Health and safety policy (sample)

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| --- |
| **Company name:** |

Company health and safety policy

This company is committed to a health and safety program that protects and maintains the health and safety of workers at our work site(s), This company is also committed to the protection and maintenance of the health and safety of others (i.e. sub-contractors) who enter onto our property, and the general public.

The employer, supervisors and workers at every level are responsible and accountable for the company’s health and safety performance. Active participation by everyone, every day, in every job is necessary for the health and safety excellence that this company expects. Health and safety excellence includes the promotion and maintenance of the highest degree of physical, psychological and social well-being of all employees. Our goal is a healthy, injury-free workplace for all. By working together we can achieve this goal.

The **employer** will ensure:

* the health, safety and welfare of workers at the work site
* the health, safety and welfare of other persons at or near the work site who may be affected by hazards originating from the work site
* workers are aware of their occupational health and safety rights and duties
* workers are not subjected to or participate in harassment or violence at the work site
* workers are supervised by a person who is competent and familiar with the Occupational Health and Safety Act, regulations, and Code
* they consult and co-operate with the health and safety committee/health and safety representative
* health and safety concerns are resolved in a timely manner
* where a prime contractor is required, the prime contractor is advised of all the names of the supervisors who work at the work site
* supervisors and workers are adequately trained for the protection of health and safety at the work site before:
* performing a work activity
* performing a new work activity or process, or using new equipment
* moving to another area of the work site

**Supervisors** will:

* ensure
* they are competent to supervise the workers under their supervision
* the workers under their supervision work in accordance with procedures and measures required by the Occupational Health and Safety Act, regulations and Code
* the workers under their supervision use all hazard controls and properly use or wear the personal protective equipment required by the employer or under the Occupational Health and Safety Act, regulations or Code
* workers are not subjected to and do not participate in harassment or violence at the work site
* take all precautions necessary to protect the health and safety of every worker under their supervision
* advise every worker under their supervision of all known or reasonably foreseeable hazards to health and safety in the area where the worker is performing work
* report concerns about an unsafe or harmful work site act or condition that occurs/exists or has occurred/existed to the employer

**Workers** will:

* protect the health and safety of themselves and other people at or near the
work site
* co-operate with their supervisors and employer to protect the health and safety of themselves and others
* use all devices and wear all personal protective equipment for the worker’s protection as required by the employer or the Occupational Health and Safety Act, regulations or Code
* refrain from causing or participating in harassment or violence
* report concerns about an unsafe or harmful work site act or condition that occurs/exists or has occurred/existed to the employer or supervisor

In addition, the **employer**, **supervisors** and **workers** will:

* co-operate with any person exercising a duty imposed by the Occupational Health and Safety Act, regulations or Code
* comply with the Occupational Health and Safety Act, regulations and Code and any work site policies, procedures and codes of practice
* Other **workers** (e.g. **contractors**, **suppliers**, or **service providers**) will comply with the Occupational Health and Safety Act, regulations and Code, and work site policies.
* Workers at every level must be familiar with the requirements of the Alberta occupational health and safety legislation as it relates to their work.

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| **Employer signature:** | **Date:** |

Hazard assessment and control (template)

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| --- | --- |
| **Job/position/work type:** | **Date ofassessment:** |
| **Assessment performed by** (names)**:** | **Reviewed/revised:** |
| **Tasks** (List **all** tasks/activities of the job/position) | **Hazards** (List **all** existing and potential health and safety hazards related to the identified tasks) | **Controls** (List the controls for each hazard: elimination, engineering, administrative, personal protective equipment or a combination thereof) | **Dateimplemented** |
|  |  | Elimination:Eng:Admin:PPE: |  |
|  |  | Elimination:Eng:Admin:PPE: |  |
|  |  | Elimination:Eng:Admin:PPE: |  |
|  |  | Elimination:Eng:Admin:PPE: |  |

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Emergency response plan (template)

|  |  |
| --- | --- |
| **Company:** | **Date:** |
| **Address:** |
| **Completed by:** |  |
| **Potential emergencies** e.g. power outage, flood, fire, robbery)Refer to your hazard assessment to determine which hazards could require rescue or evaluation. |  |

List and location of emergency equipment and facilities

|  |  |  |  |
| --- | --- | --- | --- |
| **Emergency equipment including fire protection requirements** (e.g. alarms, sprinklers, fire suppression systems, fire extinguishers, hoses, fire doors) | **Equipment** | **Location** | **Operating procedures** |
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| **First aid** (e.g. first aid kit – type and location; blanket, first aiders/shift, transportation) | **First aid kit:** | **Location:** |
| **First aid supplies and first aid room** (as applicable)**:** | **Location:** |
| **First Aiders** |
| Morning shift: | Afternoon shift: | Night shift: |
| **Transportation plan:** |
| **List and location of emergency facilities** (e.g. fire station, hospital, police, walk-in clinic) | **Facility name** | **Address/distance** |
|  |  |
|  |  |
|  |  |
| **Alarm and emergency communication requirements** (e.g. type of alarm system, paging or PA system) |  |
| **Rescue and evaluation procedures** |  |
| **Emergency response procedures** (Detailed procedures to be followed **for each** identified emergency, including who is responsible for what) | **Emergency situation** | **Procedures** |
|  |  |
|  |  |
|  |  |
| **Emergency response training and requirements** (List the positions or names of workers trained to use each type of emergency equipment and those trained in rescue and evaluation procedures) | **Position or name** | **Training received** | **Frequency** |
| AM shift | Day shift | Night shift |
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Emergency contact list (template)

|  |  |
| --- | --- |
| **Company address:** | **Business phone:** |
| **Prepared by:** |

Emergency response contacts

|  |  |
| --- | --- |
| **Police** | 9-1-1 |
| **Police** (non-emergency) |  |
| **Emergency medical services** (Ambulance) | 9-1-1 |
| **Fire** | 9-1-1 |
| **Poison control** | 1-800-332-1414 |

Company contacts

|  |  |
| --- | --- |
| **Owner/General manager** |  |
| **Manager** |  |
| **Health and safety coordinator** |  |
| **Maintenance** |  |
| **Security** |  |
| **Public relations (designated)** |  |
| **Other** |  |

Alberta Government contacts

|  |  |
| --- | --- |
| **Occupational Health and Safety** | 1-866-415-8690 (toll free)780-415-8690 (in Edmonton) |
| **Workers’ Compensation Board (WCB)** | 1-866-922-9221 (toll free) |
| **Alberta Environment and Parks** | 1-800-222-6514 24-hour emergency hotline |
| **Other** |  |

Other contacts

|  |  |
| --- | --- |
| **Power company** |  |
| **Gas company** |  |
| **Telephone company** |  |
| **Insurance company** |  |
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Work site inspection (template)

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| --- | --- |
| **Company:** | **Date:** |
| **Location:** |
| **Inspectors’ names:** |
| **Description of hazard** (specific location and/or equipment, nature of hazard): | **Recommended actions()** (detailed action, taking account of hierarchy of controls or a combination of controls where elimination is not possible): |
| **Action** | **Assigned to**  | **Due date** | **Completed** |
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Summary record of training (template)

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| --- | --- | --- | --- | --- | --- |
| **Company:** |  |  |  |  |  |
| **Location:** |  |  |  |  |  |
| **Worker’s name** | **Training completion date** | **Comments/other** |
| Site orienation | **First aid** | Emergency response plan | WHMIS | Safe work procedures | Harassment and violence prevention |
| Initial | Retraining |
|  |  |  |  |  |  |  |  |  |
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Worker orientation record (template)

Consider using a checklist like this when training new workers on health and safety in your workplace.

|  |  |
| --- | --- |
| **Worker’s name:** | **Date of orientation:** |
| **Prepared by:** | **Supervisor’s name:** |
|  Yes No | **Written work procedures**(list them here): |
| Rights to workers:* Right to know [ ]  [ ]
* Right to participate [ ]  [ ]
* Right to refuse [ ]  [ ]
 |
| Company’s health and safety policy [ ]  [ ]  |
| Work site party responsibilities [ ]  [ ]  |
| Health and safety rules [ ]  [ ]  |
| Site orientation [ ]  [ ]  |
| Review of hazards [ ]  [ ]  |
| How to report unsafe/unhealthy conditions andother health and safety concerns [ ]  [ ]  |
| How to report incidents [ ]  [ ]  | **Other topics covered**(list them here): |
| Workplace violence prevention plan [ ]  [ ]  |
| Workplace harassment prevention plan [ ]  [ ]  |
| Review the emergency response plan [ ]  [ ]  |
| Location of fire exit(s) and fire extinguisher(s) [ ]  [ ]  |
| How to get first aid treatment [ ]  [ ]  |
| Location of first aid kit(s) [ ]  [ ]  |
| WHMIS training (if applicable) [ ]  [ ]  |
| Location of safety data sheets (SDSs) [ ]  [ ]  |
| Use of personal protective equipment [ ]  [ ]  |
| **Worker signature:** | **Supervisor signature:** |

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Incident reporting and investigation (template)

|  |  |
| --- | --- |
| **Name of worker:** | **Job title:** |
| **Date of injury or illness** (Month/Day/Year): | **Time:** [ ]  AM [ ]  PM |
| **Date injury or illness reported** (Month/Day/Year): | **Time:** [ ]  AM [ ]  PM |
| **Incident reported to:**  | **Job title:** |
| **Location of incident:** |
| **Type of incident**[ ]  First aid [ ]  Medical aid [ ]  Serious injury/incident [ ]  Potentially serious incident [ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| **Nature of injury or incident:** |
| **Damage to property or equipment** (if applicable): |
| **Witnesses** |
| **Name age** | **Job title** | **Statement attached** |
|  |  |  |
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| **Description of incident** (Outline the circumstances of the injury/incident) |
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|  | **Corrective action(s)** |
| **Direct causes** | **Action** | **Assigned to** | **Completed** (date) |
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| **Indirect causes**(contributing factors) | **Action** | **Assigned to** | **Completed** (date) |
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| **Root cause** | **Action** | **Assigned to** | **Completed** (date) |
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| **Investigation team:** |
| **Date** (Month/Day/Year): |

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First aid record (template)

|  |  |
| --- | --- |
| **Date of injury or illness** (Month/Day/Year): | **Time:** [ ]  AM [ ]  PM |
| **Date injury or illness reported** (Month/Day/Year): | **Time:** [ ]  AM [ ]  PM |
| **Full name of injured or ill worker:**  |
| **Description of the injury or illness:** |
| **Description of where the injury or illness occurred/began:** |
| **Cause if the injury or illness:** |
| **First aid provided?** [ ]  **YES** [ ]  **NO**  |
| **Nature of first aider:** |
| **First aider qualifications:**[ ]  Emergency first aider [ ]  Emergency medical responder [ ]  Advanced care paramedic[ ]  Standard first aider [ ]  Primary care paramedic [ ]  Nurse[ ]  Advanced first aider |
| **Describe first aid provided:** |
| [ ]  Copy provide to worker [ ]  Copy refused [ ]  Injured/ill worker initial \_\_\_\_\_ |
| **Keep this record confidential and retain for at least 3 years from reported date of injury/illness.** |

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Workplace harassment prevention policy (sample)

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| --- |
| **Company name:** |

The management of *company name*  is committed to providing a work environment in which all workers are treated with respect and dignity. Harassment will not be tolerated from any person at or outside of the work site including: *(List who this policy applies to, especially if it applies to people other than workers such as customers, clients, other employers, supervisors, workers and members of the public, etc.)*

 *company name*  as the employer is committed to eliminating or, if that is not reasonably practicable, controlling the hazard of harassment. Everyone is obligated to uphold this policy and to work together to prevent workplace harassment.

Workplace harassment means any single incident or repeated incidents of objectionable or unwelcome conduct, comment, bullying or action by a person that the person knows or ought reasonably to know will or would cause offence or humiliation to a worker, or adversely affects the worker’s health and safety, and includes conduct, comment, bullying or action because of race, religious beliefs, colour, physical disability, mental disability, age, ancestry, place of origin, marital status, source of income, family status, gender, gender identity, gender expression and sexual orientation, and a sexual solicitation or advance.

Reasonable action taken by the employer or supervisor relating to the management and direction of workers or a work site is not workplace harassment.

In support of this policy, we have put in place workplace harassment prevention procedures. It includes measures and procedures to protect workers from the hazard of harassment and a process for workers to report incidents, or raise concerns. *(Consider specifying and expanding upon the components of the harassment prevention procedures here.)*

The employer will ensure this policy and the supporting procedures are implemented and maintained. All workers and supervisors will receive relevant information and instruction on the contents of the policy and procedures.

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

Every worker must work in compliance with this policy and the supporting procedures. All workers are required to raise any concerns about harassment and to report any incidents to the appropriate person. *(Consider providing more information about how to report incidents and other procedures here.)*

The employer will investigate and take appropriate corrective actions to address all incidents and complaints of workplace harassment in a fair, respectful and timely manner. *(Consider providing more information about how incidents and complaints will be investigated and/or dealt with here.)*

The employer pledges to respect the privacy of all concerned as much as possible. The employer will not disclose the circumstances related to an incident of harassment or the names of the parties involved (including the complainant, the person alleged to have committed the harassment, and any witnesses) except where necessary to investigate the incident, to take corrective action, to inform the parties involved in the incident of the results of the investigation and corrective action taken, or as required by law.

No workers can be penalized, reprimanded or in any way criticized when acting in good faith while following this policy and the supporting procedures for addressing situations involving harassment. This harassment prevention policy does not discourage a worker from exercising the worker’s right under any other law, including the *Alberta Human Rights Act*.

|  |  |
| --- | --- |
| **Signed:***(Signature of highest management level)* | **Date:**  |

Workplace violence prevention policy (sample)

|  |
| --- |
| **Company name:** |

The management of *company name*  is committed to the prevention of workplace violence and is ultimately responsible for worker health and safety. We will take whatever steps are reasonable to protect our workers from the potential hazards associated with workplace violence. Violent behavior or threat of violence in the workplace is unacceptable from anyone. This policy applies to: *(List who this policy applies to, especially if it applies to people other than workers such as visitors, clients, delivery persons and volunteers, etc.)*

 *company name*  as the employer is committed to eliminating or, if that is not reasonably practicable, controlling the hazard of violence. Everyone is obligated to uphold this policy and to work together to prevent workplace violence.

Violence, whether at a work site or work-related, is the threatened, attempted or actual conduct of a person that causes or is likely to cause physical or psychological injury or harm, and includes domestic or sexual violence.

In support of this policy, we have put in place workplace violence prevention procedures. It includes measures and procedures to protect workers from workplace violence, a means of summoning immediate assistance and a process for workers to report incidents or raise concerns. *(Consider specifying and expanding upon the components of the violence prevention procedures here.)*

The employer will ensure this policy and the supporting procedures are implemented and maintained. All workers and supervisors will receive relevant information and instruction on the contents of the policy and procedures.

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

Every worker must work in compliance with this policy and the supporting procedures. All workers are required to raise any concerns about workplace violence and to report any violent incidents or threats. *(Consider providing more information about how to report incidents and other procedures here.)*

The employer will investigate and take appropriate corrective actions to address all incidents and complaints of workplace violence in a fair and timely manner. *(Consider providing more information about how incidents and complaints will be investigated and/or dealt with here.)*

The employer pledges to respect the privacy of all concerned as much as possible. The employer will not disclose the circumstances related to an incident of violence or the names of the complainant, the individual alleged to have committed the violence, and any witnesses, except where necessary to investigate the incident or to take corrective action, to inform the parties involved in the incident of the results of the investigation and corrective action taken, to inform workers of a specific or general threat of violence or potential violence, or as required by law. Employer will disclose only the minimum amount of personal information required that is necessary to inform workers of a specific or general threat of violence or potential violence.

No workers can be penalized, reprimanded or in any way criticized when acting in good faith while following this policy and the supporting procedures for addressing situations involving workplace violence. This violence prevention policy does not discourage a worker from exercising the worker’s right under any other law.

|  |  |
| --- | --- |
| **Signed:***(Signature of highest management level)* | **Date:**  |