



**6.** Is there a health and safety education and training program that includes:

- i. documented safety education and training records;  Yes  No  N/A
- ii. job-specific safety orientations (ex., lock/tag-out, ergonomics);  Yes  No  N/A
- iii. reassignment or transfer when workers change jobs or duties;  Yes  No  N/A
- iv. introductions to new equipment, processes, and procedures; and  Yes  No  N/A
- v. required personal protective equipment?  Yes  No  N/A

Notes:

**7.** Is there a functional OHS or Accident Prevention (AP) Committee that:

- i. has worker and employer representation as defined by legislation;  Yes  No  N/A
- ii. holds regularly scheduled meetings at intervals required by legislation;  Yes  No  N/A
- iii. produces meeting minutes and makes them available to all employees;  Yes  No  N/A
- iv. meets its defined mandate and responsibilities as required by legislation; and  Yes  No  N/A
- v. receives health and safety education and training specific to the committee's role?  Yes  No  N/A

Notes:

**8.** Do supervisors and the OHS or AP Committee:

- i. conduct regularly scheduled inspections, as outlined in a written policy that specifies frequency;  Yes  No  N/A
- ii. inspect all work areas of the organization;  Yes  No  N/A
- iii. document, post, and retain inspection reports for future reference;  Yes  No  N/A
- iv. identify unsafe work conditions; and  Yes  No  N/A
- v. receive a written response from the employer of corrective actions?  Yes  No  N/A

Notes:

**9.** Do incident investigation policies:

- i. state how to conduct investigations;  Yes  No  N/A
- ii. identify root causes;  Yes  No  N/A
- iii. identify corrective actions;  Yes  No  N/A
- iv. require documentation, and timely implementation of corrective actions; and  Yes  No  N/A
- v. require the OHS or AP Committee to review investigation reports?  Yes  No  N/A

Notes:

**10.** At your safety or toolbox meetings, do you:

- ii. include all workers and contractors (if on site);  Yes  No  N/A
- iii. hold them at regularly scheduled times;  Yes  No  N/A
- iv. document them; and  Yes  No  N/A
- v. maintain a record of the people who attend?  Yes  No  N/A

Notes:

**11.** Do you have a written Emergency Response Plan (ERP) specific to your worksite(s) that:

- i. is available to all workers;  Yes  No  N/A
- ii. identifies roles, and assigns duties;  Yes  No  N/A
- iii. lists training requirements specific to the ERP;  Yes  No  N/A
- iv. ensures First Aid equipment and supplies are available on site;  Yes  No  N/A
- v. identifies workers with valid First Aid certificates;  Yes  No  N/A
- vi. lists current emergency contacts; and  Yes  No  N/A
- vii. you review, test and update?  Yes  No  N/A

Notes:

**12.** Is there a written personal protective equipment (PPE) program that:

- i. addresses your known work environment risks;  Yes  No  N/A
- ii. you communicate to all workers and contractors;  Yes  No  N/A
- iii. documents your training on the use, care, and maintenance of PPE; and  Yes  No  N/A
- iv. specifies the basic PPE all workers and contractors must use?  Yes  No  N/A

Notes:

**13.** Is there a preventative maintenance program that:

- i. includes an inventory of equipment and tools that require monitoring, periodic checks, and maintenance;  Yes  No  N/A
- ii. meets manufacturer and regulatory standards;  Yes  No  N/A
- iii. includes inspection records; and  Yes  No  N/A
- iv. documents completion of corrective actions?  Yes  No  N/A

Notes:

**14.** Do you have safe work procedures that:

- i. you document;  Yes  No  N/A
- ii. you communicate and make available to workers;  Yes  No  N/A
- iii. recognize, evaluate, and control hazards (ex. job hazard, risk analysis, and hazard assessment);  Yes  No  N/A
- iv. communicate individual safety responsibility for assigned duties; and  Yes  No  N/A
- v. you review on a regular basis?  Yes  No  N/A

Notes:

**15.** Do you audit your health and safety program to evaluate its effectiveness and ensure that actions receive correction in a timely manner?  Yes  No  N/A

Notes:

**Unrated Question:** Answer required but not rated.

- 1. Do you participate in a third-party safety audit? (ex., Certificate of Recognition (COR), OHSAS 18001)  Yes  No  N/A

Notes:

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