

October 10, 2024 First Aid Webinar questions

Ambulance Stations

- I was wondering if there is any thoughts and/or advice for ensuring Ambulance Stations are staffed and available for response based on a worksite location? I know there are issues of staff shortages in many rural and remote areas of BC. Is the advice that is being given to call an ambulance station before beginning work every day?

WorkSafeBC cannot speak on behalf of BC Emergency Health Services (BCEHS) about the services provided by that organization; however, we do not expect employers to contact BCEHS to confirm ambulance availability on a day-to-day basis. If ambulance delays are reasonably foreseeable, such as in areas where they occur with some frequency, we would expect employers to take this into account when determining minimum first aid services and procedures. This means that, even in urban settings, you may need:

- First aid attendants with a higher level of training
- Additional first aid supplies and equipment
- More advanced first aid facilities
- Emergency transportation capability, such as an emergency transport vehicle or industrial ambulance

In such cases, you must also develop first aid procedures that include instructions on when the decision to transport an injured worker will be made.

- Why the change from 20 minutes from hospital to 30 minutes to ambulance station? Often there are never ambulances at a station, especially in remote locations.

To be clear, while the basis for determining whether a workplace is remote or not is based on travel time from an ambulance base, as opposed to travel time from a hospital, employers must still ensure injured workers are transported directly to the hospital or other medical treatment centre. The intent of this change referencing ambulance base is to recognize that transport by BCEHS ambulance is the preferred method of transport. WorkSafeBC had consulted with BC Emergency Health Services (BCEHS) on the proposed amendments prior to making these changes. An ambulance base is an indication of ambulance service coverage. BCEHS positions their ambulances and paramedics based on the communities served and where other ambulances have been dispatched, and triages according to the acuity of calls received. BCEHS has advised about the addition of 600 full time paramedic positions across the province and the introduction of a new staffing model aimed at stabilizing paramedic staffing in rural and remote BC communities.

- Why is there not an app or some notification system for hospitals on diversion? Not having this type of tool makes the first aid assessment and emergency planning almost impossible for employers from a day to day, hour to hour process.

WorkSafeBC cannot speak on behalf of health authorities about the services provided by hospitals. We recognize that hospital diversions, emergency department closures, or other barriers may affect the time it takes to transport an injured worker to hospital. When delays are reasonably foreseeable, such as in areas where they occur with some frequency, the employer needs to take those factors into account when determining minimum first aid services and procedures; and consider travel time to the next nearest hospital. These increased levels of first aid services and procedures may be required as a default in those situations, eliminating the need to alter emergency planning on a daily basis.

Working Alone

- (*multiple similar questions*) I'm wondering about the first aid equipment required for working alone or in isolation. I noticed that the first aid equipment tables all started with 2 employees.

The requirements listed in tables of Schedule 3-A of the OHSR represent only the minimum levels that may be necessary at the workplace. The employer is required to conduct a first aid assessment to determine what additional supplies, equipment, and services may be necessary. Situations involving a worker working alone or in isolation introduce more variables that are specific to the particular workplace, making universal guidance regarding minimum levels impractical. It is recognized that some level of first aid supplies, equipment, and services will be required in all workplaces, including those involving workers working alone or in isolation and it is anticipated that the first aid assessment will identify what those are. As stated in the Guideline to Part 3, it is recommended that personal first aid kits are carried in all workplace vehicles that travel further than 10 minutes from the central workplace, unless a larger kit is required by Schedule 3-A, a first aid assessment, or the *Motor Vehicle Act*.

- The main confusion for me is with getting first aid to folks in the bush, they are either alone or with one other person in the forest. Do they have to have a spineboard at the truck? One person can not pack the other person out of the bush on a spineboard. I have 5 foresters going to the field alone everyday. So do I need to contact local helicopter companies first every day to see that they are available in case of emergency?

The Regulation states that the employer must provide all the equipment, supplies, first aid attendants and services necessary to promptly provide first aid and prompt transport to medical treatment. The employer is also required to

develop and implement first aid procedures that outline how first aid services and equipment will be accessed and deployed. The procedures must identify any barriers to first aid and how these barriers will be overcome. In the scenario given here, the small crew size and workers working alone and in isolation would be examples of barriers to first aid and the employer must find solutions to overcome these barriers. Solutions would be situation specific, but in cases where delivery of adequate first aid may be compromised by the size of the work crew, a potential solution may involve mutual aid from adjacent operations, other contractors or licensees, or the involvement of an external service provider. Arrangements for such services would have to be made ahead of time and confirmed as appropriate.

Where air transportation is the primary or only method for transporting an injured worker, arrangements must be made with an air service provider to ensure that an appropriate aircraft is reasonably available. Availability of the aircraft must be confirmed before the start of each work day and if the aircraft ceases to be available, the arrangements must include a provision that the air service provider would have a method for notifying the employer that the aircraft is no longer available.

First Aid Training & Kits

- Is Transportation Endorsement included in advanced first aid?

Patient handling and transportation, which is the main component of the one-day Transportation Endorsement course is also covered in the Advanced First Aid course, which is of ten days duration.

- Does the Level 1/TE have a bridge course to get the intermediate Level? For example, a 1-day upgrade course?

No, there are no provisions for bridging the levels, from Level 1 under the old system to the new two-day CSA aligned Intermediate course. The one-day OFA Level 1 course has been replaced by a one-day Basic first aid course. The two-day Intermediate course has replaced the five-day OFA Level 2 course. The one-day Transportation Endorsement course, which teaches patient handling and transportation skills serves to supplement the Basic or Intermediate courses, where such skills are required.

- Why are the kits not aligned with the CSA kits in terms of supplies?

First aid kits required for BC workplaces are aligned with the CSA standard Z1220-17, with a few additional items required in BC, such as the addition of a tourniquet and PPE (examination mask) in the Basic Kit, addition of PPE in the Intermediate Kit, and the addition of Oxygen Therapy Kit and PPE in the Advanced Kit. For all levels, the CSA

Medium size kit is required. The additional items required in BC were deemed necessary in order to provide adequate first aid response. Detailed kit content lists are included in the First Aid Guideline on WorkSafeBC.com.

- *(multiple similar questions)* I have looked into courses in our area, but they do not have many/any intermediate courses listed. We have multiple employees with level 1 with transportation that will need to be upgraded to intermediate. I heard Darcy indicate that as a company we will have to show that we are actively working on getting our workers into the appropriate level of training to meet the new regulation. Is this correct? How long grace period for working with local providers?

There is no defined timeline for this and it is expected that employers will have their first aid attendants trained at the appropriate level as soon as training becomes available, while recognizing challenges with access to Intermediate level training in some areas of the province. The employer would be expected to demonstrate due diligence in accessing the training.

Multi-Employer Worksites

- *(multiple similar questions)* If there are multiple employers on a worksite, with different hazard classifications, how does a prime contractor determine the overall hazard rating to determine first aid requirements for the site? Do you defer to the highest rating?

If multiple phases of an operation are occurring at the single workplace at the same time and are using one set of first aid procedures, first aid attendants, supplies, and equipment, the first aid services must be adequate for all situations and all workers and employers they are intended to serve. While moving to the highest hazard rating may be appropriate in some situations, it may not be necessary, as determined through the first aid assessment. In the case of a Class 4 forestry workplace (remote/less accessible) with 20 to 49 workers, the minimum requirements will be the same under the Moderate and High hazard rating. For smaller operations, where the minimum levels are different, the first aid assessment would likely indicate that adopting the higher hazard rating requirements is necessary. As long as the first aid provided achieves compliance for all of the employers at the worksite, the intent of the regulation will be met.

- *(multiple similar questions)* If you are a sub-contractor working with a Prime Contractor, what do you need to do?

The prime contractor of a multiple-employer workplace must ensure that all activities of employers, workers and other persons at the workplace relating to occupational health and safety, including first aid services, first aid assessments and procedures are coordinated. However, prime contractor's overarching responsibility for coordination of first aid does not absolve the individual sub-contractors from their own obligations as employers. As such, the sub-contractor who is also an employer must ensure that this employer's workers have access to appropriate levels of first aid services, equipment, supplies and first aid attendants to ensure prompt and appropriate first aid and prompt transport to medical treatment. The sub-contractor must provide to their workers the required information, instruction and training, including the first aid procedures developed by the prime contractor.

First Aid Assessment

- *(multiple similar questions)* We work in many field locations a day. Can the first aid assessment cover all those locations if similar conditions or do we need an assessment for each location?

Where the number of workers, nature and extent of risks, and other elements of the first aid assessment are similar for multiple workplaces you can use one written first aid assessment that applies to all of those workplaces. Similarly, the same first aid procedures can apply to multiple workplaces, as long as information such as pre-arranged routes to emergency medical treatment is location specific. You'll need to conduct annual first aid drills separately for first aid procedures that are substantially different (e.g., rescue methods or means of transport), but you may not need to conduct drills for each temporary work location.

- *(multiple similar questions)* Can you share first aid equipment, personnel and transportation if you have two active blocks close together?

If the first aid assessment confirms that first aid needs and requirements can be met by assigning first aid equipment, attendants and transportation for deployment at two separate, but proximate locations then that arrangement may be acceptable. The assessment would have to take into consideration factors such as the total number of workers at the two locations, distances involved, and response times, among others. The deployment of first aid equipment and services to the two locations would have to be reflected in the first aid procedures. Sharing of first aid equipment and services between nearby locations, through mutual aid arrangements involving different operations or otherwise, may be an effective means of ensuring that adequate resources are available, especially

when small crews at separate locations would find it challenging to launch effective response to a first aid emergency.

- If there are ER closures in our area, how are we supposed to account for that in our first aid assessment?

Hospital diversions, emergency department closures, or other barriers may affect the time it takes to transport an injured worker to hospital. When delays are reasonably foreseeable, such as in areas where they occur with some frequency, the employer needs to take those factors into account when determining minimum first aid services and procedures; and consider travel time to the next nearest hospital. This may not be as critical if the workplace is accessible to BCEHS ambulance; however, if a remote workplace is not accessible to an ambulance and it is the employer who is responsible for providing transport, the distance to the nearest available hospital needs to be taken into consideration and would likely influence the type of transport, such as the use of a helicopter instead of ground transport.

- *(multiple similar questions)* Can you clarify the point of a requiring a transportation endorsement without requiring any equipment with which to transport? Additionally, my understanding is that one person cannot safely “transport”, therefore, why should a crew of two person need transport endorsements? If one worker is hurt, the other, won’t be able to transport the hurt worker.

Small crew sizes that make appropriate response to a first aid emergency challenging are an example of a barrier to first aid that needs to be taken into consideration in the first aid assessment. The employer is required to find solutions for overcoming such challenges, including mutual aid arrangements with nearby operations or retaining external service providers, such as those that offer helicopter emergency medical service (HEMS). Transportation endorsement training teaches patient handling and packaging skills that would enable properly trained first aid attendants to assess, stabilize, prepare, and supervise the transport of an injured worker, which in the case of small crews in remote areas may involve previously arranged external resources.

- Will officers look over our assessments and give input?

WorkSafeBC prevention officers will review the required written first aid assessments in the course of workplace inspections. They will be able to advise about regulatory requirements related to first aid assessments, but are not in a position to assist employers in conducting the assessments. WorkSafeBC has developed resources, such as the

first aid assessment tool (PDF worksheet and an online tool) to help employers, along with the joint committees or worker health and safety representatives, in conducting and documenting the assessment. Additionally, Guidelines – Part 3, available on WorkSafeBC’s website contains an extensive section on conducting first aid assessments.

- Can you have a generic assessment for remote sites and generic non-remote ones for closer to hospital?

If the first aid requirements are the same for different workplace locations, it may be appropriate to have one written first aid assessment that applies to work at these different locations. Another way of looking at it is in terms of “task-based” first aid assessments - if workers regularly perform similar tasks at different locations, employers may consider conducting a "task-based" first aid assessment that applies to changing workplace locations. Task-based assessments are only appropriate if all the substantive factors, such as the number of workers, nature and extent of hazards and risks are the same or substantially similar. Task-based assessments must be conducted and reviewed by joint health and safety committees or worker health and safety representatives, as applicable. Similarly, the same first aid procedures can apply to multiple workplace locations, if that is supported by the assessment and as long as access to, and deployment of first aid services can still be effective. In that case, it may be that the only variables, such as the location coordinates and pre-arranged routes to emergency medical treatment, would need to be updated to be location specific. Along similar lines, it may not be required to conduct separate drills for each temporary work location, as long as the first aid procedures are substantially the same.

- Are temporary workers counts still the same (4 = 1)?

When determining minimum first aid requirements, employers should calculate the maximum number of workers present at the workplace during a typical shift. All workers — including managers, supervisors, and administrative staff who are regularly present at the workplace — must be included in the worker count under this provision, regardless of whether they are normally exposed to the substantive hazards of the workplace. Where the number of workers consistently varies between shifts, separate assessments may be conducted for each shift.

All workers who regularly attend a workplace must be included in the worker count for that workplace, even if they are on site only briefly.

When determining the minimum first aid requirements for a workplace, employers should count transient workers, those who are present at the workplace only temporarily, as follows:

- Count one-quarter of the number of workers who travel more than 10 minutes' surface travel time from the workplace more than 50% of the shift. For example, if four engineering technicians are out in the field, away

from the office for most of the day, only one additional worker needs to be counted for the purpose of determining first aid requirements at that office, in addition to the other workers typically present at that office.

- Pro-rate the number of transient workers, for example, log truck drivers, based on an estimation of the time they will be at the workplace, such as a cutblock. If it is expected that up to four log trucks could be lined up for loading at a busy cutblock throughout the day, the employer may determine that it is reasonable to include an additional four workers for the purpose of determining first aid requirements at that operation, if that is the maximum number of log truck drivers that are likely to be at the workplace at any given time. If the trucks are in-block for less than 50% of the time, they should only be counted as one-quarter each, or one worker. Similarly, if it is expected that only one log truck could be expected at the landing at any one point, then it would be reasonable to include one additional worker for the purpose of determining first aid requirements at that operation.

The above scenarios are only examples to illustrate the idea of adjusting the calculation to account for transient workers, but it's recognized that every operation is unique and a number of possible permutations may exist.

- Will the online interactive assessment tool capture transient and dispatched workers in addition to total number of workers?

No, in its current form, the assessment tool only captures the total number of workers. Pro-rating the number of transient or dispatched workers is highly situation dependent and including that functionality would not be practical. The employer should conduct the pro-rating for transient workers offline and enter the pro-rated number into the tool.

- Can a first aid attendant also be a driver if there is only a crew of two?

That depends on the nature of the injury and the extent of first aid that needs to be delivered. In some situations, the first aid attendant may be required to monitor the patient and actively deliver first aid during transport, dictating that the first aid attendant cannot be the driver. It is anticipated that the employer's first aid procedures be developed for both minor injuries, where the first aid attendant may be able to drive, and more serious injuries where additional assistance would be required. In the case of remote workplaces with small crews, the first aid procedures may indicate the deployment of mutual aid from nearby operations or arrangements with contract service providers, such as those that provide helicopter emergency medical services (HEMS).

- We have a lot of different sites that we work on, do we really have to consult our worker safety rep/JHSC for every first aid assessment that is done? They won't change much from site to site.

The joint committee or the worker health and safety representative would be in a good position to determine whether the same first aid assessment is appropriate for more than one location or whether a new assessment is warranted. Where task-based assessments are used for similar workplaces, joint committee should review these prior to use. Please see WorkSafeBC guideline G3.16(3.1) for additional ways for employers to engage workers in first aid assessments.

- I am one of the Level II first aid attendants and helped with completing the first aid assessment for our building, which is a low hazard rating and was straightforward. However, we have a menagerie of work groups in our building (forestry, biology, geology, parks, etc.) with various worksites across the Region. I've had several questions from others in the building about if they also need to complete the first aid assessment. My understanding was that the first aid attendants and JOHS reps complete the first aid assessment for the building, which we have supplemented with an Emergency Field Procedures document for folks heading to the field. I'd like to clarify if this is sufficient, or would each work group need to do their own first aid assessment for every worksite they go to?

A separate first aid assessment is required for dispatched workers, in this case the field crews, when they are not present at the office location. However, a separate assessment may not necessarily be required for each new field location if the substantive factors such as the number of workers, hazards, risks, potential barriers to first aid, and first aid procedures remain the same.

It is necessary to point out, that while the workers are in the field, the low hazard rating that applies to administrative office locations would likely not be appropriate and an alternate hazard rating that better reflects the nature of field work would need to be applied. For example, a moderate hazard rating that is assigned to CU 763036 Field Work Services, may be more appropriate, or the risk assessment could result in an even high hazard rating if that is warranted. The decision to use a hazard rating for an alternative classification unit should be made in consultation with the joint committee or worker representatives. Justification for the selection of an alternative classification unit with a different hazard rating must be adequately documented on the written first aid assessment. Additionally, the field crews would likely find themselves in remote and less-accessible Class 4 workplaces, which would require different minimum levels of first aid under Schedule 3-A.

First Aid Procedures

- Are first aid procedures what is included on the last page of the first aid assessment? It seems that this is duplication with the Emergency Response Plan.

First aid procedures are written instructions that outline in detail how first aid will be delivered. They include information on equipment, supplies, facilities, first aid attendants and how these resources will be activated and deployed. First aid procedures are developed based on a first aid assessment that is prepared, reviewed, and updated in consultation with the joint committee or the worker health and safety representative, as applicable. Comprehensive guidance on first aid procedures is included in the OHS Guidelines for Part 3: Occupational First Aid, available on WorkSafeBC's website. While a first aid emergency would require a response under the Emergency Response Plan and first aid procedures would be included in the Emergency Response Plan, there are additional types of emergencies, such as wildfires, avalanches, landslides, to name just a few, that may also be addressed in the Emergency Response Plan as applicable. First aid procedures are typically a module in the overall Emergency Response Plan.

- Is there a form for completing the written First Aid procedures?

No, a template for completing first aid procedures is not available as it is not be practical to generate procedures that would be universally suitable for the hundreds of types of workplaces across our province and the variety of industries. Individual industry associations may wish to develop first aid procedure templates specific to their industries.

- The requirement to render first aid is 10 minutes and to dispatch an ETV in 3-5 mins. Is there a time requirement for an ETV to reach a workplace?

A specific time interval for the ETV arrival is not specified in the Regulation or the Guideline. However, the key principle here is that in order to provide effective treatment, the equipment and the first aid attendant must be readily accessible and first aid must be administered as soon as practicable after the injury or illness is discovered, in accordance with the practices and standards found in the first aid attendant's training program. According to the OHSR guideline for first aid, the attendants must be ready to initiate response to the first aid emergency within 3 to 5 minutes of being summoned. And altogether, the standard for accessing the injured worker and rendering first aid is within 10 minutes of the response being initiated. The emergency transport vehicle should be immediately available for use, which means that it must be available to transport the injured worker as soon as the injured worker is ready for transport.

Air Transportation

- Are we expected to have a helicopter on standby at all times for remote operations that can't be accessed by roads?

For remote operations that cannot be accessed by roads, air transportation is the primary and possibly the only method for transporting an injured worker. In those situations, the employer must meet a number of requirements under the OHSR, including making arrangements with an air service provider to ensure that appropriate aircraft is reasonably available to the workplace. While this does not necessarily mean having a dedicated helicopter on standby, it does mean that in an emergency, the air service provider would prioritize response to the first aid emergency. Further, those arrangements must include procedures to determine availability of the aircraft before the start of each work day and for notifying the employer if the aircraft ceases to be available. If air transportation is unavailable because of weather conditions or other factors, employers should avoid conducting high-risk work.

- Do services that provide helicopter evacuation and onboard advanced medical care services meet the intermediate/advanced attendant and Transport requirement?

While specialized helicopter emergency medical service (HEMS) providers offer highly skilled personnel, they typically would not be present at the worksite while work is carried out and as such, they would not be considered a substitution for the required first aid services under OHSR. However, where the employer has arranged for HEMS provider to respond to a workplace emergency, the HEMS crew will be able to take over from the first aid attendants at the workplace after they have delivered the initial first aid.

- If helicopter transport is our primary mode of emergency transport, what are we to do if they let us know one is no longer available? Pull crews out that may be 2kms into a forested environment? This also seems very onerous for helicopter companies to start letting several companies know they are no longer available.

The arrangements stipulated in the OHSR for workplaces where air transportation is the primary or only method for transporting an injured worker must include procedures to determine availability of the aircraft before the start of each work day and for notifying the employer if the aircraft ceases to be available. The employer(s) would be responsible for ensuring, through arrangements with the air service provider, that there is a method for such notification. The helicopter company would need to determine whether they are capable of making the notifications in order to enter into arrangements with employers. Without reliable arrangements, there is no means of ensuring

that air transport will be available in an emergency, placing workers in a high hazard remote workplace under undue risk.

- Is training available and/or the helicopter companies informed of these new requirements?

If air transportation is the primary or only method for transporting an injured worker, the employer must meet a number of requirements under the OHSR, including making arrangements with an air service provider to ensure that appropriate aircraft is reasonably available to the workplace. Further, those arrangements must include procedures to determine availability of the aircraft before the start of each work day and for notifying the employer if the aircraft ceases to be available. The legislation places the onus on the employer to ensure that the contracted air service provider can deliver the agreed-upon services.

- *(multiple similar questions)* There is very little mention of using Search and Rescue for extrication services in the discussion around first aid procedures. If my company works in moderate risk forestry activities, we won't be carrying stretchers compatible with helicopters, so we would call in SAR for major extrication.

While a volunteer SAR group may be able to respond to a workplace incident in some cases, subject to availability of suitable transportation (helicopter), available trained personnel, and authorization from Emergency Management BC for that particular task, such response could not be counted on to be automatic and for that reason, would not meet employer obligations under the Occupational Health & Safety Regulation (OHSR).

The OHSR states that the employer must provide the equipment, supplies, first aid attendants and services necessary to promptly provide first aid and prompt transport to medical treatment. Under OHSR, this is the employer's responsibility and not the responsibility of other parties, such as the Search and Rescue societies staffed by volunteers. However, employers may consider entering into contract arrangements with air service providers, such as those that offer helicopter emergency medical service (HEMS).

Drills

- What is considered a first aid drill?

The OHSR (Occupational Health and Safety Regulation) states that at least once every year, and whenever the first aid procedures change significantly, the employer must conduct first aid drills. A first aid drill is an exercise that tests the effectiveness of the first aid procedures, and is designed to verify that the first aid attendants and others

who may be assisting, are capable of fulfilling their roles and responsibilities. If there are any gaps or deficiencies in the first aid procedures or the overall planned response to an emergency, those should become apparent in an effective drill. Those deficiencies should then be documented and addressed through changes to the procedures, equipment, training, communications, etc. A well-designed drill should include and test all aspects of emergency response – from summoning assistance in the first place and initiating the response, to accessing equipment and supplies, packaging the patient for transport if required, coordinating transport, communicating with outside agencies, etc.

- Can an emergency response event act as a first aid drill? I thought an emergency response did not qualify as your yearly drill and you had to perform a drill under non-emergency conditions?

Activating a workplace emergency response plan, including first aid, in response to an actual incident is not considered a drill for the purpose of complying with this regulation. The employer is still required to hold a formal drill at least once every year, and whenever the first aid procedures change significantly.

- If you are contracting out most of the work, does each contractor hold their own drill individually? Or will one drill involving multiple contractors suffice as a one drill for each? And who is in charge of setting that drill up? The licensee?

That would depend on what is most appropriate for that particular workplace. If the contractors' operations are conducted within proximity of each other and they are able to launch unified response to a first aid emergency, then it may be concluded that it is of benefit to hold a joint drill. This could be a good way to pool equipment and services, such as first aid attendants and emergency transport vehicles (ETVs) and practice mutual aid. However, if any of the contractors then move their operations to a different area and their first aid procedures at the new location change significantly, then they would be required to hold an individual drill that reflects the new circumstances. A joint drill involving multiple contractors would be coordinated by the licensee or the prime contractor.

Assorted

- Can you clarify the classification for silviculture surveying and block layout? CU 703016 and CU 703008 both contain verbiage regarding reforestation, but do not clearly define forestry activities that mostly revolve around walking, measuring and tallying?

WorkSafeBC groups all firms into classification units (CUs) based on the products produced, services provided, and the processes, technology, or materials used. Many firms may be involved in more than one business activity. Firms whose main activities involve surveying and block layout are typically classified in CU 763036 Field Work Services. Firms in this classification unit are assigned a moderate hazard rating for the purpose of defining first aid-related requirements. Firms in Classification Unit (CU) 703016, Tree Planting or Cone Picking, typically have tree planting as their main activity and are assigned a moderate hazard rating. CU 703008 Integrated Forest Management covers firms that are tenure holders, and those that engage in a wider range of forest management activities including timber harvest, log hauling, and reforestation, as some of the examples. So, these would be the forest licensees and also stump-to-dump contractors. Their activities may be subcontracted or carried out by the firm's own workers, including cruisers, engineers, and layout technicians. Based on the nature and extent of the risks and hazards in this classification unit, which include tree falling, yarding, and log hauling, among others, firms in this classification unit are assigned a high hazard rating for the purpose of defining first aid-related requirements.

- Will current MTCs still meet the requirements for an ETV and dressing station or do they need upgrades?

That would depend on the unit in question and circumstances of the workplace. An MTC (mobile treatment centre) is an industrial ambulance that also has a sink with running water (or an alternative system for supplying fresh, potable water), minimum headroom of 1.8 metres in the treatment area, and be sufficient for the first aid attendant to treat the injured or ill worker. An employer may determine, through a formal written first aid assessment for that particular workplace, that an MTC may be appropriate in place of an emergency transport vehicle (ETV). Where the workplace is more than 2 hours' surface travel time from a hospital, another vehicle suitable for transporting an injured worker (ETV or industrial ambulance) should also be provided. When using an MTC in place of a dressing station, the MTC should contain the same first aid equipment as outlined for those facilities. Guidelines – Part 3 – Occupational First Aid [WorkSafeBC](#).

- Who is the best person to contact if we have further questions about these changes?

If you have a question regarding first aid requirements or other questions about workplace health and safety, please call the WorkSafeBC Prevention Information Line, Monday to Friday, from 8:05 a.m. to 4:30 p.m.

Prevention Information Line

Phone: 604.276.3100 (Lower Mainland)

Toll-free: 1.888.621.7233 (1.888.621.SAFE)