

FIRST AID PLAN GUIDELINES

FOR UNIVERSITY OF WASHINGTON PERSONNEL

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# Background

## Purpose

All University personnel are required to have access to quick and effective first aid in the event of an emergency. This guide contains instructions for creating a First Aid Plan for University of Washington (UW) personnel on UW campuses, UW-owned sites, UW-leased spaces, temporary field locations, and field trips that are under the control of University operations and staff.

Environmental Health & Safety (EH&S) provides guidelines to accommodate the wide variety of work types, locations, and environments shared by the University’s personnel. University units use these guidelines to determine the required number of first-aid trained personnel (if any), which first-aid supplies are needed and how to obtain necessary supplies.

Personnel identified as first-aid trained for the purposes of meeting regulatory requirements do so as a collateral duty; it is not their primary job assignment to provide first aid or other medical assistance.

## Regulatory Requirements and University Policy

The University is required to comply with federal and state first-aid regulations. Compliance with Washington Industrial Safety and Health Act (WISHA) under Washington Administrative Code [(WAC) 296-800-150](https://app.leg.wa.gov/wac/default.aspx?cite=296-800-150), “First Aid,” requires the University to ensure that first-aid trained personnel are available to provide quick and effective first aid with [appropriate first-aid supplies](https://app.leg.wa.gov/wac/default.aspx?cite=296-800-15020). The University’s [Administrative Policy Statement 10.3](http://www.washington.edu/admin/rules/policies/APS/10.03.html) also states the requirement to ensure that personnel have access to first aid.

## Roles and Responsibilities

The roles and responsibilities for University health and safety programs and policies are outlined in [Executive Order 55](http://www.washington.edu/admin/rules/policies/PO/EO55.html). The following are specific to the University’s First Aid requirements.

### EH&S responsibilities

The UW Environmental Health and Safety Department (EH&S) provides assistance to University units implementing these guidelines to meet first-aid requirements. EH&S interprets the first-aid requirements and serves as a liaison to the Washington State Department of Labor and Industries (L&I) for health and safety. In addition, EH&S helps to ensure compliance with federal and state first-aid regulations through program oversight and provision of services, including information, resources, and training.

### UW unit responsibilities

[UW Executive Order 55](http://www.washington.edu/admin/rules/policies/PO/EO55.html) specifies that each dean, director, department chair, and supervisor is responsible for the health and safety performance in their respective units. This responsibility cannot be transferred or delegated.

University units are responsible for ensuring the availability of quick and effective first aid and readily accessible first-aid supplies in work areas.

Each unit must document their First Aid Plan, defining the unit’s method for meeting the first-aid requirements from the options and guidelines included in this document. [Appendix 1](#_Appendix_1:_Documentation) is a tool UW units can use to develop their First Aid Plan.

# First Aid Plan requirements

First Aid Plans must address the following two regulatory requirements:

1. First-aid trained personnel are available to provide quick and effective first aid.
2. Appropriate first-aid supplies are readily available.

## First-aid trained personnel

University units have two options for ensuring first-aid trained personnel are available:

* **Option 1:** For University work locations served by municipal enhanced 9-1-1 emergency medical services, the First Aid Plan can indicate that local emergency medical services will be relied upon in case of emergency.
* **Option 2:** Compliance may be achieved in any location by having at least one first-aid trained employee present when personnel are working. A common method for ensuring a consistent presence of first-aid responders is for each supervisor (or their designee) to be trained and certified in first aid. It is strongly recommended that an alternate person also be trained and certified in first aid, to ensure coverage during absences.

Units may choose to implement one or both of these options; however, some higher risk work environments and work activities require that first-aid responders are on site while personnel are working. Refer to the sections below for more information.

## First-aid supplies

First Aid Plans created by University units must address the type and accessibility of first-aid supplies:

1. First-aid supplies at your workplace are appropriate to:
   1. Your occupational setting and work-related activities; and
   2. The response time of your emergency medical services.
2. First-aid supplies are:
   1. Readily available and easily accessible to all your employees;
   2. Stored in containers that protect them from damage, deterioration, or contamination; containers must be clearly marked, not locked, and may be sealed; and
   3. Able to be moved to the location of an injured or acutely ill worker.

# First Aid Plan documentation

1. Units must identify and document the certification of first-aid trained personnel *if their unit’s First Aid Plan relies on first-aid trained personnel being present on site while personnel are working* (instead of relying on 9-1-1 for emergency response). Units can use [Appendix 1](#_Appendix_1:_Documentation) to document this information.
2. Units that have off-site locations and activities, such as field trips and remote research field stations, should have separate [site-specific and situation-specific first-aid response plans](https://www.ehs.washington.edu/research-lab/field-operations-safety) for these events. Units should refer to the [UW Field Operations Safety Manual](https://www.ehs.washington.edu/resource/uw-field-operations-safety-manual-1110) and create a Fieldwork Safety Plan that serves as their First Aid Plan.
3. Units must communicate their First Aid Plan to their personnel.

# First Aid Plan Additional Considerations

While the majority of University personnel work in office environments, large numbers of personnel work in higher risk settings and situations, such as laboratories, medical/clinical settings, shops and trades, working alone, and remote locations. Below are additional considerations for University units with personnel in specific settings and situations.

## Office environments

Organizational units with office work environments (e.g., academic, administrative, or service unit offices, etc.) have two options for complying with the first-aid training requirement.

* **Option 1:** Have at least one first-aid trained employee per floor of each building, wing, or other defined work area where the unit has offices. For example, a large suite of offices may have one first-aid trained employee for the suite and can rely on a first-aid trained employee in a nearby area as a backup. One method for providing adequate coverage is for evacuation wardens to complete first-aid training.
* **Option 2:** Units in metropolitan areas can rely on 9-1-1 emergency services and campus security (i.e., UW Police Department on the Seattle campus and Campus Security Services on Bothell and Tacoma campuses) for first-aid response. In office areas where this option is used, the unit is required to inform all personnel in the area that these services are the primary first-aid responders and how to summon assistance.

## Laboratories

Work environments that are primarily laboratory facilities (research, clinical, and/or teaching) are required to always have at least one first-aid trained employee present where personnel are working. This can be achieved by having at least one first-aid trained individual per floor, building, wing, or other defined work area (such as a center, institute, or suite of laboratories). More than one first-aid trained employee may be needed to ensure coverage during absences and vacancies. One method for providing adequate coverage is for evacuation wardens to complete first-aid training.

L&I requires first-aid and CPR trained individuals and first-aid supplies be on site when work in a laboratory facility includes confined space entry, welding, scuba diving, and electrical power construction, generation, transmission, and distribution.

## Medical/clinical environments

At the UW Medicine medical centers and Harborview Medical Center, first aid and emergency medical response are available to personnel from on-site medical staff through the hospital paging system. In areas where medical staff are not available or do not respond to employee injuries or illnesses, first-aid trained staff must be available. One first-aid trained employee on each floor of a building, wing, or other defined work area is adequate coverage if provisions are made for back up from first-aid trained personnel in adjacent areas. Please note that medical center staff who render first aid as part of their primary job responsibilities are required to take [bloodborne pathogens exposure training](#_Bloodborne_pathogens_exposure) and are not covered under the [Good Samaritan Act](#_Good_Samaritan_Act).

## Shops and trades/warehouse operations

To ensure that first-aid trained personnel are always available when personnel are present, each shop and warehouse location must have at least one first-aid trained employee on each shift in each work area. More than one first-aid trained employee may be needed to ensure coverage during absences and vacancies.

L&I requires first-aid and CPR trained individuals and first-aid supplies to be on site when shop work includes confined space entry, welding, scuba diving, and electrical power construction, generation, transmission, and distribution.

## Working alone

Working alone applies to work or study occurring when no other person is in direct line of sight or within hearing range of the person working. A person may work alone in a lab, office, shop, or other University location, or in the field. Working alone can take place during normal working hours, as well as on evenings and weekends.

Personnel who work alone must know how to summon first aid. Supervisors/leads must know the location of all staff working alone and periodically confirm their safety.

Refer to the [Working Alone Safely Focus Sheet](https://www.ehs.washington.edu/system/files/resources/working-alone-safely.pdf) as a guide for pre-task planning to identify and assess the risks and safety measures needed.

## Remote locations

When University personnel are stationed in a remote location (e.g., at a research field station, on a field trip or diving excursion) that is *not* served by a municipal emergency medical service, there must always be personnel at the site who are trained in advanced first-aid. Refer to the [UW Field Operations Safety Manual](https://www.ehs.washington.edu/system/files/resources/uw-field-operations-safety-manual.pdf), section 4.B. First Aid Skills for additional information on this requirement. Use the [Fieldwork Safety Plan](https://www.ehs.washington.edu/research-lab/field-operations-safety) to document who has advanced first-aid training. EH&S offers [Wilderness First Aid for Environment and Forestry Sciences](https://www.ehs.washington.edu/training/wilderness-first-aid-environment-and-forestry-sciences-restricted-registration-code), which satisfies the requirement for advanced first-aid training.

In addition, when University personnel are assigned to work at a remote field location or on a field trip, the employing unit must have a written [Fieldwork Safety Plan](https://www.ehs.washington.edu/research-lab/field-operations-safety) for each field station or field trip. The emergency plan must include emergency phone numbers, communications capabilities, provisions for transportation of injured or ill personnel, and the location of the nearest medical facility.

In accordance with the [UW Diving Safety Manual](http://ehs.washington.edu/system/files/resources/divingsafetymanualuw.pdf), scientific scuba diving conducted under University auspices must include documented pre-dive emergency planning. University certified divers are required to have current [diving first aid and CPR certification](https://www.ehs.washington.edu/training/scientific-diver-first-aidcpraedoxygen-administration), including emergency oxygen training.

## Other Locations

If an employing unit has a work environment not addressed in these guidelines or has a complex mix of work environments or locations, EH&S will assist in the development of a unit-specific first aid response plan. Contact EH&S at 206.543.7388 or [ehsdept@uw.edu](mailto:ehsdept@uw.edu) for assistance.

## Training

### Obtaining and documenting first-aid training

EH&S offers first-aid training courses. The current course schedule is listed on the EH&S [Training](http://ehs.washington.edu/training/find-your-course#facc) webpage. EH&S can also assist large groups with obtaining advanced first-aid training, if needed. Course fees apply for all first-aid training courses.

Each employee who completes the EH&S-sponsored first-aid course will receive a first-aid card to serve as documentation. In addition, EH&S maintains [training records](https://ehs.washington.edu/training/training-records) for all EH&S-sponsored courses.

If a unit chooses to contract with an outside provider, the unit is responsible for ensuring that the trainer is certified to teach first aid. First-aid training acquired through outside providers must be documented and maintained within the employing unit.

First-aid training must be repeated every two years to maintain a valid first-aid certificate. A current list of personnel who are trained and certified in first aid and CPR, and/or wilderness first aid (through a course provided by EH&S) can be accessed via the [Training Records page](https://www.ehs.washington.edu/training/training-records) on the EH&S website.

### Advanced first-aid training

Personnel working in a remote location are required to have access to advanced first-aid training. The work environment and potential hazards should be assessed to determine if injuries could result that would require first-aid skills outside the scope of a standard first-aid course. In these cases, wilderness first-aid training may be more appropriate. Arrangements for advanced first-aid training can be made by contacting the EH&S Training team at [ehstrain@uw.edu](mailto:ehstrain@uw.edu) or calling 206.543.7201.

# First-aid kits

## First-aid supplies

First-aid supplies are required to be readily available to all personnel, and stored in clean, clearly marked, portable containers. Containers must be made of material that protects them from damage, deterioration, or contamination in the work environment.

First-aid kits and supplies may be purchased through [UW Procurement](https://f2.washington.edu/fm/ps/) or through a local retailer or safety supply vendor. Contact EH&S at 206.543.7388 if you need assistance determining what types of first-aid supplies are needed for your work environment.

## Assessing additional needs

Units are required to assess their work environments and environmental hazards to determine if additional supplies are needed beyond a standard, commercially-available kit. For example, the [UW Field Operations Safety Manual](https://www.ehs.washington.edu/resource/uw-field-operations-safety-manual-1110) and [Field Work Risk Assessment Guide](https://ehs.washington.edu/resource/field-work-risk-assessment-tool-field-rat-guidelines-1106)lines, are useful to determine first-aid supplies needed for field work.

### Burn creams

EH&S recommends omitting burn creams from UW first-aid supplies because the medical treatment of burns is specific to the type of burn. Most often burn treatment consists of leaving the site clean (do *not* apply butter, burn gels, creams or lotions) after thoroughly rinsing with copious amounts of water.

There are a few exceptions to this approach:

* Chemical burns that should **not** be irrigated immediately with water are dry lime, phenols, and elemental metals (e.g., sodium, potassium, calcium oxide, magnesium, phosphorous).
* Workers who have skin contact with hydrofluoric acid should apply 2.5% calcium gluconate gel and then seek medical attention. This treatment is specific to people working with hydrofluoric acid. Refer to the [EH&S Hydrofluoric Acid Focus Sheet](https://www.ehs.washington.edu/system/files/resources/Focus_Sheet-HF.pdf) for more information.

### Medications

Medications (including [over-the-counter medicines](https://medlineplus.gov/overthecountermedicines.html)) are *not* allowed to be stocked in UW first aid kits under most circumstances. Medications can interact with a person’s underlying health conditions or other medications, and so must be used only for the person that they are indicated for. For example, pain medication or an EpiPen should be kept with a person’s own belongings, and not stored in the unit’s first-aid kit. However, medications may have a place in a first-aid kit in the following limited circumstances:

* The kit is specific to an individual’s use only.
* The kit will be used in a remote field location where access to over-the-counter medications will be limited and including some medications may be appropriate (e.g., diphenhydramine to treat an allergic reaction or ibuprofen to treat a minor injury/illness). Refer to the [UW Field Operations Safety Manual](https://www.ehs.washington.edu/resource/uw-field-operations-safety-manual-1110) for additional guidance.

In rare circumstances and in close consultation with EH&S, units may evaluate the inclusion of a prescription medication in a general-access kit (e.g., epinephrine autoinjectors or naloxone). A risk assessment is required, and should include the following details (at a minimum):

* A known exposure to a hazard above baseline work or recreational activities (e.g., stinging insects, work with unhoused populations, work with specific hazardous drugs or narcotics)
* Anticipated likelihood of interaction with this hazard (e.g., beekeeping activities)
* Barriers to accessing emergency medical services in an expedient manner (e.g., extended remote field deployment where time to access help is hours or days)

EH&S will work with the requesting unit on both the risk assessment and the implementation plan to maintain a prescription medication in a first-aid kit. This includes ensuring compliance with any University requirements or applicable regulations.

### Documentation

Units are required to document the location of their first-aid kits and assign a person to re-stock supplies and check expiration dates. Frequency and mechanism of auditing first-aid kit supplies may be determined by the unit.

### Communication

All personnel need to be informed of the location of first aid kits through orientation and regular communication (e.g., an annual reminder at an all-employee meeting).

# Automated external defibrillators

Automated external defibrillators, or AEDs, are electronic devices that help the heart to reestablish its proper rhythm via a shock. State and local laws do not require automated external defibrillators (AEDs) to be provided in buildings; however, units may choose to purchase an AED. Units that [purchase an AED](https://www.ehs.washington.edu/system/files/resources/aed-focus-sheet.pdf) should designate an AED coordinator who will follow [guidance](https://www.ehs.washington.edu/fire-life/automated-external-defibrillators) on registration, training, and maintenance of the AED.

UW Police Department officers carry AEDs in their vehicles on the Seattle campus and are trained in their use.

For more information on AEDs, visit the [Automated External Defibrillators](https://www.ehs.washington.edu/fire-life/automated-external-defibrillators) webpage on the EH&S website.

# Stop the Bleed Kits

Stop the Bleed Kits may be [purchased](https://www.stopthebleed.org/) by units. State and local laws do not require units to have these kits; however, they are highly recommended in some work environments because a person can die from blood loss within five minutes. Blood loss is the leading cause of preventable death in trauma events.

Units may choose to stock Stop the Bleed Kits in specific areas where there are significant physical hazards, such as a shop or warehouse. Wherever Stop the Bleed kits are supplied, units are required to ensure personnel are trained in their use.

[Training](https://hiprc.org/outreach/stop-the-bleed/) is available at Harborview Medical Center and other sites shown on the national [Stop the Bleed list](https://cms.bleedingcontrol.org/class/search).

# Good Samaritan Act

Personnel who obtain first-aid training as a collateral duty and *not* as a primary job assignment are covered by the [Good Samaritan Statute](https://doh.wa.gov/sites/default/files/legacy/Documents/2900/goodsam.pdf) ([RCW 4.24.300](https://apps.leg.wa.gov/rcw/default.aspx?cite=4.24.300)), which states:

*“Any person, including but not limited to a volunteer provider of emergency or medical services, who without compensation or the expectation of compensation renders emergency care at the scene of an emergency or who participates in transporting, not for compensation, therefrom an injured person or persons for emergency medical treatment shall not be liable for civil damages resulting from any act or omission in the rendering of such emergency care or in transporting such persons, other than acts or omissions constituting gross negligence or willful or wanton misconduct.”*

# Bloodborne pathogens exposure

Personnel who render first aid or other medical assistance as a primary or secondary job duty must be included in the [UW Bloodborne Pathogens Program](https://www.ehs.washington.edu/biological/bloodborne-pathogens), participate in annual training, and be offered a Hepatitis B immunization.

In the event that a University employee is exposed to human blood or other potentially infectious materials during the administration of first aid or any other activity in the workplace, the employee should notify their supervisor immediately to be referred to the appropriate [employee health center](https://www.ehs.washington.edu/workplace/uw-employee-health-center) for post-exposure follow-up. In addition, a UW [Online Accident Reporting System (OARS)](http://ehs.washington.edu/ohsoars/index.shtm) report must be submitted. More information about [incident reporting](https://www.ehs.washington.edu/workplace/incident-reporting) is available on the EH&S website.

University personnel who are first-aid trained as a collateral job duty are *not* required to have annual bloodborne pathogen training nor are they required to be offered a Hepatitis B immunization.

# Resources and contact information

Questions regarding first aid should be directed to EH&S at 206.543.7388 or [ehsdept@uw.edu](mailto:ehsdept@uw.edu).

*Continued on next page.*

# Appendix 1: Documentation of First Aid Plan

**Instructions**: *Use this form to document the First Aid Plan for your department, organization, or unit. Update this form when any information changes. This plan may include multiple work environments.*

Department, organization, or unit name:

Location(s) covered by this plan:

**This First Aid Plan is for the following type of work environment:**

Office  Laboratory  Shop or warehouse  Remote location

Other (explain):

**[Unit Name] has chosen the following as our plan to provide quick and effective first aid to personnel at the location(s) listed above** (check the appropriate box below):

We will rely on our local municipal emergency response service to provide first aid.\*

We will ensure that first-aid trained personnel are available to render first aid to our personnel. The following personnel have received first-aid training within the past two years and are certified to provide first aid (list first-aid trained personnel. Include name, phone number, work location, and date of last first-aid training):

We have a specialized procedure for ensuring quick and effective first aid is available to our personnel (describe below):

**Location of the first-aid supplies:**

**Plan for personnel who work alone outside of normal business hours** (describe your plan for these individuals to obtain emergency assistance}:

**Automated external defibrillators (AED):**

Our unit has a designated Automated External Defibrillator (AED) at our location.

Location of the AED(s):

We have designated an AED coordinator who is responsible for registration, training, and maintenance of the AED, as well as recordkeeping for the device and its use. Our AED coordinator is (list designated personnel. Include name, phone number, work location, and date of last first-aid/CPR training):

**Additional provisions:** Any additional measures or supplies designated for first-aid response (e.g., location of Stop the Bleed kits) are described here:

**This First Aid Plan was last updated:**

**For questions regarding this plan contact:**

*\*Note: If your work environment is a laboratory, shop, or warehouse or personnel conduct confined space entry, welding, scuba diving, and electrical power construction, generation, transmission, and distribution they are required to be first-aid and CPR trained and cannot depend upon local municipal emergency response. You will need to ensure that first-aid trained personnel are available on site when personnel are present.*