

Occupational Health & Safety (OHS) Program Manual

Table of Contents

OHS PROGRAM OVERVIEW 6

MANAGEMENT AND LEADERSHIP 7

Overview 7

OHS Policy 7

Roles & Responsibilities 8

Employer 8

Managers & Supervisors 9

Employees 10

General OHS Rules 11

Disciplinary Action 12

HAZARD IDENTIFICATION, RISK ASSESSMENT & CONTROL 14

Overview 14

Policy Statement 14

Hazard Identification 14

Risk Assessment 14

Control Measures 15

Review Process 16

SAFE WORK PROCEDURES & WRITTEN INSTRUCTIONS 17

Overview 17

Policy Statement 17

Safe Work Procedures 17

How To Develop Written Safe Work Procedures 19

INSPECTION & MAINTENANCE 20

Overview 20

Policy Statement 20

Informal Workplace Inspections 20

Safety Committee Inspections (Formal Inspection) 20

Special Inspections 21

Preventative Maintenance 21

Tools and Equipment Maintenance 22

Mobile Equipment Maintenance 23

Scheduled Inspections & Maintenance 24

INVESTIGATION OF INCIDENTS & ACCIDENTS 25

Overview 25

Policy Statement 26

Role of Supervisor 26

Procedure 26

TRAINING & INSTRUCTION OF EMPLOYEES 28

Overview 28

Policy Statement 28

New / Young Worker Orientation 29

Safety Talks 30

JOINT OCCUPATIONAL HEALTH & SAFETY COMMITTEE 31

Overview 31

Policy Statement 31

Purpose 31

Terms of Reference 31

Committee Membership 32

Committee Duties 32

JOHSC Meeting Agenda 33

OHS TOPICS 34

Occupational First Aid 34

Overview 34

Policy Statement 34

Procedures 34

Responsibilities 35

Blood Borne Pathogens 38

Overview 38

Emergency Preparedness & Response 40

Risk Assessment 40

Emergency Procedures 40

Training 41

Globally Harmonized System (GHS) 42

Policy Statement 42

Responsibilities 42

Training 43

Working Alone or In Isolation 45

Overview 45

Emergency Information 46

Bullying and Harassment 47

Policy Statement 47

Purpose 47

Application and Scope 47

Definitions 48

Procedures 48

Confined Spaces 49

Overview 49

Policy Statement 49

Prevention of Unauthorized Entry 49

Avalanche Control 51

Avalanche Control Blasting Procedures 51

Helicopter Bombing Procedures 55

Personal Protective Equipment 60

Personal Clothing 60

Job Specific Personal Protective Equipment 60

Hearing Protection 60

Respiratory Protection 60

Contractor/Subcontractor Policy 62

Contractors & Subcontractor Responsibilities 62

PROGRAM ADMINISTRATION & REVIEW 64

Overview 64

Policy Statement 64

Records 64

Responsibilities 64

Program Review 67

RESOURCE TOOLKIT (FORMS & CHECKLISTS) 68

Accident/Incident Investigation Form 68

Workplace Inspection Report Form 72

Safe Work Procedure Template 83

Joint Health and Safety Committee Meeting Minutes 84

Employee Training Record 87

Safety Talk Template 88

Audit Improvement Action Plan 92

Employee Safety Acknowledgement 93

Contractor Service Agreement 94

Contractor Safety Acknowledgement 96

Contractor Safety Orientation 97

Emergency Phone Numbers 99

# OHS PROGRAM OVERVIEW

Occupational health and safety (OHS) programs are a legal requirement, as specified in sections 3.1 to 3.4 of the Occupational Health and Safety Regulation (the Regulation). Every helicopter and snowcat skiing business must have an OHS program to help prevent accidents and injuries. An effective program will also help our organization deal with any incidents that do occur.

Every workplace is different, so it is important for our organization to develop an OHS program that addresses the specific needs of our operation. This OHS Program contains the basic components of a program, which will need to be modified as necessary to continue to enhance our unique program.

This OHS program will need to be reviewed at least once a year to make sure it remains current and effective. An annual review will help our organization identify the strengths and weaknesses of our program so we can focus on the areas that need improvement. It is a good idea to include employees in the review process.

#### Overview of Legislation

The legal requirements for workplace health and safety in British Columbia are described in the Workers Compensation Act (the Act) and the Regulation.

[The Act](http://www2.worksafebc.com/Publications/OHSRegulation/WorkersCompensationAct.asp) describes the jurisdiction of WorkSafeBC and its authority to make regulations, inspect workplaces, issue orders, and impose penalties. It also describes the rights and responsibilities of employers and workers in relation to health and safety. Most of these are described in Part 3 of the Act (sections 106–230).

[The Regulation](http://www2.worksafebc.com/Publications/OHSRegulation/Home.asp) contains general requirements that apply to most workplaces, as well as requirements for specific industries. The information in the Regulation is divided into three basic categories:

* Core Requirements (parts 1–4) deal with workplace health and safety basics, including health and safety programs, rights and responsibilities, and workplace inspections.
* General Hazard Requirements (parts 5–19) deal with topics such as personal protective equipment (PPE), chemical safety, protection against noise, and the use of safety with machinery and equipment.
* Requirements for Specific Industries and Activities (parts 20–32) — These requirements apply to specific industries, such as agriculture, forestry, and construction.

Many sections of the Regulation also have accompanying Guidelines and Policies that will help clarify our requirements.

# MANAGEMENT AND LEADERSHIP

## Overview

An effective OHS program must demonstrate management and leadership commitment to the program and a willingness to improve the workplace safety culture.

## OHS Policy

**(Company Name)** is committed to an Occupational Health and Safety (OHS) Program that protects its employees, guests, contractors, the public and property from accidents and/or incidents occurring on our site. Through this program we will not only engage the workers in safe work practices, but also in the development of a strong health and safety culture.

We believe that all accidents are preventable, so our goal is ZERO accidents.

Active participation at all levels will ensure that our goal can be achieved.

**(Company Name)** endeavors to provide proper and relevant employee training, job specific safe work practices, personal protection equipment, operation and maintenance procedures, and safety guidelines that focus management, employee and contractor awareness on reducing the risk of accidents and/or incidents in all activities.

**(Company Name),** contractor employers and contractor employees are responsible for fully complying with all health and safety standards and regulations, including the Workers Compensation Act and the Occupational Health and Safety Regulation (the “OHS Regulation”), and for co-operating with management in the implementation of the Health and Safety Program, worksite inspections, incident/accident investigations and in the continuous improvement of this program.

**(Company Name)** is committed to safe and sustainable practices in all aspects of our operations and therefore will review and update our safety program on a yearly basis to adapt to industry changes, trends and requirements.

**(Company Name)** management, contractor management and all employees are collectively responsible to ensure compliance with local government, occupational health, safety and environmental regulations.

Signed: Date:   
  
President/CEO (or highest ranking employee)  
(Company Name)

## Roles & Responsibilities

Responsibilities for workplace health and safety are specified under sections 115 to 124 of the Act. The employer, management, supervisors, employees and contractors each have specific responsibilities.

### Employer

Will undertake every effort to ensure:

* A proactive approach to occupational safety and health requirements.
* Clear direction is given to management and supervisors in their health & safety responsibilities and will hold them accountable for meeting these responsibilities.
* **(Company Name)** Safety Policy and Procedures and all pertinent WorkSafeBC (WSBC) regulations are communicated and enforced.
* All work is performed in a safe manner.
* Prompt and appropriate action is taken to correct unsafe conditions or acts.
* Regular informal and planned safety inspections are conducted and appropriate action is taken.
* Accident/incident investigations are conducted and follow-up action is taken without delay.
* Health & safety activities and accident/incident trends are reviewed in regular management meetings, including necessary courses of action to prevent further incidents.
* That all employees receive orientation and training in safety policies, safe work procedures and work practices in their assigned tasks, and that follow-up instruction and training is conducted to confirm they understand and follow safe work procedures.
* The maintenance of records and statistics to evaluate the use and condition of equipment and structures, as well as instruction and training of workers in their assigned tasks.
* Initiate and maintain a Workplace Injury Management program as a component of the Health and Safety program using staff input.

### Managers & Supervisors

Will ensure:

* All workers will receive proper training, instruction, and safety orientation prior to starting any job task.
* To observe new hire employees closely until confident of workers’ ability to perform assigned duties safely.
* Periodic meetings of management personnel are held for the purpose of reviewing health and safety activities and accident trends and determining necessary courses of corrective actions.
* Support and direction necessary for the effective implementation of the health and safety program are provided and health and safety policies, procedures and regulations are enforced.
* Workers are informed of any potential or actual dangers to their health and safety, are instructed in Personal Protective Equipment, safe work practices, rules and WSBC requirements and policies.
* Employees are not permitted to work when their actions indicate that the work would jeopardize themselves or others.
* Appropriate records and statistics are maintained and made available, where required, to inspectors, investigators or other regulatory personnel.
* Where required by WorkSafeBC, a qualified coordinator/person is designated to be responsible for project health and safety activities.
* Where practicable, new work areas are inspected prior to commencement of work.
* Planned inspections of work areas, equipment, tools, work methods and practices are undertaken.
* Immediate action, as authorized by management, is undertaken to correct substandard safety practices and conditions identified through inspections or reported to management/supervisory personnel.
* All accidents required to be investigated by the OHS Regulation are investigated for the purpose of identifying causes and necessary corrective actions.
* Accident investigation reports are reviewed and necessary courses of corrective action are implemented through directives to appropriate personnel.
* That if regulatory infractions are noted on a WSBC inspection report, necessary corrective actions are authorized and implemented at the earliest practicable opportunity.
* Appropriate personal protective equipment is provided.
* Required first aid and emergency facilities are maintained on the job.
* Regular safety meetings are held for personnel to:

1. discuss observed unsafe work practices and conditions;
2. review and implement corrective action to eliminate unsafe practices and conditions; and
3. encourage safety suggestions from workers.

* WHMIS-controlled products are identified and labelled and appropriate Material Safety Data Sheets (MSDS) are readily available.
* A procedure is developed for periodically checking the well-being of workers assigned to work alone under conditions that present a risk of injury.
* A good example is set for all workers.

### Employees

We expect all workers and/or employees to take an active part in the Occupational Health and Safety Program. This can be accomplished by, but is not limited to the following.

The worker/employee must:

* Be properly trained
* Be familiar with and comply with all applicable requirements of the company Health and Safety Program and the OHS Regulation.
* Report all unsafe conditions and practices to their immediate supervisor and take corrective action, when practicable, to eliminate such hazards.
* Not operate equipment unless they are authorized and trained to do so, with all safeguards in place and functional, and that no person will be endangered.
* Immediately report to a company supervisor and the first aid attendant all work-related injuries and health problems and cooperate in the investigation of such incidents. If they have a physical or mental impairment that may affect their ability to work safely (e.g. back problems, epilepsy), they inform their supervisor of the impairment and do not work where the impairment may create an undue risk to themselves or anyone else.
* Not enter or remain at the workplace if under the influence of alcohol, prescription or illegal drugs that may impair their ability to do their job safely.
* Not engage in any improper activity or behaviour (e.g. horseplay, scuffling, fighting, practical jokes or similar conduct) that may endanger themselves or others.
* Maintain good housekeeping and enter/leave their work area using safe routes.
* Wear appropriate personal protective equipment and maintain it in good working order.
* Use GHS-controlled (Globally Harmonized System) materials in accordance with GHS recommendations.
* Actively participate in safety meetings to help maintain safe conditions on site.
* Follow company safety policies, and safe work procedures at all times

## General OHS Rules

The following rules apply to all workers during the course of their employment. These rules will be reviewed and amended when there is a change in the work process or as otherwise required:

* Each worker will use all precautions to ensure his/her health & safety.
* Use equipment safeguards that are provided.
* Use personal protective equipment as required.
* No worker will remove, impair or render ineffective any safeguard provided for the protection of workers.
* Workers will report any unsafe work condition or practice to their supervisor or manager.
* No worker will engage in any horseplay, scuffling, fighting, practical jokes, or any other behaviour that might create or constitute a hazard to themselves or others.
* Arrive and perform work where they are alert and attentive and not impaired by alcohol or drugs (prescription and non-prescription).
* Wear the required uniform and/or nametag to identify them as an employee whenever they are working.
* Only perform work independently that they have received training and orientation to.
* Only use company equipment, machinery and tools that they have received demonstration, training and orientation to.
* Only access those areas that they have been given authority to access at designated times.
* Keep access & alarm codes and keys secure at all times.
* Report all injuries and illnesses that they have sustained either at work or outside of work that may impair their ability to work safely to their supervisor or manager.
* Adhere to all company Policies and Procedures.

Failure to follow company rules, procedures and the OHS Regulation will result in disciplinary action, including possible termination of employment.

### Disciplinary Action

All safety rules and procedures contained in the **(Company Name)** Health & Safety Program shall be practiced and enforced by all personnel. Compliance with this Health and Safety Program rules and instructions, the OHS Regulation and any other applicable federal, provincial or local regulations is mandatory. Disregard or negligence in complying with good health and safety practices by any employee may result in unnecessary injury and will be cause for disciplinary action. When disciplinary action is required against non-compliance of a regulation or company instruction as set out in this safety program, the immediate supervisor shall utilize and follow the following guideline for disciplinary action and:

* Conduct an assessment of the incident.
* Render a decision for remediation and/or corrective action.
* Report the incident and remedial action to Senior Management without delay.

Actions of a hazardous nature or are considered unacceptable or have been determined as a result of the assessment will result in disciplinary action.

#### Definition

Any infraction of government, corporate, or client rules that does not have the potential to cause serious damage or injury.

* 1st offense: Verbal warning
* 2nd offense: Written warning
* 3rd offense: Suspended from site until further notice or termination.

# HAZARD IDENTIFICATION, RISK ASSESSMENT & CONTROL

## Overview

Accidents are preventable, as long as we take a proactive approach to health and safety. By implementing a system of hazard identification and risk control, we can prevent workplace injuries and diseases.

## Policy Statement

**(Company Name)** uses a Hazard Identification and Risk Assessment Matrix to track and monitor workplace hazards, risks and controls. It includes an introduction to the methodology and a worksheet for each area of our operation.

There are four basic categories to our hazard identification, risk assessment & control process:

### Hazard Identification

Job safety analysis (JSA), also known as "job hazard analysis", is the first step in developing the correct procedure. In this analysis, each task of a specific job is examined to identify hazards and to determine the safest way to do the job. Job safety analysis involves the following steps:

1. Select the job
2. Break down the job into a sequence of steps
3. Identify the hazards

All potential hazards of each job should be outlined in the Hazard Identification and Risk Assessment Matrix.

### Risk Assessment

Once you have identified a hazard, evaluate the risks associated with it in order to determine how best to mitigate it. A risk assessment is a systematic examination of all aspects of the work undertaken to identify what could cause injury or harm, whether the hazards could be eliminated and if not, what prevention or protected measures are, or should be in place, to control the risk.

Risk assessments will be completed:

* when new tasks are introduced.
* when employees communicate that a job process or task has created hazards that have not previously been evaluated.
* During an annual review.

A risk assessment will be completed by someone familiar with the job, in consultation with the Joint Occupational Health and Safety Committee (JOHSC) member or a worker representative. Should a new hazard be identified, prompt action will be taken to evaluate the hazard potential to employees.

All risks of each job should be calculated and outlined in the Hazard Identification and Risk Assessment Matrix.

### Control Measures

Once you’ve identified hazards and assessed the risks, look for ways to control them. Whenever possible the hazard will be removed, or hazard controls will be implemented using the following hierarchy of controls in order of effectiveness:

* Elimination/Substitution: remove the hazard from the workplace or replace it with something less harmful.
* Engineering Controls: reduce the source of exposure by modifying the workplace. This includes modifications to layout, equipment, ventilation systems, and/or processes.
* Administrative Controls: implement policies or procedures to alter how the work is done, including timing of work and standards and operating procedures.
* Personal Protective Equipment: When all other means of controlling the hazard are not appropriate, we will provide employees with equipment to reduce their exposure to workplace hazards as required by the OHS Regulation.
* Should workplace controls not be adequate to decrease the risk rating, additional controls will be identified and implemented by a determined date prior to the annual risk assessment review.

All control measures of each job should be outlined in the Hazard Identification and Risk Assessment Matrix.

### Review Process

Hazard identification and risk assessments are to be reviewed at least annually, after an accident/incident occurs, and when there is change in a work process or environment.

# 

# SAFE WORK PROCEDURES & WRITTEN INSTRUCTIONS

## Overview

Part 3: Rights & Responsibilities of the OHS Regulation requires that…”(c) appropriate written instructions, [be] available for reference by all workers, to supplement this Occupational Health and Safety Regulation”.

Written safety rules, policies and procedures ensure employees are provided with consistent information:

* To guide and direct employees in the safe performance of their jobs.
* To arrange the steps of performing the assigned task in order of priority.
* As a training standard for employee orientation.

Risk assessments, written safe work procedures and/or job hazard analysis will be developed in consultation with the safety committee and/or workers who do the job:

* For workplace operations where the OHS Regulations do not specifically apply.
* Where a risk assessment was conducted and the need for written direction was identified.
* For those tasks where there is a high risk of injury or occupational illness.

## Policy Statement

**(Company Name)** uses a standard Safe Work Procedures (SWPs) template to document instructions on how to perform specific tasks safely. All SWPs will be developed by the most qualified managers and workers related to the job.

### Safe Work Procedures

Written safe work procedures (SWPs) are instructions that explain how to perform specific tasks safely and efficiently. SWPs tell employees how to protect themselves against known hazards. Following SWPs helps minimize risks.

Not all workplace tasks require a written SWP. Generally, SWPs are written for hazardous or complicated tasks, or tasks that are performed frequently. In some cases, SWPs are required by the Occupational Health and Safety (OHS) Regulation. For example, written SWPs are required for working alone, emergency evacuation, and locking out equipment.

SWPs are to be used by all employees when the nature of their assigned duties involves tasks for which procedures are written. SWPs that are specific to our operation will also help with employee orientation and training. They can be used as the basis for Safety Talks (short, informal meetings in which a supervisor or trainer goes over a specific task in the workplace).

We will ensure the SWPs are available to all supervisors and employees. Copies of the procedures will be provided or will be posted in the area where the work activity occurs, e.g. “Cleaning the Slicer” should be posted next to the slicer.

These procedures will be replaced or revised when:

* Necessitated by change of equipment or process.
* As a result of an industrial accident/incident or equipment malfunction, and the investigation results recommend a change in procedures.
* The results of a risk assessment indicate a change is required.

A work procedure may consist of more than one specific task. In such cases, each separate task will be analyzed to complete a job safety analysis for that procedure. The final version of the SWP will be presented in a narrative style format that outlines the correct way to do the job in a step-by-step outline. The steps are described in positive terms, pointing out the reasons why they are to be done in this way. Reference may be made to applicable rules and regulations and to the personal protective equipment required, if any. Employees who carry out the tasks should be consulted in developing the procedure. The findings of the hazard identification and risk assessment process will be used in the creation and maintenance of safe work procedures. SWPs can be either complex or simple depending on the risk associated with the job task.

Safe Work Procedures should include but may not be limited to:

* A description of the job task, tool, or machine that is to be operated
* Expectations of the employee
* Checklists
* Safety precautions
* Required personal protective equipment
* Controls and concepts
* Operating procedures

Once executed, signed copies of the SWPs should be stored in the employee’s file.

### How To Develop Written Safe Work Procedures

Before you begin developing written SWPs, review the Hazard Identification and Risk Assessment Matrix, so you can develop SWPs for the most dangerous (highest risk) ones first.

Using the [Safe Work Procedure Template](#_Safe_Work_Procedure), follow these steps to develop a written SWP that will help minimize the risks associated with a hazardous task:

1. Define the task that requires a safe work practice. This can be as simple as saying “Cleaning the meat slicer.”
2. Break the task down into individual steps.
3. Describe the hazards for each step.
4. Based on your risk assessment, enter numbers for the probability, severity, and frequency, which will determine the hazard rating.
5. Describe the equipment associated with the task. For example, equipment for the task “Using knives” would include a sharpening stone or steel and rags.
6. Consider the personal protective equipment that employees will need to protect against the hazards. For example, when cleaning service carts, employees need to use rubber gloves and safety glasses.
7. Describe applicable training and legal requirements (for example, OHS Regulation requirements).
8. Think about the actions that workers will need to do to perform the task safely. These actions will form the core of the SWP. Write them down in bullet point form. If there is a procedure that should be carried out in a specific order, use a numbered list to indicate that there is a sequence of steps to be followed.
9. In the bottom left corner of the template, note the initial date that the SWP was issued. Use the bottom right corner to note the most recent date that the SWP has been reviewed. Correct safe work procedures are the safest way of doing a job, job instruction, monitoring performance, and accident investigation.

Once developed, each safe work procedure should be added to the Resource Toolkit section of this OHS Manual.

# INSPECTION & MAINTENANCE

## Overview

WorkSafeBC Regulation 3.5 General requirement

Every employer must ensure that regular inspections are made of all workplaces, including buildings, structures, grounds, excavations, tools, equipment, machinery and work methods and practices, at intervals that will prevent the development of unsafe working conditions.

## Policy Statement

The inspection process at the worksite is not to be limited to formalized inspections conducted by the supervisor. The expectation is that there will be other active inspection processes in place.

*Informal inspections* will be conducted by supervisors and workers on an ongoing basis in their areas of responsibilities.

*Formal safety inspections* shall be conducted and documented by the Supervisor or designate on the job site on a daily basis. **(Company Name)** Inspection Program comprises of 3 types of inspections that are structured as follows:

### Informal Workplace Inspections

All employees are expected to maintain continual awareness of hazards in their work areas. This is accomplished by supervisors conducting regular walk-through of their areas of authority and by workers checking their work areas prior to commencing work. No formal inspection report is required; however, any detected hazards must be corrected immediately if the task is within the employee’s capabilities. If not, the hazard should be reported to the area supervisor or management for correction.

### Safety Committee Inspections (Formal Inspection)

Safety Committee Inspections are workplace Inspections that are conducted at least monthly by site safety committee members. An [Inspection Report](#_Workplace_Inspection_Report) is completed, documented and filed, and copies are sent to the supervisor of the inspected area and the safety committee for review. The area supervisor must ensure that corrective action is taken so that the hazard is eliminated or controlled.

### Special Inspections

Special inspections take place immediately after a malfunction, accident or after a new work procedure or machinery is introduced. The area supervisor and a worker representative (preferably a safety committee member) conduct this type of inspection. An [Inspection Report](#_Workplace_Inspection_Report) must be completed and distributed to Senior Management. In some cases, a contractor who specializes in specific equipment repairs will be required during the inspection process.

**(Company Name)** will also conduct a yearly (internal) Certificate of Recognition Audit as well as schedule an external audit (once every three years) to maintain the company’s COR status and help us measure our progress (as/where required).

## Preventative Maintenance

All tools, equipment and vehicles must be properly maintained so that workers are not endangered. Regulations require inspections of vehicles, tools, machines and equipment before use.

Preventive maintenance is the systematic care and protection of tools, equipment, machines and vehicles in order to keep them in a safe, usable condition, limit downtime, and extend productivity. We must always be aware that maintenance tasks themselves are potentially hazardous and can result in injury.

A successful maintenance program:

* is well organized and scheduled;
* controls hazards;
* defines operational procedures; and
* trains key personnel.

General requirements for equipment maintenance include:

* Obtaining a copy of the maintenance schedule recommended by the manufacturer.
* Ensuring that maintenance is performed as required.
* Ensuring that the person(s) performing the maintenance are competent (e.g. licensed mechanic).
* Retaining records of maintenance/service conducted.
* Specifying who is responsible for overseeing equipment maintenance and where the records are kept.
* Setting up a system for removal and tagging of damaged or defective tools and equipment.

### Tools and Equipment Maintenance

This section has been included in our safety manual to highlight the importance of proper maintenance as a vital part of a safety program. In addition to ensuring that workers use the tools and equipment properly, it is vital that tools and equipment be properly inspected, maintained, and kept in good repair. Our maintenance program will reduce the risk of injury, damage and lost production.

**It is our policy to ensure that all tools, equipment and vehicles are well maintained in order to reduce the risk of accidents or injuries.**

* Only properly trained workers are to use tools, equipment and vehicles.
* Inspect all tools, equipment and vehicles before using.
* For vehicles, inspection will consist of doing a circle check.
* If applicable, maintenance schedules for all tools, equipment and vehicles are to be respected.
* Each jobsite supervisor is to conduct a bi-weekly inspection of all tools, equipment and vehicles on the site. This inspection is recorded bi-weekly using an Inspection Checklist.
* If at any time a worker judges that a tool, equipment or vehicle is unsafe to use, they are to properly tag the item and inform the supervisor immediately.
* Tools, equipment or vehicles that are tagged unsafe shall be taken out of circulation and either repaired or replaced.

**REMINDER: Always use hand and power tools Safely**

* Select the right tool for the job.
* Keep tools in good condition.
* Use tools the correct way
* Keep tools in a safe place.

### Mobile Equipment Maintenance

#### Maintenance Personnel Qualifications

The qualifications of maintenance personnel are key to the success of a maintenance program.

All individuals who perform maintenance work on company mobile equipment will have the appropriate skills, accreditation and/or certification. This certification applies both to company employees and to contracted maintenance services.

#### Operator Qualifications and Training

All individuals who operate our mobile equipment, heavy duty, vehicles etc., will have the appropriate skills, accreditation and/or certification. This applies to both company employees and contracted equipment services.

#### The approval process includes the following:

* possession of a valid driver’s licence appropriate to the type of equipment; and
* successful completion of a practical operating exam administered by competent and authorized personnel.

#### The operator should be trained in the following:

* their responsibilities to operate the equipment in a safe manner;
* familiarity and comprehension of safety requirements for the piece of mobile equipment that they intend to operate;
* manufacturer's operating and maintenance procedures; and
* hand signals and/or other requirements set by the company.

#### Records

The maintenance program must contain a recording system. Part of this system should be made up of inventories and schedules. In addition, the recording system should document what maintenance work was done, when, and by whom.

#### Monitoring

The monitoring functions in a maintenance program fall into two areas.

First, the people responsible for operating and/or maintaining equipment must monitor that equipment to ensure that appropriate checks and maintenance are done.

Secondly, management should monitor the entire program to ensure that it is functioning in accordance with company policy.

### Scheduled Inspections & Maintenance

All mobile equipment is to be inspected and maintained according to manufacturer’s requirements as a minimum. Records of all inspections and maintenance will be completed and maintained for review and approval.

Maintenance of equipment, release of lubrication fluids, etc., is performed only in approved areas. Spills and leaks from equipment are to be cleaned up promptly.

#### Pre-Operation Checks

Walk around checks on all pieces of mobile equipment are necessary to ensure the unit is safe to operate both from the personnel standpoint and for the equipment; that is, all fluids must be at the correct level and all components must be intact.

# INVESTIGATION OF INCIDENTS & ACCIDENTS

## Overview

An a*ccident* is defined as an unplanned event that causes harm to people or damage to property. Accidents are categorized as one of the following:

**Lost Time Injury (LTI)** refers to any injury that prevents a worker from coming to work on the day following the day of the injury.

* **Medical Aid** refers to any injury not severe enough to warrant more than the day of injury off, but where medical treatment by a doctor is given.
* **First Aid** refers only to injuries that can be treated on the job without any days lost.
* An **Incident**is defined as property damage but with no injury to workers.
* A **Near Miss** is a situation in which no injury or damage occurred but might have if conditions had been slightly different.
* **Occupational Illness** is defined as a condition resulting from a worker’s exposure to chemical, biological or physical agents in the workplace to the extent that the health of the worker is impaired.

**Critical Injury** is defined as an injury of a serious nature that:

* Places life in jeopardy;
* Produces unconsciousness;
* Results in substantial loss of blood;
* Involves the fracture of a leg or arm but not a finger or toe;
* Involves the amputation of a leg, arm, hand or foot but not a finger or toe;
* Consists of burns to a major portion of the body; or
* Causes the loss of sight to an eye.

## Policy Statement

**(Company Name)** requires all employees to immediately report to their supervisor all accidents and incidents that result in injury or property damage, and all near misses with the potential for serious injury or property damage. Supervisors will report the accident promptly to management to ensure timely submission to WorkSafeBC. Each incident will be analyzed to determine root causes and contributing factors and the analysis will be used to reduce or eliminate the risk of future incidents.

## Role of Supervisor

The supervisor and the site health and safety coordinator (if applicable) must investigate all accidents and incidents that involve workers. This includes completing the [Accident Investigation Report](#_Accident/Incident_Investigation_For), taking statements from witnesses and collecting any other pertinent information and ensuring the injured worker has received the necessary medical assistance.

The supervisor is responsible for ensuring that all accident reports are transmitted to the Health and Safety Department, or Human Resources (HR) as described below. If a worker sustaining a First Aid later seeks medical aid, the supervisor must advise HR to his/her current status. The supervisor should contact the injured worker as frequently as the injury deems, or at least once a week.

## Procedure

All incidents, or near misses, that have the potential of injuring a worker must be investigated. A preliminary investigation must occur immediately after the incident occurs and an immediate corrective action plan is put in place to prevent further injuries to workers. Preliminary investigations must be submitted within 48 hours of the incident occurring. A fully detailed investigation must be completed and submitted to the board within 30 days of the incident.

An employer must ensure that an incident investigation report required by [Division 10 of Part 3 of the *Workers Compensation Act*](http://www2.worksafebc.com/publications/OHSRegulation/WorkersCompensationAct.asp#SectionNumber:Part3Division10) contains

(a) the place, date and time of the incident;

(b) the names and job titles of persons injured in the incident;

(c) the names of witnesses;

(d) a brief description of the incident;

(e) a statement of the sequence of events that preceded the incident;

(f) identification of any unsafe conditions, acts or procedures that contributed in any manner to the incident;

(g) recommended corrective actions to prevent similar incidents; and

(h) the names of the persons who investigated the incident.

If a worker is injured on the job, our responsibilities include:

* Transporting the injured worker to the nearest location where medical treatment can be obtained.
* Reporting the incident/injury to the WorkSafeBC within three business days of the injury's occurrence or within three business days of you or your representative becoming aware of the injury.
* Submitting an [Incident and Injury Report](http://www.worksafebc.com/claims/report_injury/incident_and_injury_report/default.asp) (Form 7) online or completing and sending the [Employer's Report of Injury or Occupational Disease](http://www.worksafebc.com/forms/assets/PDF/7.pdf) to WorkSafeBC.
* You must report fatalities and serious injuries immediately to the Prevention Emergency Line at 604-276-3301 in the Lower Mainland or toll-free 1-888-621-7233.

# **TRAINING & INSTRUCTION OF EMPLOYEES**

## Overview

All workers need to know how to perform their jobs safely and to understand their role in maintaining a healthy and safe workplace. Employers must ensure that workers are trained, qualified, and competent to perform their tasks. Adequate instruction and supervision must also be provided to all workers.

## Policy Statement

**(Company Name)** recognizes that training and education of workers is a vital part of our health and safety program. Our employees must have the knowledge and skills to do their work in a safe manner.

Safety instruction will be provided to all workers, and workers are required to comply with these instructions.

Our program of worker education and training will consist of:

* Conducting worker orientation sessions for new workers and site-specific orientations.
* Conducting Safety Talks on a regular basis.
* Developing safe job procedures and instructing workers in these procedures.
* Monitoring ongoing requirements for health and safety instruction.
* Delivering specialized training for employees as required.

Job-specific training of employees is conducted in, but is not limited to, the following situations:

* When a new employee is hired.
* When an employee is assigned new or different work.
* When an employee is moved to a new site or location

This training will be conducted by the employee’s immediate supervisor and will contain the following items:

* Review of safe work practices and procedures that apply to the specific job.
* Bring all known safety hazards that may affect the employee to his/her attention.
* Determine just what the employee can do and how he/she does it. This includes both discussion with the employee and observation of how he/she does the work.
* Provide the employee with all the information and Personal Protective Equipment (PPE) that is necessary for the employee to do the job safely and correctly.

Depending on the complexity of the job and the employee’s skill/experience level, job specific training may take anywhere from a few minutes to several months. Ensure training documentation are kept and made available to WorkSafeBC upon request. The on-going monitoring and coaching of the worker is a major duty and responsibility of that worker’s immediate supervisor.

## New / Young Worker Orientation

Employees of **(Company Name)** will receive an orientation session. This new worker orientation will be used to review general health and safety program requirements as required by WorkSafeBC regulations.

Orientation of new employees and all contractors and their employees is mandatory and must be completed prior to commencement of work. It is the responsibility of the supervisor to ensure their workers complete the **(Company Name)** Orientation prior to starting work.

The orientation will include safety information specific to the job and the expected duties the worker will perform. The supervisor may conduct the orientation session.

As a minimum the site specific safety orientation should include (but not be limited to) the following:

* The identification of worksite hazards, and the safe procedures for dealing with these hazards
* Accident/Incident Investigations
* The requirements for personal protective equipment to be used, and for specific tasks
* Company Safety Policy
* Written safe work procedures
* Global Harmonization System (GHS)
* Safety Data Sheets (SDS)
* Emergency Evacuation
* First Aid Policy and Procedures
* Roles and Responsibilities
* Right To Refuse Unsafe Work
* Joint Occupational Health and Safety Committee (JOHSC)
* Bullying and Harassment Policy
* Violence In The Workplace

The initial orientation training needs to be followed up with further training of workers when any of the follow conditions exist:

* The work to be conducted has not been done before, and new or modified work procedures are required.
* There is an obvious skill and/or knowledge gap that prevents the worker from completing tasks as required.
* A worker requests training for work activities with which they are not familiar.
* WorkSafeBC directs that training is required.

**(Company Name)** will assist the employee in ensuring that the required training takes place. The training will be competency based in order for it to be effective and meet the test of due diligence. Competency based means that the essential skills and knowledge required to do the work correctly have been identified, included in the training, and passed on to the worker.

## Safety Talks

[Safety Talks](#_Safety_Talk_Template) are a key element of worker education and training. Safety Talks must be conducted with a specific topic for discussion such as a safety rule, safe job procedure, a recent incident, health and safety committee meeting minutes, inspection results, etc. They will be used to discuss hazards and provide information on how we will minimize or remove the risk of injury. All workers on site must attend the Safety Talks, which will generally be 15 minutes or less in duration.

# JOINT OCCUPATIONAL **HEALTH** & SAFETY COMMITTEE

## Overview

The *Workers Compensation Act* requires employers to establish a Joint Occupational Health and Safety Committee (JOHSC) in any work place that regularly employs 20 or more workers (full and part time). *(Small employers of 19 or less are not required to have a formal JOHSC, but are required to hold informal monthly meetings with regards to safety).*

## Policy Statement

We will establish and maintain a joint occupational health and safety committee with the purpose of maintaining a safe work environment for all our employees.

## Purpose

The JOHSCs are to be made up of worker and employer representatives to consult in a cooperative spirit to identify and resolve health and safety problems in support of our Occupational Health & Safety Program.

## Terms of Reference

1. Promote and monitor safe work practices.
2. Conduct regular monthly inspections.
3. Participate in the identification of dangerous situations, and recommend means of controlling the hazards.
4. Maintain records regarding complaints received and their resolutions.
5. Identify and recommend solutions to management pertaining to health and safety problems.
6. Participate in accident/incident investigations.
7. Review incident records to ensure that accident investigations are conducted and follow accident trends.
8. When called upon, accompany a WorkSafeBC (WSBC) Occupational Safety Officer during a regular WSBC inspection.

## Committee Membership

Representation from all areas and shifts of (**Company Name**) operation is required:

* The committee will consist of a minimum of four members.
* At no time will management representatives outnumber the worker representatives,
* The committee will have 2 co-chairs, one selected by the worker representatives, the other selected by the employer representative (regularly the OHS Supervisor).
* Fellow workers will select worker representatives by vote. Alternatively, a worker may volunteer for the role with the support of the department workforce.
* Management representatives will be appointed.
* Use of alternates: Each committee member will have an alternate representative selected in advance for when the member is unable to attend.

## Committee Duties

A joint committee has the following duties and functions in relations to its workplace:

* To identify situations that may be unhealthy or unsafe to workers and advise on effective systems for responding to those situations.
* To consider and expeditiously deal with complaints to the health and safety of workers.
* To consult with workers and the employer on issues related to occupational health and safety and occupational environment.
* To make recommendations to the employer and the workers for the improvement of the occupational health and safety and occupational environment of workers.
* To make recommendations to the employer on educational programs promoting the health and safety of workers and compliance with the regulations, and to monitor their effectiveness.
* To advise the employer on programs and policies required under the regulations for the workplace and to monitor their effectiveness.
* To advise the employer on proposed changes to the workplace or the work processes that may affect the health and safety of workers.
* To ensure that accident investigation and regular inspections are carried out as required by the regulation.
* To participate in inspections, investigations and inquiries as provided in the regulations.
* To carry out any other duties and functions prescribed by the regulation.

## JOHSC Meeting Agenda

The [Safety Committee Agenda and Minutes Form](#_Joint_Health_and) shall be completed for each meeting.

* Call to order.
* Roll call – Chairman introduces any guests or visitors present.
* Review business arising out of previous minutes.
* Reading of relevant correspondence and reports.
* Incident/Accident, near miss review.
* Recommendations and suggestions.
* Discuss the work schedule and its impact on safety.
* New business.
* Set date, time and location for next meeting.
* Adjournment.

Three months of safety minutes will be posted on the health and safety board, or equivalent communication board at all times for workers to review.

# OHS TOPICS

## Occupational First Aid

### Overview

Part 3 of the Regulation specifies first aid requirements for BC workplaces. Prompt first aid can help minimize the severity of work-related injuries. It can also save our operation money by reducing costs related to medical treatment, as well as hiring and training costs if one of our employees is sidelined by an injury.

**(Company Name)** is committed to ensuring that appropriate first aid is provided as quickly as possible for any injured company employee. We will provide and maintain a first aid program for the purpose of minimizing the suffering related to job-related injuries and illnesses, reducing absenteeism, maintaining productivity, and meeting WorkSafeBC regulatory requirements.

Where required, **(Company Name)** will provide and maintain first aid services, supplies and equipment as identified by the *Workers Compensation Act* and *Occupational Health & Safety (OHS) Regulation*.

First aid services, supplies and equipment will be made available to all employees during working hours.

### Policy Statement

**(Company Name)** will provide and maintain the appropriate first aid services, supplies and equipment suitable to the degree of hazards of the job, travel time to a hospital, and number of employees as required by Part 3 of the OHS Regulation.

Annual First Aid Assessments will be conducted by the first aid attendant with the assistance of the Joint Occupational Health and Safety Committee (JOHSC) and management. First aid coverage will be assigned based on the results of these assessments.

### Procedures

1. Workers who sustain a job-related injury or illness, regardless of seriousness, are required to immediately report it to the first aid attendant for treatment and/or recording, and must also report it to their immediate supervisor. If medical treatment is required, employees are entitled to choose their own medical practitioner. A [WorkSafeBC Form 6A](http://www.worksafebc.com/forms/) must be completed by any worker injured on the job, and then submitted to **(Company Name)** at the earliest opportunity.
2. The first aid attendant will be in complete charge of all first aid treatment of injured workers until medical aid is available. Supervisory personnel will not attempt to overrule the attendant's decisions related to first aid or emergency transportation.
3. Injuries that arise as a result of employment with the company will be reported to WorkSafeBC within 3 business days by submitting [WorkSafeBC Form 7](http://www.worksafebc.com/forms/) if any of the following conditions occur:

* the worker loses consciousness following the injury.
* the worker is transported to or directed to go for medical treatment.
* the injury is one that obviously requires medical attention.
* the worker states that they intend to seek medical attention.
* the worker has received medical treatment for the injury.
* the worker is unable or claims to be unable to return to their usual job, as a result of job induced injury, on any work day subsequent to the day of injury.
* the accident results in or is claimed to have resulted in the breakage of eye-glasses, dentures, hearing aids or prosthetic devices.
* WorkSafeBC or the worker requests that an Employers Report of Injury or Occupational Disease (Form 7) be submitted to WorkSafeBC.

### Responsibilities

#### Management is responsible to:

* Ensure that there are sufficient first aid attendants to cover all shifts and eventualities (e.g. vacation, sick, etc.), and their certification is current;
* Provide sufficient time for first aid attendants to treat, record and follow-up on injuries;
* Ensure that first aid attendants are sufficiently trained to perform their first aid tasks, recording observations and making return to work assessments or referrals to medical aid;
* Ensure workers receive prompt first aid service and follow-up;
* Monitor and inspect first aid records to ensure that all entries are complete and legible;
* Review first aid entries to ensure that an accident report is completed for all injuries referred to medical attention;
* Assign responsibility to a qualified first aid person to;
* Maintain the first aid equipment and supplies;
* Keep first aid supplies in a clean and tidy condition, ready for use;
* Ensure that observations pertinent to the injury treated are accurately recorded; and
* Ensure that all sections of the first aid records are complete.

#### The First Aid attendant is responsible to:

* Maintain current required Occupational First Aid or Outdoor Emergency Care certification for the worksite;
* Promptly provide workers with a level of care within the scope of the attendant’s training and regulations;
* Objectively record observed signs and symptoms of injuries and illnesses;
* Refer to medical attention injuries and illnesses recognized as being serious or beyond the scope of the attendant’s training;
* Inform the worker’s supervisor should a worker be sent to medical treatment to ensure that an accident investigation is started;
* Inform the worker’s supervisor when an injured worker requires a job or task accommodation to maintain attendance at work;
* Complete a First Aid Report for all injuries or illnesses that are referred to medical attention;
* Liaise with the Employee Claims team as needed.

#### Records

The following records and forms will be made available to all first aid attendants:

* First aid record book (located at all first aid stations)
* First Aid Report

First aid records and statistics will be kept for at least 3 years and will be regularly reviewed by management to determine trends and recommend corrective actions.

A first aid assessment will be completed using the WorkSafeBC [first aid assessment tool](http://www2.worksafebc.com/calculator/firstaid/) to ensure we meet all regulatory requirements with regards to our program. The assessment will be posted in the first aid room, and will be reviewed on an annual basis.

#### Air transportation

If air transportation is the primary or only method for transporting an injured worker, all of the following requirements must be met:

1. Before the start of operations in a workplace, arrangements must be made with an air service to ensure that an appropriate aircraft is reasonably available to the workplace during those operations;
2. The arrangements in paragraph (1) must include procedures for:
   1. The employer to determine the availability of appropriate aircraft before the start of each work day; and
   2. The air service to notify the employer if an appropriate aircraft ceases to be available.
3. A system must be provided that enables the pilot of the aircraft and the first aid attendant attending to an injured worker to communicate at all times when the aircraft is in transit to the location of the injured worker and during transport of the injured worker to medical treatment.

## Blood Borne Pathogens

### Overview

First-Aid attendants and employees are to be aware of potential exposure to Blood Borne Pathogens (blood, body fluids and feces). Every person in the general population is subject to potential exposure to blood borne pathogens. The first aid attendant as well as other employees (room attendants, cooks, etc.) have “reasonably anticipated exposure” to blood borne pathogens.

Measures are to be taken to limit occupational exposure to blood, body fluids and other potentially infectious materials since exposure could result in transmission of blood borne pathogens which could lead to disease or death.

The following are basic requirements for first aid attendants and all employees who may come into contact with blood borne pathogens:

* A type of waterproof gloves must be worn whenever there is the likelihood of hand contact with blood or other potentially infectious material. Disposable gloves must be changed when soiled or damaged. Many emergency workers wear double gloves to reduce the likelihood of blood contact when removing gloves.
* Masks, eye protection and face shields are to be worn when there is a potential for splashing or spraying of blood or other potentially infectious material.
* Gowns and plastic aprons must be disposed of in double plastic garbage bags. These bags are to be tied securely prior to removal and transport to waste containers. Bio-hazardous wastes include any bandages, used first aid supplies, and used disposable wipes and towels.
* Take particular care not to cut or puncture your own skin with any sharp object that may be contaminated.
* Use sterile disposable needles and scalpel blades when necessary to remove slivers or other minor foreign objects that are within the scope of treatment by a first aid attendant.
* Absolutely ensure sterilization of any first aid instruments, tools and/or supplies that have been contaminated with blood, body fluids or feces.
* Hands must be washed after gloves are used.
* In the event of direct body contact with blood or other body fluids, immediately wash skin with germicidal soap and running water and then apply a liberal coating of alcohol gel.
* Complete an Accident Report Form and make an entry in the Accident Records.
* Arrange an appointment to see your physician or other health care professional should you desire blood testing.
* Any specific eye, mouth, other mucous membrane or non-intact skin contact with blood or other potentially infectious materials is considered an exposure incident. Follow the steps outlined above. Prompt medical attention and blood testing is recommended.

## Emergency Preparedness & Response

### Risk Assessment

1. The employer must conduct a risk assessment in any workplace in which a need to rescue or evacuate workers may arise.
2. If the risk assessment required by section (1) shows a need for evacuation or rescue, appropriate written procedures must be developed and implemented, and a worker assigned to coordinate their implementation.
3. Written rescue and evacuation procedures are required for but not limited to
   1. Work at high angles
   2. Work in confined spaces or where there is a risk of entrapment
   3. Work with hazardous substances
   4. Underground work
   5. Work on or over water and
   6. Workplaces where there are persons who require physical assistance to be moved.

### Emergency Procedures

1. Emergency means of escape must be provided from any work area in which the malfunctioning of equipment or a work process could create an immediate danger to workers and the regular means of exit could become dangerous or unusable.
2. Emergency exit routes must be designed and marked to provide quick and unimpeded exit.
3. Emergency drills must be held at least annually to ensure awareness and effectiveness of emergency exit routes and procedures, and a record of the drills must be kept.
4. Any deficiencies found during the drill will be corrected without delay and revised accordingly.
5. All emergency drills will be reviewed by the senior management team, and the Joint Occupational Health and Safety Committee.

### Training

1. All workers must be given adequate instruction on the fire prevention and emergency evacuation procedures applicable to their workplace.
2. Workers assigned to emergency evacuation duties in their workplace must be given adequate training, by a qualified instructor, in fire suppression methods, fire prevention, emergency procedures, organization and chain of command, and communications applicable to their workplace.

## Globally Harmonized System (GHS)

### Policy Statement

**(Company Name)** management will ensure that all hazardous materials stored, used, transported, or disposed of by company personnel are identified and labelled in accordance with applicable legislation. This includes Globally Harmonized System (GHS), Transportation of Dangerous Goods (TDG), and the *Waste Management Act* (WMA). All information regarding hazardous materials will be made readily available to workers exposed to such materials by providing a Safety Data Sheet (SDS) file for all work locations where hazardous materials are used, handled or stored.

### Responsibilities

Management will ensure all employees using or handling hazardous materials have been trained in hazard recognition, and safe handling, use, storage, transportation and/or disposal procedures as required.

The information and training regarding hazardous materials will be reviewed on a regular basis.

Supervisory staff is responsible for ensuring that workers who use, handle, transport or dispose hazardous materials have been adequately trained to recognize standard hazard symbols and safe handling/transportation information such as risk phrases, first aid measures and appropriate protective measures as required by law. Supervisory staff is also responsible for ensuring that sufficient labelling, SDS and protective equipment are available at work locations to meet regulated requirements.

Workers are responsible for following procedures and instructions provided for safe use, handling, storage, transport and disposal of hazardous products. Lastly, workers are responsible for reporting containers that are unlabeled, illegibly labelled or incorrectly labelled. Worksite first aid attendants will maintain an up-to-date controlled material file on site. First aid attendants must be aware of the emergency first aid procedures required for workers who may have been overexposed to hazardous materials at their worksites. Workplace information includes knowledge of the hazards of the workplace and of the materials used in the workplace. The Globally Harmonized System is a major response to the worker’s right-to-know about safety and health hazards of materials used in the workplace.

GHS legislation provides employees, employers and suppliers nationwide with specific vital information about hazardous materials through the key elements of:

* Controlled product labelling
* Material safety data sheets
* Worker education and training programs

### Training

On the basis of GHS and other workplace information, **(Company Name)** has developed work procedures that ensure worker health and safety. Workers must be educated in hazards and trained in work procedures.

#### Chemical Inventory

An annual inventory of hazardous materials must be maintained which identifies all hazardous substances and their quantities at the workplace. A chemical inventory includes the chemical name (formula) of the material and the size of its container. Annual inventories allow for the following:

* To check ethers and other chemicals with limited shelf life.
* To remove surplus hazardous chemicals
* To remove chemicals that you would not or have not used in the past 1-3 years.
* To correct incompatible storage.
* To identify which chemicals are present.

#### GHS Controls

Employer shall establish workplace controls, based on hazard evaluations, which could include:

* Engineering controls: ventilation, process modification and isolation of the source.
* Administrative controls: work procedures, storage arrangements, maintenance and time scheduling.
* Personal protective equipment used only in situations where other controls are not practicable.
* Establish emergency procedures
* First aid measures
* Fire-fighting/evacuation measures (notify fire departments of hazardous materials).
* Procedures to handle spills or accidental release.
* Provide worker education and training.

All employers are to ensure their employees have received GHS training. All supervisors and employees are to monitor products/materials arriving on site for GHS Labels. Product/materials displaying a “GHS Label” indicate that they are “Controlled Products” and must be accompanied by “Safety Data Sheets” (SDS).

These products/materials are not to be used until the SDS is available on site.

Prior to the use of the “Controlled Product”, the supervisor will review the GHS Label and SDS with the employee who is using the product.

## Working Alone or In Isolation

### Overview

No worker may be permitted to work alone or in isolation in an area that has been defined as “high risk” to violent acts and/or threats of violence unless certain measures have been taken to protect that worker. To this point there are only two measures that will be considered acceptable:

1. Changing work processes and procedures to eliminate the hazards by removing the person from the area of risk.
2. Securing the person within the area of risk by reducing or eliminating access to the area by unauthorized persons.

**Regular Person-Check Procedure**

* Having another employee check on the person working alone or in isolation periodically in adherence to the Working Alone/Isolation Policy; this may include personal or telephone checks, radio, etc.
* Be oriented to the operation of personal alarms and surveillance systems,.
* Prominently display notices that indicate that the premises are monitored and have emergency numbers readily available in case assistance is needed.
* Do not open back doors and/or leave them open unattended.

This section describes procedures for checking on the well-being of an employee working alone.

You will be contacted by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* By Radio
* Phone

They will contact you:

* Every 30 minutes

You will attempt to call the contact person within five minutes if you were not available at the pre-determined person-check time.

If your contact person cannot reach you at one of these pre-determined times, he or she will make another attempt within a minute. If your contact person still cannot reach you after the second attempt, he or she will do the following:

* Call the supervisor and send someone to your work location.
* If necessary, call 9-1-1 and request help at your location.

### Emergency Information

In case of an emergency (for example, fire, earthquake, flood, or a bomb threat) call the following person:

Contact name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Bullying and Harassment

### Policy Statement

**(Company Name)** promotes a work environment that is characterized by professionalism, collegiality, and harmony. This policy prohibits conduct defined below as either personal or sexual harassment or bullying. **(Company Name)** will not tolerate personal or sexual harassment or bullying in any interactions connected to work with **(Company Name)**, and where such conduct is found to have occurred, **(Company Name)** may take disciplinary action, up to and including termination.

This policy is not intended to constrain normal social interactions.

**(Company Name)** also considers false allegations of bullying and harassment to be serious workplace misconduct subject to disciplinary action, up to an including termination.

### Purpose

The purpose of this policy is to assist all employees in identifying and preventing personal and sexual harassment and bullying in the workplace, and to provide procedures for handling and resolving complaints. It is intended to promote the well-being of everyone in the workplace and to foster the values of integrity, trust, and harmony that are essential for a sound organization.

This policy is intended to address WorkSafeBC requirements imposed by Bill 14.

### Application and Scope

This policy applies to all regular and part-time employees, and management. This policy applies to all situations where activities are connected to work with **(Company Name)** and could impact on employment during and outside of regular business hours at the workplace and away from the workplace. This includes:

* Activities on the premises of **(Company Name)**;
* Work assignments outside of the premises of **(Company Name)**;
* Work-related training sessions, education seminars, and conferences;
* Work-related travel;
* Work-related social functions that are sponsored or organized by **(Company Name)**.

Employees are expected to conduct themselves in a manner that is consistent with the requirements of our company policies, in addition to Bill 14 which prohibit workplace bullying and harassment. Employees should take these requirements seriously. Failure to meet the appropriate standards of workplace conduct and/or to meet the requirements of our company policies and the Bill 14 requirements may result in discipline, up to and including termination of employment.

### Definitions

#### Bullying

Workplace bullying is usually seen as behaviour (conduct or comments) that can “mentally” hurt or isolate a person; however, it can involve negative physical contact as well. Bullying usually involves repeated incidents or a pattern of behaviour that is intended to intimidate, offend, degrade or humiliate a particular person or group of people. It has also been described as the assertion of power through aggression.

#### Harassment

Harassment in the workplace can include “engaging in a course of vexatious comment or conduct against a worker in a workplace that is known or ought reasonably to be known to be unwelcome”, or “any vexatious behaviour in the form of repeated and hostile or unwanted conduct, verbal comments, actions or gestures, that affects an employee’s dignity or psychological or physical integrity and that results in a harmful work environment for the employee”.

### Procedures

Employees with bullying or harassment complaints should direct them to their immediate supervisor, or alternatively the Manager of Human Resources (a contact person outside of their department). Bullying complaints should be submitted in writing, and include the names of possible witnesses.

Reported complaints are measured against the Bullying and Harassment Policy. If an investigation is warranted, the appointed investigator must determine a fair and unbiased process to follow, which may require the implementation of interim workplace measures. For example, it may be necessary to place the complainant and/or alleged harasser on investigative leave with pay, or to arrange temporary transfer or reassignment, if possible. Ideally, investigators shall have independence from the area or department in which the complainant works.

Investigations shall be conducted as quickly as possible, and a complainant will ultimately be informed of the outcome of the complaint process regardless of whether any action is taken against the alleged harasser.

## Confined Spaces

### Overview

Entry into and work in a confined space poses health and safety problems, which may include:

* Presence or possible buildup of a hazardous atmosphere
* Unexpected movement of equipment or materials
* Engulfment
* Explosive, toxic or oxygen deficient atmosphere

Work within a confined space must be carefully defined and planned ahead of the entry in order to identify all possible hazards and take appropriate preventive action.

### Policy Statement

It is the policy of **(Company Name)** that all identified confined space work on the property will be contracted out to properly trained, and equipped contractor’s specializing in this type of work.

**(Company Name)** employee will not be allowed to enter an identified confined space at any given time.

All identified confined spaces will be locked and properly identified and labeled according to WorkSafeBC regulations.

### Prevention of Unauthorized Entry

#### Posting of Confined Spaces

All Permit-Required Confined Spaces that can be readily labeled are posted in a manner designed to inform employees of the existence/location of the dangerous space.

The signs read as follows:

DANGER! PERMIT-REQUIRED CONFINED SPACE, DO NOT ENTER!

If posting danger signs cannot be used to inform the exposed employees, use any other effective means to warn of the existence, location, and the danger posed by the permit spaces.

#### Documentation

All confined space documentation must be maintained at the **(Company Name)** office for a period of no less than two years upon the completion of the job.

## **Avalanche Control**

### Avalanche Control Blasting Procedures

1. Avalanche Control Crew
   1. Minimum number

(See specific procedures)

* 1. Minimum qualifications and training.

All avalanche control involving explosives will have a blaster in charge of the explosive procedure, who possesses a valid WSBC Blasting Certificate in Avalanche Control that endorses for the specific procedure used. He/she is responsible for the safe storage, assembly, transport, initiation and placement of the explosives, as well as the control of the danger area, the supervision and direction of assistance, the handling of misfires and the maintenance of records. He/she is to be physically present in the blasting area during all blasting operations unless delegating to another blaster qualified to perform the procedure required. Where skiing is necessary, crews are to be competent skiers.

* 1. Responsibilities of each member.

(See specific procedures)

* 1. Safety equipment and precautions.

Because of the hazards of static electricity, it is recommended that all personnel wear apparel and packs constructed of natural fibre rather than synthetics.

The blaster and his/her assistants shall be clothed and equipped to safely conduct avalanche blasting and rescue.

1. Blasting Area
   1. Definition

The “blasting area” is defined as the area encompassing the place where charges are being assembled, initiated and placed as well as where unexploded charges are known or believed to exist (such as misfires).

1. Control of the Danger Area
   1. Definition

The “danger area” includes all areas affected by the blast concussion and materials, and terrain capable of having avalanches resulting from the use of the applied explosives.

* 1. Visual Sweeps

The danger area is to be visually swept prior to avalanche control blasting. In addition, surrounding terrain that would allow access to the danger area before completion of the procedure is to be swept. If a misfire occurs, a repeat visual sweep may be indicated. If persons are discovered within, then control is to be suspended until the danger(s) is/are evacuated.

* 1. Guarding

Where a visual sweep is inadequate, guards are to be posted with direct continuous radio communication with the avalanche control crew (and pilot when helicopter bombing).

* 1. Warning Signs, Signals and Physical Barriers

(These will not be used)

1. Communication Procedures

(See specific procedures)

1. Components of the Explosive Charge
   1. Types of Explosives

Product literature and copies of these avalanche control-blasting procedures are readily available for reference. Handling transportation and storage of explosive is in accordance with manufacturers’ recommendations.

* 1. Types of detonators

Factory made safety fuse-detonator assemblies that incorporate a “static shunt” only are to be used, in accordance with manufacturers’ instructions.

No safety fuse assembly that 1 mt. is used. Double priming is recommended if personnel may be placed in a hazardous position when required to handle a misfired charge.

* 1. Type of blasting accessories

Only pull wire fuse igniters are used to ignite safety fuse assemblies and according to the manufacturers’ directions. It is recommended to use hand crimpers to punch explosives and cut safety fuse.

It is recommended that assembly of charges be reinforced with friction tape.

1. Disposal of Unused Charges
   1. Location of disposal operation

If unused charges are to be detonated this is to be done in a “danger area” that is managed accordingly.

* 1. Methods used for disposal

All unused Primers must be detonated.

* 1. Safety precautions

Unused charges are to be detonated observing all appropriate, relevant precautions.

1. Misfired charges
   1. Method of locating

An attempt is to be made to locate misfires visually from the air or ground but they are not to be approached for at least 30 minutes after the ignition of the safety fuser assembly or by manufacturers’ recommendations. If initial search is not successful or is unsafe, subsequent search is to be performed once the snow has melted. Specially trained explosive-recovery dogs may be used.

* 1. Equipment and technique approach

Appropriate mountaineering equipment and techniques (e.g. to provide a reliable belay) are to be used to approach the misfire when indicated.

* 1. Securing the blasting area

If a misfire is suspected or known and the danger area is accessible to the public then the blaster is to ensure it remains closed for at least 30 minutes or by manufacturers’ recommendation

* 1. Destruction of the misfire

Whenever safe, a located misfire is to be destroyed promptly (after waiting 30 minutes or by manufacturers’ recommendation). If initially unsafe or not located it is to be destroyed as soon as conditions allow thereafter.

* 1. Method of destruction

The misfire is not to be disturbed or disassembled at any time. It is to be destroyed by placing then detonating a second charge beside it (without the second charge touching the misfire).

* 1. Warning signs and closure

If the misfire is not destroyed initially and the danger area is accessible to the public, then it is to be closed. If closure is impractical, warning signs (which include descriptions of the misfired charges) are to be posted appropriately.

* 1. Recording location

If a misfire is not initially destroyed, its exact location is to be recorded in the Blasting Log.

1. Blasting Log

All explosive use and avalanche results are to be recorded by the blaster in the Blasting Log.

1. Storage Magazines, Temporary
   1. Location

This magazine is also located and built according to regulations by the Explosive Branch, Energy, Mines, and Resources Canada.

* 1. Restrictions on contents

A maximum of 75 kg of blasting explosives and 100 caps are stored in separate magazines. At the end of each operating season, all explosives left over are transported to a licensed magazine or disposed of by detonation.

* 1. Maintenance

Besides routine checks, this magazine requires little maintenance.

* 1. Safety Precautions

Explosives signs are posted to warn of hazard from all normal access routes; but to avoid attracting undue attention, the magazines are weighed down, securely chained where indicated to prevent theft.

1. Emergency Procedure.
   1. Type and location of equipment

Avalanche control crews carry first aid equipment while in the helicopter, and while they’re on the ground they carry avalanche transceivers, shovels, probes, radio(s), and first aid equipment. In addition, a cache of extra similar equipment is stationed in the helicopter and/or at the operation office.

* 1. Emergency crews

Guides and other qualified personnel are stationed in the Heli-skiing area during avalanche control blasting.

1. Approval of Avalanche Control Blasting Procedures

Procedures and amendments are to be submitted to, and approved by, WorkSafeBC prior to their use.

### Helicopter Bombing Procedures

1. Helicopter Bombing Crew
   1. Minimum number

The minimum number of crew (apart from the pilot) is one, as one individual can function as spotter, bombardier, and recorder. In the majority of cases, however, efficiency is markedly increased by having a crew of three, namely spotter/recorder, bombardier, and assistant. In addition, trainees who are designated for future avalanche control crew are to be included when feasible. On occasion additional crew will be included for the reassessment of explosive use procedures and application of explosives to avalanche control.

* 1. Minimum qualifications, training and responsibilities

The bombardier is to be a blaster with a valid WCB Blasting Certificate in Avalanche Control endorsed for helicopter bombing. He/she is to remain in charge of all aspects of explosive use (included safe storage, assembly, transport, initiation and placement of explosives, control of the danger area, the supervision and direction of assistants and the handling of misfires). He/she is to be familiar with the area and trained in avalanche technology and is to be equipped with a timing device (recording in seconds and record in a Blasting Log). Alternatively, these last four responsibilities may be assumed by other crew members (usually the spotter/recorder) when present in the helicopter.

The crew positions of bombardier, spotter/recorder and assistant are to be assumed by personnel trained in the Helicopter Bombing Procedure.

The assistant will generally assist the bombardier by obtaining charges from the explosive transport container and handing them to the bombardier and being available in emergencies to facilitate rapid jettison of the container.

* 1. Safety equipment

The bombardier is to be secured to one “hard” point (e.g. Cargo tie-down points on the floor in a Bell 204, 205, 212, or 214 or the seatbelt anchor in a 206 Euro copter A-Star, EC130) in the helicopter via a body harness, slings, and carabineers. It is recommended that he/she be secured additionally to a second point above his/her seat (not necessarily a “hard” point) in a 204, 205, 212, or 214, he/she wear a full body harness and use locking carabineers at the harness end of the slings (to allow close and rapid access to unclip).

All other personnel are to be secured with the provided seat belts.

* 1. Safety procedures

A pre-flight crew familiarization of equipment and procedures is to be performed by all helicopter bombing crew and pilot before each bombing run.

It is recommended the bombardier be seated at the end of the rear bench seat on the opposite side to the ski basket (if attached). However, no additional equipment is to be attached to the helicopter ski in the side the bombardier is seated that could obstruct the dropping of the charge.

After these considerations are met it is recommended that a bombardier is to place charges with his/her dominant hand from the same side of the helicopter (i.e. a right-handed bombardier is to place with his/her right hand from the right side of the helicopter).

The sliding door on the 204 is to be fully opened during initiation and placement of the charge while that of the 205, 212, and 214 is to be controlled once it is behind the rear bench seat during the initiation and placement. It is recommended that this be done by a sling from the door to a point level with the front seat. In a 206 the window panel or the rear door is to be removed on the appropriate side.

No charge is to be assembled or dismantled in a helicopter.

1. Communication procedure
   1. Type, location and use of equipment

The bombardier, pilot and spotter/recorder (if an additional person) communicate on a headset and microphone through the helicopter intercom system. The pilot communicates (and they can relay bombardier’s communications) with the Heli-skiing operations office, emergency crew (and guards) if used via established two-way FM and HF radio systems.

1. Components of the Explosive Charge

(See “General Procedures”)

1. Assembly of the charge
   1. Location of the assembly operation

Charges are to be assembled prior to entering the helicopter and at last most practical moment and as close to the helicopter as safety permits. Generally, this will be within 200 metres of the helicopter pad.

* 1. Maximum number of charges

No greater number than those to be used are to be made up at one time.

* 1. Safety precautions

Only helicopter bombing crew are to be present during assembly.

1. Transportation of Explosives, Detonators and Igniters
   1. Separation before assembly

Explosives, detonators and igniters are to be transported separately to the Assembly site.

* 1. Transportation of assembled charges and igniters

Assembled charges are transported in the helicopter in a container that is secured and capable of being easily jettisoned. It is recommended that the same container be used to transport the charges from the assembly site to the helicopter and any unused primers (that are to be dismantled) from the helicopter. It is recommended that this container be of wood with no metal exposed to the interior, labeled, with a closing lid that can be locked and the box secured in the helicopter by fastening one seatbelt through a handle. If the pilot detects a significant aircraft malfunction and he/she deems it necessary, he/she will command the bombardier to jettison the container.

Explosives are not to be in the helicopter during refueling operations.

The helicopter will be grounded (e.g. by using the refueling ground wire) while loading and unloading the charges from the aircraft. Igniters are to be carried separately from charges and not attached until the fuse is ready to be ignited.

* 1. Safety Precautions

Only helicopter bombing crew are to transport explosives, detonators, and assembled charges.

1. Initiation Charge
   1. Device Used

Pull wire igniters only.

* 1. Method, location and notification of crew members of ignition and safety precaution

The bombardier or the spotter/recorder direct the pilot to the target area.

As the target is approached, the bombardier obtains a charge (or charges) from the container and igniter(s) separately. If spotter/recorder is present he/she may command to the bombardier, “Prepare.” If an assistant is present, he/she may hand the bombardier the charge and igniter separately. If a container with a lid is used, it may be opened to obtain the charge(s) but it is recommended that it remain closed otherwise (unless opened to double check the number of remaining charges) especially while ignited fuses are in the bombardier’s hands.

It is recommended that the fuse be trimmed at this time and an attached thermalite igniter (copper coloured) may be removed simultaneously.

Once close to the target and with the aircraft in a slow flight condition, the sliding door (if present) is to be opened. The igniter is to be placed on the fuse carefully and slowly and the fuse ignited. It is recommended this is done with the ignition pull-tab pointed out the door. Timing is to be initiated on ignition of the igniter. If a spotter/recorder is present, he/she may command the bombardier to perform this step by “ignite” and on hearing “Ignition” from the bombardier, will commence timing.

The bombardier is to check ignition has occurred by inspecting for continued emission of smoke from the fuse assembly. If in doubt, it is recommended that a bare hand be used for heat detection to confirm ignition has occurred. If fuse has not ignited, it should never be re-cut or attempted to relight. All charges are to be double primed to avoid misfire.

1. Placement of Charge
   1. Method of placement and safety precautions

Charges are to be dropped only when the helicopter is in a slow flight condition, down and away from the aircraft. It is recommended that the hand be on top of the charge (fingers above with thumb below) and the charge not be raised quickly before dropping but pushed down and away. It is recommended the charge be visualized by the bombardier until it is well clear of the aircraft.

Once the door is closed, the bombing crew commands the pilot to immediately remove the aircraft from the danger area. At no given time will the aircraft remain within the danger area for no longer than 90 seconds after the placement of the first igniter on the fuse.

Results are to be checked and recorded in the log. Misfires are to be managed with established procedures.

## Personal Protective Equipment

### Personal Clothing

* Employees shall be properly attired. Clothing appropriate for work shall be worn.
* Workers must wear clothing that provides ample protection from weather and other hazards. When clothing may come in contact with moving parts of equipment, tools or machinery, the clothing must not be torn, ragged or loose, and pants must not have cuffs.
* High-visibility apparel must be worn when there is exposure to the danger of moving vehicles.

### Job Specific Personal Protective Equipment

* **(Company Name)** requires full use of protective clothing such as full time use of helmets, goggles, ear protection, etc.
* Gloves, eye protection (sunglasses) and hearing protection must be used when required, and include dark glasses for people working with welders, or those adjacent to them.
* Transceiver – Avalanche Safety

### Hearing Protection

* CSA/ANSI approved hearing protection must be worn when the noise level in a work area exceeds the permissible occupational exposure limit, typically noise greater than 85 decibels.

### Respiratory Protection

When required, program will include instruction and training by their employer on:

* Responsibilities
* Training
* Helmet Policy
* Hearing Protection
* Use of Respirators
* Positive/Negative Pressure Fit Testing
* Inspection and Cleaning
* Records

All workers will be trained to the proper use of personal protection equipment (PPE) to their specific job tasks. No exceptions.

## Contractor/Subcontractor Policy

All contractors/subcontractors shall be made aware of our Occupational Health and Safety Program rules and regulations. The Contractor Supervisors and/or Foreman shall be responsible for the direct supervision and safety of their crew. They are accountable to the Project Superintendent for the performance of personnel through the safe work practices and procedures as well as any other applicable Acts and Regulations. It is the contractor/subcontractor’s responsibility to perform the job in compliance with our safety standards or other applicable legislation.

Contractors are required to act as "Employer” on **(Company Name)** behalf as identified in the British Columbia Occupational Health & Safety (OHS) Act Duties in Respect of Health and Safety; or as the "Prime Contractor" in *Workers Compensation Act*, Part 3, Division 3, Section 118: General Duties of Employers, Workers and Others – Coordination at multiple employer workplaces.

Any infractions not immediately corrected as directed by **(Company Name)** will result in the contractors/subcontractors being advised of the breach of contract and the action that will be taken as a result of the breach according to company policy. It must be firmly established that our safety program protects all workers on the job, including all subcontractor’s employees. All contractors must agree to, and sign, our contractor service agreement form prior starting the job.

### Contractors & Subcontractor Responsibilities

All contractor/subcontractors must:

* Read and understand our company Health & Safety Program. Must be knowledgeable of and comply with all regulations, laws and codes.
* Ensure all his/her employees complete a [Contractor Safety Orientation](#_Contractor_Orientation) when/where required prior to his/her employees working on site.
* Enforce all established safety regulations and work methods. Take disciplinary action necessary to ensure compliance with the rules.
* Conduct a Job Hazard Analysis (JHA) for all tasks where moderate to high risk activities are prevalent within the scope of work.
* Ensure that a trade safety representative will attend regular Site Safety Meetings.
* Hold regular “Safety Talk” meetings with his/her crew, record the meeting, and submit a copy to the project supervisor for review.
* Conduct regular inspections for unsafe practices and conditions and ensure prompt corrective action to eliminate causes of accidents and “near misses”.
* Complete an accident/incident report ensuring all accidents/incidents are investigated and corrective action is taken to prevent re-occurrence. Copies of the report are given to the project supervisor.
* Inform each employee of the hazards associated with his/her job and provides the training in the safe work practices required to perform his/her job safely.
* Impart to each employee an understanding that violation of established safety rules will not be tolerated.
* Ensure that required safety equipment and personal protection equipment are provided and used for each job.

# PROGRAM ADMINISTRATION & REVIEW

## Overview

Maintaining current health and safety records and statistics in a central location is a critical part of an effective health and safety program. Many policies, procedures, notices, statements, and reports are necessary to fulfill legal and health and safety program requirements.

## Policy Statement

**(Company Name)** will maintain records and statistics relating to health and safety as required by the *Workers Compensation Act* and *Occupational Health & Safety Regulation*.

## Records

Good record keeping will be used by **(Company Name)** management to:

* Monitor and evaluate the health and safety performance of the company, specific job sites, supervisory personnel and workers.
* Identify common factors or trends in accidents and incidents to assist in the development of the Accident Reduction Program.
* Monitor and evaluate the effectiveness of corrective actions.

## Responsibilities

#### Workers

* Report all accidents, incidents, first aid occurrences and equipment damage to supervisors.

#### Supervisors

* Send all relevant health and safety information to the head office and follow up with procedures to prevent subsequent occurrences.

#### Management

* Maintain all records
* Monitor injury frequency
* Compile information for the annual health and safety review
* Ensure follow up of all action items from the annual review
* Each Site Safety Officer will keep accident/incident statistics and have them available upon request. This information should include:
* Accident and incident investigation reports
* Inspection records (Company and WSBC)
* Disciplinary action records
* First aid treatment records
* Copies of WSBC Forms 6A, 7, WCB monthly Claims Cost Statements
* Worker medical questionnaire responses
* Right to refuse unsafe work occurrence records
* Worker and subcontractor safety commitments
* Orientation and training records
* Records of management meetings
* Health and safety program review records

#### Statistics

Statistics must be tracked to help determine how well **(Company Name)** is achieving their health & safety goals. **(Company Name)** will regularly use WorkSafeBC’s Safety Planning Toolkit to establish these goals.

Frequency, severity and average days-lost rates can be used as indicators of the level of success. They show the rate and duration of work-related lost time injuries and illnesses. The following guidelines are provided for producing the required statistics:

1. Work-related injuries and illnesses to be included in calculations are those that require treatment by a physician, with prescribed absence from work beyond the day of illness or injury occurrence.
2. Illness and injury frequency, severity and average days-lost rates will be determined each month:

* Frequency, severity and average days lost rates will be based on all lost time work-related injuries and illnesses that appear on WorkSafeBC’s Monthly Claim Cost Statements.
* Days charged for illnesses and injuries, for which the disability continues beyond the statement date, will be included in following month’s calculations.
* Injuries or illnesses that occurred over a long period, such as bursitis or tenosynovitis, will be included in the month they are reported.

1. The following formulas are industry accepted methods for calculating work-related lost time illness and injury frequency, severity and average days lost rates:

##### Frequency Rate

(Number of lost time injuries and illnesses x 200,000)/Total hours worked during the month, year, etc.

##### Severity Rate

(Total days lost due to work-related injuries and illnesses x 200,000)/Total hours worked during the month, year, etc.

**NOTE:** The 200,000 figure represents 100 workers at 40 hours per week for 50 weeks per year.

## Program Review

**(Company Name)** management will monitor the company health and safety program(s) on an ongoing basis and will ensure an annual review is performed. Personnel involved in the program review will be qualified to do so.

The review will examine all elements of the program to ensure that the program continues to meet WorkSafeBC and company requirements. The improvements will be the result of input from the management, the Joint Occupational Health and Safety Committee (JOHSC), the employees, the Workers’ Compensation Board, etc. Changes in work processes or the products used will be included in the program revision, if there is a change in the effect of the process or product on the health and safety of any employee.

#### Procedures

The introduction of a new work or a new product (with potential health and safety hazards) shall result in a review by the management and the JOHSC to ensure all health and safety safeguards are in place. Any significant change in the effects (or potential effects) on employees’ health and safety, will be encompassed in the program to ensure that employees have access to that information.

Any major reduction of the effectiveness of the current Health and Safety Program will be immediately addressed by means of a full audit. The audit will identify the source of the problem(s) and will be modified to include corrective measures for the elimination of said problem(s).

#### Program Audit

The Health and Safety Program shall be audited and evaluated annually. The purpose of the audit is to ensure the program is being utilized and is effective, and to investigate the safety activities and performance during the previous year within the context of the Program Manual. The audit will also be used to set measurable objectives and to outline specific safety activities, focal points, and revisions to procedures for the coming year.

The annual review will be based on an acceptable format to the Certificate of Recognition (COR) requirements and WorkSafeBC standards. A written report, including unbiased evaluations, will be produced.

Upon completion of the written report **(Company Name)** will:

* Develop a [Corrective Action Plan](#_Audit_Improvement_Action) to implement practicable recommended revisions.
* Monitor the implementation of the action plan.

# RESOURCE TOOLKIT (FORMS & CHECKLISTS)

## Accident/Incident Investigation Form

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Last Name: | | | First Name | | Occupation/Job Title | | | | Yrs. Experience in Occupation | |
| Full Address: | | | | | | | | | | |
| City/Town | | | | | | | | | Postal Code | |
| Division/Branch | | | | | Date of Occurrence | | | | Time | |
| Location | | | | | Date Reported | | | | Time | |
| ❑ Hazardous Situation | ❑ Incident | | | ❑ First Aid | ❑ Health Care | | ❑ Lost Time | | | ❑ Critical Injury |
| Describe what happened and, if applicable, describe injury. Attach an accident/incident diagram, if appropriate. | | | | | | | | | | |
| Describe the nature, date and time of first aid treatment, if applicable. | | | | | | | | | | |
| **Part of Body Injured** (Indicate “R”, “L”, or “B”, where applicable) | | | | | | Signature of person reporting incident | | | | |
| ❑ Head  ❑ Eye  ❑ Neck  ❑ Shoulder  ❑ Upper back | | ❑ Lower back  ❑ Upper Arm  ❑ Elbow  ❑ Lower Arm  ❑ Wrist | | | ❑ Hand/fingers  ❑ Hip  ❑ Upper leg  ❑ Knee  ❑ Lower leg | | | ❑ Ankle/foot  ❑ Other | | |

|  |  |  |
| --- | --- | --- |
| **Type of Accident/Incident** | | |
| **Check off (✓) statements that best describe the accident/incident:** | | |
| ❑ Repetitive Strain  ❑ Acute Strain (lifting, pulling, carrying)  ❑ Caught in/under/between  ❑ Struck, contacted by/with/against | ❑ Slip/fall  ❑ Vehicle  ❑ Client/employee action  ❑ Cut/bruise | ❑ Exposure to  ❑ Other (explain) |
| **Witnesses** | | |
| Name | | Telephone |
| Address | |
| Name | | Telephone |
| Address | |
| Physician’s Name | | Telephone |
| Address | |
| Remember to attach witness(es) statement(s) on the Witness Statement form. | | |

|  |  |
| --- | --- |
| **Causes: Check (✓) all that are applicable** | |
| **Conditions** | **Practices** |
| ❑ Congestion or restricted action  ❑ Poor housekeeping; disorderly workplace  ❑ Slip/trip hazards  ❑ Lack of or inappropriate furniture/equipment  ❑ Design or arrangement of furniture/equipment  ❑ Defective furniture, tools, equipment or materials  ❑ Inadequate or excessive illumination  ❑ Inadequate ventilation  ❑ Excessive noise  ❑ Inadequate or improper protective equipment  ❑ Fire and explosion hazards  ❑ Inadequate warning systems  ❑ Irate client/employee action  ❑ Adverse weather  ❑ Other (explain): | ❑ Improper body position/posture  ❑ Tasks not varied/micro breaks not taken  ❑ Unnecessary rushing  ❑ Improper lifting  ❑ Unsafe loading/placement  ❑ Using defective equipment  ❑ Using equipment improperly  ❑ Altering or modifying equipment  ❑ Not using personal protective equipment or failing to use it properly  ❑ Not following appropriate procedures  ❑ Inappropriate conduct  ❑ Hazardous personal attire  ❑ Other (explain): |
| What are the reasons for the existence of these practices and/or conditions? | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Prevention/Corrective Action** | | | |
| Actions to prevent accident/incident recurrence. Check (**✓**) those actions taken to prevent recurrence. Mark with (**P**) other corrective actions decided upon or planned but not yet carried out. More than one item may apply. | | | |
| ❑ Training/instruction of person involved  ❑ Improve work procedures  ❑ Inform staff/managers of safe work procedures  ❑ Perform job safety analysis  ❑ Inform staff/managers of hazard and how to protect themselves  ❑ Notify appropriate individuals  ❑ Improve engineering/design  ❑ Improve inspection procedures  ❑ Tools, equipment, furniture repair or replacement | | ❑ Request ergonomic assessment  ❑ Request environmental assessment  ❑ Correction of work area  ❑ Recommend development/improvement to training/OHS program  ❑ Reassess work standards  ❑ Reassignment of person  ❑ Improve housekeeping  ❑ Other (describe): | |
| Remember that ALL corrective action must be documented on the Corrective Action form. | | | |
| Describe actions taken. | | | |
| **Investigated by:** | | | |
| Manager’s Signature | Name (print) | | Date (dd-mmm-yyyy) |
| **Review by:** | | | |

## Workplace Inspection Report Form

This form is to be used by departments to conduct monthly workplace safety inspections. The intent is to document the process, identify concerns or issues that require corrective action, delegate responsibility for addressing the issue and following up outstanding issues during subsequent inspections.

**How often should inspections be conducted?** Monthly

**Who should be involved?** A manager/supervisor and (JOHSC) employee(s)

**When?** Set a standard day and time of the month so it becomes part of the departmental process

**Actions:** Some actions may require outside help (e.g. an Ergonomics Advisor assisting with a specific ergonomics issue or the maintenance department fixing a piece of equipment), so please ensure if you delegate responsibility for a task, that the responsible person is informed or a request is made via the appropriate channel.

**Date Completed:** This should be filled out to ensure the follow-up loop is completed

**Where should the records be kept?** All inspections must be posted, and records kept in the inspections binder

|  |  |
| --- | --- |
| **Date of inspection** |  |
| **Inspector(s)** |  |
| **Area(s) inspected** |  |
| **Department** |  |

**Section 1: General Safety**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM |  | **Y** | **N** | Area / Room # | Type of follow up required | Follow-up by | Date Completed |
| 1.1 | Are worker incident /injury forms available / do staff know when to use them |  |  |  |  |  |  |
| 1.2 | Are new employees informed of work hazards |  |  |  |  |  |  |
| 1.3 | Do staff know how to contact first aid |  |  |  |  |  |  |
| 1.4 | Is safety and health training provided |  |  |  |  |  |  |
| 1.5 | Are staff encouraged to take H&S training |  |  |  |  |  |  |
| 1.6 | Are all exit signs working |  |  |  |  |  |  |
| 1.7 | Are fire exits kept clear |  |  |  |  |  |  |
| 1.8 | Are fire extinguishers inspected and up to date |  |  |  |  |  |  |
| 1.9 | Do emergency procedures/floor plans exist |  |  |  |  |  |  |

**Section 2: Work Areas**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM |  | **Y** | **N** | Area / Room # | Type of follow up required | Follow-up by | Date Completed |
| 2.1 | Is adequate space provided to work safely |  |  |  |  |  |  |
| 2.2 | Is there adequate lighting |  |  |  |  |  |  |
| 2.3 | Are appropriate chairs available (5 castors, adjustments etc) |  |  |  |  |  |  |
| 2.4 | Is area free of clutter (housekeeping) |  |  |  |  |  |  |
| 2.5 | Are shelves kept free of over stacking |  |  |  |  |  |  |
| 2.6 | Are working surfaces at appropriate heights to limit posture concerns |  |  |  |  |  |  |

**Section 3: Support and Structure**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM |  | **Y** | **N** | Area / Room # | Type of follow up required | Follow-up by | Date Completed |
| 3.1 | Are surfaces level and even |  |  |  |  |  |  |
| 3.2 | Is area free of hazards that may cause trips, slips and falls |  |  |  |  |  |  |
| 3.3 | Are surfaces slip resistant where necessary |  |  |  |  |  |  |
| 3.4 | Are steps in good condition |  |  |  |  |  |  |

**Section 4: Electrical**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM |  | **Y** | **N** | Area / Room # | Type of follow up required | Follow-up by | Date Completed |
| 4.1 | Are switch panels free of clutter and accessible |  |  |  |  |  |  |
| 4.2 | Are cords and plugs in good condition |  |  |  |  |  |  |
| 4.3 | Are circuits free of overload |  |  |  |  |  |  |
| 4.4 | Are cords out of the way as not to contribute to tripping hazards |  |  |  |  |  |  |

**Section 5: Ventilation, Illumination, Noise**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM |  | **Y** | **N** | Area / Room # | Type of follow up required | Follow-up by | Date Completed |
| 5.1 | Does there appear to be adequate ventilation (may have to ask staff to find out about complaints) |  |  |  |  |  |  |
| 5.2 | Is the workplace free of excessive noise |  |  |  |  |  |  |
| 5.3 | Is there adequate lighting (overhead or task) |  |  |  |  |  |  |

**Section 6: Work Practices**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM |  | **Y** | **N** | Area / Room # | Type of follow up required | Follow-up by | Date Completed |
| 6.1 | Are safety procedures in place and known to staff |  |  |  |  |  |  |
| 6.2 | Are procedures documented |  |  |  |  |  |  |
| 6.3 | Do staff know how to report concerns |  |  |  |  |  |  |

**Section 7: Personal Protective Equipment**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM |  | **Y** | **N** | Area / Room # | Type of follow up required | Follow-up by | Date Completed |
| 7.1 | Is personal protective equipment required for any specific work |  |  |  |  |  |  |
| 7.2 | Do staff know how to use it properly and have been trained where appropriate (E.g. respirator fit test) |  |  |  |  |  |  |
| 7.3 | Is it available, or do they know how to access PPE |  |  |  |  |  |  |

**Section 8: Strain, Sprain, Overexertion**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM |  | **Y** | **N** | Area / Room # | Type of follow up required | Follow-up by | Date Completed |
| 8.1 | Are staff trained in proper lift techniques |  |  |  |  |  |  |
| 8.2 | Are workstations set up to reduce poor posture |  |  |  |  |  |  |
| 8.3 | Are staff aware of safe handling procedures |  |  |  |  |  |  |
| 8.4 | Do staff know where to find safe handling procedures |  |  |  |  |  |  |

**Section 9: WHMIS / Hazardous Materials**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM |  | **Y** | **N** | Area / Room # | Type of follow up required | Follow-up by | Date Completed |
| 9.1 | Are Material Safety Data Sheets (MSDS) accessible for staff (via a binder or on-line link to OHSAH) |  |  |  |  |  |  |
| 9.2 | Have staff who work with hazardous products had WHMIS training |  |  |  |  |  |  |
| 9.3 | Worker can answer the following four questions:   1. *What are the hazards of the products you are using?* 2. *How do you protect yourself from the hazards of these products?* 3. *What do you do in the event of an emergency?* 4. *Where can additional information be found?* |  |  |  |  |  |  |
| 9.4 | Do staff know how to access the on-line training module |  |  |  |  |  |  |
| 9.5 | Do staff know what to do in the event of a spill |  |  |  |  |  |  |

**Section 10: Fire Safety & Emergency Response**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM |  | **Y** | **N** | Area / Room # | Type of follow up required | Follow-up by | Date Completed |
| 10.1 | Do staff know what to do in the event of an evacuation alarm |  |  |  |  |  |  |
| 10.2 | Do staff know where the muster station is in the event of an evacuation |  |  |  |  |  |  |
| 10.3 | Are there designated fire wardens and have they had appropriate training |  |  |  |  |  |  |
| 10.4 | Are fire extinguishers in working condition |  |  |  |  |  |  |
| 10.5 | Are corridors outside the office area clear and free of storage |  |  |  |  |  |  |

**Section 11: Violence Prevention**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM |  | **Y** | **N** | Area / Room # | Type of follow up required | Follow-up by | Date Completed |
| 11.1a | Is there a risk of aggressive or violent behaviour by clients or visitors toward staff, |  |  |  |  |  |  |
| 11.1b | If yes, has a risk assessment for violence been done or reviewed in the last year? |  |  |  |  |  |  |
| 11.2 | Do staff know about department policies, procedures, or protocols to keep staff safe while interacting with clients or visitors who pose a risk of violence? |  |  |  |  |  |  |
| 11.3 | Do staff know how to call for help if a client or visitor is becoming aggressive/violent? |  |  |  |  |  |  |
| 11.4 | Are emergency numbers posted near phones? |  |  |  |  |  |  |
| 11.5 | Do staff have training in recognizing and/or responding to aggressive/violent people? |  |  |  |  |  |  |
| 11.6 | Are work areas designed and furniture arranged to prevent entrapment of staff and/or minimize the potential for assault? (e.g., exits readily available, deep reception desks, Plexiglas barriers, no objects available that could be used as weapons) |  |  |  |  |  |  |
| 11.7 | Are there hiding places or blind spots where staff cannot see? (e.g., parking lots, elevators, corridors, rooms) |  |  |  |  |  |  |
| 11.8a | Do staff sometimes work alone or in isolation? |  |  |  |  |  |  |
| 11.8b | If yes, do they know appropriate check-in procedures and how to get help in an emergency? |  |  |  |  |  |  |

**Section 12: Comments**

|  |  |
| --- | --- |
| ITEM |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**Signatures:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Dept

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Safe Work Procedure Template

**Potential Hazards**: (what hazards are associated with this task)

**Potential Injury:** (what types of injuries are associated with the hazards)

**Equipment Required:** (what type of equipment do you need for the job)

**Personal Protective Equipment**: (what type of PPE is required to do this task)

**Training Required:** (what type of training – formal, or informal, to do this task)

**Legal Requirements:** (what are the regulations for this task)

**Job Task:** *(Example: proper lifting)*

**Steps***: (a step by step breakdown on how to complete the task safely)*

## Joint Health and Safety Committee Meeting Minutes

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Meeting #:** |  | | | | **Date:** |  | |
| **Location:** |  | | | | **Time:** |  | |
| **Name** | | **Company** | | **Committee Title** | | | |
|  | |  | |  | | | |
|  | |  | |  | | | |
|  | |  | |  | | | |
|  | |  | |  | | | |
|  | |  | |  | | | |
|  | |  | |  | | | |
|  | |  | |  | | | |
|  | |  | |  | | | |
| Absent: | | | | | | | |
|  | |  | |  | | | |
|  | |  | |  | | | |
| **Item** | | | | **Action By** | | | **Resolved** |
| Old Business: | | | | | | | |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
| **Item** | | | | **Action By** | | | **Resolved** |
| New Business: | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | |  | | |  |
|  | | | | | | | |
| **The next meeting will be held on:** | | | **Date:** |  | | | |

## Employee Training Record

|  |  |
| --- | --- |
| Employee Name |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Course/Content | Trainer | Date Completed | Date of Expiry |
| *(e.g. First Aid, Emergency procedures, safe work practices)* | *(e.g. St. John First Aid, )* |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Safety Talk Template

[insert organization’s department] - [insert Safety Talk Topic]

Instructor Guide

**Safety Talk Overview**

Safety Talks are a method to refresh an employee’s knowledge and skills, maintain their interest in safety and illustrate the organization’s commitment to creating a healthy & safe work environment. Safety Talks can be performed on a weekly basis or before the start of a new scope of work and should be about 15 minutes in duration. Generally, these Safety Talk meetings are led by a supervisor and should be mandatory for all crew members to attend. The content should be centred on a single topic (e.g. a safety rule, safe job procedures, recent incident, Joint Occupational Health & Safety Committee (JOHSC) meeting minutes, inspection results, etc.).

**Topic Overview:**

At helicopter and cat skiing operations in BC every year, a significant number of [insert job title aligned to topic] are injured by [insert hazard]. Potential injuries could include [insert potential injuries here].

**Demonstration and Discussion Topics**

🞏 **Discuss** the hazards of being a [insert job title aligned to topic].

🞏 **Tour** the work area with workers pointing out where the accidents can occur [insert job hazards aligned to topic].

🞏 **Distribute** the “Do’s & Don’ts” section of this handout.

🞏 **Use** the “Instructor Guide” section of the handout as your discussion guide and the “Safety Talk Record” to document the meeting.

🞏 **Discuss** how accidents can happen.

🞏 **Remind** employees that they are required to wear adequate personal protective equipment.

🞏 **Explain** what can be done to minimize the risk of accidents (do’s & don’ts in handout)

🞏 **Emphasize** that following safe work procedures is mandatory.

🞏 **Make it real** by telling at least two true stories of injuries from your experience.

🞏 **Discuss** the attitude of “it won’t happen to me”. Remind them that an injury can and will happen if they take shortcuts or are careless.

🞏 **Answer** any questions or concerns they might have.

🞏 **Set a good example** by working safely at all times.

[insert organization’s department] - [insert Safety Talk Topic]



SAFETY TALK RECORD

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Discussion Leader: | | | Date: | | | | |
| Department: | | | Time: | | | | |
|  | | |  | | |  | |
| **Attendees (Please print your name and sign beside it. If you are a contractor, also include your company name):** | | | | | | | |
| 🞏 | | 🞏 | | | | | |
| 🞏 | | 🞏 | | | | | |
| 🞏 | | 🞏 | | | | | |
| 🞏 | | 🞏 | | | | | |
| 🞏 | | 🞏 | | | | | |
| 🞏 | | 🞏 | | | | | |
| 🞏 | | 🞏 | | | | | |
| 🞏 | | 🞏 | | | | | |
| 🞏 | | 🞏 | | | | | |
| 🞏 | | 🞏 | | | | | |
| 🞏 | | 🞏 | | | | | |
| 🞏 | | 🞏 | | | | | |
| 🞏 | | 🞏 | | | | | |
| **Near Miss/Incidents and Investigations Reviewed: (None this month 🞏)** | | | | | | | |
| (Industry alerts can be discussed here as well) | | | | | | | |
| **Safety Topic Discussed:** | | | | | | | |
| Title: | | | | Date: | | | |
| **Any questions or concerns from workers?** | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| **Action Needed:** | **Person responsible:** | | | | **Due Date:** | | **Completed Date:** |
|  |  | | | |  | |  |
|  |  | | | |  | |  |
| **Reviewed By:** |  | | | |  | |  |
| ***Supervisor/Manager Print Name & Sign:*** | | | | | ***Date:*** | | |

[insert organization’s department] - [insert Safety Talk Topic]



[Insert the goal of this Safety Talk, e.g. “The goal of this Safety Talk is to reduce the number of incidents with workers being struck by moving machinery, equipment, and people around the load/unload zones of the helicopter/snowcat”].

**Tasks**

[Insert the tasks associated with this topic, e.g. “Walking around the helicopter/snowcat”, “loading/unloading equipment into/out of the helicopter/snowcat”].

Do’s:

[Insert the safety tips associated with this topic, e.g. “When deciding to walk towards the helicopter/snowcat, assess the conditions of the walkway and whether it’s safe to use the path, or if snow needs to be removed, or salt spread.”]

[insert organization’s department] - [insert Safety Talk Topic]



Don’ts:

[Insert the safety tips associated with this topic, e.g. “Do not listen to personal music devices while moving around a helicopter/snowcat (e.g. walkmans, MP3 players, iPods and cell phones) or while on duty”]



## Audit Improvement Action Plan

**[Year]**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Audit Deficiency** | **Improvement Action** | **Person Responsible** | **By When** | **Action Status** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| **Reviewed by Owner / Senior Manager** | **Signature** | **Date** |

## Employee Safety Acknowledgement

I acknowledge that I have received and read a copy of the **(Company Name)** Company Safety Program Manual. As a condition of employment or contract between **(Company Name)** and myself, I have read and understood my responsibilities as they are defined in this program and will abide by these rules, policies and procedures as well as any regulations or otherwise governing safety.

I understand that this program is to be used in conjunction with the Workers Compensation Regulation/Act and if there is a discrepancy between the two, that the WorkSafeBC Regulation will take precedence over this program.

I understand that **(Company Name)** reserves the right to change or amend the **(Company Name)** Safety Program at any time.

I understand that any violation to the safety program policies or procedures will be cause for disciplinary action or termination of employment.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Name (Company Name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Contractor Service Agreement

THIS AGREEMENT made the \_\_\_\_\_\_\_\_\_\_\_ day of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_,between\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (the Contractor), and (the Company);

1. The Contractor must employ only orderly, trained, competent and skillful people to do work and the Contractor’s employees must be fully covered under WorkSafeBC by the Contractor and must provide up-to-date Clearance Certificate from WorkSafeBC. All sub-contractors must be approved in writing by the company before commencing any work and the Contractor is responsible for ensuring that their employees comply with the terms of this agreement.
2. The Contractor acknowledges and accepts all risks arising or pertaining to the ownership, possession, use or operation of its equipment in completing its services, whether in whole or in part, whether directly or indirectly, by an act or omission or negligence of the Contractor, or for those whom it is law responsible.
3. The Contractor will act as "Employer” on (company) behalf as identified in the British Columbia Occupational Health & Safety (OH&S) Act Duties in Respect of Health and Safety; or as the "Prime Contractor" in Workers Compensation Act, Part 3, Division 3, Section 118: General Duties of Employers, Workers and Others – Coordination at multiple employer workplaces.
4. Contractor must indemnify and save harmless the Company from any and all claims, demands, actions, losses or property damage arising directly or indirectly from ownership, possession, use or operation of its equipment in completing its services., whether in whole or in part, whether directly or indirectly, by an act omission or negligence of the Contractor, of for those whom it is in law responsible. Contractor must protect and hold Company harmless and must pay all costs, expenses and reasonable legal fees incurred or paid by Company in connection with such litigation. The indemnities contained in this Agreement shall not prejudice by and must survive the termination of this Agreement.
5. The Contractor must, during any time in which it is providing services to the Company, take out and keep in full force and effect property damage and public liability insurance in which the limits of public liability and property liability must not be less than two million ($2,000,000.00) dollars per occurrence, the whole at the Contractor’s sole cost and expense. All policies must be in written with insurance companies qualified to do business in the Province of British Columbia and shall name the company as an additional insured and a certificate acknowledging same must be provided to the Company.
6. The Contractor must abide by and must ensure that each of the contractor’s employees and sub-contractor’s employees (if applicable) abide by the Company’s Health and Safety rules and regulations. The Contractor will also be able and willing at such times as recommended by the Company to provide additional precautions as deemed necessary by the Company for safe-guarding employees and equipment. The Contractor further acknowledged and agrees that any violation of safety rules or regulations is justification for the immediate termination of its Contract with Company, without any further obligation on the part of the Company.
7. The Contractor must, at its own expense, obtain and maintain in good standing all permits and licenses required by any authorities having jurisdiction over the business of the Contractor. The Contractor must also comply with all federal, provincial and municipal governmental laws and regulations which are applicable to its business, and in particular, those affecting health and safety, workers’ compensation and environmental matters.
8. This Agreement must be constructed and enforced in accordance with the laws of the Province of British Columbia and the parties agree to attorney to the jurisdiction of the Courts of that Province.
9. This Agreement embodies the entire agreement of the parties with regards to the matter herein, and no other agreement must be deemed to exist, except as entered into in writing by both parties to this Agreement.
10. The Contractor must not assign this Agreement or any part of it and may not employ or retain anyone as a sub-contractor or otherwise, to perform any part of its obligation under this Agreement without prior written consent of the Company.
11. No contracted work offers will be granted by the Company unless this Agreement terms and conditions are fully accepted and agreed upon by the parties to the satisfaction of the Company.

Accepted this \_\_\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_

***Contractor / Sub-Contractor Company ( )***

By: By:

(Authorized signing officer) (Authorized signing officer)

Print Name: Print Name:

## Contractor Safety Acknowledgement

I acknowledge that I have received and read a copy of the **(Company Name)** Company Safety Program Manual and Contractor Safety Information Package.

As a condition of employment or contract between **(Company Name)** and myself/company, I have read and understood my responsibilities as they are defined in this program and will abide by these rules, policies and procedures as well as any regulations or otherwise governing safety.

I understand that it is my responsibility as an employer to inform/educate/instruct workers under my control on any policies/procedures/regulations with respect to safety while working on **(Company Name)** projects.

I understand that this program is to be used in conjunction with the Workers Compensation Regulation/Act and if there is a discrepancy between the two, that the WorkSafeBC Regulation will take precedence over this program.

I understand that **(Company Name)** reserves the right to change or amend the **(Company Name)** Safety Program at any time.

I understand that any violation to the safety program/policies/procedures or regulation will be cause for disciplinary action or termination of employment.

I acknowledge that I understand the requirements of the **(Company Name)**.

Safety Program and agree to abide by all such requirements.

Company:

Employee Name: (Contractor)

Signature: (Contractor)

## Contractor Safety Orientation

Employee name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position (tasks): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date On site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of orientation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person providing orientation (name and position): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

| **Topic** | **Initials** (trainer) | **Initials** (worker) | **Comments** |
| --- | --- | --- | --- |
| 1. Supervisor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Telephone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| 2. Rights and responsibilities  (a) General duties of contractors |  |  |  |
| (b) Worker right to refuse unsafe work and procedure for doing so |  |  |  |
| (c) Worker responsibility to report hazards and procedure for doing so |  |  |  |
| 3. Workplace health and safety rules  a) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  b) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  c) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  d) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| 4. Known hazards and how to deal with them  a) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  b) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  c) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  d) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| 9. First aid  (a) First aid attendant name and contact information |  |  |  |
| (b) Locations of first aid kits and eye wash facilities |  |  |  |
| (c) How to report an illness, injury, or other accident (including near misses) |  |  |  |
| 10. Emergency procedures  (a) Locations of emergency exits and meeting points |  |  |  |
| (b) Locations of fire extinguishers and fire alarms |  |  |  |
| (c) How to use fire extinguishers |  |  |  |
| (d) What to do in an emergency situation |  |  |  |
| 11. Where applicable, basic contents of the occupational health and safety program |  |  |  |

## Emergency Phone Numbers

Location - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **EMERGENCY DEPARTMENTS** | **CONTACT  PERSON** | **PHONE  NUMBER** |
| Safety Department |  |  |
| Project Manager |  |  |
| Site Superintendent |  |  |
| Fire Department Non-Emergency |  | 911 |
| Police Department  Non-Emergency |  | 911 |
| Ambulance |  | 911 |
| Provincial Poison Control Centre |  | 1-800-567-8911 |
| Environmental Emergencies |  | 1-800 663-3456 |
| BC Hydro |  | 1-888-769-3766 |
| Fortis BC (Emergency Number) |  | 1-800-663-9911 |
| BC One Call (Call before you dig) |  | 1-800-474-6886 |
| Waterworks Emergencies |  | 7am-3pm: 604-326-4800  3pm-7am: 604-606-2676 |
| WorkSafeBC |  | 604-276-3100 |