

# Resources

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# Resource Sheet 1: What Does the Law Say?

## About Hazard Recognition

The *Act* implies that identifying hazards by attempting to recognize them is required in at least the following sections:

### 1. Observation/Worker Concerns

#### Section in the Act

Worker duty to report hazards	28 (1) (c)
Worker duty to report violations of <i>Act</i>	28 (1) (d)
Supervisor duty to inform workers of dangers	27 (2) (a)
Employer duty to acquaint workers and supervisors with hazards in the work	25 (2) (d)

### 2. Investigations

#### Section in the Act

Notice of critical injury or fatality	51
Notice of disabling injury or illness	52
Supervisor's investigation of work refusals	43
Investigation of dangerous circumstances	45, 48

### 3. Inspections

#### Section in the Act

Health and safety rep or designated JHSC member, preferably certified member, inspects workplace	8(6), 9(23)
Health and safety rep or designated JHSC member, inspects at least once a month or, if not practical, some part of it each month and whole workplace at least once a year	8 (6)(7) 9(26)(27)
Employer provides information and assistance to JHSC member/health and safety rep doing inspection	8 (9), 9(29)
JHSC member/rep reports findings to joint health and safety committee	9 (30)
Ministry of Labour inspector can enter the workplace at any time	54(1)(a)
Employer duty to ensure that equipment, materials and protective devices are maintained in good condition	25 (1)(b)

# Resource Sheet 1: What Does the Law Say? (cont'd)

## 4. Examining Records

### Section in the Act

Employer provides information to: JHSC, workers, etc.	25 (2) (a) (l) (m)
Committee has access to information on health and safety testing	9 (18) (e), s11 (2)
Committee has access to Workers' Safety and Insurance Board annual summaries	12
Employer keeps records of worker exposures and make available to workers	26 (1)(d)
Worker committee member/representative is present at beginning of testing	8(11)(b), 9 (18)(f)
Employer must provide material safety data sheets	38

## 5. Task/Process Analysis

### Section in the Act

Assessment of worker exposure required by the designated substances regulations	Designated substances regulations
General duty for employer to take every precaution reasonable to protect workers	25 (2)(h)
Employer duty to acquaint workers and supervisors with any hazard in the work	25 (2)(d)

# Resource Sheet 2: Health and Safety Key Word Chart

Hazard Recognition			Assessment		Controls		Action Plan
Hazards	Potential Consequences	Tools	Method	Contributing Factors	Location	Control Methods	Who, What, When
Walking surfaces Mechanical <ul style="list-style-type: none"> <li>• Pinch points</li> <li>• Crushing</li> </ul> Thermal Heat/Cold Steam Radiation Noise Vibration Chemical Electrical Sources Ergonomics <ul style="list-style-type: none"> <li>• sequence of work</li> <li>• pace</li> <li>• awkward positions</li> <li>• force</li> </ul> Pushing Pulling Lifting Reaching Shoveling Manipulation Hazardous Materials Atmospheric conditions Pressure Housekeeping Moving parts	Head Legs Knees Feet Toes Hands Fingers Arms Shoulders Back Lungs Eyes Skin Hearing Dizziness Breathing	1. Observation 2. Inspection 3. Injury/incident investigation 4. Examining workplace records 5. Task and process analysis	1. Collect information about the hazard. Ask questions about contributing factors listed in the column to the right. Use the tools listed in the "Tools" column to the left.  2. Identify or establish the standard that applies.  3. Compare findings to standards/expectations to determine basic cause and degree of risk.  4. Document and report findings.	<p><b>People</b>                      Training                      Experience                      Supervision                      Leadership                      Administration</p> <p><b>Equipment</b>                      Correct equipment                      Vehicles                      Maintenance                      Warning systems</p> <p><b>Material</b>                      Correct materials                      Proper handling                      Storage controls                      Scrap materials                      By-products</p> <p><b>Environment</b>                      House keeping                      Surface conditions                      Thermal                      Crowding                      Lighting                      Noise                      Air quality</p> <p><b>Process</b>                      Flow of work                      By-products                      Design of work                      Ergonomics</p>	<p><b>At the Source</b>                      Substitution                      Elimination                      Re-design                      Isolate/enclose</p> <p><b>Along the Path</b>                      Physical barrier                      Shielding                      Ventilate</p> <p><b>At the Worker</b>                      PPE                      Training                      Administrative</p>	<p><b>Elimination</b></p> <p><b>Substitution</b></p> <p><b>Engineering</b>                      Re-design                      Isolation                      Ventilation                      Shielding</p> <p><b>Administrative</b>                      Hygiene and Facilities                      Schedules                     <ul style="list-style-type: none"> <li>• work</li> <li>• maintenance</li> </ul>                     Training                      Rotation                      Timing of work                      Procedures                      Training                      Housekeeping                      Processes                      Flow of work                      Maintenance                     <ul style="list-style-type: none"> <li>• equipment</li> <li>• tools</li> </ul>                     Monitoring                     <ul style="list-style-type: none"> <li>• air</li> <li>• exposure</li> </ul> </p> <p><b>PPE</b>                      Quality                      Maintenance                      Training                      Supervision                      Storage                      Replacement                      Appropriateness</p>	Determine steps to the application of a recommended control(s).  Determine who is responsible for carrying through the recommendation.  Determine target dates for application of each step in the control plan, i.e. <ol style="list-style-type: none"> <li>1. Make recommendations</li> <li>2. Follow-up response</li> <li>3. Amend modify or carry through with recommendation</li> <li>4. Confirm resolution of hazard concerns.</li> </ol>

# Resource Sheet 3: Sample Health and Safety Hazard Reporting Procedure

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<b>Title: Health and Safety Hazard Reporting Procedure</b>	<b>Date of Issue:</b>
<b>Approved by:</b>	<b>Review / Revise Date:</b>
<b>Location:</b>	

## PURPOSE

To identify the steps to be taken for reporting hazardous conditions that may arise in the workplace.

## ROLES & RESPONSIBILITIES

1. All employees are responsible for reporting to his/her supervisor any hazardous conditions that may exist in the workplace.
2. The workplace supervisor is responsible for responding to the employee's concern and ensuring the hazardous condition is resolved.

## PROCEDURE

1. Employee who identifies a safety hazard/concern should report this to his/her supervisor immediately.
2. The supervisor is expected to deal with the matter promptly, consult with others as needed, and advise the employee of the plan of action to resolve the matter. Reasonable time would depend on the potential risk of the situation but should not exceed one week.
3. If the supervisor is unable to resolve the concern, he/she should bring it to the attention of the owner/manager.
4. If the employee's concern is not satisfactorily resolved after a reasonable period of time, the employee is encouraged to bring the concern to the attention of a member of the Joint Health and Safety Committee/health and safety representative.
5. The employee will be asked to document the concern, outlining the facts and the information requested.
6. All concerns are to be thoroughly investigated with factual information pertaining to the concern.
7. The Joint Health and Safety Committee/representative and the employee's supervisor are responsible for ensuring the employee is informed of the progress of the resolution of the concern.

8. If the concern remains unresolved, the Joint Health and Safety Committee/representative may contact the Ministry of Labour Inspector for assistance.

**Note:** This procedure does not preclude the employee from exercising his/her right to refuse unsafe work, as defined under the *Occupational Health and Safety Act*.

## TRAINING

## FORMS

## REFERENCE MATERIALS

# Resource Sheet 4: Sample Workplace Inspection Procedure

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<b>Title: Workplace Inspection Procedure</b>	<b>Date of Issue:</b>
<b>Approved by:</b>	<b>Review / Revise Date:</b>
<b>Location:</b>	

## PURPOSE

To assess the quality of workplace conditions, equipment and methods, and the quality and adequacy of controls for hazards in the workplace.

## ROLES & RESPONSIBILITIES

The employer is responsible for ensuring the proper application of this policy. All employees will follow the standard and participate in the workplace inspection program. All employees have roles and responsibilities in the Workplace Inspection Program. The success of this program relies on the participation of all employees.

## PROCEDURE

### *Pre-Use Inspections:*

#### **Workplace Equipment:**

Prior to using any equipment, a visual inspection should be completed to check for any abnormalities. Report any malfunctions or unusual conditions that occur during use of the equipment immediately. If you are unfamiliar with a piece of equipment contact your supervisor for further instruction.

#### **Company vehicles:**

1. Company vehicles will be inspected daily using the vehicle inspection checklist (attach appendix A).
2. Workers will perform inspections of vehicles as assigned by their supervisor.
3. Vehicle inspections will be completed on the first day of the workweek.
4. Vehicle inspection checklists will be delivered to xxxxxxxx upon completion.

# Resource Sheet 4: Sample Workplace Inspection Procedure (cont.)

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5. Regular mechanical inspections of company vehicles as recommended by the manufacturer will be monitored by xxxxxxxx using the weekly inspection forms submitted by the drivers.

## Power Tools:

\*\*\*List requirements for inspection\*\*\*

## Forklift Truck:

Forklift truck inspections to be completed on a daily basis using the “Forklift Inspection Report” as per the Forklift Policy. (\*\*only adequate if you have a forklift policy, otherwise list requirements\*\*)

## Personal Protective Equipment:

PPE will be inspected prior to each use.

(\*\*list types of PPE and what to look for when inspecting that particular item\*\*)

See your supervisor if you require a replacement.

## Hoists:

1. Hoists will be inspected on a weekly basis using the “Hoist Inspection Checklist”. (Attach Appendix B).
2. Inspections of hoists have been assigned as part of the “Employee Weekly Inspection”.
3. Hoist inspections will be completed on Fridays and handed in to the Employer with the Employee’s inspection report of their assigned area.
4. Hoists will be inspected by a third party on an annual basis. A sticker will be applied to the hoist confirming specifications have been met.

## New Equipment:

1. All new equipment brought in to the workplace will be inspected prior to use.
2. The Employer and the workers that will use the equipment shall conduct the inspection.
3. The pre-use inspection will be documented and maintained in the equipment file.
4. A schedule for regular maintenance inspections shall be determined in consultation with the manufacturer’s directions and added to this program.
5. The Employer will consult Section 7 of the Industrial Regulation prior to purchasing or installing any new company equipment.

# Resource Sheet 4: Sample Workplace Inspection Procedure (cont.)

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## *Inspections by Employees:*

\*\*\*Company Name\*\*\* employees have been assigned an area to inspect **weekly**. The purpose of the inspection is to identify health and safety hazards, equipment maintenance issues, hazard control effectiveness and housekeeping problems. Suggestions for improvement should be noted.

1. Document the inspection including deficiencies on the checklist provided.
2. Submit the completed checklist to Employer before shift end on Fridays.

## *Inspections by the Employer:*

1. The Employer will accompany the Worker Health and Safety Representative while completing the **monthly** workplace. Items to be inspected include identification of health and safety hazards, equipment maintenance issues, completion of previous issues noted on past inspection forms, hazard control effectiveness, training needs and housekeeping issues.
2. See procedure for “Inspections by the Worker Health and Safety Representative” for inspection details and requirements.

## *Inspections by the Supervisor:*

1. The Supervisor will complete a **daily visual** inspection to identify health and safety hazards, equipment maintenance issues, hazard control effectiveness and housekeeping problems. Record any issues found and remedial action taken in Supervisors’ notebook.  
The Supervisor will complete a **monthly** workplace inspection to identify health and safety hazards, equipment maintenance issues, hazard control effectiveness and housekeeping problems.
3. The Supervisor will document the **monthly** inspection including deficiencies and corrective action taken on the Workplace Inspection Report form.

## *Inspections by the Worker Health and Safety Representative :*

The worker health and safety representative will schedule **monthly** workplace inspections. The purpose of the inspection is to identify health and safety hazards, equipment maintenance issues, completion of previous issues noted on past inspection forms, hazard control effectiveness, training needs and housekeeping issues.

1. The inspection schedule shall be completed in December for the following year.
2. Inspections to be completed on a monthly basis.
3. Prepare for Inspection by reviewing previous reports.
4. Be familiar with the work processes and work areas.
5. Review workplace requirements as necessary (e.g. standard procedures, training records, etc.)
6. Wear the required PPE.
7. Use Monthly Workplace Inspection Checklist (Attach Appendix C) as a guide to ensure a thorough inspection.

# Resource Sheet 4: Sample Workplace Inspection Procedure (cont.)

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8. All substandard or unsatisfactory conditions to be documented using the Workplace Inspection Report (see Appendix D).
9. Check to see if previous actions are complete.
10. Recognition of good practices and adherence to procedures should also be noted.
11. Suggestions for resolving items noted on the inspection to be documented on the Workplace Inspection Report.
12. Take corrective action immediately when possible/necessary.
13. Workplace Inspection Report must be submitted to the Employer once the inspection is complete.
14. The Employer will review the Workplace Inspection Report and initiate/plan appropriate corrective action where necessary within one week.
15. The Employer will post a copy of the completed Workplace Inspection Report identifying action taken to resolve hazards noted during the inspection.
16. Copies of the completed Workplace Inspection Report will be:
  - Posted on the Health and Safety Board
  - Maintained on file by the Employer
  - Maintained on file by the Worker Health and Safety Representative

This inspection program will be communicated to all employees at staff training sessions and during orientation for new workers.  
Any changes to the inspection program will be communicated to employees at staff training sessions and or the weekly staff meeting.

## TRAINING

Employees will be provided with appropriate training to allow their participation in the workplace inspection program.

If an employee feels that they require further training, the employee will notify their supervisor. Training records will be completed during the training sessions and kept on file by xxxxxxxxxxxxxxxx. Employees will sign in on the training record.

## FORMS

## REFERENCE MATERIALS

# Resource Sheet 5: Sample Workplace Inspection Checklist

Walking Surfaces		Fire Prevention	
Walkways free of obstacles		Extinguishers available & accessible	
Cords anchored or covered		Extinguishers/hose cabinets dated monthly	
Floor coverings in good condition		Pull stations accessible	
No slip/trip hazards present		Electric cords/outlets in good condition	
Warnings posted when floors are wet		Electrical outlets not overloaded	
		Fire exits clear of obstruction	
Furniture/Office Equipment		Fire doors closed	
In good mechanical condition		Fire exit signs lit	
Properly assembled			
Properly adjusted		Security	
Secure from tipping		Employees/visitors have ID badges	
Free from sharp edges/corners		Visitors have safety rules	
Dangerous parts properly guarded			
Emergency switches accessible (Only access to Fire Extinguishers checked)			
		First Aid	
Preventative maintenance program established for equipment & tools [ <i>not yet established</i> ]		First aid kit available at First Aid Station in main photocopy room	
Loose clothing/jewelry/ID badges secured		First aid kit checked monthly	
Appropriate for work being done		WSIB poster 82 beside the kit	
Defective equipment properly identified		Certificates of first aiders current & posted	
Unnecessary items removed		First aid log sheet available & in use	
Employees instructed on safe/proper use			
Electrical cords at workstation secured			
		Protective Clothing/Equipment	
Bookcase/Shelves/Cabinets		Equipment/clothing provided where required	
Secured from tipping		(Including safety kits and cellular phones)	
In good condition		Equipment/clothing used where required	
Drawers/doors closed when not in use		Equipment/clothing in good condition	
One drawer of filing cabinet open at a time		Employees trained in usage	
Material safely stored/stacked/piled		Are areas appropriately signed	
Heavier or commonly accessed items between knuckle and shoulder height		Do employees have/wear proper PPE when they visit other workplaces	
Step stools available if required			

## Resource Sheet 5: Sample Workplace Inspection Checklist (cont.)

		Posted Information	
Environment		OH&S Act & OHS Policy	
Light levels adequate		First Aider names	
Air quality adequate		JHSC meeting minutes	
Temperature and humidity adequate		RTW program	
People dressed appropriately for season			
Air/temperature units unobstructed		Training	
Noise levels appropriate		Employees aware of emergency procedures	
Hazardous materials properly labeled		Employees aware of security procedures	
Hazardous materials properly stored		Employees provided information and instruction to protect their Health and Safety	
Unexpired MSDSs are available (dated within 3 years)			
Housekeeping satisfactory			
No construction hazards present		Procedures	
		Proper use of ergonomic equipment	
		Proper use of ergonomic equipment	
		Procedures for manual materials handling in/around inspection area	
Disabled		Other Unsafe Acts/Conditions	
Required accommodations provided		Contractor infractions ( e.g. safe use of ladder)	
Accommodations provided are functional		Randomly ask employees about "near misses"	

\*\*\*MAKE A CHECKLIST SPECIFIC TO YOUR WORK ENVIRONMENT\*\*\*

# Resource Sheet 6: Sample Workplace Inspection Recording Form

Inspection Location(s): \_\_\_\_\_ Time of Inspection: \_\_\_\_\_  
 Department/Area: \_\_\_\_\_ Date of Inspection: \_\_\_\_\_

Item (and location of item)	Hazard Observed	Hazard Class	Repeat Item		Recommended Action	FOR FOLLOW UP				
			Yes	No		By		Action Taken	Completed	Authorized Signature
						Whom	When			

### Classification of Hazardous Practices or Conditions

**Class A:** Likely to cause permanent disability or loss of life or body part, and/or extensive loss of structure, equipment or material.

**Class B:** Likely to cause serious injury or illness (resulting in temporary disability) or property damage that is disruptive, but less severe than Class “A”.

**Class C:** Likely to cause minor (non-disabling) injury or illness or non-disruptive property damage.

Copies To:

Inspection Completed By:





# Resource Sheet 7: Sample Injury/Illness/Incident Investigation Procedure

<b>Title: Sample Injury/Illness/Incident Investigation Procedure</b>	<b>Date of Issue:</b>
<b>Approved by:</b>	<b>Review / Revise Date:</b>
<b>Location:</b>	

## PURPOSE

To provide a procedure where all occurrences can be investigated to prevent recurrence.

Occurrences are:

- injuries
- occupational illnesses
- property damage
- near misses.

## ROLES & RESPONSIBILITIES

1. Employees are required to report all injuries/illnesses/incidents/property damage occurrences to his/her supervisor.
2. The supervisor is responsible for investigating, reporting and corrective action follow-up of all injuries/illnesses/incidents/property damage.

## PROCEDURE

### A. General

1. All injuries/illnesses/incidents/property damage must be reported to the supervisor.
2. Immediately after an injury/illness/incident/property damage occurrence, the supervisor shall ensure the safety of employees, public, equipment and facilities from further injury or damage and follow the steps laid out in this procedure.
3. There are four categories of injuries:
  - no treatment
  - first aid
  - health care
  - critical injury.

# Resource Sheet 7: Sample Injury/Illness/Incident Investigation Procedure (cont'd)

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## B. No Treatment Injury

1. A 'no treatment injury' occurs when there is an injury that does not require any treatment (i.e. bruised finger).
2. The employee will report the injury to the supervisor.
3. The supervisor will record the injury in the **"First Aid Report Book"** which is to be kept by the office manager.

## C. First Aid Injury

1. A "first aid injury" is an injury that can be treated at the worksite and does not require treatment from a health care professional (i.e. a cut finger that requires a bandaid only).
2. The employee is to report the injury to the supervisor.
3. First Aid treatment will be provided and the treatment recorded in the **"First Aid Report Book."**

## D. Health Care Injury

1. A "Health Care Injury" is an injury that requires treatment (i.e. a cut finger that requires stitches) from a health care professional (i.e. physician, chiropractor, etc.) but is not of a critical nature. A supervisor is to arrange for:
  - first aid treatment for the injured employee and record the treatment in the **"First Aid Report Book."**
  - transportation (e.g. taxi, ambulance, etc.) of the employee to a location where professional health care can be delivered (i.e. doctor's office, hospital).
2. A **"Functional Abilities Form"** is to be taken to the attending physician.
3. The supervisor is to conduct an investigation immediately, or as soon as possible following the notification of the injury/illness/incident/property damage.
4. The supervisor will notify the employer that a health care injury has taken place and that a WSIB Form 7 must be submitted to WSIB within 3 days of the injury.

## E. Critical Injury

1. A 'Critical Injury' is 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 a toe
  - involves the amputation of a leg, arm, hand or foot, but not a finger or a toe
  - consists of burns to a major portion of the body
  - causes the loss of sight in an eye.
2. The supervisor is to arrange for:

# Resource Sheet 7: Sample Injury/Illness/Incident Investigation Procedure (cont'd)

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- first aid treatment of the injured employee and record the treatment in the **“First Aid Report Book”**
  - transportation (e.g. taxi, ambulance, etc.) of the employee to a location where professional health care can be delivered (e.g., hospital)
  - immediate notification of the Ministry of Labour, Joint Health and Safety Committee/representative, and supervisor
  - securing the scene as per OHSA section 51(2).
3. A **“Functional Abilities Form”** is to be taken to the attending physician.
  4. The supervisor is to conduct an investigation immediately, or as soon as possible following the notification of the injury/illness/incident/property damage.
- The supervisor will notify the employer that a critical injury has taken place and that a WSIB Form 7 must be submitted to WSIB within 3 days of the injury.

## F. Injury/Illness/Incident/Property Damage Reporting

1. Investigations will be conducted by the department manager, with the optional assistance of a member from the Joint Health and Safety Committee/representative. (Note: for items with an \*, assistance from a member of the Joint Health and Safety Committee/representative is compulsory). The findings are documented on the **“Employee Injury/Incident Report”** whenever any of the following occurs:
  - health care
  - critical injury\*
  - fatality\*
  - fire or explosion
  - property damage above \$xxxxx
  - injury/illness/incident/property damage involving possible public liability
  - other injury/illness/incident/property damage.
2. When conducting the investigation it is important to:
  - preserve the injury/illness/incident/property damage scene where practical and possible
  - identify witnesses or others having knowledge of the accident/incident
  - interview the injured employee where practical and possible
  - identify any primary/secondary causes
  - identify any primary/secondary unsafe actions
  - identify any primary/secondary hazardous conditions.
3. Investigations must be completed within 24 hours of the injury/illness/incident/property damage or request.

# Resource Sheet 7: Sample Injury/Illness/Incident Investigation Procedure (*cont'd*)

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TRAINING

FORMS

REFERENCE MATERIALS

# Resource Sheet 8: Sample Injury/Illness/Incident Investigation Report

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## INVESTIGATION REPORT

<p>(check all that apply)</p> <p><input type="checkbox"/> INJURY   <input type="checkbox"/> ILLNESS   <input type="checkbox"/> INCIDENT   <input type="checkbox"/> PROPERTY DAMAGE</p>
Date and time investigation began:
Was there anything unusual about the employee's assigned task that could have contributed to the injury/illness/incident/property damage?
Were established rules, regulations and procedures being followed, personal protective equipment worn?
What could be done to prevent a similar injury/illness/incident/property damage from occurring?
What corrective action has already been completed?
What corrective action is planned?

Corrective action complete?  yes    no

Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewed by (Dept. Head): \_\_\_\_\_ Date: \_\_\_\_\_

Approved by (Gen. Mgr): \_\_\_\_\_ Date: \_\_\_\_\_

# Resource Sheet 9:

## HAZARD RECOGNITION CHECKLIST: WORKPLACE INSPECTION

- On the checklist below, check off all the hazards or potential hazards present at your work site
- Add any identified hazards specific to your work site to the list
- Add any identified hazards to the “Hazard Assessment and Control Form”

ITEM	YES	N/A	NO
Is lighting sufficient?			
Is the temperature satisfactory?			
Is ventilation satisfactory?			
Is furniture & equipment acceptable from an ergonomic perspective?			
Are items stored appropriately?			
Are walkways clear?			
Are doors, exits and aisles clear of obstructions?			
Are persons observing “No Smoking” restrictions?			
Are MSD Sheets readily available, current and complete?			
Is required PPE being used appropriately?			
Is the use of safe lifting techniques evident?			
Are exit signs clearly visible and illuminated?			
Are chemicals / flammables stored appropriately?			
Are there any slip / trip hazards present?			
Are potential slip and fall hazards quickly cleaned up?			
Are all ladders in good condition?			
Are tools and equipment in good condition?			
Are appropriate equipment guards in place?			
Are electrical power cords in good condition?			
Is loose clothing, jewellery, ID badges secure?			



# Resource Sheet 10: The SCIP HAZARD ASSESSMENT TOOL

**How to use this tool:**

- Transfer hazard(s) from Hazard Inspection Checklist
- Determine Frequency (column A) and Severity (column B)
- Calculate Risk Factor (Frequency X Severity)
- Rank Hazards by Risk Factor: highest to lowest
- Determine Controls, Responsibility and Status

FREQUENCY	
1	Very Rare (yearly or less)
2	Rare (few times a year)
3	Unusual (once per month)
4	Occasional (once per week)
5	Frequent (daily)

SEVERITY	
1	No consequence (injury)
2	Minor injury or illness
3	Moderate injury or illness
4	Serious injury or illness
5	Fatality or permanent disability

Identified Hazard or Unsafe Work Activity	Frequency (A)	Severity (B)	Risk Factor (A X B)	Controls Required	Responsibility and Date Assigned	Status

# Resource Sheet 11: WHMIS

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## What is WHMIS?

WHMIS is a Canada-wide system designed to give employers and workers information about hazardous materials used in the workplace. Under WHMIS, there are three ways in which information on hazardous materials is to be provided:

1. labels on the containers of hazardous materials,
2. Materials Safety Data Sheets (MSDS) to supplement the label with detailed hazard and precautionary information, and
3. worker education programs.

The supplier of the hazardous material provides the labels and materials safety data sheets to the employer. The employer passes the information on to the worker and provides education programs.

## What does WHMIS stand for?

Workplace Hazardous Materials Information System.

## Why is WHMIS important?

The purpose of WHMIS is to give all working Canadians a uniform and appropriate quantity and quality of information about hazardous materials used in the workplace.

Many Canadian workers are exposed to hazardous materials on the job. In the past, information about these materials has often been incomplete, inconsistent or not available at all. This means that employers and workers were often unaware of the hazards of a material in the workplace, and of the necessary handling precautions. This lack of awareness can cause serious occupational illness and injury.

## To what workplaces does WHMIS apply?

In Ontario, WHMIS applies to all workplaces covered by the *Occupational Health and Safety Act*, and to all federal government workplaces.

## Who enforces the WHMIS legislation?

In Ontario, WHMIS legislation is enforced by the Ministry of Labour inspectors, except in federal government workplaces, where Labour Canada inspectors enforce the legislation.

# Resource Sheet 11: WHMIS (cont'd)

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## What do I need to do in my workplace to comply with WHMIS legislation?

### Labeling

1. Ensure that materials that you receive at your location are properly labeled.
2. Apply workplace labels to all products that are transferred from a supplier container to another container.

Workplace labels must contain:

- product Identifier
- precautionary Measures
- reference to Material Safety Data Sheet (MSDS) for more information.

### Material Safety Data Sheets (MSDS)

1. Obtain current (within 3 years) Material Safety Data Sheets for each product used at your location. Refer to the WHMIS Regulation, Ontario Regulation 644/88 or *WHMIS: A Guide to Legislation* for detailed requirements of a Material Safety Data Sheet.

### Training

1. Provide “generic” WHMIS training to all workers who are “exposed or likely to be exposed” to a controlled product (Refer to the WHMIS Regulation, Ontario Regulation 644/88 or *WHMIS: A Guide to Legislation* for definition of controlled product)
2. Provide workplace specific WHMIS training.
3. Review workplace specific WHMIS training at least annually or more often if conditions at the workplace change, or new information on a controlled product becomes available.
4. WHMIS review to take place in consultation with the Joint Health and Safety Committee/representative.

**Contact your Health and Safety Association for more information on WHMIS or for WHMIS training.**

The above information was extracted from *WHMIS: A Guide to the Legislation*, produced by the Ministry of Labour.

## Resource Sheet 12:

# Emergency Planning Checklist

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## Leadership and Administration

- 1. Have you appointed someone to develop and administer an emergency response plan?

## Emergency Plan

- 2. Is there a written plan for all probable emergencies?
- 3. Does the plan include?
  - evacuation of people to predetermined safe areas
  - written instructions for all sites on fire, work shutdown, etc.
  - control of hazardous materials
  - removal of vital equipment, materials and records
  - a designated control area
  - a search and rescue plan
  - an all clear and re-entry procedure
  - procedures to alert everyone about an emergency and what they do
- 4. Do you carry out practice drills?
- 5. Do you have fire-fighting procedures?
- 6. Have you informed the fire department about hazardous materials?

## First Aid

- 7. Are the appropriate employees trained in first aid?
- 8. Are the required first aid facilities and equipment readily available and clearly marked?

## Emergency Lighting and Power

- 9. Do you have emergency lighting and power (if necessary)? Are emergency exits marked?
- 10. Have you tested emergency lighting and power systems?

## Source of Energy Controls

- 11. Is there a colour code system for master controls and shut-offs?
- 12. Do all the appropriate people know about this system?
- 13. Is the system checked regularly to ensure that it works?

## Protective and Rescue Equipment

- 14. Is fire extinguishing and fighting equipment checked and adequate?
- 15. Are hazardous materials identified and their location known?
- 16. Is emergency equipment available and regularly maintained (e.g. stretcher, respirators)?

## Emergency Team

- 17. Have you identified an emergency response team?
- 18. Has the emergency response team been adequately trained?

## Communication

- 19. Have you identified a method to communicate during an emergency?

# Resource Sheet 13:

## Sample Fire Emergency Response Plan

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<b>Title: Fire Emergency Response Plan</b>	<b>Date of Issue:</b>
<b>Approved by:</b>	<b>Review / Revise Date:</b>
<b>Location:</b>	

### PURPOSE

To identify the steps for responding to a fire emergency.

### ROLES & RESPONSIBILITIES

All employees are responsible for following the fire emergency response plan.

### PROCEDURE

#### A. Extinguishment/Control/Confinement

In the event a small fire is determined to be extinguishable, make sure events unfold in the following sequence:

1. Activate the fire alarm system BEFORE attempting to fight the fire.
2. Call 9-1-1.
3. Attempt to extinguish the fire if it is safe to do so. Keep yourself between the fire and the nearest exit door.

#### B. Evacuation Procedure

In the event a small fire cannot be extinguished with the use of a portable fire extinguisher or the smoke presents a hazard to the operation, evacuate the building in the following way:

1. Close the door to the area to confine and contain the fire.
2. Evacuate all personnel to the parking lot area (designated meeting place), away from any emergency vehicles.
3. Instruct all employees to report to their supervisor in the parking lot (designated meeting place).
4. Supervisor to report headcount and any missing persons to the Emergency Co-ordinator.
5. Emergency Coordinator to report missing people to the Fire Department.
6. General Manager to act as Emergency Co-ordinator, assign the responsibility in his/her absence, and notify all personnel of replacement.

# **Resource Sheet 13: Sample Fire Emergency Response Plan (cont.)**

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**TRAINING**

**FORMS**

**REFERENCE MATERIALS**

# Resource Sheet 13: Sample Fire Emergency Response Plan (cont'd)

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The actions to be taken by occupants in emergency situations are posted in each department and read as follows:

## REMAIN CALM

This building is equipped with a single stage fire alarm system. The fire alarm system is to be activated to alert the other occupants of an emergency and to put into operation the approved fire emergency response plan. The fire department is to be notified by telephoning 9-1-1, giving the correct address and the exact location of the fire.

# IN CASE OF FIRE

## UPON DISCOVERY OF FIRE

- Leave fire area immediately
- Call Fire Department 9-1-1
- Sound fire alarm
- Close doors
- Leave building via nearest exit and proceed to designated meeting place

## *UPON HEARING FIRE ALARM*

- Leave building via nearest exit
- Close doors behind you and proceed to designated meeting place

## CAUTION

**If you encounter smoke in stairway,  
use alternate exit.**

# REMAIN CALM



# Resource Sheet 15: Sample First Aid Kit Inspection Record

YOUR COMPANY NAME Table of contents for First Aid Kit #3 Sub-Section 10 16 to 199 employees		Signature								
<p>6. Employers shall inspect first aid boxes and their contents at not less than quarterly/yearly intervals and shall mark the inspection card for each box with the date of the most recent inspection and the signature of the person making the inspection.</p> <p>10 (1). Every employer employing more than 15 and less than 200 workers in any one shift at a place of employment shall provide and maintain at the place of employment one stretcher, two blankets and a first-aid station with a first-aid box containing as a minimum:</p> <p>Location: _____</p>										
		Contents	#							
A current edition of a First Aid Manual (St. Johns)	1 each									
1 card of safety pins	24 each									
Basin – plastic/stainless steel	1 each									
Adhesive dressings	48 each									
Adhesive tape 1” wide	2 rolls									
Gauze bandages 1” wide	12 rolls									
Sterile gauze pads (3” square)	48 each									
Gauze bandage 2” wide	8 rolls									
Gauze bandage 4” wide	8 rolls									
Sterile surgical pads (pressure dressing)	6 each									
Triangular bandages	12 each									
Set assorted splints	1 set									
Splint padding	2 rolls									
CPR Mask	1 each									
Gloves	1 pair									
Poster (Form 82)	1									
Valid First Aid Certificates										
Inspection Tag										
Blankets	2 each									
Stretcher	1 each									

