

REVIEW OF THE HEALTH AND SAFETY (FIRST-AID) REGULATIONS 1981

POSITION STATEMENT ON THE STRUCTURE AND CONTENT OF FIRST AID TRAINING COURSES

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Health and Safety Executive**

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INTRODUCTION

This paper considers the implications for first aid training of the recent review of the Health and Safety (First-Aid) Regulations 1981. It provides information on:

- the background to the review;
- the findings of the review;
- justification for change;
- course structure and content;
- the role of appointed persons.

The paper presents fundamental changes to the first aid training arrangements that currently require a prospective first aider to undertake a 4 day first aid at work course followed by a 2 day refresher course after 3 years. In developing its position, the Health and Safety Executive (HSE) has consulted widely and worked closely with the first aid at work training industry. The responses and comments received have been important in helping to shape the future of first aid training.

This document does not cover the more detailed aspects of how the changes will be implemented in practice or the timescales for their introduction. It is recognised that further discussions will be required with HSE approved first aid training organisations to clarify this detail. Nor does the document address other issues that HSE is currently considering, including the approval and monitoring of training providers and methods for delivering training.

BACKGROUND

Since the Health and Safety (First-Aid) Regulations 1981 came into force there have been substantial changes in the workplace and the type and pattern of work activities. There have also been changes to the market for provision of first aid training and in the methods available for delivering this training. The review of the regulations was aimed at evaluating whether they are still effective in their current form in meeting the first aid needs of modern businesses.

To inform the review, HSE commissioned Casella Winton to look at how employers view the first aid regulations and what factors influence their compliance with them. The findings from this work were published in HSE's Research Report series in February 2003⁽¹⁾. Following on from this, HSE published a Discussion Document (DD) requesting views on a range of topics, including first aid training⁽²⁾. Consultation on the DD closed at the end of November 2003 by which time over 500 responses had been received from a range of stakeholders. A subsequent analysis of these responses has been published⁽³⁾. The findings and recommendations from this analysis were incorporated into a paper presented to the Health and Safety Commission in September 2004⁽⁴⁾.

Following on from the Commission paper, HSE developed more detailed proposals on the structure and content of first aid training courses, taking account of the comments received from consultation on the DD. A paper containing these proposals was sent out for limited consultation in November 2004 (Appendix 1) to obtain views from HSE approved first aid training organisations. An analysis of the findings is presented in Appendix 2.

FINDINGS OF THE REVIEW

Casella Winton research

In terms of first aid training, the research carried out by Casella Winton identified a number of key aspects for further consideration:

- Small organisations find it difficult to release employees to attend initial 4 day first aid at work courses.
- Many training providers and first aiders consider the current 3 year period between the initial 4 day course and subsequent refresher training is too long as skill decay will occur.
- A number of alternative training regimes were suggested, generally centred on reducing the duration of the 4 day course and making refresher training more frequent.
- The role of the appointed person was considered a valid one, particularly for small, low risk organisations. However, in many cases there was confusion between the role of appointed persons and that of first aiders. Some organisations are using appointed persons as first aiders after they have completed a one day first aid course.
- Some organisations have sent employees on a one day course in first aid and use such personnel as 'basic first aiders'. This approach, while not complying with the regulations, may be considered more proportional to the needs of smaller organisations where only low risk activities are carried out.

Overall, the Casella Winton research showed general support for shorter first aid courses, more frequent refresher training and 'basic first aiders' trained in emergency first aid.

Further support for more frequent refresher training has come from an HSE review of the scientific and medical literature on the issue of skills and knowledge retention⁽⁵⁾. The findings of this review indicated that some individuals cannot adequately perform basic life support within 2 months of first aid training and after 3 years the results are generally very poor. This reinforces the view that first aiders in the workplace should undertake refresher training more frequently than every 3 years.

Discussion Document

The DD requested views on 3 options for first aid training:

- Option 1 – No change to the current arrangements.
- Option 2 – Appointed person as a basic requirement or, to meet employers identified needs, successful completion of either of the following new first aid courses:
 - A 6 hour emergency first aid course with annual refresher training; or
 - A 16 hour first aid at work course with annual refresher training.
- Option 3 – All workplaces must have at least one first aider qualified in emergency first aid as a minimum requirement.

The key findings from analysis of the responses were as follows:

- 62% of responses were in favour of Option 2. This was a consistent finding when the responses were further analysed by role of respondent, size of organisation or sector type.
- Several respondents, mainly first aid training organisations, questioned whether the 16 hour first aid at work course proposed in the DD would be too short and suggested 18 or 21 hours as a more practical alternative.
- There was widespread support for annual refresher training of first aiders although some suggested retraining should be conducted every 6, 18 or 24 months.
- Some respondents felt that annual refresher training would place an increased burden on employers.

Overall, there was broad support for the introduction of a one day course in emergency first aid, a shorter first aid at work course and more frequent refresher training. Several respondents did have some reservations about reducing the number of contact hours for the first aid at work course.

Health and Safety Commission paper

The findings from the research and DD were considered in developing arguments for changing the first aid training regime. These arguments were incorporated into a paper presented to the Health and Safety Commission in September 2004. The Commission agreed with the recommendations that the first aid regulations and their approved code of practice were still fit for purpose while within this framework the structure and content of first aid training courses should be changed. This Position Statement is the outcome of the latter.

Consultation paper

A summary of the findings from the consultation which obtained views from around 450 first aid at work training providers can be found in Appendix 2, with more detailed data presented in Annex 1 to this Appendix.

JUSTIFICATION FOR CHANGE

Currently, if an employer needs a first aider in their workplace, they should send a suitable employee on a first aid at work course, normally covered over a 4 day period (24 contact hours). After successfully completing this course, the newly qualified first aider is issued with a first aid at work certificate, valid for 3 years. Within a 3 month period prior to expiry of the certificate, the first aider is required to complete a refresher (requalification) course, normally spread over 2 days (12 contact hours). On requalifying, the first aider is issued with another certificate in first aid at work, again valid for 3 years.

Findings from the research and consultation described above indicate that the current first aid at work training regime has a number of problems that need to be addressed. This is crucial if first aid training is to meet the needs of modern business. Any new training arrangements have to take account of the changes that have occurred in industry since the Health and Safety (First-Aid) Regulations 1981 first came into force. There has been a shift away from manufacturing to service industries and there are fewer large firms and far more small ones. Over 90% of the 3.5 million businesses employ fewer than 10 people but nearly half the workforce is employed in large organisations.

Improving first aid provision in smaller organisations is a particular challenge. The research findings indicate that employers in smaller organisations have genuine difficulties releasing employees to attend a 4 day first aid at work course because of the working time lost. In small workplaces where there are no major hazards, the 4 day course may be viewed as 'too comprehensive' and therefore disproportionate to the needs of such workplaces. To overcome this, some small organisations are sending employees on a one day emergency first aid course and using them as first aiders. Although this approach does not comply with the first aid regulations it nevertheless indicates a willingness to address first aid provision.

The research findings also indicate serious concerns about the current requirement for refresher (requalification) training at 3 year intervals following the initial first aid at work course. Skills and knowledge can deteriorate markedly during this time, suggesting the need for more frequent training.

To address these issues, HSE made a number of proposals in the DD and follow up consultation paper and invited views from stakeholders. Analysis of the responses received showed general support for changes to the current first aid at work training regime. These changes are described below.

Introducing a one day emergency first aid course

The evidence presented indicates that there is sufficient justification for introducing a one day (6 contact hours) course in emergency first aid and such a change has received support from stakeholders. It would give employers a choice when assessing their first aid provision. If a first aider is needed, a suitable employee could be sent on either a one day emergency first aid course or a full first aid at work course depending on the findings of

the needs assessment. In this way, it will be easier for employers to ensure that first aid provision is proportional to the needs of their workplace.

It is anticipated that the one day course would be particularly applicable to workplaces with a small number of employees and low hazards and that this will increase the provision of first aid in such workplaces where currently there may be no one with a first aid qualification.

To ensure consistency of training standards, HSE is considering approval for the one day course. This has received support from first aid at work training providers.

Introducing a shorter first aid at work course

The introduction of a first aid at work course lasting 18 contact hours that can be delivered over 3 days has received support from stakeholders. However, some first aid at work training providers have reservations about this change on the basis that it will not provide sufficient time for training and final assessment, but this assumes no change to the syllabus. Reducing the number of contact hours for the first aid at work course is important for several reasons.

Firstly, shorter, more clearly focused first aid at work courses should help first aiders by reducing the amount of non-essential detail they are required to assimilate. This will leave them to concentrate on the key skills and knowledge that will provide the tools to deliver high quality first aid in the workplace. Secondly, it may also encourage employers to send employees on first aid at work courses where they have previously been reluctant to do so because of concerns over releasing employees to attend the current 4 day course. Finally, a shorter course will also help offset the additional time first aiders will need to spend away from work on annual training courses under the new regime (see next section).

Introducing annual refresher training

Annual refresher training has received widespread support, mainly in recognition of the decline in first aid skills and knowledge following completion of training courses. The exact frequency of refresher training that would maximise its potential benefits is difficult to define. It is influenced not just by the evidence from scientific studies but also by the practicalities of its implementation.

Some training providers believe the refresher should be run over a full day rather than a half day. However, HSE believes it should be feasible to cover the syllabus (see next section) in half a day. In addition, it helps to minimise the impact on employers in terms of the time employees spend away from work to attend the refreshers. In reality, some first aiders may take a full day away from work to attend a half day course, especially if the training venue is a considerable distance from home/work. However, for others it should be

feasible to attend the course and still have half a day at work. This will certainly be the case where refresher training is conducted in-house.

In the Casella Winton research, 18% of those surveyed stated that annual refresher training was provided for first aiders, even though it is not a statutory requirement⁽¹⁾. In addition, the research also found that most companies (generally medium-large) would sanction more frequent training provided it did not amount to more than one day per year.

For practical purposes, annual refresher training should be viewed as a *requalification* course in emergency first aid. This is compatible with the suggestion made by respondents to the consultation paper that the certificate for successful completion of a one day emergency first aid course should be valid for 12 months (see Appendix 2). The annual refresher then becomes a requalification course to obtain a new certificate that is valid for another 12 month period.

COURSE STRUCTURE AND CONTENT

As mentioned in the 'Introduction', this document does not cover implementation of the proposed courses. However, Appendix 3 presents a simplistic flowchart suggesting those courses that would need to be successfully completed over a 3 year period in order to gain and maintain a valid certificate in emergency first aid or first aid at work. While this is for illustrative purposes only, it is based on feedback from first aid at work training providers and may represent a workable model.

Defining the course syllabuses

During the consultation process, HSE received many suggestions for additional items to be included in the emergency first aid and first aid at work courses. The syllabuses for the courses have been refined to account for this feedback. To ensure that the contents of the courses are geared to the workplace, HSE data on work related injuries have been used to inform the final selection of elements to be covered⁽⁶⁾.

To promote a consistent approach to first aid training it is important that the course syllabuses are relatively specific in defining those items to be covered. However, there does need to be some flexibility so that training providers can tailor courses to their audience where possible. In order to do this, when arranging training employers should let training providers know of any specific hazards in the workplace. Alternatively, prospective first aiders attending the courses may alert training providers to any specific requirements.

Emergency first aid

The emergency first aid course should last at least 6 contact hours, excluding breaks.

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

- understand the role of the first aider including reference to the use of available equipment and the need for recording incidents and actions;
- understand the importance of basic hygiene in first aid procedures;
- assess the situation and circumstances in order to act safely, promptly and effectively in an emergency;
- demonstrate how to administer first aid safely, promptly and effectively to a casualty who is unconscious and/or in seizure;
- demonstrate how to administer cardiopulmonary resuscitation promptly and effectively;
- demonstrate how to administer first aid safely, promptly and effectively to a casualty who is wounded or bleeding and/or in shock;
- administer first aid safely, promptly and effectively to a casualty who is choking;
- provide appropriate first aid for minor injuries.

First aid at work

The first aid at work course should last at least 18 contact hours, excluding breaks.

On completion of training, successful candidates should be competent in:

- all elements of emergency first aid (see above);
- recognising the presence of major illness and applying general first aid principles in its management.

In addition, candidates should be able to demonstrate the correct management of:

- soft tissue injuries;
- injuries to bones including suspected spinal injuries;

- chest injuries;
- burns and scalds;
- eye injuries including how to irrigate an eye;
- sudden poisoning and anaphylactic shock.

To help facilitate a move to a shorter course, the syllabus should only include those elements important to the effective provision of first aid in the workplace. Within this framework, it is important that anatomy, physiology and medical aspects etc, are kept to a minimum. Therefore, the new course should provide more emphasis on essential practical elements and less emphasis on theory.

As alluded to above, the syllabus reflects a trade off between the need to be relatively specific and the need to maintain a degree of flexibility so the course can be tailored to the needs of employers/ the audience. With this in mind, it is suggested that for the first aid management of major illness, first aiders should be able to recognise when an individual has a serious medical condition, whatever the cause, and should be able to apply general first aid principles in managing it. Placing more emphasis on specific medical conditions may suggest that the first aider will need to attempt a 'diagnosis' when dealing with a medical emergency. First aiders should not be expected to make a diagnosis of a specific illness.

Where someone suffers an asthmatic attack, heart attack or stroke (examples of medical conditions commonly covered in current first aid at work courses), while first aiders should apply general principles, there is little they can do in terms of applying procedures that would be specific to any of these conditions prior to the availability of medical expertise. Therefore the amount of detail provided on individual medical conditions should be kept to a minimum.

Emergency first aid requalification

Annual requalification courses covering emergency first aid should last at least 3 contact hours.

On completion of the course successful candidates should be competent in emergency first aid and should be able to:

- assess the situation in an emergency;
- demonstrate how to administer first aid to a casualty who is unconscious and/or in seizure;
- demonstrate how to administer cardiopulmonary resuscitation;
- demonstrate how to administer first aid to a casualty who is wounded or bleeding and/or in shock.

The course should also include any updates or changes to relevant first aid procedures.

First aid at work requalification

This course should last at least 12 contact hours, excluding breaks.

The content of the course should cover that specified for the emergency first aid requalification plus the other elements covered in the first aid at work course. The course should also include any updates or changes to relevant first aid procedures.

THE ROLE OF APPOINTED PERSONS

The Health and Safety (First-Aid) Regulations 1981 will not be changed⁽⁴⁾. Therefore, the role of the appointed person is to be retained. Indeed, there has been considerable support for this position from stakeholders. However, it is also apparent that there is a significant level of confusion over the role of the appointed person.

Under the current regulatory framework, where an employer's assessment of first aid needs indicates that no first aider is required, a person should be appointed to take charge of the first aid arrangements, including looking after the equipment and facilities, and calling the emergency services if required. The appointed person will continue to be the minimum requirement for small, low hazard organisations. As is the case now, first aid training will not be required to carry out this role.

Specifying the responsibilities of appointed persons in these terms will create a clear separation from the role of first aiders in the workplace. The latter cannot only carry out the duties of the appointed person but they can also administer first aid for which they have been trained. It follows that appointed persons should not give first aid for which they have not been trained. If an employer decides that a qualified first aider is needed in their workplace, they should ensure a suitable employee is sent on a course in emergency first aid or first aid at work.

NEXT STEPS

This Position Statement has set out basic changes to first aid training courses that HSE would like to see introduced at the earliest opportunity. However, HSE recognises that in the first instance discussions are needed with first aid at work training organisations on the practical implementation of these changes to help ensure a smooth transition. In the meantime, HSE will develop new guidance for employers that in particular will address how to perform a first aid needs assessment in the light of the options for first aid training that will be available in the future.

Updates on progress with implementation of the changes and development of guidance will be posted on the first aid web pages of HSE's website.

REFERENCES

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- 5 Woods M First aid training: retention of skills and knowledge. A summary of the literature. Health and Safety Executive 2002 (can be obtained from the Corporate Medical Unit of HSE)
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APPENDIX 1

CONSULTATION ON PROPOSALS FOR THE STRUCTURE AND CONTENT OF FIRST AID TRAINING COURSES

[This consultation is now closed]

**Prepared by the Corporate Medical Unit, Health and Safety
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INTRODUCTION

The detailed proposals described below were developed following the Health and Safety Executive's analysis of responses to its Discussion Document 'A review and evaluation of the effectiveness of the Health and Safety (First-Aid) Regulations 1981' (the document can be viewed at: <http://www.hse.gov.uk/consult/disdocs/dde21.pdf>). The key findings from the analysis of responses on first aid training are as follows:

- Around two thirds of responses were in favour of Option 2 - retaining an appointed person as a basic requirement, or if needed, providing a first aider that has successfully completed a course in emergency first aid or first aid at work.
- Further analysis of responses by role of respondent, size of organisation and industry sector type, generally showed a consistent pattern with Option 2 favoured in almost every case.
- Several respondents, mainly First Aid Training Organisations, questioned whether the proposed initial 16 hour first aid at work course would be too short and suggested 18 or 21 hours as an alternative.
- There was widespread support for annual refresher training of first aiders although some suggested retraining should be conducted every 6, 18 or 24 months.

The proposals below take account of the following:

- There is considerable confusion over the role of the appointed person and this role therefore requires clarification.
- The majority of respondents were in favour of having two levels of first aid training which will assist employers in ensuring first aid provision is proportional to their needs.
- There was widespread support for annual refresher training.

PROPOSALS

Employers' provision of first aid

Where an employer's assessment of first aid needs indicates that no first aider is required, they should appoint a person to take charge of the first aid arrangements, including looking after the equipment and facilities, and to call the emergency services if required. The **appointed person** will not need to undertake first aid training to carry out this role.

Where an employer's assessment of first aid needs indicates that a qualified **first aider** (or more than one first aider) is required, they can choose from two training options depending upon identified needs – either an **emergency first aid course** or **first aid at work course**.

In this way, there will be two categories of personnel only – an appointed person and a first aider. The first aider will be qualified in one of the two training options.

Course structure and content

Emergency first aid (EFA)

Initial course

A minimum of 6 contact hours run over one day. Contact hours include actual teaching time but exclude breaks. The competency of candidates should be evaluated by continuous assessment - trainers should satisfy themselves that all students understand any given topic before moving on to the next topic.

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

- understand the role of the first aider;
- act safely, promptly and effectively in an emergency;
- administer cardiopulmonary resuscitation promptly and effectively;
- administer first aid safely, promptly and effectively to a casualty who is unconscious;
- administer first aid safely, promptly and effectively to a casualty who is wounded or bleeding;
- administer first aid safely, promptly and effectively to a casualty who is choking;
- provide appropriate treatment for minor injuries (small cuts and grazes, bruises, minor burns and scalds);
- understand the basic principles of personal hygiene in first aid procedures.

An emergency first aid certificate should be valid for a period of 3 years.

Requalification

A minimum of 6 contact hours in one day every 3 years. A first aider can attend a requalification course up to 3 months before the expiry date of their certificate. The new certificate will take effect from the date of expiry. The competency of candidates should be evaluated as for the initial course.

The content should include those elements covered by the initial course together with any relevant updates/ changes to first aid procedures.

Refresher training during intervening periods

Training courses should run over 3-4 contact hours every 12 months. The competency of candidates should be evaluated by continuous assessment. Candidates should have their original certificate stamped to indicate they have successfully completed refresher training.

Candidates should demonstrate their competence to:

- act safely, promptly and effectively in an emergency;
- administer cardiopulmonary resuscitation promptly and effectively;
- administer first aid safely, promptly and effectively to a casualty who is unconscious;
- administer first aid safely, promptly and effectively to a casualty who is wounded or bleeding.

Any relevant updates/ changes to first aid procedures can also be included.

First aid at work (FAW)

Initial course

A minimum of 18 contact hours run over 3 days or up to a maximum of 9 weeks (each session lasting at least 2 hours). Contact hours include actual teaching time and final examination time but exclude breaks. The competency of candidates should be evaluated by continuous assessment and final practical examination*. For continuous assessment, trainers should satisfy themselves that all students understand any given topic before moving on to the next topic. The final practical examination should be conducted by at least one assessor who has not been involved with the teaching.

On completion of training, successful candidates should be competent in EFA (see contents of the proposed initial EFA course above) and in addition should be able to:

- administer first aid safely, promptly and effectively to a casualty who:
 - has been severely burned or scalded;
 - is suffering from an injury to bones, muscles or joints;
 - is suffering from shock;
 - has an eye injury;
 - may be poisoned;
- recognise common major illnesses (eg stroke, heart attack, epilepsy, asthma, diabetes) and take appropriate action;

- demonstrate a basic understanding of the use of first aid equipment provided in the workplace;
- keep simple factual records;
- demonstrate a basic understanding of the legal framework for first aid provision at work.

A first aid at work certificate should be valid for a period of 3 years.

* The final practical examination must determine the student's ability to act safely, promptly and effectively when an emergency occurs at work and to deal with a casualty who:

- requires cardiopulmonary resuscitation;
- is unconscious;
- is wounded or bleeding.

Requalification

A minimum of 12 contact hours run over 2 days or a maximum of 6 weeks (each session lasting at least 2 hours), every 3 years. A first aider can attend a requalification course up to 3 months before the expiry date of their certificate. The new certificate will take effect from the date of expiry. The competency of candidates should be evaluated as for the initial course.

The content should include those elements covered by the initial course together with any relevant updates/ changes to first aid procedures.

Refresher training during intervening periods

Training courses should run over 3-4 contact hours every 12 months. The competency of candidates should be evaluated by continuous assessment. Candidates should have their original certificate stamped to indicate they have successfully completed refresher training.

Candidates should demonstrate their competence to:

- act safely, promptly and effectively in an emergency;
- administer cardiopulmonary resuscitation promptly and effectively;
- administer first aid safely, promptly and effectively to a casualty who is unconscious;
- administer first aid safely, promptly and effectively to a casualty who is wounded or bleeding.

Any relevant updates/ changes to first aid procedures can also be included.

Reduction of the initial FAW course to 3 days

The proposals include an initial FAW course to be run over a minimum of 18 contact hours which is a significant reduction from the current requirement for 24 contact hours. While the content of the proposed course is not substantially different from the current course, it is believed that it could be covered in 18 hours. Removing non-essential details, limiting the teaching of theory such as medical, anatomical and physiological aspects and removing non-essential practical procedures such as some bandaging techniques, will all help save time. The removal of non-essential detail and emphasis on the first aid to be given to casualties with life threatening injuries or illness will help simplify training and make it more focused.

Automated external defibrillators (AEDs)

The EFA and FAW courses outlined above do not include AED training. However, training organisations will have the option to provide such training if they wish. This could be in the form of AED awareness training that provides basic information in a brief session. It must not detract from the specified contents of the EFA or FAW courses. Detailed training in the use of an AED may be more appropriately given as an extension to existing EFA or FAW courses or provided as a separate course.

Additional training

Additional training may be necessary to cover less common risks so that first aiders can deal with special problems. For example, specific training is recommended in cases where first aid may need to be given in relation to work with hydrofluoric acid or in confined spaces. Such training may be taken as an extension to the basic training courses or as a separate course. It should not detract from the contact hours specified for basic training.

Existing first aiders

Existing first aiders with valid first aid at work certificates should undertake the requalification course at 3 years as they would do under the current training regime. From that point onwards they should complete annual refresher training and requalification courses every 3 years under the new training regime.

COMMENTS *[This consultation is now closed]*

HSE would welcome comments and feedback on any aspect of the above proposals. We are particularly interested in your views on the content of the initial EFA and FAW courses and whether any additional elements should be included or whether any of the proposed elements should be removed.

APPENDIX 2

CONSULTATION ON PROPOSALS FOR THE STRUCTURE AND CONTENT OF FIRST AID TRAINING COURSES

ANALYSIS OF RESPONSES

BACKGROUND

The consultation paper (Appendix 1) was aimed at obtaining the views of as many HSE approved first aid training organisations as possible. This limited consultation was conducted through an effective mechanism of 'Regional Coordinators' who held meetings with HSE approved training providers. From these meetings, HSE received coordinated responses rather than responses from individual providers.

RESULTS

Overall, the responses received from Regional Coordinators represented the views of around 450 training providers. Only specific issues raised in the responses received were recorded as to whether they reflected areas of agreement or concern, or were suggestions for alternative options. No assumptions were made where a response did not contain any comment on a given issue. An overview of the analysis is given below. More detailed information is presented in Annex 1, covering issues that were given support, those causing concern and further suggestions.

In broad terms, the responses were consistent with those received on the Discussion Document. Firstly, there was support for introducing a one day course (6 contact hours) in emergency first aid (EFA), with a suggestion that the certificate should be valid for 12 months rather than 3 years. Secondly, there was support for shortening the first aid at work (FAW) course. However, some training providers expressed reservations about reducing the current 4 day FAW course to 3 days (18 contact hours). Thirdly, annual refresher training was widely supported and some responses suggested that it should be run over 6 hours rather than 3-4 hours. There was considerable concern over the practicalities of implementing annual refresher training especially around the issue of how to ensure first aiders attend refreshers and the validity of their certificate if they fail to do so.

There were many suggestions for additional items to be included in the content of the proposed courses. These are listed in Annex 1. The proposed approach to automated external defibrillator (AED) training was given support.

Other comments that were noted indicated more general concerns. In particular, respondents reflected a view that there was considerable confusion over the term and role of the appointed person. In addition, there was a call for clearer guidance on performing a first aid needs assessment to help ensure employers provide first aid personnel that meet the needs of their workplace. Finally, a number of responses stated that the proposed courses should be 'approved'.

ANNEX 1

Key issues raised in response to the consultation on the structure and content of first aid training courses

Emergency first aid course

Support:

- 6 hour course duration
- Course content

Concern:

- The lack of formal assessment

Suggestions:

- The EFA certificate should be valid for 12 months only
- The course should be spread over more than one session
- Additional items for the course content
 - Basic illnesses
 - Head injuries
 - Spinal injuries
 - Elements specific to the workplace
 - Shock
 - Burns/scalds (major)
 - Record keeping
 - Allergies/anaphylaxis
 - Heart attack
 - Tissue injury
 - Asthma
 - Chest pains
 - Stroke
 - Diabetes
 - Epilepsy
 - Children
 - Angina
 - RIDDOR
 - Sprains
 - Strains
 - Fractures
 - AVPU score
 - Dislocations
 - AEDs

First aid at work course

Support:

- Reducing the initial course to 18 hours
- Requalification after 3 years
- Requalification course of 2 days duration
- Course content
- The use of at least one assessor

Concern:

- An 18 hour course duration will not provide sufficient time for training and final assessment

Suggestion:

- Additional items for the course content
 - Elements specific to the workplace
 - Head injuries
 - Industrial illness
 - Anaphylaxis
 - Children
 - AEDs/AED safety/the value of AEDs/AED awareness
 - Spinal injuries
 - Effects of heat/cold

Refresher training

Support:

- Annual refreshers
- 3-4 hour course duration

Concern:

- The practicalities of implementing annual refresher training
 - Could it be done in-house?
 - What is the validity of a certificate if the refresher is missed?
 - Who will verify completion?
 - Can a student requalify if their certificate is not stamped?
 - It could be open to abuse
- The introduction of annual refresher training could be a problem for employers

Suggestions:

- A 6 hour refresher course is preferable to 3-4 hours
- Additional items for the course content

- Choking
- Airway management

Other issues

Support:

- Two first aid training options
- Approach to AED training
- Approach to additional training

Concern:

- There is confusion over the term/role of appointed persons
- Clear guidance on the first aid needs assessment is essential to help ensure employers send prospective first aiders on an appropriate course

Suggestions:

- Some training should be given to appointed persons
- The proposed courses should be 'approved'/'regulated'

**Corporate Medical Unit
Health and Safety Executive**

11 July 2005

APPENDIX 3

Flowchart showing courses to be completed over a 3 year period to maintain a valid certificate in emergency first aid or first aid at work

