



# AED POLICY DEVELOPMENT GUIDE



## **INTRODUCTION**

This guideline has been developed to assist your organization in establishing a comprehensive AED Policy that governs the selection, use, placement, and maintenance of AED equipment on construction projects, and to help ensure compliance with relevant Ontario legislative and regulatory requirements.

## **AED POLICY DEVELOPMENT STEPS**

Step 1: Determine whether your company is legally required to have an AED at the project

Step 2: Conduct a formal hazard assessment to determine the need for AED equipment

Step 3: Define the purpose and scope of the AED policy

Step 4: Define responsibilities (e.g., procurement, assessment, evaluation, etc.)

Step 5: Define equipment requirements

Step 6: Determine AED placement, accessibility and quantity

Step 7: Define training requirements

Step 8: Define inspection and maintenance program

Step 9: Develop the emergency response procedure

Step 10: Develop recordkeeping and document control process

Step 11: Develop enforcement and evaluation steps

Step 12: Develop appendices

Step 13: Develop implementation strategy

## **STEP 1: DETERMINE WHETHER YOUR COMPANY IS LEGALLY REQUIRED TO HAVE AN AED AT THE PROJECT**

First, your organization needs to identify whether duties of a constructor apply to you.

Refer to the definition from the Occupational Health and Safety Act: “constructor” means a person who undertakes a project for an owner and includes an owner who undertakes all or part of a project by himself or by more than one employer; (“constructeur”).

Next, determine whether your organization meets the mandatory AED requirement under Ontario Regulation 157/25. The mandatory AEDs are required for:

- Construction projects with 20 or more workers regularly employed, AND
- The project is expected to last 3 months or more.

If both criteria are met for a project, the mandatory AED requirements apply to that project. If one or both criteria are not met, an AED is not required under Ontario Regulation 157/25, however, an AED may still be required based on the results of the workplace-specific hazard and risk assessment (see Step 2).

When determining whether the regulation applies, confirm workforce thresholds by reviewing staffing projections for each phase of the project, including subcontractor headcount, and ensure that the assessment and calculations are fully documented (e.g., meeting minutes). In addition, review the project schedule to verify the expected duration.

## **STEP 2: CONDUCT A FORMAL HAZARD ASSESSMENT TO DETERMINE THE NEED FOR AED EQUIPMENT**

Complete a hazard and risk assessment to identify factors that may contribute to cardiac arrest incidents. Construction workers face an elevated risk of cardiac events due to high-stress environments, physically demanding work, and exposure to various high-risk conditions. When completing the assessment, consider the following factors:

- Worker risk factors: physical exertion, age profile (if known), heat or cold stress, high-stress tasks, shift length.
- Worksite-specific risks: remote or obstructed areas, confined access, multistory sites, barriers created by hoarding and sidewalk closures (consider these barriers in AED retrieval time planning).
- Estimate EMS response time: identify the nearest ambulance station or EMS point of care and assess potential delays caused by construction staging, traffic restrictions, or access limitations.

When conducting a hazard assessment, use a standardized and systematic approach that evaluates both the likelihood of a cardiac incident (based on frequency and probability) and the potential severity of the outcome. Even if an AED is not legally required based on project duration or workforce size, high-risk workplaces must still consider implementing an AED as a reasonable precaution under OHSA s.25(2)(h). Ensure that the hazard and risk assessment is fully documented, retained, and kept up to date as project conditions change.

### **STEP 3: DEFINE THE PURPOSE AND SCOPE OF THE AED POLICY**

Write a clear “Purpose” statement that references applicable regulatory requirements (OHSA, O. Reg. 213/91, and First Aid Regulation 1101), identifies the AED program as a “reasonable precaution” under OHSA s.25(2)(h), and notes that early AED use significantly increases a worker’s chance of survival during a cardiac arrest event.

Next, develop a “Scope” section that defines exactly which projects, facilities, and operations the AED Policy applies to, consistent with the applicability criteria established in Step 1. This must identify all departments and parties involved (e.g., operations, health and safety, contractors) and clearly specify whether corporate locations such as offices, warehouses, or shops are included in the AED program. The Scope should also detail how contractors and subcontractors are expected to comply with the policy, including any site-specific requirements or documentation obligations.

## **STEP 4: DEFINE RESPONSIBILITIES (E.G., PROCUREMENT, ASSESSMENT, EVALUATION, ETC.)**

Define the roles and responsibilities of all workplace parties involved in the AED program. Consult your organizational chart to ensure that every relevant role is identified and that responsibilities are appropriately assigned.

At a minimum, the following parties should be considered:

- Constructor / Employer: provide AEDs, maintain AEDs in good working condition, ensure appropriate training is delivered, establish and oversee the inspection and maintenance system, ensure AED availability on projects that meet regulatory thresholds, and ensure that at least one trained worker is present whenever work is in progress.
- Supervisors: enforce AED requirements, ensure that workers are trained and available to respond, verify completion of inspections, and monitor ongoing compliance.
- First Aider / Competent Workers - conduct equipment inspections, complete inspection logs, apply tag-out if equipment fails or is otherwise unfit for use, report AED deficiencies, use equipment as prescribed
- Workers - follow training and procedures, report AED deficiencies.
- Contractors / Subcontractors - comply with site AED policy, provide proof of training, participate in drills and audits.

## **STEP 5: DEFINE EQUIPMENT REQUIREMENTS**

Your policy must incorporate specific AED equipment requirements. Ensure that the policy clearly states that all AED units must be licensed as medical devices by Health Canada. In addition to the AED unit itself, the policy must identify all required accessories, which at minimum include a CPR mask, scissors, disposable gloves, a razor, a garbage bag, and absorbent towels.

The policy must also address appropriate storage provisions. Specify that AEDs must be stored in a manner that protects them from dust, moisture, extreme temperatures, and direct sunlight. Consider the range of suitable storage solutions available for different work environments, such as wall-mounted indoor cabinets, heated outdoor enclosures, locked or unlocked cabinets, and alarmed or non-alarmed units.

For examples of community and workplace AED programs, including equipment offered through initiatives such as the MIKEY Network, refer to: <https://mikeynetwork.com/apply-for-a-mikey/> .

## **STEP 6: DETERMINE AED PLACEMENT, ACCESSIBILITY AND QUANTITY**

Provide clear instructions regarding the placement, accessibility, and quantity of AED equipment required for each workplace. Your policy must specify that AEDs be installed in unobstructed, easily accessible locations and be clearly identified with the prescribed signage (e.g., heart and lightning bolt symbol). AED placement must be planned to minimize retrieval time and ensure rapid response during an emergency. As a guideline, industry best practice is to achieve an AED retrieval time of less than 1.5 minutes of travel time from any regularly occupied work area.

When determining the number and distribution of AEDs, consider the results of the workplace-specific hazard and risk assessment, including travel distance, the number of floors or work zones, typical worker locations, and any barriers to movement such as hoarding or restricted access routes. Consult the manufacturer's recommendations for the specific AED model used on-site to ensure that all equipment-specific placement and environmental requirements are met.

Lastly, ensure that a workplace-specific map or plan clearly identifies the locations of all emergency response equipment, including AEDs. These locations must be reviewed with workers during site orientation so they understand where the equipment is situated and how to access it during an emergency. The workplace plan must also be posted in a conspicuous and accessible location to ensure all workers, contractors, and visitors are aware of AED placement at all times.



## **STEP 7: DEFINE TRAINING REQUIREMENTS**

Whenever AED equipment is required at a project, at least one worker trained in CPR and AED operation must be present at all times while work is in progress. Your organization must establish minimum training requirements for AED use, which should include obtaining CPR/AED certification from a recognized training provider, ensuring that the curriculum includes hands-on practical components, defining expectations for workers retraining and emergency response drill frequency. In addition, all designated First Aid and AED-trained workers must review the user manual and specifications for the specific AED model available at their workplace to ensure familiarity with equipment features and operation.

Your organization must also determine appropriate ratios of AED-trained workers relative to the total number of workers on site. At a minimum, one trained worker per shift is required, however, additional trained personnel may be needed to ensure adequate coverage during breaks, across multiple work phases, or in isolated or high-risk work zones.

To verify the effectiveness of training and associated emergency response processes, your organization should implement ongoing evaluation processes, such as scheduled response drills (at least annually), unannounced mock drills, documentation audits, and workplace inspections focused on first aid and AED readiness.

## **STEP 8: DEFINE INSPECTION AND MAINTENANCE PROGRAM**

To ensure that AED equipment remains ready for use, your organization must establish clear inspection and maintenance processes. AED inspections should be incorporated into the company's overall first aid equipment inspection schedule and completed in accordance with the manufacturer's recommendations, but no less than quarterly (monthly visual inspections are strongly recommended). Develop a standardized checklist to ensure that inspections consistently address, at minimum: the AED model and identification number, battery status, pad expiry dates, completeness of the accessory kit, condition of the cabinet or enclosure, environmental suitability, signage and visibility, and verification that the AED is unobstructed and located as indicated on the workplace map. Inspections must be conducted by a competent and trained person. Your policy must also specify that inspection records are to be stored with the AED as required. In addition to scheduled inspections, consider integrating visual checks into supervisor inspections and health and safety representative walkthroughs to support ongoing readiness.

Importantly, your AED policy must emphasize that all AED equipment must be maintained strictly in accordance with the manufacturer's recommendations. Review the maintenance schedules provided by the manufacturer and incorporate these requirements directly into the policy, including any timelines for battery replacement, pad replacement, software updates, and functional testing. The policy should also reference the relevant documentation such as the AED user manual or manufacturer maintenance guide to ensure that personnel have access to accurate, equipment-specific instructions.

Any AED device or its component that is damaged, expired, contaminated, used during an incident, missing required accessories, or fails any part of the inspection process shall be immediately removed from service, clearly tagged "Defective – Do Not Use," and secured in a locked cabinet or designated control area to prevent accidental use. The unit shall be replaced as soon as reasonably practicable, with priority given to immediate replacement where worker safety or emergency response capability may be compromised.

## **STEP 9: DEVELOP THE EMERGENCY RESPONSE PROCEDURE**

The next step is to develop, or cross-reference, your company's emergency response and post-incident mitigation procedures related to AED use. Your policy must require that each workplace establish an emergency response plan that specifically incorporates AED deployment, worker roles, communication protocols, and site-specific access considerations. All incidents involving AED use must be reported using the company's standardized incident reporting and investigation form.

At minimum, this form must capture:

- a record of all circumstances of the incident as described by the injured worker,
- the date and time of the occurrence,
- the names of witnesses, the nature and exact location of the injuries, and
- the date, time, and nature of each first aid treatment provided.

Your policy must also outline the steps for decommissioning and replacing an AED after it has been used in an emergency. This includes identifying the individuals responsible for initiating replacement, notifying the appropriate internal parties, securing the used AED, and ensuring that pads, accessories, or the unit itself are replenished or replaced in accordance with manufacturer instructions.

## **STEP 10: DEVELOP RECORDKEEPING AND DOCUMENT CONTROL PROCESS**

Your policy must describe the process for producing, maintaining, and controlling all AED-related records. At a minimum, the following records must be created and retained:

- Training records (First Aid, equipment-specific AED training).
- JHSC minutes that document discussions related to AED policy implementation.
- AED equipment inspection and maintenance logs.
- Incident reports for any occurrence involving AED equipment.
- Disciplinary records related to enforcement of the policy.

The policy must also establish provisions for record retention, with recommended minimum retention periods of three years, unless otherwise required by company policy or applicable legislation. Record storage requirements must be clearly defined, including the requirement that AED inspection and maintenance records be stored with the AED unit as well as centrally archived. Access to these records should be controlled and limited to designated personnel (e.g., operations manager, site superintendent, health and safety representative).

All AED-related records, as well as the policy itself, must comply with the company's document control standards, including requirements for file naming conventions, document identification numbers, revision numbers, approval dates, and approver information. The AED Policy must be formally reviewed and approved at least annually by senior management and the Joint Health and Safety Committee (or the Health and Safety Representative, where applicable). In addition to scheduled annual reviews, consider incorporating a policy review requirement following any workplace incident involving AED use to ensure that lessons learned are integrated and that the policy remains current, effective, and aligned with best practices.

## **STEP 11: DEVELOP ENFORCEMENT AND EVALUATION STEPS**

When drafting the auditing and enforcement section of the AED Policy, ensure that the policy clearly defines how compliance will be monitored and what actions will be taken when non-compliance occurs. The policy must state that AED requirements will be actively monitored and enforced, and that any instance of non-compliance—such as failure to follow AED procedures, neglect of inspection responsibilities, or failure to maintain AED readiness—will trigger an internal investigation and may result in a nonconformity report or disciplinary action. The policy must also include explicit language prohibiting tampering with, disabling, or obstructing AED equipment.

Supervisors must be clearly identified as the individuals responsible for ensuring worker compliance with AED procedures. In addition, the policy must describe how ongoing evaluation will occur, including scheduled audits and periodic review of the AED program itself. All deficiencies identified during inspections or audits must be corrected within defined and documented timeframes, and the policy must require a mechanism for tracking and verifying the completion of corrective actions.

This combined enforcement and audit structure must be embedded in the policy to demonstrate due diligence and maintain continual improvement of the AED Policy. Finally, specify that the AED Policy must be reviewed, updated as required, and approved annually by senior management and the Joint Health and Safety Committee (or the Health and Safety Representative, where applicable).

## **STEP 12: DEVELOP APPENDICES**

Consider developing additional forms and supporting documents and including them as appendices to the AED Policy. These resources help ensure consistency, support compliance, and provide clear guidance to workers and supervisors.

For example,

Appendix A – AED Inspection Checklist.

Appendix B – Emergency Response Flowchart.

Appendix C – AED Equipment Asset Inventory Template.

Appendix D – AED Equipment Training Record.

Appendix E – Sample Workplace Plan Showing AED Equipment Locations.

## **STEP 13: DEVELOP IMPLEMENTATION STRATEGY**

Now as your AED Policy is drafted, your organization need to develop its implementation strategy. Consider the following steps when implementing the AED Policy:

1. Develop the AED Policy in accordance with organizational requirements and applicable legislation.
2. Obtain formal approval of the policy through Senior Management and the JHSC.
3. Procure the required AED equipment and associated accessories based on the needs identified in the hazard and risk assessment.
4. Provide worker training, including First Aid and AED-specific training, to ensure adequate coverage on all shifts and in all work zones.
5. Install AED units and associated signage in all required workplace locations, ensuring accessibility and visibility.
6. Post workplace AED maps and trained responder lists in conspicuous areas and review them with workers during orientation.
7. Initiate workplace inspections to verify compliance with AED placement, signage, inspection, and maintenance requirements.
8. Conduct mock emergency response drills to validate readiness and reinforce worker competency in AED use.
9. Consult workers to obtain their feedback regarding the AED Policy and its implementation.
10. Begin the audit cycle and implement continuous improvement practices to ensure the AED program remains effective, compliant, and up to date.

## **ADDITIONAL RESOURCES**

- THE MIKEY NETWORK MISSION <https://mikeynetwork.com/>
- Occupational Health and Safety Act, R.S.O. 1990, c. O.1  
<https://www.ontario.ca/laws/statute/90o01>
- O. Reg. 213/91: CONSTRUCTION PROJECTS  
<https://www.ontario.ca/laws/regulation/910213>
- Workplace Safety and Insurance Act, 1997, S.O. 1997, c. 16, Sched. A  
<https://www.ontario.ca/laws/statute/97w16>
- R.R.O. 1990, Reg. 1101: FIRST AID REQUIREMENTS  
<https://www.ontario.ca/laws/regulation/901101>