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**Health and Safety Program for Members Handbook**

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**Overview**

The Ontario Occupational Health and Safety Act (OHSA) and associated regulations set a minimum standard for employee health and safety. This handbook outlines the health and safety requirements based on this legislation. This handbook is not the comprehensive health and safety program. Please refer to [Employer/Organization Name] health and safety board and health and safety program for further information.

Health and safety information and training is one part of the health and safety program. [Employer/Organization Name] promotes a culture of health and safety. Ask the supervisor for assistance if you are not trained or if you are unsure of the work assigned to you.

The Internal Responsibility System (IRS) is the underlying philosophy of occupational health and safety legislation in Canada. Its foundation is that everyone in the workplace is responsible for their own safety and the safety of their co-workers.

Anyone who sees a health and safety problem in the workplace has a duty to report the situation to management. Once identified, management has a duty to address the problem.

[Employer/Organization Name] is committed to continuously improving the health and safety of our employees, suppliers, customers and visitors. We believe the well-being of our organization is dependent on the health and safety of our workforce and promise every precaution reasonable in all circumstances will be taken for the protection of all employees.

[Employer/Organization Name] is committed to making every effort to have the most up to date information for our employees.

**Health and Safety Policy Statement**

[Employer/Organization Name] is vitally interested in the prevention of loss of any of its resources. Protection of employees from injury or illness is a major continuing objective of this organization. Supervisors and employees must be dedicated to this continuing objective.

[Employer/Organization Name] will provide and maintain a safe and healthy work environment, in accordance with appropriate standards and in compliance with legislation. [Employer/Organization Name] will strive to eliminate any foreseeable hazards which may result in property damage, incidents, or personal injury or illness.

[Employer/Organization Name] recognizes that employers, supervisors and employees share the responsibility for health and safety and the prevention of loss. Safe operating policies and procedures will be clearly defined in [Employer/Organization Name]’s health and safety program.

Supervisors and employees will perform their activities in accordance with established safe operating policies and procedures and in compliance with legislation.

Supervisors will be held accountable for the health and safety of employees under their supervision. Supervisors are responsible to ensure that machinery, equipment and workplaces are safe, that employees comply with established safe work practices and procedures, and that employees have received adequate training in their specific work tasks to protect their health and safety.

Employees are equally responsible to protect their health and safety by working in compliance with the legislation and safe procedures established by [Employer/Organization Name]. Employees will receive information, training and competent supervision in their specific work tasks to protect their health and safety. Employees will report any hazards to their supervisors immediately.

Commitment to health and safety must form an integral part of [Employer/Organization Name].

**Workplace Violence and Harassment Prevention Policy Statement**

[Employer/Organization Name] is committed to the prevention of workplace violence and providing a work environment in which all individuals are treated with respect and dignity. We will take the necessary steps reasonable to protect our employees from workplace violence from all sources. We are also committed to providing a work environment in which everyone is treated with respect and dignity and protect our employees from workplace harassment.

Workplace violence or harassment are unacceptable in the workplace and will not be tolerated. Everyone in the organization is expected to uphold this policy, and will be held accountable by the employer.

Workplace harassment is defined as engaging in a course of vexatious comment or conduct against an employee in a workplace that is known, or ought reasonably to be known, to be unwelcome, or workplace sexual harassment. Harassment may also relate to a form of discrimination as set out in the Ontario Human Rights Code.

Workplace violence is defined as the exercise of physical force by a person against an employee, in the workplace, that causes or could cause physical injury to the employee. This also includes attempts of violence and statements or behaviours that could be interpreted as a threat of violence.

We will ensure that this policy and the supporting program are implemented and maintained and that all employees and supervisors have the appropriate information and instruction to protect them from violence and harassment in the workplace.

Supervisors will adhere to this policy and the supporting program. They will be responsible for ensuring that measures and procedures are followed by employees and that employees have the information that they need to protect themselves.

Employees are encouraged to raise any concerns and to report any incidents of workplace violence or harassment to their supervisor. If the supervisor is involved in the incident, it should be reported to the employer.

We will investigate and deal with all concerns, complaints or incidents of workplace violence and harassment in a fair, respectful and timely manner while respecting employees’ privacy as much as possible. Information provided about an incident or about a complaint will not be disclosed except as necessary to protect employees, to investigate the complaint or incident, to take corrective action or as otherwise required by law.

Nothing in this policy or program prevents or discourages an employee from filing an application with the Ontario Human Rights Tribunal on a matter related to the Ontario Human Rights Code within one year of the last alleged incident. An employee also retains the right to pursue any other legal avenues available.

**Employer Responsibilities**

Key responsibilities include:

* Following employer responsibilities and ensuring understanding of supervisor and employee responsibilities under both the OHSA and [Employer/Organization Name]’s internal health and safety policies and procedures.
* Referring to the most current Canadian Standards Association (CSA) standards, as applicable.
* Providing equipment, materials and protective devices (e.g. guards on machines, personal protective equipment, etc.) that are maintained and are in good condition.
* Ensuring equipment, materials and protective devices are used properly and in a safe manner.
* Providing information, instruction and supervision to an employee to protect the health and safety of the employee.
* Appointing competent, qualified supervisors.
* Providing upon request, in a medical emergency, information in the possession of the employer, including confidential business information to a legally qualified medical practitioner, and to such other persons as may be required by law.
* Acquainting an employee or a person in authority over an employee with any hazard in the workplace and in the handling, storage, use, disposal and transport of any article, device, equipment or a biological, chemical or physical agent.
* Affording assistance and cooperation to the Health and Safety Representative in the carrying out of their functions.
* Only employing employees over the prescribed age.
* Not knowingly permitting in or about the workplace anyone under the prescribed age.
* Taking every precaution reasonable in the circumstances for the protection of an employee.
* Providing to the Health and Safety Representative the results of a report relating to occupational health and safety (including written copies of the relevant portions if available). The employer must also advise employees of the results of a report and, if the report is in writing, make available on request copies of the portions concerning occupational health and safety.
* Responding in writing within 21 days to any health and safety recommendations submitted by the Health and Safety Representative, including a timetable to implement the recommendations the employer agrees with and the reasons why the employer disagrees with any recommendations.
* Posting a copy of the OHSA, pertinent regulations and any explanatory material prepared by the Ministry of Labour, Immigration, Training and Skills Development (MLITSD) in an accessible workplace location. Explanatory material is to be in English and the majority language of the workplace.
* Posting and annually reviewing and re-posting a signed copy of the health and safety policy in an accessible workplace location.
* Posting and annually reviewing and re-posting a signed copy of the violence and harassment policy annually and ensuring that the policy in an accessible workplace location.
* Developing and maintaining a health and safety program to implement [Employer/Organization Name]’s health and safety policy.
* Accurately keeping, maintaining and making available to affected employees all records of handling, storage, use and disposal of biological, chemical or physical agents as prescribed.
* Notifying a MLITSD Director of the use or introduction into a workplace of such biological, chemical or physical agents as may be prescribed.
* Monitoring the levels of biological, chemical or physical agents in the workplace and keeping posted records as necessary.
* Ensuring that the workplace meets all standards limiting the exposure of an employee to biological, chemical or physical agents.
* If required, establishing a medical surveillance program and providing for safety-related medical examinations and tests for employees as prescribed.
* Where prescribed, providing an employee with written instructions as to the measures and procedures taken for their own protection, and carrying out such training programs for employees and supervisors as needed.
* Ensuring that all workplace structures meet any standards as outlined in the Building Code Act and prescribed by MLITSD.
* Ensuring that all scheduled health and safety training sessions are carried out and completed according to the training timetable.
* Ensuring that all supervisors and employees performing work for [Employer/Organization Name] have completed the prescribed occupational health and safety awareness training program.
* Creating a work environment that holds zero tolerance on violence and harassment.
* Reviewing all Incident Investigation Forms and ensuring these are discussed at management meetings.
* Actively commending employee and supervisor health and safety performance when it meets or exceeds expectations.
* Monitoring and ensuring supervisors and employees fulfill their responsibilities.
* Performing observations of employee safe work practices during workplace inspections.
* Implementing progressive discipline.

**Supervisor Responsibilities**

Key responsibilities include:

* Following supervisor responsibilities and ensuring understanding of employee responsibilities under both the OHSA and regulations and [Employer/Organization Name]’s internal health and safety policies and procedures.
* Ensuring employees work in the manner and with the protective devices, measures and procedures required by the OHSA and regulations (e.g. wearing safety shoes, confining hair, jewelry or loose clothing around moving parts, etc.).
* Ensuring employees use or wear the equipment, protective devices or clothing required by the employer.
* Advising employees of the existence of any potential or actual danger to their health or safety of which the supervisor is aware.
* Where prescribed, providing employees with written instructions as to the measures and procedures to be taken for their protection.
* Taking every precaution reasonable in the circumstances for the protection of an employee.
* Ensuring employees are provided with and sign appropriate job descriptions.
* Reinforcing and demonstrating a positive health and safety attitude and working climate.
* Holding information sessions with employees on health and safety issues.
* Showing interest and involvement in the health and safety performance of the organization.
* Upholding safety rules and procedures and supporting enforcement.
* Implementing progressive discipline.
* Developing a working relationship with the Health and Safety Representative and supporting their role.
* Performing informal workplace inspections daily.
* Making every reasonable attempt to resolve any employee health and safety concerns.
* Conducting Incident Investigations and reviewing all forms and ensuring these are discussed at management meetings.
* Ensuring employees are trained in safe work practices and job safety requirements associated with a particular job process and providing written instructions where appropriate.
* Holding regular meetings with employees in order to review specific safety practices and policies to reinforce safety.
* Correcting any substandard or unsafe acts or any unsafe conditions, and taking action, up to and including progressive discipline.
* Reporting, investigating, and properly documenting all incidents and injuries to employees and guests, as well as any property damage or loss of process.
* Ensuring that a maintenance program for any equipment and machinery in the workplace is carried out.
* Implementing emergency procedures when necessary and ensuring that employees have been properly trained to comply.
* Informing employer of any known occupational health and safety concerns.
* Regularly evaluating employee performance and providing periodic feedback with respect to health and safety.
* Commending employees for exemplary health and safety practices.
* Performing observations of employee safe work practices during workplace inspections.
* Conducting annual evaluations that measure the responsibilities of the employees.
* Attending all required health and safety training programs (e.g. orientation, the prescribed occupational health and safety awareness, etc.), and applying knowledge to activities at [Employer/Organization Name].

**Employee Responsibilities**

Key responsibilities include:

* Following employee responsibilities under both the OHSA and regulations and [Employer/Organization Name]’s internal health and safety policies and procedures.
* Using or wearing the equipment, protective devices or clothing that the employer requires.
* Reporting to the supervisor any missing or defective equipment or protective device which could endanger any person.
* Reporting to the supervisor any contravention of the OHSA, regulations or [Employer/Organization Name]’s health and safety program.
* Reporting to the supervisor any observed hazards.
* Not removing or making ineffective any protective device without providing an adequate temporary substitute. When the work is completed, the original protective device must be replaced immediately.
* Not using or operating any equipment, machine, device or thing or otherwise working in a manner that may endanger anyone.
* Not engaging in any prank, contest, feat of strength, unnecessary running or rough and boisterous conduct.
* Following safe work practices, policies and procedures.
* Following established rules and procedures for handling materials, equipment and processes (e.g. reporting unlabelled containers, using proper lifting techniques, etc.).
* Requesting that worn out or defective equipment be replaced.
* Using all safety devices provided, ensuring optimum condition of devices and reporting any defects immediately to a supervisor.
* Using equipment and materials only in the manner intended.
* Carrying out repairs, alterations and processing changes only when authorized.
* Reporting immediately to the supervisor all injuries, incidents near hits/misses and unusual conditions.
* Inspecting work area and equipment daily and reporting and documenting any hazards immediately to the supervisor.
* Attending all required health and safety training programs (e.g. orientation, the prescribed occupational health and safety awareness, etc.), and applying knowledge to activities at [Employer/Organization Name].

**Progressive Discipline**

**Definitions**

***Tier 1 Misconduct***

Examples are poor housekeeping, improper documentation, substandard performance of work, failure to wear prescribed safety equipment, horseplay, aggressive driving, failure to perform a specified task and any other issues that may appear minor on the surface, yet are critical to the efficient, safe and profitable operation of [Employer/Organization Name].

***Tier 2 Incompetence***

Any willful or reckless act that could violate another individual’s rights, endanger another individual’s health and safety, negatively affect customer success or satisfaction or be construed as against the law. Examples are theft, fighting, threatening another employee with physical harm or death, hateful words or acts, deliberate destruction, and any other form of gross negligence.

**Procedure**

Discipline progression is over a rolling three month period, which can be adjusted if it appears the actions are deliberate or the supervisor believes the offence to be more serious than a Tier 1 offence but less serious than a Tier 2 offence. Consultation with the employer is required. A Tier 2 offence is almost always grounds for termination of employment.

**Reprisals**

Under section 50 of the OHSA, no employer or person acting on behalf of an employer will dismiss, discipline, suspend, impose a penalty, intimidate or coerce an employee, nor will they threaten an employee with such reprisals, because the employee has acted in compliance with the OHSA or regulations or an order made thereunder, sought enforcement of the OHSA or regulations or has given evidence in a proceeding in respect of enforcement of the OHSA or regulations or inquest under the Coroners Act.

An employee that believes that an employer or person acting on behalf of an employer has reprised against them can file a complaint with the Ontario Labour Relations Board.

**Horseplay**

[Employer/Organization Name] will protect their employees from horseplay, disruptive activity, or other forms of disorderly conduct.

Horseplay is defined as any prank, contest, feat of strength, unnecessary running or rough or boisterous conduct.

**Responsibilities**

* Not engage in any prank, contest, feat of strength, unnecessary running or rough and boisterous conduct.
* Not engage in practical jokes, wrestling, water fighting, and all other forms of horseplay.
* Disciplinary action will be taken with any person failing to follow any component of this policy. Please see Progressive Discipline Policy.

**Hazard Reporting**

A hazard is defined as anything that can cause injury or illness in people, or damage to property. A hazard may occur from what people do, or may occur as a result of their working conditions.

It is the duty of all employees to report hazards to their supervisor. This should be done using the Hazard Reporting Form following the procedure below. All hazards will be identified as high, medium or low as defined here, and will be dealt with in priority sequence.

* High hazards are defined as those with a major risk potential. They are serious or significant hazards, and should receive high priority for immediate controls or elimination
* Medium hazards are defined as those with moderate risk potential and require controls as soon as possible
* Low hazards are defined as those with minor risk potential and require controls after any higher priority hazards have been addressed

If the hazard is low and can be corrected in a safe and healthy manner by the employee or supervisor, they should do so (e.g. moving boxes that are blocking a doorway). All other hazards that are more serious or require expertise should be dealt with by the employer or supervisor and Health and Safety Representative.

**Health and Safety Representative**

A Health and Safety Representative is required at a farming operation where six or more employees are regularly employed and a Joint Health and Safety Committee (JHSC) is not required.

**Purpose of the Health and Safety Representative**

* To act as an advisory person whose function it is to promote the maintenance of a safe work environment that enhances the health, safety and wellbeing of all employees. The Health and Safety Representative will be an auditor of the overall health and safety system.

**Joint Health and Safety Committee**

A Joint Health and Safety Committee (JHSC) is required at a farming operation where 20 or more employees are regularly employed and have duties related to one or more of the following operations:

* Mushroom farming
* Greenhouse farming
* Dairy farming
* Hog farming
* Cattle farming
* Poultry farming

**Purpose of the Committee**

* To act as an advisory body whose function it is to promote the maintenance of a safe work environment that enhances the health, safety and wellbeing of all employees. The committee will be an auditor of the overall health and safety system.

**Refusal to Work**

Any employee has the right to refuse work where they feel their own, or someone else’s health or safety is in danger. Employees have a right to refuse work if there is a belief that an employee’s physical well-being is at risk, or because of actual, attempted or threatened application of physical force or workplace violence.

No employer or person acting on behalf of an employer will dismiss, discipline, suspend, impose a penalty, intimidate or coerce an employee, nor will they threaten an employee with such reprisals, because the employee has acted in compliance with the OHSA or regulations or an order made thereunder or sought enforcement of the OHSA or regulations.

**Procedure**

In the case of a refusal to work the employee must:

* Report the issue to a supervisor stating that this is a “work refusal” or “refusal to work” situation. The employee must give a reason they feel the work is unsafe.
* Employees refusing must remain in a safe location reasonably close to the workplace and available to the supervisor and [Employer/Organization Name] pending the results of an investigation. The situation is then investigated by the supervisor, in the presence of the refusing employee and Health and Safety Representative, to determine agreement that there is a health and safety issue.
* If there is agreement, corrective action will be taken to fix the problem and the employee returns to work.
* If there is not agreement, or if the corrective action is not sufficient, and the employee still feels that he or she has reasonable grounds for a work refusal, then [Employer/Organization Name] or person on behalf of the employee notifies the MLITSD that there is a work refusal underway.
* The employee will be assigned other reasonable duties until an Inspector can come in and a written decision about the situation is given.
* Another employee may be assigned to do the task that was refused, but they must be informed of the current work refusal in the presence of the Health and Safety Representative. The employee may choose to do the task or exercise their right to refuse.
* The Inspector will investigate in consultation with the supervisor, the refusing employee and the Health and Safety Representative. Their decision will be written and a copy of the report must be posted in the workplace for 14 days.
* If the MLITSD Inspector’s decision is not likely to endanger the employee, the refusing employee will be required to return to their regular duties.

**Health and Safety Training Program**

[Employer/Organization Name] will deliver a variety of training to employees depending on their positions or tasks. Some training programs will be delivered to all employees, while others will be position or task specific.

**Personal Protective Equipment**

**Guidelines**

***Footwear***

All employees must wear Canadian Standards Association (CSA) approved, steel-toed safety boots or shoes.

***Gloves***

All [Employer/Organization Name] employees engaged in a work practice that has the potential to damage the hands, fingers and/or wrist must wear the proper gloves to prevent this type of injury. The type of gloves available to employees include, but are not limited to, heat and/or cut resistant gloves (cloth or leather), chemical resistant gloves (rubber-latex, nitrile or neoprene), and vibration dampening.

***Eye Protection***

CSA approved safety glasses or goggles must be worn:

* When using chemicals that may be airborne or splashed into the eyes. Chemical splash goggles shall be worn when using chemicals that may be splashed into the eyes.
* Whenever using a tool or performing a task that increases danger to the eyes (e.g. hammer and chisel, drill, hydraulic system service, etc.).

All employees will receive training on proper usage of safety glasses or goggles.

Note: It would be prudent for everyone to wear safety glasses at all times in areas where eye damage can occur. However, there are times when this is not reasonable (e.g. completing paperwork at a desk, etc.), and therefore we have not mandated it at this time. When in doubt, wear safety glasses.

***Hearing Protection***

All employees and contractors that work in a noisy environment including sound levels at or above 85 decibels are required to wear CSA approved hearing protection. At [Employer/Organization Name], hearing protection is to be worn where needed. As a general rule, if you cannot carry on a conversation with a person standing beside you, hearing protection should be worn.

***Head Protection***

CSA approvedhard hats will be worn for protection where there is a risk of head injury. Situations where head injury is likely include working:

* Below other employees or machinery (such as overhead cranes)
* Around or under conveyor belts
* Where there may be overhead obstructions

Depending on the task, the appropriate type and class of hard hat must be worn. [Employer/Organization Name] must ensure employees wear the proper hard hat.

Employees who wear hard hats must ensure they fit properly; they should not be loose or tight, as this may hinder their performance and effectiveness. Hard hats must also be inspected daily for cracks, dents, cuts, gouges and signs of wear.

***Respirators (Half-Mask Cartridge type)***

All employees working in the breathing space of any airborne toxic material must wear a National Institute for Occupational Safety and Health (NIOSH) approved respirator, with the proper filter cartridges designed for the specific toxic material.

* Generally, respirators must be worn when handling or using any chemical, and the chemical SDS states that a respirator is required.
* The airborne concentrations are approaching and/or above the exposure limit.
* All employees required to use respirators will be fully and properly trained on how to use them, including maintenance and proper fit testing.
* [Employer/Organization Name] will provide respirators and cartridges for all applicable employees. Supervisors are responsible for ensuring this equipment is available to employees.

***Welding and Hot Work PPE Requirements***

* Welding helmet, hand shield, or goggles
* Respirator (protection from fumes and oxides)
* Fire or flame-resistant clothing, aprons
* Hearing protection (ear muffs or plugs)
* Insulated gloves
* Rubber-soled, CSA approved safety boots

***Battery Charging/Handling PPE Requirements***

* Acid-resistant apron
* Acid-resistant gloves
* Chemical splash goggles
* Face shield

***Fall Protection***

* Personal fall protection equipment is mandatory when at risk of a fall greater than 2.4 metres, or from any height if at risk of a fall into a hazardous substance, liquid, process, machinery, or other similar hazard.
* All personal fall protection equipment will be inspected prior to use. If, for any reason, there are any safety defects, violation or concerns, remove that equipment from service and notify the supervisor immediately.
* Fall protection equipment shall be secured to approved/engineered anchor points.
* All employees required to wear fall protection shall be fully and properly trained on its use, including selection, care and use of fall protection equipment.

***Sun Protection***

* Employees completing work where there is a greater risk of ultra-violet (UV) radiation exposure shall be provided with a broad-spectrum sunscreen with a sun protection factor (SPF) of 15 or greater. It should be applied to all exposed skin areas, 20 to 30 minutes prior to going outside, and reapplied every 2 hours. If the employee prefers they may choose to wear their own sunscreen.
* Sunglasses with 100% ultraviolet (UV) protection are recommended.
* Appropriate clothing, including light-weight, tightly woven shirts and long pants will block most of the sun’s rays. Light coloured cotton is most comfortable under hot conditions. Clothing should fit comfortably and not be too tight. However, loose clothing should notbe worn if there is any chance you will be working around machinery.
* Hats that shade the ears, face, temples, and back of the neck shall be worn when outdoors. Standard baseball caps do not offer much protection against the sun and therefore require a neck shade to protect the back of the neck and the ears.

**Industrial Hygiene**

* When contact with any chemicals or batteries are made, wash your hands and any exposed skin that may have come in contact with the product involved.
* PPE shall be stored in a manner to remain in good and clean condition.
* If at any time, a piece of PPE becomes damaged or made ineffective, it needs to be brought to a supervisor and removed from use immediately. The piece of PPE involved needs to be replaced as soon as possible.
* Protective clothing or other safety devices that have been worn next to the skin will be cleaned and disinfected prior to being worn by another employee.

**Replacement Process**

* Employees are to inform supervisors when supplies are low and PPE is needed.

**Lockout Tagout**

Lockout tagout (LOTO) is required when involved in activities such as erecting, installing, constructing, repairing, adjusting, inspecting, un-jamming, setting up, troubleshooting, testing, cleaning, servicing and maintaining machines, equipment and processes.

**Definitions**

***Affected Employees***

* Employees who simply need to be aware of the fact that there is a LOTO Program. Affected employees DO NOT participate in the program and are NOT AUTHORIZED to perform lockouts.

***Authorized Employees***

* Employees who have been trained on the equipment and on the LOTO Policy and Procedures. These employees ARE AUTHORIZED to perform lockouts.
* At [Employer/Organization Name], only qualified contractors are considered authorized to complete LOTO.
* A person who is qualified to engage in hazardous energy control because of knowledge, training, and experience and has been assigned to engage in such control.

**Responsibilities**

Affected Employees

* Affected employees are not authorized to perform lockouts.
* Affected employees are not to remove or otherwise tamper with any lockout or tagout hardware.
* Do not attempt to start or re-energize equipment that is locked out.
* Reporting any safety hazards to the employer and the Health and Safety Representative.

***Authorized Employees***

* Participate in training.
* Follow the LOTO Policy.
* Shut down, disconnect all power sources, control stored energy, and lockout each energy-isolating device. LOTO key(s) is/are to be retained in the employee’s pocket.
* Verify that machine, equipment or process is isolated and de-energized by trying to start the machine, equipment or process.
* Ensure that all guards are replaced, tool/debris removed, and that the machine, equipment or process is safe to return to service prior to removing LOTO locks.

**Musculoskeletal Disorder Prevention**

[Employer/Organization Name] will review activities that have Musculoskeletal Disorder (MSD) hazards and use the Musculoskeletal Disorder Hazards Survey as required. The MSD hazards will be assessed, and controls will be put into place to ensure that activities are as employee-friendly as possible.

**Responsibilities**

* Participate in training provided.
* Correctly use equipment provided.
* Follow proper safe operating procedures and work practices
* Report hazards, stressors and/or MSD symptoms to their supervisor as soon as they are recognized.

**Workplace Hazardous Materials Information System (WHMIS)**

**Responsibilities**

* Take proper and adequate training in hazardous materials procedures.
* Use appropriate equipment, protective devices and measures provided for working with hazardous materials.
* Advise supervisors when proper procedures cannot be followed.
* Ensure labels are in good condition.

**Supplier Labels**

* The supplier must determine if the product contains any hazardous ingredients. If so the supplier is responsible to attach a supplier label to the product prior to shipping.
* If at any time the supplier label becomes illegible or is missing, it must be immediately reported to the supervisor.

**Workplace Labels**

* Workplace labels are required when product is transferred from the supplier container to another container or when the supplier label becomes illegible or is missing.
* Workplace labels will contain the following information:
* Product Identifier - name of the product
* Safety Precautions
* Statement saying more information available from the SDS
* Employees must review and follow instructions.

**Safety Data Sheet (SDS)**

* SDS contain a great deal of information about the product; they will outline the hazards and the precautions to avoid injury or illness when handling the product.
* SDS are located [Location].

**Workplace Violence and Harassment Prevention**

**Definitions**

***Workplace Harassment***

* Engaging in a course of vexatious comment or conduct against an employee in a workplace that is known or ought reasonably to be known to be unwelcome, or
* Workplace sexual harassment.

***Workplace Sexual Harassment***

* Engaging in a course of vexatious comment or conduct against an employee in a workplace because of sex, sexual orientation, gender identity or gender expression, where the course of comment or conduct is known or ought reasonably to be known to be unwelcome, or
* Making sexual solicitation or advance where the person making the solicitation or advance is in a position to confer, grant or deny a benefit or advancement to the employee and the person knows or ought reasonably to know that the solicitation or advance is unwelcome.

***Workplace Violence***

* The exercise or attempt of physical force by a person against an employee in a workplace that causes or could cause physical injury to the employee.
* Statement or behavior that an employee could reasonably interpret as a threat to exercise physical force against the employee, in a workplace, that could cause physical injury to the employee.

**Responsibilities**

* Comply with this policy and all related procedures at all times for their own protection and the protection of others within the workplace.
* Immediately report any violent or potentially violent incident to the supervisor. In the event of an extreme or imminent threat of physical harm to themselves or any person at [Employer/Organization Name], the employee should contact emergency services at 911.
* Fully cooperate in any investigation of complaints or incidents of workplace violence or harassment as indicated within this policy.

**Procedure**

***Zero Tolerance***

[Employer/Organization Name] will not tolerate any incidents of workplace violence or harassment perpetrated against or by any employee, customer, vendor, contractor, visitor, or any other person at [Employer/Organization Name].

All physical assaults involving an employee or occurring at [Employer/Organization Name] will be reported to the police. Threats of physical violence will be reported to the authorities as appropriate.

***Domestic Violence***

Any employee or knowledge of another employee, experiencing violence outside of the workplace that may create a risk of danger to themselves or others in the workplace is encouraged to report such violence to the supervisor so that necessary preventative precautions may be taken to protect all employees.

***Reporting Incidents of Workplace Violence or Harassment***

Any employee who observes workplace violence or harassment, or is a victim thereof will immediately go to a safe location and report it to the supervisor. If the supervisor is involved in the incident, then report it to the employer. Witnesses to workplace violence should ensure their own safety and report it to the supervisor. At the discretion of management, the police may need to be contacted. In the event that the employer is not available, employees will contact the police if they feel it is necessary.

All complaints and incidents are to be recorded in writing using the Violence and Harassment Reporting Form, by the reporting person or employee, providing a copy to the employer.

All employees who are subject to workplace violence or harassment also have the option of pursuing recourse through the Ontario Human Rights Tribunal, the Criminal Code and/or the Ontario Criminal Injuries Compensation Board.

***Support***

[Employer/Organization Name] will provide support to victims of violence or harassment. Employees who are victims of violence or harassment are encouraged to seek assistance and can be assured that any counseling and/or treatment administered are completely confidential.

**Incident Reporting**

All incidents causing injury or occupational illness, however minor, must be reported to the supervisor and to the Health and Safety Representative.

**Emergency Information**

**In Case of Fire, Chemical Spill, Bomb Threat or Biohazard Leak and Spill**

**Upon Discovery**

* Leave the area immediately.
* Announce the emergency to inform others.
* Leave the building via the nearest exit.
* Close the doors behind you.
* Contact emergency services at 911.
* Report the emergency to the owner.
* Go to the designated meeting area.

**Upon Hearing Alarm or Announcement**

* Leave the building via the nearest exit.
* Close the doors behind you.
* Go to the designated meeting area.

**When Evacuating**

* If you encounter fire, smoke, or spilled chemicals, use an alternate exit.
* Provide help to persons needing assistance to exit.

**Designated Meeting Area**

* [Location]

**Emergency Contact Information**

Emergency contact information is posted:

* [Location such as at each phone and on each piece of mobile equipment].

**First Aid**

[Employer/Organization Name] will protect the health, safety and well-being of its employees. The company will ensure that any person injured or ill in the workplace will be provided with the utmost care, and that prompt and proper first aid will be administered by a certified First Aid Attendant. [Employer/Organization Name] will provide properly stocked first aid kits, and will keep a record of all first aid treatment and advice.

**First Aid Station**

The first aid station is located [Location], and will be adequately stocked.

**Reporting Requirements**

The First Aid Attendant will be required to record in the First Aid Logbook all treatment given to an employee. Should the injury or illness be serious enough that medical attention is required, an Incident and Injury Report will be completed and sent to the employer. The Incident Report will record the circumstances surrounding the incident as described by the injured employee. Specifically, the report must include:

* The date of the injury
* Time of the injury
* The names of witnesses
* The nature and location of injury

**Transportation of Injured Employee**

If the injury or illness is serious enough that the person must be transported to a hospital or medical centre for immediate medical attention, contact emergency services at 911 for an ambulance. The Certified First Aid Attendant will be responsible for stabilizing the health and safety of the injured/ill person until the ambulance arrives.

If the person is injured or becomes ill, but does not require immediate medical attention, he or she will be offered transportation via taxi service to their desired destination (e.g. home or family doctor’s office). A supervisor will accompany the person to their desired destination, and the company will be responsible for any related transportation fees (e.g. cab fare or ambulance fees).

**Return to Work**

If you have been injured at work or require medical attention you are requested to follow the procedures outlined in this memo. Your participation and cooperation is necessary to help you return to work safely.

Once a workplace injury or incident has been reported to the supervisor or employer, a meeting will be scheduled with all parties concerned (the injured employee and their supervisor) to prepare a Return to Work (RTW) plan. The RTW plan will be based on the functional abilities section of Form 8 that is completed by the treating physician. By working together we will be able to prepare a RTW program that is in the best interest of all involved.

Our objective in the return to work process is to reduce all lost time claims, thereby protecting both [Employer/Organization Name] and the employee from financial loss. In order to control lost time incidents, we must become actively involved as soon as possible following incident.

We must all work together to continuously address health and safety concerns and reduce employee incidents.

**Handbook Acknowledgement**

I acknowledge that I have received the [Employer/Organization Name] Handbook.

I have reviewed the Handbook in its entirety and understand my roles and responsibilities for managing health and safety in the workplace as an employee of [Employer/Organization Name]. When necessary, I have asked the employer or supervisor for clarification of my roles and responsibilities.

I acknowledge that workplace health and safety is a shared responsibility between employers, supervisors and employees and agree to adhere to all [Employer/Organization Name] policies, procedures and safe work practices.

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Employee Name (Please Print)

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Employee Signature

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

Position

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

Date

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

Supervisor Name (Please Print)

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Supervisor Signature

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

Date