

Use of drugs by first aiders – guidance notes for trainers

In the UK, or for expeditions with a UK leadership

The Health and Safety Executive (HSE) sets out regulations governing first aid in the work place. In the absence of other national or local laws, it is appropriate that these laws should be used for all first aid situations. HSE guidance in the *Approved Code of Practice and Guidance: First aid at work – The Health and Safety (First-Aid) Regulations 1981 (L74)*¹, (“the ACoP”) states that:

“First aid at work does not include giving tablets or medication to treat illness and such items should not be kept in the first aid box. However, strictly speaking, there is no legal bar to employers making such items available to employees, if the assessment of first aid needs indicates they should be provided.”

Where no explicit HSE guidance exists recommendations have been made based on best-fit adherence to the nearest HSE guidance and accepted industry-wide best practice.

1. Aspirin

For pain relief:

The ACoP states:

“The HSE has no objection to paracetamol or aspirin being made available in the workplace. First aiders administering these tablets should have a reasonable understanding of what is involved.”

In suspected heart attack:

The ACoP states:

“The HSE First aid at work does not include giving tablets or medicines to treat illness. The only exception to this is where aspirin is used when giving first aid to a casualty with a suspected heart attack in accordance with currently accepted first-aid practice.”

2. Salbutamol (ventolin) and other asthma inhalers

The ACoP states:

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

3. Epipen

The ACoP states:

“Medicines legislation restricts the administration of injectable medicines. Unless self administered, they may only be administered by or in accordance with the instructions of a doctor (e.g. by a nurse). However, in the case of adrenaline there is an exemption to this restriction that means in an emergency, a suitably trained layperson is permitted to administer it by injection for the purpose of saving life. The use of an Epipen to treat anaphylactic shock falls into this category. Therefore, first aiders may administer an Epipen if they are dealing with a life-threatening emergency in a casualty who has been prescribed and is in possession of an Epipen and where the first aider is trained to use it.”

4. Non-prescription drugs

See *Aspirin* above. Extrapolating from HSE guidance on simple painkillers, it would be reasonable to assume that other non-prescription drugs would fall into the same category. Where non-prescription drugs are made available “first aiders administering these tablets should have a reasonable understanding of what is involved”.

Recommendation:

Trainers should ensure that first aiders are clear that their remit does not include the administration of drugs. However where an individual wishes to use a non-prescription drug from a first aid kit in a remote situation, the first aider should have an understanding of what the drug does, and should know to read the label and package insert, and explain any key points to the individual. The first aider should record the name of the individual, the date, time, and the drug and dose taken.

5. Prescription drugs

See *salbutamol* above. Prescription drugs are prescribed by a doctor to an individual, and the first aider's role is restricted to assisting the individual to medicate themselves. On expeditions, however, prescription drugs may also be provided to a first aid kit.

Recommendation:

Trainers should ensure that first aiders are clear that their remit does not include the administration of drugs. However on expedition, where prescription drugs are available in the first aid kit, the first aider should be aware of the following key recommendations:

- a. Prescription drugs should be clearly marked as such.
- b. Prescription drugs should only be administered to a patient under the remote guidance of a doctor.
- c. Ideally this remote guidance will take the form of a telephone consultation.
- d. Where this is not possible within a reasonable timeframe, the first aider should follow a clear written protocol provided by the doctor with the drugs, and a doctor should be contacted at the first available opportunity.
- e. The first aider should read the label and package insert, and explain any key points to the patient.
- f. The first aider should record the name of the patient, the date, time, and the drug and dose taken.
- g. The first aider should ensure that the patient adheres diligently to the stated dosing regime.

6. Defibrillators

The ACoP states:

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

7. Under-18s

Where the patient is under 18, particular care must be taken to ensure that drug use is appropriate and controlled. Where the individual has a prescription drug prescribed to them, the first aider's role is once more to aid the individual to self-medicate.

Recommendation:

Trainers should ensure they provide clear guidance to first aiders on the use of drugs (prescription or non-prescription) in individuals under the age of 18. This should include the following key points:

- h. They may aid a minor to take prescription medication prescribed to them.
- i. Before administering any prescription or non-prescription drug, the first aider must first consult with a doctor.
- j. Ideally this consultation will be in person, or, in remote situations, by telephone.
- k. Every effort should be made to hold this telephone consultation, and expedition planning should include the need for 24-hour communication to a doctor.
- l. Where a telephone consultation is not possible, follow recommendation *d*, above.
- m. Recommendations *e* to *g* above, should be followed for both prescription and non-prescription medications.

¹ Available at <http://www.hse.gov.uk/firstaid/information.htm#cop>