

# Workplace First Aid Notice Posting for Workers



## Introduction: How to Use This Tool

Whether an OHS requirement or simply a best practice, employers should create and conspicuously post workplace notice(s) letting workers know about the first aid resources available at the site and how they can be accessed. Such notices can be separate or combined, like the Model Notice below, just as long as they list at least the same information as that contained in our Model and are posted near first aid kits, dressing stations, first aid rooms and/or other conspicuous locations around the work site.

## FIRST AID NOTICE TO WORKERS

### Being Prepared for a Medical Emergency May Save Your Life!

#### You Must Report Your Injuries

If you get sick or injured at work, you must tell your supervisor, manager or other Company official as soon as you can. The same is true if you see a co-worker get hurt or sick. Reporting work injuries and illnesses is not simply Company policy; it's a vital safety issue. And it also happens to be the law!

#### How to Get First Aid

The Company has taken steps to ensure that you get the first aid treatment you need for any injuries you suffer at the workplace. If first aid is not enough, you will be taken, at Company expense, to the nearest medical facility for more extensive treatment.

## **Vital Information You Need to Know to Get First Aid for a Work Injury or Illness**

Here's what you need to know about the first aid help available and how to get it:

### **LOCATION OF FIRST AID KIT(S)**

The Company has *[list number]* of first aid kits at the facility, located at *[list the location of each first aid kit at your workplace]*.

<b>FIRST AID KIT</b>	<b>LOCATION</b>

### **LOCATION OF FIRST AID STATION(S)/ROOM(S)**

The Company has *[list number]* of first aid stations/rooms at the facility, located at *[list the location of each first aid station or room, i.e., place where you keep the first aid equipment and supplies, at your workplace]*.

**Name and Contact Information of Person in Charge of First Aid Station/Room:** \_\_\_\_\_

\_\_\_\_\_

*[If you have one first-aid attendant at your workplace, list his/her name; if you have more than one first-aid attendant,*

*list the attendant designated as being in charge of the first aid station; and if you don't have any first-aid attendants, list the person at your workplace who's trained to provide first aid.]*

## **FIRST-AID PROVIDER(S)**

The Company has arranged to have [list number] of trained first aid providers at its facility. [List the name, location, and qualifications of each person at your workplace who is trained to deliver first aid, which may include one or more of the following:

- *A standard first-aid attendant;*
- *An advanced first-aid attendant; and/or*
- *Another person trained in first aid.]*

NAME	WORK LOCATION	QUALIFICATIONS (e.g., standard first-aid attendant)

## **EMERGENCY COMMUNICATION PROCEDURE**

The Company has put into place a procedure to make it easy to call for immediate first aid in the event of a work emergency. [Explain the procedure for summoning first aid and communicating with first aid and emergency response personnel.]

## **FIRST AID EMERGENCY CONTACTS**

Nearest

Police

Station:

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Nearest Fire Station:

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Nearest Hospital or Medical Facility:

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Ambulance/Other Emergency Transport Service:

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Other Emergency Contacts for First Aid: