

WHITEPAPER

*UNDERSTANDING  
AND MEETING YOUR*  
**FIRST AID  
OBLIGATIONS**



AN ONLINE RESOURCE  
SHARING SAFETY &  
COMPLIANCE EXPERTISE







# UNDERSTANDING AND MEETING YOUR FIRST AID OBLIGATIONS

The Occupational Safety and Health Administration (OSHA) requires employers to provide a safe workplace that is reasonably free of hazards. Still, accidents happen, so employers must also provide access to emergency medical care and appropriate first aid supplies.

OSHA's standard at 1910.151, Medical services and first aid, applies to all general industry employers, from offices to factories, even if a company has only one employee. If your company uses temps from a staffing agency, they are covered just like all other employees.

The standard is just three short paragraphs with limited detail. The first two paragraphs mention medical consultation, emergency medical care, and first aid supplies but do not address the number of responders, what training they need, or the type of supplies. The third paragraph covers emergency eyewashes and showers, but those provisions are not addressed in this paper.

Fortunately, more information can be found in OSHA's Letters of Interpretation, Appendix A of the standard, *OSHA's Best Practices Guide: Fundamentals of a Workplace First-Aid Program*, and *ANSI Z308.1 Minimum Requirements for Workplace First Aid Kits*. Even so, the specifics depend on the conditions of each workplace, including the types of injuries you can reasonably expect based on your experience.

## CONSULTATION AND RESPONDERS

The first paragraph of the standard reads:

**The employer shall ensure the ready availability of medical personnel for advice and consultation on matters of plant health.**



**BEST-IN-CLASS  
REGULATORY  
CONTENT -  
CUSTOMIZED TO YOU!**

The J. J. Keller® **COMPLIANCE NETWORK** delivers our renowned brand of compliance knowledge and expertise, personalized to your exact regulatory needs. **Just add key details to your profile like your professional focus, area(s) of operation, and more.**

**BUILD YOUR PROFILE**

This requires having medical personnel available for advice on employee safety and health. In addition, OSHA encourages consultation with a medical professional regarding first aid plans and procedures; the type and number of first aid supplies; and any first aid training program.

The second paragraph raises more questions than it answers, stating simply:

**In the absence of an infirmary, clinic, or hospital in near proximity to the workplace which is used for the treatment of all injured employees, a person or persons shall be adequately trained to render first aid. Adequate first aid supplies shall be readily available.**

This requires employers to ensure prompt first aid, either by having trained personnel on site, or by ensuring that emergency responders can arrive in a reasonable time. Where serious accidents are likely, OSHA says that emergency care must be available within 3-4 minutes. Serious accidents may involve falls, suffocation, electrocution, or amputation. Where serious injuries are not likely, such as offices, a response time of up to 15 minutes may be reasonable.

Outside responders can be EMTs, an ambulance service, or any suitably trained medical responders. If you plan to rely on outside responders:

- Contact the responder before using them. Verify their response time and capacity to service your establishment. Even if a volunteer fire department is just down the street, check their response time since volunteers are unlikely to be waiting at that location.
- Verify that the provider will be available for all work days and shifts. Do not assume they'll be available on nights or weekends, especially if the provider is a volunteer department.
- Make sure the provider has the capacity to meet your needs. If the service has only one ambulance, and it goes out on a call, it can't respond to your establishment.



**Do you know  
HOW MANY  
first-aid kits  
your workplace  
should have?**

If the service has limitations, you may need to identify a second provider, or train some employees.

If you select an outside responder, your emergency plan might be simply having employees call 911, in which case you must provide a way for employees to do so. Even if you haven't trained or designated employees as responders, do not discourage any trained employees from offering first aid as Good Samaritans. In a Letter of Interpretation, OSHA noted that "rendering of first aid should be encouraged by trained employees in addition to calling 911."

Note that some OSHA standards require trained responders on site. The logging standard (1910.266) and the electric power generation standard (1910.269) both require having persons trained in first aid.

## READILY AVAILABLE SUPPLIES

The standard requires that "adequate" first aid supplies be "readily available," but doesn't provide details. A Letter of Interpretation applied the 3-4 minute response time for the availability of supplies. In short, employees trained to render first aid must have access to appropriate supplies. The supplies should be in an easily accessible area; employees should not need to travel through several doorways, hallways, and/or stairways to find them.

Neither OSHA nor ANSI addresses the number of first-aid kits a workplace should have, nor where they should be placed. Employers must determine this based on anticipated needs. Also, there's no requirement to mount first-aid kits on a wall, but this can help make them available and ensure they don't get misplaced.

To determine what supplies you need, assess the workplace and the potential injuries. Appendix A states that employers should provide "reasonably anticipated supplies" based on the injuries in the establishment's OSHA 300 Log. The Best Practices Guide says first aid supplies "should reflect the kinds of injuries that occur." For example, if employees could get burns, include adequate supplies for treating burns.





## EXPAND YOUR COMPLIANCE KNOWLEDGE

Gain foundational knowledge and pursue professional development in the J. J. Keller Institute, part of **COMPLIANCE NETWORK**. Explore articles and videos on 120+ compliance subjects - including first aid - then test your understanding with practical exercises.

**ENTER THE INSTITUTE**



## DOCTOR APPROVED

*While federal OSHA does not require having a doctor approve the first aid supply list, some state-plan states, such as California, do require this. CalOSHA says that first aid supplies beyond a basic list must be selected “in accordance with the documented recommendations of an employer-authorized, licensed physician.”*

Although ANSI Z308.1 is not mandatory, OSHA suggests it as a guide for small workplaces. It provides lists for two types of kits: Class A kits contain basic items to deal with common injuries, and Class B kits are appropriate for more populated, complex, or high-risk workplaces. However, larger operations should consider the need for additional types of equipment, and first aid supplies in larger quantities.

When selecting supplies, OSHA suggests considering an automated external defibrillator (AED). Each employer should assess its potential need for an AED, consult with a physician, consider state and local laws, and coordinate with local EMS if needed.

Periodically check first aid supplies to ensure that used or expired items get replaced, and to adjust them based on demand. The Best Practices Guide suggests that one person be responsible for tracking and maintaining first aid supplies.

Some employers have reported getting cited for expired products in first-aid kits. Removing and replacing expired items is a best practice, but OSHA does not specifically prohibit expired products. However, ANSI says that “Any first aid supply beyond its marked expiration date should be removed from the kit and replaced.” State health statutes or state-plan state regulations might also prohibit outdated supplies.

## LOCKING THE SUPPLIES

Employers commonly ask about locking up first aid supplies so employees cannot take them for personal use. In a Letter of Interpretation, OSHA states that first aid cabinets can be locked, but must still be readily accessible in an emergency. If the person with the key goes offsite or cannot be found when needed, this would violate the “readily accessible” requirement. One option might be to provide keys to several individuals and let employees know who has a key.



## WANT EXPERT GUIDANCE FOR YOUR FIRST AID PROGRAM?

**COMPLIANCE NETWORK** members enjoy direct access to J. J. Keller's accomplished team of regulatory experts. **Ask questions, schedule one-on-one consultations, and submit research requests** to overcome any compliance challenge.

**ASK OUR EXPERTS**

## DID YOU KNOW?

*The American Heart Association (AHA) recommends CPR training for anyone responsible for operating an AED. States may require or encourage this also.*

## CONSIDERING OTC MEDICATIONS

Over-the-counter (OTC) medications can be purchased without a prescription. OSHA does not address OTC medications, but the ANSI standard says that if a first-aid kit includes OTC drugs, they should be in a single dose, tamper evident packaging, and should not contain ingredients known to cause drowsiness.

There is risk potential for employers if a worker has an allergic reaction to employer-supplied OTC medications. Some companies offer a vending machine for employees to purchase these medications, while other employers simply don't offer them. State laws can affect your level of risk, so you may want to consult a legal professional on this issue.

## TRAINING REQUIREMENTS

OSHA does not certify first aid courses or instructors, but any nationally accepted and medically sound first aid program meets the requirements of 1910.151. Training must be consistent with the work environment, and with the type of work being done.

Training should include instruction in general first aid as well as knowledge and skills to address workplace-specific hazards. A training program must include instructor observation of hands-on skills, along with written performance assessments. Instructor-led retraining for life-threatening emergencies should occur at least annually. Retraining for non-life-threatening response should occur periodically.

Regarding online or computer-based training, OSHA clarified in a Letter of Interpretation that online training alone would not meet the requirements of the standard. Basic first aid and CPR requires training in physical skills, and learning those skills requires practice. A training program should develop hands-on skills using mannequins and partner practice.





When in-person training or retraining is not possible, providers may offer alternative options such as an online portion now and a hands-on portion later. Check with your training provider to see how they approach first aid training.

## CARDIOPULMONARY RESUSCITATION (CPR)

OSHA requires CPR training only if employers fall under a standard that requires it. However, the Best Practices Guide recommends that responders have CPR certifications, and CPR is usually a part of a training offered by national organizations. Training should also cover AEDs if they are available at the worksite. State laws may require that only trained responders use AEDs.

First aid training should be repeated periodically to maintain and update knowledge and skills. For CPR and AED skills, studies have shown a retention rate of 6-12 months, so the American Heart Association's Emergency Cardiovascular Care Committee encourages skills review and practice sessions at least every 6 months for CPR and AED skills.

Several OSHA standards require both first aid and CPR training, including:

- 1910.146 Permit-required confined spaces
- 1910.266 Logging operations
- 1910.269 Electric power generation, transmission, and distribution
- 1910.410 Qualifications of dive team
- 1926.950 Power transmission and distribution

Also, if responders may need to care for victims in hazardous locations, they must be trained on the hazards and necessary PPE for entering those locations, and have rapid access to that PPE in emergencies.





## BLOODBORNE PATHOGENS

Employees who render first aid may be exposed to blood or other potentially infectious materials (OPIMs). Coverage under the Bloodborne Pathogens Standard (1910.1030) does not depend on whether employees have been trained in first aid, but whether they are designated to render medical assistance. Employees expected to provide first aid are covered, triggering the training and other obligations of the Bloodborne Pathogens Standard.

Employers may provide first aid training without designating employees as responders and without triggering the Bloodborne Pathogens Standard. However, training responders to comply with a specific OSHA regulation (such as logging or electric power generation) constitutes a de facto designation as a responder for the purposes of coverage under the Bloodborne Pathogens Standard.

Employees who are not expected to render first aid, but do so as Good Samaritans, are not covered by the Bloodborne Pathogens Standard. However, an employee who routinely provides first aid to other employees with the knowledge of the employer may be a de facto designated responder, even if the employer has not explicitly designated the employee. For example, if supervisors keep the first-aid kits and routinely assist injured workers, the supervisors could be deemed designated responders under the Bloodborne Pathogens Standard.

The Bloodborne Pathogens Standard also requires personal protective equipment (gloves, masks, eye protection, and so on) with the first aid supplies if responders could be exposed to blood or body fluids.



## KEEP UP WITH THE LATEST REGULATORY NEWS

The J. J. Keller® **COMPLIANCE NETWORK** provides up-to-date news, industry highlights, and workplace safety and health developments directly affecting your business.

**DON'T MISS TOP STORIES**

## KEEP YOUR PROGRAM CURRENT

Management commitment and worker involvement is vital in developing, implementing, and maintaining a first aid program. Once developed, the program should be reviewed periodically to ensure it continues to meet the needs of the specific workplace.

Employers should evaluate training, supplies, equipment, and policies to identify additions or modifications needed based on changes in hazards, locations, or worker schedules since the last review. Responder training should keep up-to-date with techniques and knowledge. Expired supplies should be replaced or removed.

The goal is that if the unfortunate happens and an employee gets injured, trained responders and appropriate supplies will be readily available for that worker.



# HOW CAN WE HELP?

CLICK BELOW TO WATCH A VIDEO!



**GET FREE RESOURCES**



## Join an Entire **NETWORK** of Safety & Compliance Expertise

Become a member of **COMPLIANCE NETWORK** and gain access to J. J. Keller's industry-leading safety and compliance content – custom-tailored to your exact regulatory needs.

### MEMBERS ENJOY THESE VALUABLE BENEFITS:

- ▶ **PERSONALIZED REGULATORY CONTENT** for workplace safety, transportation, environment, HR, and other markets.
- ▶ **NEWS & TRENDING ISSUES** relevant to your industry, area(s) of operation, and more.
- ▶ **J. J. KELLER INSTITUTE**, an expansive collection of articles, videos, and interactive exercises spanning 120+ compliance topics.
- ▶ **UNPRECEDENTED ACCESS TO EXPERTS** through question submissions, one-on-one phone or video consultations, and in-depth research requests.
- ▶ **AND MORE**



## ABOUT THE AUTHOR



### **CINDY PAULEY, EDITOR - EHS J. J. KELLER & ASSOCIATES, INC.**

Cindy Pauley is an Editor for J. J. Keller & Associates, Inc. on the Environmental, Health & Safety (EHS) Publishing Team. She utilizes her years of safety program development and management experience in oil and gas, chemical, manufacturing, construction, and agricultural industries to develop a wide variety of easily understandable content and to provide regulatory insight for J.J. Keller & Associates' customers and partners.

Cindy is both a Certified Occupational Safety Specialist (COSS) and a Certified Occupational Hearing Conservationist (COHC) with a Master of Arts (MA) and Bachelor of Applied Arts (BAA) from Central Michigan University.

## ABOUT J. J. KELLER & ASSOCIATES, INC.

Since we began as a family-owned company in 1953, our purpose at J. J. Keller & Associates, Inc. has been to protect people and the businesses they run. Today, serving 500,000+ companies across North America, our associates are proud to make a larger impact than ever. Organizations of all sizes rely on our expert insights to help create safe work environments and simplify complex government regulations. They trust in our comprehensive portfolio of solutions - including ELogs, dash cams and mobile technology; driver training via online courses, streaming video or DVD; cloud-based management tools; managed services; consulting services; online and print publications; forms, PPE and safety supplies.

Transportation professionals rely on J. J. Keller's experts, products and services to reduce risk, improve regulatory compliance, manage performance, and boost operational efficiency. Learn more at [JJKeller.com](http://JJKeller.com), and follow us on [LinkedIn](#), [X](#), and [Facebook](#).

Government regulations change frequently; therefore, J. J. Keller cannot assume responsibility or be held liable for any losses associated with omissions, errors or misprinting in this publication. This publication is designed to provide reasonably accurate information and is distributed with the understanding that J. J. Keller is not engaged in rendering legal, accounting, or other professional services. If legal or other expert advice is required, the services of a competent professional should be sought.

