



CPD4dentalnurses

YOUR FUTURE IN YOUR HANDS

First Aid Part 1: First Aid Regulations and Requirements in Dental Practice

Aims: The aim of this course is to outline the responsibilities of dental practices for meeting first aid requirements. This CPD article should be completed alongside First Aid parts 2 and 3.

Objectives: On completion of this verifiable CPD article the participant will be able to demonstrate, through completion of a questionnaire, the ability to:

- Identify the importance of risk assessments in the dental practice.
- Know how to complete a first aid needs assessment in dental practice.
- Recognise the first aid training requirements in dental practice.
- Understand the practice's responsibility for first aid arrangements.
- Know how to fill in an accident report.
- Demonstrate knowledge of Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).

Introduction

In dental practice, the employer has a legal responsibility under Health and Safety law, to ensure that employees, patients, and visitors to the practice, are safe. Under the Health and Safety (First Aid) Regulations 1981, this includes the requirement to ensure that there is adequate first aid provision for employees in the workplace. The Health and Safety Executive (HSE) state, "The employer should ensure that an employee who is injured or taken ill at work receives immediate attention. HSE will prosecute in cases where there is a significant risk, a disregard for established standards, or persistent poor compliance with the law."¹

Employer's Legal Duties



The Health and Safety (First Aid) Regulations 1981, set out the legal responsibilities of employers to be able to provide immediate and appropriate first aid to their employees. These regulations apply to all workplaces, including those with less than 5 employees, and to the self-employed.¹

The level of first aid provision required will depend on a first aid needs assessment, which every employer must carry out. Although the legal requirement applies only to employees, the HSE advises that non-employees (such as patients and visitors) should also be considered in the needs assessment. Dental professionals are expected to be trained and competent in administering first aid to patients when required.

First Aid Needs Assessment



First Aid needs assessment²

When conducting a first aid needs assessment, the following factors must be considered:

- The workplace;
- the workforce; and,
- the hazards and risks present.³

Therefore, the first aid risk assessment should be specific to the nature of work. In dental practice, the nature and size of the practice and the practice's history of any accidents should be taken into account. Consideration may also need to be given to the following:

- 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 (e.g. members of the public).³

While the HSE does not require this assessment to be written, keeping a written record is strongly recommended in case the decision-making process needs to be demonstrated.

An employer needs to consider the risks in the workplace and identify potential injuries that could occur in order to ensure efficient first aid provision is available. The Management of Health and Safety at Work Regulations 1999 place a requirement on employers to assess the risks in the workplace and identify how to manage these risks.

These risk assessments can be used to inform the first-aid needs assessment. The HSE provides the following table of hazards that are commonly found in the workplace.¹ Any applicable hazards should be noted in the risk assessment.

Hazard	Causes of accidents	Examples of injury requiring first aid
Chemicals	Exposure during handling, spillages, splashing, leaks.	Poisoning, loss of consciousness, burns, eye injuries, respiratory problems.
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, heart attack.
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, staircases, 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, lacerations.
Workplace transport	Hit by, 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.

Employers are required to periodically review first aid needs to ensure that it remains at an appropriate level. It is good practice to do this at least annually.

First Aid Arrangements and Equipment



The first aid arrangements will depend on the outcome of the first aid needs assessment. This will indicate the level of first aid equipment, facilities, and level of first aid training required within the practice. As a minimum, the HSE state that you must have:

- ✓ A suitably stocked first-aid kit.
- ✓ An appointed person to take charge of first-aid arrangements.
- ✓ Information for all employees giving details of first-aid arrangements.

Most workplace first aid kits conform to BS8599 and are available in different sizes to suit the environment. The contents of the first aid kit will be driven by the outcome of the risk assessment of potential hazards and accidents that could be sustained in the dental practice and should be identified by a white cross on a green background. It is recommended that first aid kits are easily accessible and preferably placed near to hand washing facilities. The expiry dates of items should be checked regularly. The HSE suggest that, where work activities present a low risk, a minimum first aid kits may contain:

- A leaflet with general guidance on first aid (for example, HSE's leaflet Basic advice on first aid at work which can be downloaded from the further reading section).
- Individually wrapped sterile plasters of assorted sizes.
- Sterile eye pads.
- Individually wrapped triangular bandages, preferably sterile.
- Safety pins.
- Large and medium-sized sterile, individually wrapped, unmedicated wound dressings.
- Disposable gloves. ⁴

Dental practices should also consider other items from their risk assessment that may be required to be added to a standard first aid kit. For example, a saline eye wash in the event of an eye injury.

Training

The selection of a first aider will depend on a number of factors. A suitable first aider will have:

- A good disposition, be reliable and have good communication skills;
- an aptitude and ability to absorb new skills and knowledge;
- an ability to cope with stressful and physically demanding emergency procedures; and,
- normal duties in the workplace that can be left immediately to respond to an emergency. ¹



The level of training required for a first aider will depend on the outcome of the first aid needs assessment. There is an optional four level framework for first aid provision which consists of four layers. These are:

- Appointed Person (AP).
- Emergency First Aid at Work (EFAW).
- First Aid at Work (FAW).
- Additional Training.

Appointed Person

If an employer's first aid needs assessment identifies that a designated first aider is not required, the minimum requirement is that an appointed person takes charge of the first aid arrangements. This will involve looking after the equipment and facilities related to first aid and calling the emergency services if required.¹ If the practice has less than five workers, you should have at least one appointed person to look after first aid provision.¹ Arrangements should be made to cover holidays and absence if the appointed person is not available. To fulfil their role, appointed persons do not need first-aid training, although the HSE state that appointed persons "may benefit from completion of an EFAW course (or other suitable alternative). Given this, and the remaining possibility of an accident or sudden illness, rather than providing appointed persons, employers may wish to consider providing qualified first-aiders."¹

Emergency First Aid at Work (EFAW)

If the dental practice has more than 5 workers, you should consider having at least one EFAW or FAW trained first aider. The EFAW course is a 6 hour course.

First Aid at Work (FAW)

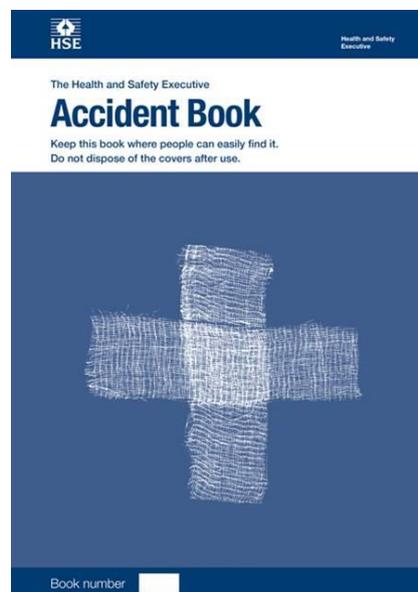
If a dental practice has more than 50 workers, you should have at least one FAW trained first aider. The FAW course is delivered over 3 days (18 hours).

All first aid certificates are valid for three years. Although not mandatory, the HSE strongly advise that first-aiders undertake annual refresher training during any three year EFAW/FAW certification period.

Additional Training

Additional training may need to be undertaken as appropriate to the circumstances of the workplace. Examples of additional training appropriate to dental practices is training to recognise the presence of major illness and provide appropriate first aid (including heart attack, stroke, sepsis, epilepsy, asthma and diabetes), annual CPR/BLS/AED and annual first aid refreshers. The HSE state that this additional training may be relevant, “wherever the environment is low hazard but you have identified a risk, either based on the known health profile, age and number of employees or a need to consider members of the public.”¹

Accident Records



By law, all accidents sustained in the dental practice should be recorded, no matter how small and an accident book is an essential document for employers and employees. The book may be filled in by any person on behalf of the casualty or the casualty themselves. The first aider or appointed person is often the one to fill in the accident report. The following should be included:

- The name, address and occupation of the injured or ill person.
- The date, time and location of the accident.
- A description of how the accident occurred, giving the cause if you can.
- Details of the injury suffered and details of first aid administered.
- Details of what happened immediately after the incident. For example, did they carry on working or attend hospital?¹

The following points also need to be considered:

- An accident book is a legal document.
- Anything written down at the time of an incident is usually considered stronger evidence in court than something recalled from memory.
- Complete the accident report all at the same time using the same pen (not pencil).
- To comply with the General Data Protection Regulation (2018), personal details entered into the accident book must be kept confidential and sheets stored securely.

[Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 \(RIDDOR\)](#)

RIDDOR is the law that “requires employers, and other people in charge of work premises, to report and keep records of:

- Work-related accidents which cause deaths;
- work-related accidents which cause certain serious injuries (reportable injuries);
- diagnosed cases of certain industrial diseases; and
- certain 'dangerous occurrences' (incidents with the potential to cause harm).”⁵

The regulations state that it is the responsibility of the employer or person in control of the premises to report the following occurrences directly to the Health and Safety Executive:

- Deaths where the accident is work related.
- Specified injuries. These include:
 - Fractures, other than to fingers, thumbs and toes.
 - Amputations.
 - Any injury likely to lead to permanent loss of sight or reduction in sight.
 - Any crush injury to the head or torso causing damage to the brain or internal organs.
 - Serious burns (including scalding) which: covers more than 10% of the body, or causes significant damage to the eyes, respiratory system or other vital organs.
 - Any scalping requiring hospital treatment.
 - Any loss of consciousness caused by head injury or asphyxia.

- Any other injury arising from working in an enclosed space which:
 - Leads to hypothermia or heat-induced illness.
 - Requires resuscitation or admittance to hospital for more than 24 hours.
- Dangerous occurrences. These are certain, specified near-miss events.
- Incidents resulting in a person being off work (or unable to do full duties) for more than 7 days. This does not include the day of the accident but does include weekends and rest days.
- Occupational diseases. Employers and self-employed people must report the diagnoses of certain occupational diseases if they are likely to have been caused or made worse by work. These include:
 - Carpal tunnel syndrome.
 - Severe cramp of the hand or forearm.
 - Occupational dermatitis.
 - Hand-arm vibration syndrome.
 - Occupational asthma.
 - Tendonitis or tenosynovitis of the hand or forearm.
 - Any occupational cancer.
 - Any disease attributed to an occupational exposure to a biological agent.

Non-fatal accidents to non-workers such as patients and members of the public must also be reported if they result in an injury which leads to that person being taken from the scene of the accident and directly to the hospital for treatment of that injury. There is no need to report if the person is being taken to hospital purely as a precaution when no injury is apparent.

Further RIDDOR information can be accessed from the further reading section.

Conclusion

The Health and Safety (First Aid) regulations 1981, includes the requirement to ensure that there is adequate first aid provision for employees in the workplace. Employers need to ensure that they carry out a first aid needs assessment for the practice, have an appointed person or appropriately trained first aiders as required, have the equipment to deliver first aid to staff and visitors, and have an accident book to report incidents. By applying these principles, dental practices will be able to ensure compliance, protect patients and staff, and maintain safe working standards.

Personal Development Plan and Reflective Learning

This CPD is linked to the following GDC Enhanced CPD Development Outcomes:

C. Maintenance and development of knowledge and skill within your field of practice.

D. Maintenance of skills, behaviours and attitudes which maintain patient confidence in you and the dental profession and put patients' interests first.

Reflective learning is now a requirement of the GDC Enhanced Professional Development Scheme. As such, you will now be given the option to answer some reflective learning questions, before your certificate is generated. These will be:

- 1) What did you learn (or confirm) from the activity that was helpful or relevant to your daily work and patients?
- 2) Comment on any changes/updates needed in your daily work
- 3) How has completion of this CPD article benefitted your work as a DCP?

Examples will be provided. Please remember that you can fill this in on completion of the exam, but you can also update this at any time from your CPD log. If you take a few moments to write your reflection on completion, you will have fulfilled the Enhanced CPD requirements.

Further Reading

[Health and Safety \(First Aid\) Regulations 1981 \(2013, amended 2018 and 2024\)](#)

[Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 \(RIDDOR\)](#)

References

1. The Health and Safety Executive. Health and Safety (First Aid) Regulations 1981 (2013, amended 2018 and 2024) Available at: <https://www.hse.gov.uk/pubns/priced/l174.pdf> (accessed 14/09/2025)
2. Skills Training Group (2022) How to Complete a First Aid Risk Assessment. Available at: <https://www.skillstg.co.uk/blog/first-aid-needs-assessment/> (accessed 19/09/2025)
3. The Health and Safety Executive (n.d) First Aid Needs Assessment. Available at: <https://www.hse.gov.uk/firstaid/needs-assessment.htm> (accessed 14/09/2025)
4. Health and Safety Executive (n.d) First Aid in Work. Available at: <https://www.hse.gov.uk/simple-health-safety/firstaid/what-to-put-in-your-first-aid-kit.htm> (accessed 14/09/2025)
5. Health and Safety Executive (2013) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). Available at: <https://www.hse.gov.uk/riddor/reportable-incidents.htm#:~:text=Accidents%20must%20be%20reported%20where,the%20result%20of%20their%20injury.> (accessed 14/09/2025)