should I do about first-aid provision for them?

Employers are responsible for meeting the first-aid needs of their employees working away from the main site. The assessment of first-aid needs should determine whether:

- those who travel long distances or are continuously mobile should carry a personal first-aid box; and
- employees should be issued with personal communicators/mobile phones.

First aid needs assessment

HSE cannot tell you what provision you should make for first aid. You, as an employer, are best placed to understand the exact nature of your workplace and decide what you need to provide.

First aid provision must be 'adequate and appropriate in the circumstances'. This means that you must provide sufficient first aid equipment (first aid kit), facilities and personnel at all times.

In order to decide what provision you need to make you should undertake a first-aid needs assessment. This assessment should consider the circumstances of your workplace, workforce and the hazards and risks that may be present. The findings will help you decide what first-aid arrangements you need to put in place.

In assessing your first-aid needs, you should consider:

- the nature of the work you do
- workplace hazards and risks (including specific hazards requiring special arrangements)
- the nature and size of your workforce
- the work patterns of your staff

- holiday and other absences of those who will be first-aiders and appointed persons
- your organisation's history of accidents
- You may also need to consider:
 - the needs of travelling, remote and lone workers
 - the distribution of your workforce
 - the remoteness of any of your sites from emergency medical services
 - whether your employees work on shared or multi-occupancy sites
 - first-aid provision for non-employees (eg members of the public).

Record keeping

Do I need to record incidents requiring the attention of a first-aider?

It is good practice to provide your first-aiders and appointed persons with a book in which to record incidents they attend. The information can help you 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. The record book is not the same as the statutory accident book though the two might be combined.

Employers, self-employed people and those in control of premises have a duty to report some accidents and incidents at work under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).

What information should be recorded?

Useful information to record includes:

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

Who is responsible for keeping the records?

It is usually the first-aider or appointed person who looks after the book. However, employers have overall responsibility.

Table 1 Checklist for assessment of first-aid needs

Point to consider	Impact on first-aid provision
<p>Hazards (use the findings of your general risk assessment and take account of any parts of your workplace with different work activities/hazards that may require different levels of first-aid provision)</p>	
<p>Does your workplace have low-level hazards, eg the ones you might find in offices and shops?</p>	<p>The minimum provision is:</p> <ul style="list-style-type: none"> ● an appointed person to take charge of first-aid arrangements; ● a suitably stocked first-aid kit.
<p>Does your workplace have higher-level hazards, such as chemicals or dangerous machinery? Do your work activities involve special hazards, such as hydrofluoric acid or confined spaces?</p>	<p>You should consider:</p> <ul style="list-style-type: none"> ● providing first-aiders; ● additional training for first-aiders to deal with injuries caused by special hazards; ● additional first-aid equipment; ● precise location of first-aid equipment; ● providing a first-aid room; ● informing the emergency services in advance.
<p>Employees</p>	
<p>How many people are employed on site?</p>	<p>The minimum provision is:</p> <ul style="list-style-type: none"> ● an appointed person to take charge of first-aid arrangements; ● a suitably stocked first-aid box. <p>Depending on your circumstances, 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 (including those on 'work experience'), or employees with disabilities or particular health problems?</p>	<p>You should consider:</p> <ul style="list-style-type: none"> ● additional training for first-aiders; ● additional first-aid equipment; ● location of first-aid equipment.
<p>Accidents and ill-health records</p>	
<p>What injuries and illness have occurred in your workplace and where did they happen?</p>	<p>Make sure your first-aid provision caters 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>

Point to consider	Impact on first-aid provision
Working arrangements	
Do you have employees who travel a lot, work remotely or work alone?	You should consider: <ul style="list-style-type: none"> ● 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, eg 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: <ul style="list-style-type: none"> ● inform the emergency services of your location; ● consider special arrangements with the emergency services; ● consider emergency transport requirements.
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 enough provision to cover for your first-aiders or appointed persons when they are absent?	You should consider: <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.
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.

Table 2 Suggested numbers of first-aid personnel to be available at all times people are at work

From your risk assessment, what degree of hazard is associated with your work activities?	How many employees do you have?	What first-aid personnel do you need?
Low-hazard , eg offices, shops, libraries	Fewer 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 FAW for every 100 employed (or part thereof)
Higher-hazard , eg light engineering and assembly work, food processing, warehousing, extensive work with dangerous machinery or sharp instruments, construction, chemical manufacture	Fewer than 5	At least one appointed person
	5–50	At least one first-aider trained in EFAW or FAW depending on the type of injuries that might occur
	More than 50	At least one first-aider trained in FAW for every 50 employed (or part thereof)

What to do in an emergency

Priorities

Your priorities are to:

- assess the situation – do not put yourself in danger;
- make the area safe;
- assess all casualties and attend first to any **unconscious** casualties;
- send for help – do not delay.

Check for a response

Gently shake the casualty's shoulders and ask loudly, 'Are you all right?'

If there is no response, your priorities are to:

- shout for help;
- open the airway;
- check for normal breathing;
- take appropriate action.

A Airway

To open the airway:

- place your hand on the casualty's forehead and gently tilt the head back;
- lift the chin with two fingertips.



B Breathing

Look, listen and feel for normal breathing for no more than 10 seconds:

- look for chest movement;
- listen at the casualty's mouth for breath sounds;
- feel for air on your cheek.



If the casualty is breathing normally:

- place in the recovery position;
- get help;
- check for continued breathing.



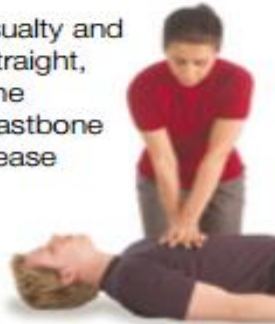
If the casualty is not breathing normally:

- get help and call for an AED* if available
- start chest compressions (see CPR).

C CPR

To start chest compressions:

- lean over the casualty and with your arms straight, press down on the centre of the breastbone 5–6 cm, then release the pressure;
- repeat at a rate of about 100–120 times a minute;
- after 30 compressions open the airway again;
- If an AED* is available use in accordance with your training/ manufacturer's instructions
- pinch the casualty's nose closed and allow the mouth to open;
- take a normal breath and place your mouth around the casualty's mouth, making a good seal;
- blow steadily into the mouth while watching for the chest rising;



- remove your mouth from the casualty and watch for the chest falling;
- give a second breath and then start 30 compressions again without delay;
- continue with chest compressions and rescue breaths in a ratio of 30:2 until qualified help takes over or the casualty starts breathing normally.

Severe bleeding

If there is severe bleeding:

- apply direct pressure to the wound;
- raise and support the injured part (unless broken);
- apply a dressing and bandage firmly in place.

Broken bones and spinal injuries

If a broken bone or spinal injury is suspected, **obtain expert help**. **Do not move casualties** unless they are in immediate danger.

Burns

Burns can be serious so if in doubt, seek medical help. Cool the affected part of the body with cold water until pain is relieved. Thorough cooling may take 10 minutes or more, but this must not delay taking the casualty to hospital.

Certain chemicals may seriously irritate or damage the skin. Avoid

contaminating yourself with the chemical. Treat in the same way as for other burns but flood the affected area with water for 20 minutes. Continue treatment even on the way to hospital, if necessary. Remove any contaminated clothing which is not stuck to the skin.

Eye injuries

All eye injuries are potentially serious. If there is something in the eye, wash out the eye with clean water or sterile fluid from a sealed container, to remove loose material. **Do not attempt to remove anything that is embedded in the eye.**

If chemicals are involved, flush the eye with water or sterile fluid for at least 10 minutes, while gently holding the eyelids open. Ask the casualty to hold a pad over the injured eye and send them to hospital.

Record keeping

It is good practice to use a book for recording any incidents involving injuries or illness which you have attended. Include the following information in your entry:

- the date, time and place of the incident;
- the name and job of the injured or ill person;
- details of the injury/illness and any first aid given;
- what happened to the casualty

immediately afterwards (eg went back to work, went home, went to hospital);

- the name and signature of the person dealing with the incident.

This information can help identify accident trends and possible areas for improvement in the control of health and safety risks.

Emergency procedures

Workplaces need a plan for emergencies that can have a wider impact. Special procedures are needed for emergencies such as serious injuries, explosion, flood, poisoning, electrocution, fire, release of radioactivity and chemical spills.

Quick and effective action may help to ease the situation and reduce the consequences. However, in emergencies people are more likely to respond reliably if they:

- are well trained and competent
- take part in regular and realistic practice

- have clearly agreed, recorded and rehearsed plans, actions and responsibilities
- Write an emergency plan if a major incident at your workplace could involve risks to the public, rescuing employees or co-ordinating emergency services.

Where you share your workplace with another employer you should consider whether your emergency plans and procedures should be co-ordinated.

Points to include in emergency procedures

- Consider what might happen and how the alarm will be raised. Don't forget night and shift working, weekends and times when the premises are closed, eg holidays
- Plan what to do, including how to call the emergency services. Help them by clearly marking your premises from the road. Consider drawing up a simple plan showing the location of hazardous items
- If you have 25 tonnes or more of dangerous substances, you must notify the fire and rescue service and put up warning signs
- Decide where to go to reach a place of safety or to get rescue equipment. You must provide suitable forms of emergency lighting
- You must make sure there are enough emergency exits for everyone to escape quickly, and keep emergency doors and escape routes unobstructed and clearly marked
- Nominate competent people to take control (a competent person is someone with the necessary skills, knowledge and experience to manage health and safety)
- Decide which other key people you need, such as a nominated incident controller, someone who is able to provide technical and other site-specific information if necessary, or first-aiders
- Plan essential actions such as emergency plant shutdown, isolation or making processes safe. Clearly identify important items like shut-off valves and electrical isolators etc
- You must train everyone in emergency procedures. Don't forget the needs of people with disabilities and vulnerable workers
- Work should not resume after an emergency if a serious danger remains. If you have any doubts ask for assistance from the emergency services

Reporting accidents, incidents and diseases

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) require employers, or in certain circumstances others who control or manage the premises, to report to the relevant enforcing authority and keep records of:

- work-related deaths
- work-related accidents which cause certain specified serious injuries to workers, or which result in a worker being incapacitated for more than seven consecutive days (see the [RIDDOR](#) site)
- cases of those industrial diseases listed in RIDDOR
- certain 'dangerous occurrences' (near-miss accidents)

- injuries to a person who is not at work, such as a member of the public, which are caused by an accident at work and which result in the person being taken to hospital from the site for treatment

Reports to the enforcing authority of all of the above categories, except over-seven-day injuries, must be made immediately by the quickest practicable means and followed up by a written notification within 10 days. Reports of over-seven-day injuries must be sent to the enforcing authority within 15 days.

In addition, **records** must be kept of all of 'over-three-day injuries', which are those where a person who is injured at work is incapacitated for more than three consecutive days. Over-three-day injuries do not, however, have to be reported to the enforcing authority. If you are an employer who must keep an accident book under the Social Security (Claims and Payments) Regulations 1979, an entry about an over-three-day injury is a sufficient record for the purposes of RIDDOR.

A person is incapacitated if they are unable to carry out the activities they would reasonably be expected to do as part of their normal work. The period of time for an over-three-day injury or an over-seven-day injury does not include the day of the accident, but it does include any weekends or rest days.

Why report and record?

Reporting and recording are legal requirements. The report tells the enforcing authorities for occupational health and safety (HSE and local authorities) about serious incidents and cases of disease. This means they can identify where and how risks arise and whether they need to be investigated.

It also allows HSE and local authorities to target their work and provide advice on how to avoid work-related deaths, injuries, ill health and accidental loss.

Information on accidents, incidents and ill health can be used as an aid to risk assessment, helping to develop solutions to potential risks. Records also help to prevent injuries and ill health, and control costs from accidental loss.

You must keep a record of:

- any reportable death, injury, occupational disease or dangerous occurrence
- all work-related injuries that result in a worker being away from work or unable to do their full range of normal duties for more than **three** consecutive days (not counting the day of the accident but including any weekends or other rest days)

The health and safety law poster

Safety signs

Employers must provide safety signs if there is a significant risk that can't be avoided or controlled in any other way, such as through safe systems of work or engineering controls.

There is no need to provide safety signs if they don't help reduce the risk or if the risk isn't significant. This applies to all places and activities where people are employed.

Employers must, where necessary:

- use road traffic signs in workplaces to regulate road traffic
- maintain the safety signs they provide
- explain unfamiliar signs to their employees and tell them what they need to do when they see safety signs

Insurance

Inspectors and the law

Health and safety laws applying to your business are enforced by HSE inspectors or by officers from your local authority.

An inspector's role is to:

- investigate (when accidents have happened or a complaint is made) whether people are at risk, to find out if something has gone wrong
- require you to take action to control risks properly if you are not already complying with the law
- take appropriate enforcement action in relation to any non-compliance, ranging from advice on stopping dangerous work activities to potentially taking prosecutions where people are put at serious risk
- provide advice and guidance to help you comply with the law and avoid injuries and ill health at work

Inspectors have the right of entry to your premises as well as the right to talk to employees and safety representatives, and exercise powers to help them fulfil their role.

HSE operates a Fee for Intervention (FFI) cost recovery scheme. If you are breaking health and safety laws, HSE may recover its costs from you by charging a fee for the time and effort it spends on helping you to put the matter right, such as investigating and taking enforcement action.

If an HSE inspector visits your premises and you want to confirm their identity, they all carry identification and you can ask to see this.

Inspectors and local authority officers prioritise the highest risks and those businesses which fail to manage health and safety properly.

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