

1.0 INTRODUCTION

All employees have a duty of care to fellow employees, contractors and members of public to provide assistance when required, including calling on expert assistance when necessary.

First aid/emergency assistance is a means of supporting fellow employees, contractors and members of public while awaiting professional medical assistance.

2.0 SCOPE

To ensure all employees and contractors have the appropriate first aid representation.

3.0 REFERENCES

<u>First Aid Regulation</u>	<u>2004-130</u>
<u>TLM Isolated Line Work First Aid Transportation Plan</u>	<u>NO.: VIII-A.1.00</u> <u>2023-08-31</u>
<u>Form 425</u>	<u>Refusal of First Aid / Medical Attention</u>

4.0 TERMS AND DEFINITIONS

Stationary Operations -	is referring to any employee whose work is located at a Plant or Office location. For example, Head Office, Generation Plants, Regional Offices, etc.
Field Operations	this includes employees located in Transmission and Customer Service/ Distribution other than administration / office workers.
Local Management Representative	either a supervisor or management tasked with the responsibility to identify training for employees.
Isolated Work Site	A site is isolated when paramedics cannot easily reach it. The time it takes a crew to package and transport an injured crewmember to the Transfer Point and to the care of Emergency Services determines if a site is isolated. Consider weather, time of day and of year (ferry schedules / road closures), and other barriers for crew and Emergency Services. If the distance between work site and Transfer Point is greater than ½ km or walking time greater than 10min, the site is isolated.
Transfer Point	Closest point a 4x4 pickup truck would reasonably travel to the worksite and used as a general muster point for crews in the event of an emergency. This is the planned location for transferring an

	injured person to Emergency Services in the event of an incident and must be predetermined and detailed on the tailboard, either by civic address, GPS coordinates or both. The location is not necessarily the closest access point for an ambulance.
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5.0 ROLES AND RESPONSIBILITIES

5.1 Local Management

- is responsible to identify employees to be designated as first aid providers holding valid first aid certificates with training in artificial respiration , cardio-pulmonary resuscitation and when required spinal Immobilization and transportation training for isolated work sites.

5.2 Plant Management

- is responsible for ensuring first aid requirements are met for all shifts.

5.3 Employees

- are required to participate in training and provide first aid services as required.

6.0 STANDARD

6.1 Training

All designated first aid providers are to be trained to the minimum level as set out in Section 8 (2) and hold a valid first aid certificate issued by an agency referred to in Section 8 (3) of the New Brunswick Regulation 2004-130.

a) Any Line Work

- All NB Power personnel and contractors engaged in line work shall hold a valid first aid certificate and be trained in artificial respiration and cardio-pulmonary resuscitation.

b) Isolated work site Spinal immobilization and Transportation Endorsement

- training is available for employees who work in remote locations to move an injured or ill employee from an isolated site to a transfer location to meet an ambulance.

Note: For additional information: TLM Isolated Line Work First Aid Transportation Plan ##

c) Other

- All other NB Power locations shall meet the minimum guidelines as identified in Regulation 2004-130.

6.2 Emergency Communication Procedure

An emergency communication procedure is established in order for employees to summon assistance in the event of an illness or accident of an employee.

The communication procedure shall

- (a) be in writing,
- (b) describe how to contact assistance,
- (c) provide directions to the place of employment and instructions as to how to access the place of employment, and
- (d) be posted in a conspicuous place at the place of employment.

Where the posting of the emergency communication procedure is not practicable, each employee shall be informed of the contents of the emergency communication procedure.

6.3 Emergency Transportation Procedure

There shall be, in writing, a transportation procedure that describes arrangements for the transportation of injured or ill employees from the place of employment to the nearest health care facility.

Where it is necessary to move an injured or ill employee from an isolated site to another place in order to transfer to an ambulance, an employer shall ensure that the transportation is by a means that;

- (a) is suitable, considering the distance to be travelled and the types of serious injuries or illnesses that may occur,
- (b) affords protection against the weather,
- (c) is equipped with a means of two-way voice communication with the emergency medical services to which the injured or ill employee is being transported, and
- (d) is of sufficient size and suitability to accommodate a stretcher and accompanying persons where required.

For Field Operations, emergency communication and transportation plan must be documented on the tailboard.

It is emphasized that the injured person may not be the best judge of their condition, especially in the case of specific trauma events. Where a decision is made to transport the injured person to a medical facility by means other than an ambulance, and the first aid provider in attendance believes there is a possibility their condition may worsen, transport shall only take place if the injured person is accompanied by at least one first aid provider who is not the operator of the transportation. Otherwise, 911 shall be called and an ambulance summoned.

6.4 Refusal of First Aid / Medical Attention

When an employee refuses first aid treatment against the advice of a first aid provider, an ambulance may be called at the discretion of the first aid provider.

Any employee refusing treatment must complete the Form 425 “Refusal of First Aid / Medical Attention.”

6.5 First Aid Kits

First aid kits in accordance with New Brunswick Regulation 2004-130 will be provided and maintained at all worksites. In work environments where specific injuries and illnesses such as burns, lacerations or poisoning may occur, additional suitable items need to be provided. (i.e.: burn kits).

The first aid kit must be readily accessible and clearly visible to all concerned. First aid kits should be portable or mounted in such a way as to allow them to be easily removed and carried to an injured person.

Where the posting of a sign is not practicable, each employee shall be informed of the location of first aid kits.

First Aid Rooms

A first aid room will be provided and maintained "*where there are more than one hundred employees employed at any one time at a place of employment.*"

The complement for the first aid kits, trained employees and first aid rooms are detailed in the *New Brunswick Regulation 2004-130*.

6.6 First Aid Records

Written records detailing the name of the injured person, description of the injury, the treatment and care provided, description of the incident, and the name of the person(s) providing emergency care must be maintained. It is the responsibility of the attending first aid responder to ensure the record is completed as soon after the event as possible. The H&S Incident (145) e-form is a written record.

7.0 APPENDIX

- Refusal of First Aid / Medical Attention Form
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DOCUMENT APPROVAL/REVISION RECORD

Revision #	Date yyyy/mm/d	Revision Summary	Author	Reviewed By	Approved By
02	2019/01/02	Complete revision New "Refusal of First Aid/Medical Attention" Form	N.Allen	R.Condon	N.Poirier
03	2023-09-27	Addition of first aid training for working in remote locations	N. Legere C. Granter	H&S Team	R. Roy



Director of Total
Health & Safety

Appendix A



Refusal of First Aid / Medical Attention

Date (yyyy-mm-dd): _____

I understand that I may have an injury/condition and the possible consequences have been explained to me. I understand that the First Aid Provider may not be aware of the full extent of the injury/illness, which may become apparent only by examination by a physician. It is my decision to refuse:

Assessment:

Treatment:

Transport:

Name:	Signature:
Company:	Telephone:
Witness:	Signature:

Reason for Refusal:

Employee verbalizes understanding of risks: Yes No

Advice given to employee:

First Aid Provider advised employee to follow up with a medical facility or family physician: Yes No

Provider:	Signature:
Time:	