



## 13.0 WORKPLACE HAZARDOUS MATERIALS INFORMATION SYSTEM POLICY (WHMIS 2015)

### 13.1 Purpose

The purpose of this procedure is to outline the Workplace Hazardous Materials Information System (WHMIS), which is a communication system on hazardous materials in the workplace from the suppliers of hazardous products to employers and to workers through the three key elements of:

- a. WHMIS Labeling (Pictograms),
- b. Safety Data Sheets (SDS), and
- c. WHMIS Worker Training and Education.

WHMIS legislation exists at both the federal and provincial levels. The goal of WHMIS is to reduce injury and disease by communicating specific health and safety information about hazardous products so that the information can be used to reduce exposure to hazardous materials.

### 13.2 Globally Harmonized System of Classification and Labelling of Chemicals (GHS)

Canada's WHMIS standard came into effect in 1988. Since then, our trade with countries that don't have systems like WHMIS has increased, and new products (and hazards) have been introduced. There are differences in how other countries classify chemicals, develop Safety Data Sheets (SDSs), and organize their labels. This can cause confusion and make it difficult to enforce and to comply with the WHMIS standard. Ultimately, this confusion threatens the health and safety of workers both here and abroad.

As a result, Canada has now aligned the Workplace Hazardous Materials Information System (WHMIS) with the Globally Harmonized System of Classification and Labelling of Chemicals (GHS). The original WHMIS, developed in 1988, is not being replaced. Rather, it has been updated to reflect elements of the Globally Harmonized System. The Globally Harmonized System will now be legislated worldwide. Once updated, the system will continue to be called WHMIS in Canada (WHMIS 2015).

Once the 2015 WHMIS legislation is in-force, there will be approximately a ***three-year transition period*** during which suppliers can provide safety data sheets and labels that comply with either system.

### 13.3 Labeling: Supplier Labels (2015)

All hazardous products that will be sold or used on site will contain the following **six pieces of information** on the supplier label:

#### 1. ***Product Identifier***

Often the chemical name of a product or the trade name, common name, code name, or code number.



## 21.0 EMERGENCY RESPONSE PLAN POLICY

### 21.1 Purpose

Emergencies and disasters can occur at any time without warning. An emergency response plan must be established and implemented at “Insert Company Name Here” in case such emergencies arise.

The following are some examples of emergency situations that can occur at “Insert Company Name Here”:

- Fire
- Explosion
- Accidental Release of Toxic Substances
- Major Structural Failure
- Major Chemical Spill
- Earthquake
- Floods
- Serious Injury

### 21.2 Policy

“Insert Company Name Here”:

- a. Develop plans in collaboration with neighboring businesses and building owners to avoid confusion or gridlock.
- b. Locate, copy, and post building and site maps.
- c. Ensure that exits are clearly marked.
- d. Practice evacuation procedures once per year.

### 21.3 Emergency Response Coordinator (ERC)

The emergency response coordinators (ERC) are the people who serve as the main contact people for the company in an emergency. The ERC is responsible for making decisions and following the steps described in this emergency response plan. In the event of an emergency occurring within or affecting the worksite, the primary contact will serve as the ERC. If the primary contact is unable to fulfill the ERC duties, the secondary contact will take on this role.

### 21.5 Potential Emergencies

The following potential emergencies have been identified in hazard assessments:

1. Fire
2. Major Chemical Spill
3. Explosion
4. Earthquake
5. Accidental Release of Toxic Substances
6. Floods
7. Major Structural Failure
8. Serious Injury

### 21.6 Muster Station (Assembly Point)

1. In case of emergency evacuation, all employees will safely exit the building(s) through the nearest exit point and assemble at the nearest muster station.
2. Muster stations have been appointed for each “Insert Company Name Here” facility.



1. DO NOT try and physically stop or hold someone (i.e. robber)
2. After the robber has left, lock the door and call the police (911) and report to your Supervisor immediately.

### **13.9 Unwelcomed Members of the Public**

If **unwelcomed** members such as loiterers (i.e. youth, gangs, etc.) are seen entering the building or located in front of the building premises, you should:

1. Must never attempt to deal with these situations alone;
2. Stay a safe distance away from the individual(s);
3. Report your concerns to your Supervisor immediately or ask the police to come to the building.

### **13.10 Risk Assessments**

1. "Insert Company Name Here" will conduct a risk assessment of the work environment to identify any issues related to potential violence that may impact the operation and will institute measures to control any identified risks to employee safety.
2. The risk assessment may include review of records and reports i.e., security reports, employee incident reports, staff perception surveys, health and safety inspection reports, first aid records or other related records.
3. Specific areas that may contribute to risk of violence may include: contact with public, exchange of money, receiving doors, working alone or at night etc. Research may also include a review of similar workplaces with respect to their history of violence. This information will be provided to the Joint Health & Safety Committee.

### **13.11 Mutual Respect**

1. "Insert Company Name Here" recognizes that to achieve its vision, the environment it provides must be one that demonstrates respect, dignity, equity, and safety for all "Insert Company Name Here" employees.
2. "Insert Company Name Here" promotes responsibility, respect, civility, and professional excellence in a safe work environment. Any form of discrimination or harassment is prohibited and "Insert Company Name Here" considers all complaints seriously.



## 11.0 DISCIPLINARY ACTION POLICY

### 11.1 Purpose

“Insert Company Name Here” is committed to ensuring the health, safety and well-being of all their employees, contractors, clients and visitors and visitors to their sites.

“Insert Company Name Here” intends to provide a safe workplace for all its employees by:

- a. Developing a comprehensive occupational health, safety and welfare program;
- b. Assigning responsibility for compliance with all aspects of that program;
- c. Continuously identifying hazards in the workplace and either eliminating them or reducing the risk associated with them;
- d. Providing appropriate training, instruction and education;
- e. Enforcing this policy equally among employees, contractors, clients and visitors and visitors.

### 11.2 Responsibilities

“Insert Company Name Here” will ensure that company employees receive adequate direction, instruction and training in carrying out their duties in a safe and effective manner. Employees will be held responsible for following company rules and safety procedures and taking direction from their supervisor.

### 11.3 Policy

1. All “Insert Company Name Here” employees must follow all company health and safety rules, safe work procedures and safety policies at all times. No exceptions.
2. Failure to follow company health and safety rules, safe work procedures and safety policies and any violation of these rules, procedures and policies may result in the following disciplinary action:
  - a. **First Offence:** Will result in a verbal warning which still must be logged in the employee’s personal file.
  - b. **Second Offence:** Will result in a written warning from the Supervisor. This letter (written warning) will be put into your employment file.
  - c. **Third Offence:** Will result in suspension (without pay) from work. The amount of “days suspended” from work will depend on the nature of the safety infraction.
  - d. **Fourth Offence:** Will result in immediate termination from employment.



## 12.0 BULLYING AND HARASSMENT POLICY

### 12.1 Purpose

The purpose of this policy is to communicate “Insert Company Name Here” approach to addressing workplace bullying and harassment and to establish a “**zero tolerance**” policy for such behavior. All “Insert Company Name Here” employees will be treated in a fair and respectful manner. Bullying and harassment can include verbal aggression or yelling, humiliating initiation practices or hazing, spreading malicious rumors and/or calling someone derogatory names.

### 12.2 Definition

1. “**Bullying and Harassment**” behaviour **includes** any inappropriate conduct or comment by a person towards a worker that the person knew or reasonably ought to have known would cause that worker to be humiliated or intimidated, but excludes any reasonable action taken by an employer or supervisor relating to the management and direction of workers or the place of employment.
2. “**Bullying and Harassment**” behavior **does not include**:
  - a. Expressing differences in opinion.
  - b. Offering constructive feedback, guidance or advice about work-related behavior.
  - c. Reasonable action taken by the Employer or Supervisor relating to the management and direction of workers or the place of employment (e.g. Managing a worker’s performance, taking reasonable disciplinary actions, assigning work).

### 12.3 Responsibilities

1. “Insert Company Name Here” has a duty to ensure the health and safety of its workers, and as a result, “Insert Company Name Here” will take all reasonable steps to prevent where possible, or otherwise minimize, workplace bullying and harassment.
2. “Insert Company Name Here” *Employees* have the duty to take reasonable care to protect the health and safety of themselves and other persons, and as a result, all “Insert Company Name Here” employees will take all reasonable steps to prevent where possible, or otherwise minimize, workplace bullying and harassment.
3. “Insert Company Name Here” *Supervisors* have the duty to take all reasonable steps to ensure the health and safety of “Insert Company Name Here” employees under their supervision, and as a result, all supervisors will take all reasonable steps to prevent where possible, or otherwise minimize, workplace bullying and harassment.



**“Controls”** are practices, procedures and standards, which a company and ultimately a worker use to prevent incidents from occurring or to limit the amount of harm or damage that occurs when an incident happens.

### **3.5 Risk Control**

There are 3 steps involved in risk control:

1. Recognize the Hazard – identify hazards with a particular job or worksite.
2. Evaluate the hazard or situation –what controls could eliminate or reduce the risk?
3. Control the Hazard – plan, implement and evaluate control measures that provide the greatest protection to workers.

### **3.6 Types of Controls**

There are four types of controls that are commonly used to minimize risk:

1. Eliminate the hazard.
2. “Engineering” controls provide the highest level of hazard control and are considered the best methods because it involves the removal of the hazard through the use or substitution of engineered machinery or equipment. The installation of seat belts on mobile equipment is an example of this.
3. “Administrative” controls include safe work procedures, processes, methods or instructions that are developed and implemented to ensure worker safety.
4. “Personal Protective Equipment” is the most common and accessible kind of control and involves direct protection of the worker. It is the last line of defense in the hierarchy of controls.

### **3.7 Risk Rating and Ranking**

Hazards identified at the worksite must be evaluated as to the degree of risk associated with the unsafe work condition or practice. ABC Company Ltd. will utilize the risk ranking method of “A, B, C” where:

- a. “A” identifies an imminent hazard that requires corrective action immediately.
- b. “B” identifies a hazardous condition or practice, which is not imminently dangerous but requires corrective action without delay.
- c. “C” identifies a low hazard situation or practice that requires documenting and tracking as to corrective action.



**NEW AND YOUNG EMPLOYEE SAFETY ORIENTATION FORM**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date: \_\_\_\_\_

Position as hired: \_\_\_\_\_

Do you have First Aid Certification? Yes  No  If **yes**, what level: \_\_\_\_\_

Do you or are you required to wear Prescription Glasses or Contact Lenses?  
Yes  No  If **yes**, what kind: \_\_\_\_\_

Do you have any Allergies? Yes  No  If **yes**, what: \_\_\_\_\_  
(Please include any special medication you must take for your allergies)

Do you take any Special Medications? Yes  No  If **yes**, what: \_\_\_\_\_  
(Health condition, where medication is prescribed by your doctor i.e. heart condition) – the answer to this question is 'optional'

Do you have any physical/health related disablement(s) that may be aggravated, and/or that may prevent you from performing certain job tasks or duties while employed with "Insert Company Name Here"?  
Yes  No  If **yes**, what: \_\_\_\_\_

Please **initial inside each check box** for each applicable safety policy/procedure discussed during the safety orientation. By initialing each box, you verify that you understand and comprehend "Insert Company Name Here" 's Occupational Health and Safety policies and safe work procedures.

1. Health & Safety Policy	2. Housekeeping
3. Safety Representative	4. Tools Machinery & Equipment
5. Supervisor Contact Information	6. Right to Refuse Unsafe Work
7. Emergency Contact Information	8. Right to Participate
9. WHMIS	10. Right to Know
11. Safety Data Sheets	12. Safe Sharps Disposal
13. First Aid Procedures	14. No Smoking
15. Eye Wash Stations	16. Drug & Alcohol Use
17. Emergency Evacuation Procedures	18. Workplace Violence
19. Personal Protective Equipment (PPE)	20. Working Alone
21. Respiratory Protection	22. Horseplay
23. Hearing Protection	24. MSI's
25. Hazard Reporting	26. Back Safety
27. Harassment and Bullying	28. Yellow & Red Caution Tape
29. Warning Signs	30. Ladder Safety

I, \_\_\_\_\_, understand and will adhere to all applicable "Insert Company Name Here" safety policies and safe work procedures as outlined and discussed in this new and young employee safety orientation session.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Manager and/or Supervisor (please print name and sign): \_\_\_\_\_



## 14.0 PERSONAL PROTECTIVE EQUIPMENT (PPE) POLICY

### 14.1 Purpose

This policy is designed to outline the use and maintenance of personal protective equipment (PPE) to protect employees from exposure to workplace hazards and the risk of occupational injury and/or disease. Personal protective equipment (PPE) is not a substitute for more effective control methods and its use will be considered only when other means of protection against hazards are not adequate or feasible.

PPE will be used in conjunction with other controls unless no other means of hazard control exist.

### 14.2 Definitions

**“A.N.S.I.”** American National Standards Institute

**“C.S.A.”** Canadian Standards Association

**“N.I.O.S.H.”** National Institute for Occupational Safety and Health

**“Personal Protective Equipment”** Any equipment or clothing worn that protects the employee from work related injuries, illnesses and fatalities.

### 14.3 Policy

1. It is the policy of “Insert Company Name Here” to provide and maintain safe and healthful working conditions and to follow operating practices that will safeguard all employees and result in efficient operations. It is “Insert Company Name Here” policy to have all workers use the proper PPE when and where required.
2. Employees, guests, and visitor workers will wear CSA safety boots, long trousers, sleeved shirts, CSA or ANSI Standard hard hats, and any other specialty PPE required for the “Insert Company Name Here” job sites. “Insert Company Name Here” will provide all required PPE for employees, either directly or by providing an allowance for specific items.
3. “Insert Company Name Here” will ensure that a worker who wears PPE is adequately instructed in the correct use, limitations and assigned maintenance duties for the equipment to be used.
4. PPE used by “Insert Company Name Here” will be within the requirements of the OHSR regulations. PPE must comply with CSA or ANSI standards. Only “Insert Company Name Here”-approved PPE shall be worn.
5. All PPE will be maintained in accordance with manufacturer’s instructions and requirements. No piece of PPE will be modified or changed contrary to manufacturer’s instructions or specifications.



## 18.0 NEW AND YOUNG EMPLOYEE ORIENTATIONS POLICY

### 18.1 Instruction and Supervision: Purpose

1. Young and new workers need special attention because they are at more risk of injury than their older or more experienced counterparts.
2. It is “Insert Company Name Here” responsibility to ensure that every worker receives adequate education and training (instruction) to do their work safely.
3. All employees must strictly adhere to the contents and provisions of “Insert Company Name Here” Occupational Health & Safety Program, Occupational Health and Safety Regulation and Workers Compensation Act and all other applicable regulations.

### 18.2 Policy

1. “Insert Company Name Here” shall provide training and orientation to all new and young workers (a worker 25 years old, or younger is considered a young worker):
  - a. Before they start work; or
  - b. When they come from another work location; or
  - c. When there’s been a change in the workplace that could affect their wellbeing.
2. All “Insert Company Name Here” employees, including new and young employees, will be given a safety orientation by their Supervisor immediately upon hiring.
3. “Insert Company Name Here” will make sure the new or young worker understands the training by asking questions about specific procedures or general requirements and by constant observation.
4. All new and young worker education, training and orientations must be recorded on the **“Insert Company Name Here” Training Record Form and the New & Young Worker Orientation Form.**
5. All education, training and orientation records shall be maintained for each worker, listing topics covered and date of education or training

### 18.3 Purpose

The purpose of this policy is to ensure that “Insert Company Name Here” has established procedures for reporting potential or actual hazards and/or unsafe conditions and behaviors throughout the work site.

### 18.5 Definitions

**“Hazard”** A thing or condition that may expose a person to a risk of injury or occupational disease.

**“IDLH”** Immediately Dangerous to Life or Health.



## 9.0 RECORDS AND STATISTICS POLICY

### 9.1 Purpose

The purpose of this policy is to ensure that ABC Company Ltd. maintains all records and statistics to ensure the Occupational Health and Safety Program is maintained and measured on a constant basis.

The table below outlines some ways ABC Company Ltd. can use data from incidents for statistical analysis:

Type of Incidents	Types of Data	Statistical Analysis
<ul style="list-style-type: none"><li>• Near Misses</li><li>• First Aid Only</li><li>• Health Care Only</li><li>• Time-Loss Injury</li></ul>	<ul style="list-style-type: none"><li>• Number of Incidents</li><li>• Frequency of Incidents</li><li>• Number of Injuries</li><li>• Types of Injuries</li><li>• Number of Days Lost</li></ul>	<ul style="list-style-type: none"><li>• Compare Monthly and Annual Results</li><li>• Compare Type of Work Activity</li><li>• Compare Shifts</li><li>• Compare Worker Experience and Training</li></ul>

### 9.2 Policy

1. The management team at ABC Company Ltd. will maintain records and statistics concerning health and safety for the company.
2. The major reason for maintaining records and statistics is to collect data for detailed analysis of accidents, incidents, and illnesses in order to eliminate causes by finding specific problem areas and taking appropriate follow-up action.
3. Records and statistics will be used as a means to measure the success of the ABC Company Ltd. Occupational Health and Safety program, as well as to provide feedback to all level of departments.
4. -----
5. -----
6. -----



## 11.0 NO SMOKING POLICY

### 11.1 Purpose

ABC Company Ltd.' is committed to providing a healthy, comfortable and productive work environment for our employees.

This policy is designed to prevent employee exposure to environmental tobacco and e-cigarette smoke/vapor and to provide a safe and healthy work environment by means of controlling and/or eliminating second-hand tobacco smoke.

### 11.2 Policy

1. Smoking of tobacco containing cigarettes is prohibited inside all ABC Company Ltd. company buildings, parts of buildings and inside company vehicles.
2. Smoking of e-cigarettes and/or vapor cigarettes is prohibited inside all ABC Company Ltd. company buildings, parts of buildings and inside company vehicles.
3. All indoor “No-Smoking” signs must be adhered to at all times, including various outdoor locations around the ABC Company Ltd. site(s).
4. All employees, contractors and visitors must comply with this policy.

### 11.3 Designated Smoking Areas

1. Smoking will only occur in the workplace at outdoor designated smoking areas located around various company sites.
2. The following criteria will be followed in regards to determining safe outdoor designated smoking areas:

**Smoking will be restricted to a safe outdoor location that is a minimum of ----- from a doorway, window or air intake of an indoor place.**

3. Ensure cigarette butts are put out (extinguished) in a safe manner and discarded of in the ashtrays provided in each smoking area.

### 11.3 E-cigarettes



## 18.0 OCCUPATIONAL FIRST AID POLICY

### 18.1 Purpose

The purpose of this policy and procedure is to provide employees with prompt, easily accessible, and appropriate first aid treatment and to keep a record of each treatment. All of the following shall be required at ABC Company Ltd.' to effectively provide first aid treatment:

1. Occupational First Aid Attendant(s) with appropriate level of training.
2. First Aid kits with appropriate types and quantities of supplies.
3. First Aid record keeping system.
4. Appropriate means of transporting an injured worker to a first aid facility or a hospital.
5. Effective means of communication between First Aid Attendant(s) and workers who may need their help.

### 18.2 Requirements for Provision of First Aid

1. First aid equipment, supplies, and services shall be readily accessible to employees during working hours and to visitors, customers and contractors through ABC Company Ltd. first aid services.
2. Signs clearly indicating the location of and how to call for first aid shall be:
  - a. Posted conspicuously throughout the workplace, and
  - b. Effectively communicated and educated to all ABC Company Ltd. employees.

### 18.3 Reporting Injuries

1. All employees covered by workplace injury and illness insurance are required to report all work related injuries or disabling occupational disease immediately to their Supervisor and/or First Aid Attendant.
2. All employees who are injured on the job must report all injuries on the day of the incident regardless of the severity, unless symptoms of injury or illness is delayed due to mechanism and cause of injury.

### 18.4 Summoning First Aid in an Emergency

1. Ensure accident scene is safe to avoid further danger to injured person or self.
2. Do not move the injured person unless there is a high risk of further injury or death. Keep calm and do not leave the injured unattended.
3. First aid can be summoned by contacting the nearest Supervisor or self where the supervisor and/or self will summon the First Aid Attendant(s).



**CREW TOOL BOX TALK FORM**

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

**Topics Covered (Please Print Clearly):**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Was a safety video(s) used for the tool box talk?  Yes  No

Name of Video(s): \_\_\_\_\_ Length (min): \_\_\_\_\_

Were any handout(s) given to the employees during this tool box talk?  Yes  No

Handout(s): \_\_\_\_\_

**\* Please attach any handouts or any other material used in the toolbox talk with this form \***

**Employees Present at Crew Toolbox Talk:**

Print Name:	Signature:	Print Name:	Signature:

Crew Talk Conducted By: \_\_\_\_\_ Signature: \_\_\_\_\_



## 15.0 COVID 19 SAFETY POLICY

### 15.1 Policy

1. Any “Insert Company Name Here” employee who is ill and/or showing flu like symptoms will remain at home and not come into work as there is a high risk of infecting other. It is recommended to also contact their local health care provider immediately.
2. If an employee falls into one of the categories below, the employee will follow the advice from the Canada Centre of Disease Control and Public Health Authorities across Canada:
  - a. **If you have COVID-19.** If you are sick with COVID-19, you need to stay home. Contact your local health care provider to get advice immediately.
  - b. **If you have traveled internationally.** The Public Health Agency of Canada advises that if you have travelled to Hubei Province, China, Iran, or Italy, you are asked to self-isolate for 14 days after the day you left the area. If you are returning from an affected area, stay home and limit contact with others for a total of 14 days. Monitor yourself daily for symptoms like fever, cough or difficulty breathing for these 14 days. If you develop symptoms speak with your health care provider to discuss any need for testing and follow up.

The Canada Centre for Disease Control is asking people arriving anywhere from outside of Canada to self-isolate, and monitor for symptoms for 14 days after arrival in Canada. People arriving from Hubei Province, Italy or Iran are asked to take extra measures to limit their contact.

If you have travelled outside Canada, monitor yourself and your family closely for symptoms like fever, cough, and difficulty breathing for a total of 14 days from your return. If any symptoms arise, limit contact with others and speak with your health care provider.

- c. **If you have been in contact with a person infected with COVID-19.** If you have had close contact with an infected person you are at high risk of exposure. The Public Health Agency of Canada recommends that in these circumstances, you voluntarily home quarantine (self-isolation), with mandatory quarantine depending on circumstances, and practice hand hygiene, respiratory etiquette, cleaning, and self-monitoring.
3. Employees are to be advised to not mask any symptoms of exposure even if they are mild symptoms or have had to take simple medications such as Tylenol. Workers showing any COVID-19 symptoms are not to come into work under any circumstances.

If an employee is confirmed to have COVID-19, “Insert Company Name Here” will inform the other employees of their possible exposure to COVID-19, without disclosing names or details of the



### **15.13 Contact with a Confirmed Case of COVID-19**

1. If a confirmed case is identified in your workplace, the designated public health services will provide advice to:
  - a. Any employee that has been in close face-to-face or touching contact
  - b. Anyone talking with or being coughed on for any length of time while the employee was symptomatic
  - c. Anyone who has cleaned up any bodily fluids
  - d. Close friendship groups or workgroups
  - e. Any employee living in the same household as a confirmed case
2. Contacts are not considered cases and if they are feeling well, they are very unlikely to have spread the infection to others:
  - a. Those who have had close contact will be asked to self-isolate at home for 14 days from the last time they had contact with the confirmed case and follow the advice they will be actively followed up by the designated public health services
  - b. If they develop new symptoms or their existing symptoms worsen within their 14-day observation period they should call the designated public health services for reassessment
  - c. If they become unwell with cough, fever or shortness of breath they will be tested for COVID-19
  - d. If they are unwell at any time within their 14-day observation period and they test positive for COVID-19 they will become a confirmed case and will be treated for the infection
  - e. Staff who have not had close contact with the original confirmed case do not need to take any precautions other than monitoring their health for flu-like symptoms and can continue to attend work.
3. A confirmed case of COVID-19 in the workplace will cause anxiety among co-workers and some may become stressed. Clear communication is important, directing workers to reliable sources of information about COVID-19. Managers should be supportive and understanding and as far as possible flexible on working arrangements.