

The frequently asked questions below have been thoughtfully curated to address the most common concerns employers face when updating their First Aid Programs considering the new Regulation – effective November 1, 2024.

Note: If you have questions beyond what is listed, please submit them <u>online</u>, and we will address them promptly.

Firs	st A	id Assessment	3
	1.	What if our workplace falls under multiple classification units (CU's)?	3
	2. numl	Should volunteers be integrated into the assessment process for determining per of workers?	3
	3. asses	We are a year-round operation with seasonal employees, do we need to do two ssments or just one for the whole year?	3
	4. of yo	Are staff on site who are not working, for example in staff accommodation, a part ur overall count of workers?	
i		With the assessment and seasonal changes to it based on number of workers, is it otable to keep the highest level of assessment throughout the season to provide stency for our staff?	
	6. you c	If hospital is closer than ambulance, would you list it prior to ambulance? Or would both?4	
	7.	What are examples of confined spaces?	1
;	8.	What are hazardous work areas?	1
	9. hazaı	Do pools (indoor/outdoor) apply to category Group 2 areas (areas where drowning rd exists)?	
	10.	Who is responsible for filling out the assessment?	5
	11. const	For seasonal businesses, how do we identify the "number of employees" as this cantly fluctuates throughout the year with a sizeable discrepancy?	
	12.	How should you include workers in the first aid assessment?	5
1	singu	How many first aid kits do I need at the minimum level throughout the site as ite is quite big (i.e. a ski resort) or can we have the first aid kit located in a lar place, and smaller personal first aid kits around the resort and still meet lation?	5
Firs	st A	id Procedures7	7
	1. respo	If there are multiple FA attendants (same level) at the scene, who would be onsible in completing follow up and documentation?	7
	2. lead i	What if multiple FA attendants are involved – who has the ultimate authority if FA is not available?	



	3. a gui	Is having a return-to-work component to our first aid procedures a requirement or deline?
Fir	st A	id Attendant Training8
	1. used	Are workplaces allowed to conduct their own supplementary first aid training that to be included in OFA 2 but are not longer covered in intermediate first aid?8
	2. yet?	Do you know why some training providers are approved and some are not as of 8
	3. opera	Regularly scheduled training course dates don't work for us because of competing ational priorities. What do you suggest we do to meet the new Regulation?8
	4.	Is transportation endorsement still required under the new Regulation?8
Fir	st A	id Drills9
	1.	What is required to be in the drill report?9
	2.	What are the best ways to refresh training throughout the season?9
	3. is one	If we have a restaurant at our hotel, do we need to conduct two separate drills, or e drill sufficient for both the hotel and restaurant?9
	4. the v	Do these drills have to be in person. Can you do videos with questions through ideo?9
En	nerg	ency Transportation10
	1. e.g. v	What are the requirements for transportation, if it is required for your workplace, vehicle type and/or supplies in the vehicle?10
	2.	How has the guidelines/requirements changed for ETV's?10
W	orkS	afeBC Inspections11
	1. work	Will WorkSafeBC conduct workplace inspections after November 1st to audit if places are following the new Regulation?



First Aid Assessment

1. What if our workplace falls under multiple classification units (CU's)?

The key is for employers to first determine whether they are operating a single workplace or separate workplaces. Work locations/areas/buildings that are separated by a far distance, public roadway, or have other barriers that would prevent a first aid attendant from reaching an injured worker within 10 minutes would indicate they are separate workplaces that require a separate assessment.

So, if an employer determines that they operate separate workplaces that are also registered under different CUs, then they can use the applicable CU's hazard rating. along with the number of workers on-site, class, and additional factors to complete a separate first aid assessment for each location/workplace.

Additionally, businesses with higher-risk activities, such as a temporary construction projects, should perform a specific assessment for higher risk work activities. It is important to restrict access to these high-risk areas to ensure the safety of other workers who are not involved in those operations. Please refer to the OHS guideline for more information on determining single/separate workplaces and hazard ratings.

2. Should volunteers be integrated into the assessment process for determining number of workers?

Employers are responsible for the overall health and safety of workers and other individuals on site. Therefore, the number of volunteers should be integrated into the first aid assessment. Keep in mind that in some cases volunteers are actually considered workers.

3. We are a year-round operation with seasonal employees, do we need to do two assessments or just one for the whole year?

First aid assessments should be reviewed and updated whenever there is a significant change in the employer's operations that would affect the assessment. This could be changes to the number of workers present at the workplace, the locations of workers, the nature and extent of risks and hazards, barriers to providing first aid, or changes to transportation time or methods of transport. If seasonal operations cause significant changes to the number of workers on site (or other factors noted) first aid assessment for each season should be completed.

Employers may do one assessment for year-round operations as long as it defaults to the highest provision of first aid based on worker numbers, hazard rating, and additional factors noted in the Regulation.



4. Are staff on site who are not working, for example in staff accommodation, a part of your overall count of workers?

First aid services are expected to be sufficient for all workers who may access them. When employers provide housing for workers, they may be considered workers for the purpose of the Workers Compensation Act – even when they are off shift.

Additionally, when workplaces are remote and/or there may be barriers to workers obtaining alternative medical care (such as roads becoming impassable due to weather), employers should include off-sift workers in their first aid assessment. However, if living in employer-provided housing is optional and if workers can reasonably obtain emergency medical care from an urban center when they are offshift, then it may not be necessary to include them in the worker count. Employers should be prepared to provide justification for how they determined the worker count for the purpose of their first aid assessment.

5. With the assessment and seasonal changes to it based on number of workers, is it acceptable to keep the highest level of assessment throughout the season to provide consistency for our staff?

Employers are always able to go above minimum requirements, so if an employer wants to ensure compliance at all times, they should base their assessment on the maximum number of workers reasonably expected during any given time period. Employers can keep that highest level of assessment year-round, as long as there are no additional hazards or barriers due to seasonal operation changes that would need to be factored in.

6. If hospital is closer than ambulance, would you list it prior to ambulance? Or would you do both?

To determine minimum first aid using schedule 3A, only use the ambulance station. For first aid procedures, you should include directions to nearest medical treatment facilities in case it is necessary to transport an injured worker (e.g. if you are a remote workplace or BCEHS is significantly delayed).

7. What are examples of confined spaces?

A confined space is an enclosed or partially enclosed area that is big enough for a worker to enter. The space may be enclosed on all sides (for example, a bin or tank), or as few as two sides (for example, an enclosed conveyor). Confined spaces are not designed for someone to work in regularly. They are places where entry may be needed from time to time for inspection, cleaning, maintenance, or repair.

8. What are hazardous work areas?



Examples of these hazardous work areas could be: work performed on a roof or where an unguarded fall hazard exists, work in confined spaces (e.g. bins, vats, tanks, crawl spaces or cellars), areas where a drowning hazard exists (work on or over water) on a marine vessel or unquarded wharf.

Keep in mind that as an employer, you are responsible for identifying hazards in the workplace, and so you should be aware if you have any of these hazardous areas.

9. Do pools (indoor/outdoor) apply to category Group 2 areas (areas where drowning hazard exists)?

It only counts if workers are doing regular work ON or OVER water. Working on the pool deck AROUND water does not require the workplace to be less accessible.

10. Who is responsible for filling out the assessment?

The employer is ultimately responsible for having the First Aid program in place, but the responsibility can be delegated to the manager or JHSC in order to make that happen. This will differ across businesses as to who is responsible for filling out that assessment sheet.

11. For seasonal businesses, how do we identify the "number of employees" as this constantly fluctuates throughout the year with a sizeable discrepancy?

During an inspection an officer will base compliance with first aid requirements on the number of workers on site at the time of the inspection (or, if investigating a serious injury – present at the time the injury occurred). If the number of workers is higher than what has been accounted for on the first aid assessment, this will be identified as a violation. Employers are always able to go above minimum requirements, so if an employer wants to ensure compliance at all times, they should base their assessment on the maximum number of workers reasonably expected during any given time period.

An employer is free to conduct multiple assessment for different shifts or times, and base first aid requirements on the different assessment – it is up to the employer to determine an appropriate balance between the administrative burden of conducting multiple assessments and ensuring the appropriate level of first aid services are provided at all times and the additional cost of providing first aid services that are above those strictly required by Regulation.

12. How should you include workers in the first aid assessment?

Where a workplace is required to have a joint committee (20 or more workers, or where required by order) or worker health and safety representative (more than 9 but fewer than 20 workers), these parties must be consulted in the development and review of first aid assessments. Where these parties are not familiar with the workplace or hazards being assessed, it may also be necessary to seek the input of other workers who have



this knowledge. Small workplaces without a joint committee or designated worker health and safety representative should also involve workers in the first aid assessment process. Worker input on assessments can be obtained during regular monthly meetings with workers (as required by section 3.2 of the Regulation), as part of a job safety analysis, or during other meetings (e.g. tailgate meetings, toolbox talks, pre-job safety meetings).

13. How many first aid kits do I need at the minimum level throughout the site as the site is quite big (i.e. a ski resort) or can we have the first aid kit located in a singular place, and smaller personal first aid kits around the resort and still meet Regulation?

First Aid Attendant response time to injured workers (with appropriate equipment) should be within 10 mins walking time (or driving time if that's the method of transportation). The employer will need to consider the workplace size, lay-out as well as the location of workers, first aid attendants, and first aid kits in order to determine if multiple first aid kits are required.



First Aid Procedures

1. If there are multiple FA attendants (same level) at the scene, who would be responsible in completing follow up and documentation?

If there are multiple attendants at the same certification level, the procedures should clearly state how to determine who will take the lead on any given call. According to the OHS Guidelines, when there are several attendants of the same level, a system should be in place to designate which one will act as the lead attendant. This can be based on factors such as:

- The attendant who has been on duty the longest
- The first attendant on the scene

The designated lead attendant for the call, would then be responsible for completing documentation and follow-up, such as the first aid record and any necessary reporting

2. What if multiple FA attendants are involved – who has the ultimate authority if FA lead is not available?

If a designated First Aid Lead is unavailable, the same guideline applies: the procedures should state that if multiple attendants with the same certification are present, a method for determining the lead for serious incidents should be in place. If no lead is specified, the first attendant who begins treatment or the one assigned by a pre-determined method (like length of service or first to arrive) would have ultimate authority.

If attendants with different certification levels are present, the attendant with the higher certification would generally take authority over the situation.

3. Is having a return-to-work component to our first aid procedures a requirement or a guideline?

First aid procedures should have reference to return-to-work as part of the post-injury care process, but this is usually tied to the employer's broader return-to-work policy. It supports injury recovery, reduces downtime, and helps ensure compliance with WorkSafeBC's expectations for injury management and worker recovery (Bill 41-Duty to Cooperate & Duty to Maintain Employment).

For more guidance on compliance with Bill 41, check out this webinar: WorkSafeBC & go2HR - Bill 41 - Return to Work Workshop



First Aid Attendant Training

1. Are workplaces allowed to conduct their own supplementary first aid training that used to be included in OFA 2 but are not longer covered in intermediate first aid?

Employers do have the right to provide their workers additional training, as long as you're using qualified instructors and not putting your workers at risk.

2. Do you know why some training providers are approved and some are not as of yet?

Currently WorkSafeBC is going through the courses submitted by all the approved First Aid Training providers for approval. Once WorkSafeBC has approved the training course, the training providers will be added to the approved training list, and courses then would be considered to meet the new regulatory requirements.

3. Regularly scheduled training course dates don't work for us because of competing operational priorities. What do you suggest we do to meet the new Regulation?

Various training providers will come onsite and provide specialized training for your staff, where you could pick the date and time. Find out which first aid training providers are in your community and inquire about specialized training that fits with your schedule.

4. Is transportation endorsement still required under the new Regulation?

Yes! In fact, the new Regulation will require more employers to have first aid attendants with transportation endorsement. Schedule 3-A identifies both Basic and Intermediate attendants requiring the additional 8-hr transportation endorsement course with a "(transport)" designation. Note: The transportation endorsement is included in the Advanced Certification curriculum.



First Aid Drills

1. What is required to be in the drill report?

Records of drills should be completed and maintained as part of your First Aid Program, and should include:

- Date & time of drill
- Names and roles of participants
- Brief summary of scenario tested
- Summary of observations and outcomes including deficiencies
- Any corrective action, including completion date

2. What are the best ways to refresh training throughout the season?

Start by setting yourself up for success by preparing your training materials before the busy season starts. Safety talks, one-pagers/posters, adding first aid procedure questions to the inspection log to ask workers when you do inspections throughout the year, make a short little video, are all ways to communicate the procedures throughout the season. Don't over complicate things, make the refresher training really simple.

3. If we have a restaurant at our hotel, do we need to conduct two separate drills, or is one drill sufficient for both the hotel and restaurant?

It's best to conduct two separate drills as it allows you to focus on the unique hazards and response needs of each area. The hotel and restaurant may likely have different operational environments, staff, and potential emergencies.

4. Do these drills have to be in person. Can you do videos with questions through the video?

This will depend on what your organization looks like. If everyone is on site, it would be best to do one in person (e.g. practicing going to the first aid room and getting first aid). For some organizations, such as tour companies, an in-person drill may not be practicable so there may be some components of the drill that could be done virtually.



Emergency Transportation

1. What are the requirements for transportation, if it is required for your workplace, e.g. vehicle type and/or supplies in the vehicle?

The guidelines provide recommendations for emergency transport vehicles (ETVs), detailing the necessary equipment they should contain. For minor injuries, you may also use insured company vehicles or other workplace vehicles for transport, as ETVs are only required for significant injuries. If a company vehicle is used, ensure the driver is licensed, the vehicle is insured, and a procedure for safely transporting the worker is established. Both the driver and the First Aid attendant accompanying the worker should be trained on these procedures. Additionally, the guidelines emphasize the importance of regular inspections for company vehicles, which should not be overlooked.

2. How has the guidelines/requirements changed for ETV's?

The amendments allow for more flexibility in the type of emergency transportation selected, while providing performance-based requirements all emergency transportation must now meet. These include:

- Being capable of safely transporting both the injured worker (secured to a stretcher) and a first aid attendant
- Having an effective means of communication between the first aid attendant and the operator of the transportation
- Being designed and equipped to secure injured workers, protect from natural elements and dust, maintain normal body temperature, and allow adequate space for the first aid attendant to provide treatment to the injured worker.

If air transportation is the primary or only method of emergency transport, employers will be required to ensure that arrangements have been made before the start of operations, the aircraft is reasonably available, along with a variety of other considerations. Refer to the OHS guidelines for more information.



WorkSafeBC Inspections

1. Will WorkSafeBC conduct workplace inspections after November 1st to audit if workplaces are following the new Regulation?

Although WorkSafeBC is not currently planning a targeted inspectional initiative associated with the new first aid requirements, first aid is a basic health and safety requirement that is generally discussed during most workplace inspections. While WorkSafeBC recognizes that employers may encounter genuine challenges in meeting the new first aid requirements by November 1, 2024. However, WorkSafeBC officers will expect employers to demonstrate that they have made reasonable efforts toward compliance. Evidence of non-compliance will be addressed as appropriate through education, consultation and/or enforcement, considering the risk to workers.