

City of Winnipeg
Community Centres

City of Winnipeg Community Centres Safety Management System

This Safety Management System has been developed by 1Life Workplace in consultation with the General Council of Winnipeg Community Centres. This manual is applicable to all City of Winnipeg Community Centres.

“WORKER/S” REFERS TO EMPLOYEES & VOLUNTEERS

Note: There may be situations where your facilities and equipment may vary from other Community Centres. If this occurs, disregard those areas that do not apply.

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1.1: SAFETY & HEALTH POLICY STATEMENT

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons

Reference(s): Workplace Safety and Health Act, Section 4(1), (2), 4.1, 5, 7.4(5)(a), 7.4(5)(d).17.1(5)

WORKPLACE SAFETY AND HEALTH POLICY STATEMENT

The City of Winnipeg Community Centres is committed to providing a safe and healthy work environment for all workers.

THE COMMUNITY CENTRE supports, participates in and is dedicated to the research, education and promotion of safety and health, cooperates with regulatory agencies, and complies with applicable regulations to maintain a safe and healthy workplace.

Safety and the prevention of accidents in the workplace can be fully achieved through the total commitment of all personnel.

This Community Centre policy is premised on the following:

- workers have the right to a safe and healthy work and recreation environment;
- to work in a safe manner is a condition of employment;
- accidents or incidents resulting in loss or injury are preventable;
- it is possible to eliminate or safeguard operating conditions that may result in injury or accidents or damage to the environment;
- management is responsible and accountable for ensuring the safe work practices of its workers;
- workers are responsible and accountable for safely performing their duties;
- workers will be provided with appropriate training to enable them to work safely;
- accidents or incidents resulting in or having potential for loss or injury will be investigated to determine the cause(s);
- workers and management will work cooperatively to promptly resolve and improve safety and health conditions in the workplace;
- no task, no matter how important or urgent will be done unless it can be done safely

POLICY

Accordingly, Community Centres are committed to:

1. Take reasonable measures for the protection of workers, property, and the general public.
2. Promptly address environmental, safety and site security concerns.

3. Analyze accidents or incidents resulting in or having potential for loss or injury and take remedial actions promptly to prevent recurrence.
4. Require persons granted access to Community Centres property to comply with applicable Safety and Health policies, standards, and procedures.
5. Working with workers in a spirit of cooperation and consultation.

RESPONSIBILITY & AUTHORITY

Management

The Community Centre Boards have the responsibility and authority to implement this policy, including the development and approval of standards and procedures.

THE COMMUNITY CENTRE Boards are responsible for developing, introducing and monitoring policies, standards, procedures and guidelines aimed at preventing accidents and reducing their adverse effects.

Each Community Centre Board is responsible within their respective jurisdiction for taking those actions deemed necessary to ensure compliance with these policies, standards, procedures and guidelines and for the safe work performance of workers.

Each manager/supervisor must demonstrate commitment to this policy at all times, and ensure its compliance in all work places.

Workers

All workers of THE COMMUNITY CENTRE are responsible for performing their duties in a manner consistent with policies, rules and standards, and for taking measures to ensure their own safety and that of their fellow workers and customers.

Workers at all levels of the organization are empowered to stop operations that constitute a danger to themselves or co-workers. They are also responsible for participating in the correction of the situation and/or condition.

POLICY & PROCEDURE REVIEW

The General Council of Winnipeg Community Centres in consultation with the City of Winnipeg Community Centres will review the effectiveness of this policy and procedure every three years at a minimum.

(Update to reflect individual community centres)

Date

1.2: RESPONSIBILITIES FOR WORKPLACE SAFETY AND HEALTH

Scope: Applies to all Workers

Reference(s): Workplace Safety and Health Act, Section 4(1), (2), 4.1, 5, 7.4(5)(d)

This Safety Management System expresses the commitment of THE COMMUNITY CENTRE in ensuring the safety, health and wellbeing of workers any others who may be affected by our work.

OBJECTIVES

1. Ensure that responsibility and accountability for safety, health and the environment are clearly defined.
2. To acknowledge that:
 - a. Employers, Supervisors and Workers are legally responsible for safety and health in the workplace and must be held accountable.
 - b. The greater the authority, the greater the responsibilities for safety and health in the workplace.
 - c. Management and Workers should work cooperatively to identify, assess and resolve safety and health concerns inside the workplace by maintaining an effective Internal Responsibility System.

RESPONSIBILITIES (As far as is reasonably practicable to)

1. Employer
 - a. Provide and maintain a safe workplace, tools and equipment.
 - b. Ensure Supervisors are familiar with their legal duties for safe work and are competent because of their experience, training, or knowledge to ensure work is performed in a safe manner.
 - c. Ensure Workers have the education, training, and supervision to work safely.
 - d. Ensure that Workers are acquainted with all reasonably foreseeable hazards and understand the safe way of doing work.
 - e. Ensure Workers are provided with personal protective equipment and are familiar with its use, care and limitations.
 - f. Ensure an ongoing system to identify existing and potential hazards to Workers, equipment, property and the environment, including measures to reduce, eliminate or control those hazards.
 - g. Ensure procedures to report and investigate incidents, near misses and work refusals so that root causes are identified and controlled.
 - h. Ensure criteria for evaluating and selecting contracted Employers and self-employed persons, and strive to ensure that they meet safety requirements.
 - i. Ensure Emergency Response Plans are developed and communicated for credible emergencies, including the resources required to deal with those emergencies.
 - j. Ensure that a Workplace Safety and Health Representative is established and cooperate with them regarding the duties with which they are charged.
 - k. Ensure THE COMMUNITY CENTRE's Safety Management System is communicated and enforced.

2. Supervisors

- a. Take all precautions necessary to protect the safety and health of Workers under their supervision including:
- b. Taking disciplinary action to enforce compliance with all policies and procedures.
- c. Taking corrective action on any unsafe condition or stop work until safe conditions is restored.
- d. Assign definite safety and health responsibilities to individuals to meet the safety, health and environmental standards of the .Community Centre Safety Manual
- e. Ensure hazard and Incident Reports are completed, and root causes are identified and controlled. Keep records and copy them to the employer and the Workplace Safety and Health Representative.
- f. Investigate incidents, near misses and refusals to work in cooperation with management and/or the WSH Representative, and ensure that root causes are corrected.
- g. Ensure Community Centres Safe Work Practices & Safe Job Procedures are followed for all work undertaken by the by THE COMMUNITY CENTRE
- h. Inspect worksites regularly for hazards, and ensure those hazards are assessed, communicated and controlled.
- i. Ensure compliance with WHMIS, TDG, Environmental and all other regulatory requirements.
- j. Ensure regular Safety Talks are held with Workers and that records of meetings are maintained. Safety talks must:
 - i. include relevant safety and health topics
 - ii. be at least 15 – 30 minutes in length
 - iii. be held more frequently if work changes, if new hazards are introduced or if an incident occurs
- k. Ensure all Workers under their supervision:
 - i. Have received THE COMMUNITY CENTRE safety orientation, have been trained in applicable Safe Work Practices & Safe Job Procedures and understand THE COMMUNITY CENTRE rules and expectations for safety before beginning work.
 - ii. Use all PPE where supplied and required for their protection, such as hard hats, safety boots and glasses, face shields, fall protection, hearing protection and respiratory protection.
 - iii. Are advised of all known and reasonably foreseeable risks to safety and health in the area that they are performing work.
 - iv. Report ALL known and potential hazards, near misses and incidents.
- l. To model safe work and environmental practices, including wearing all PPE and maintaining an orderly work site (housekeeping).

3. Workers/Volunteers

- a. Take reasonable care to work safely, and in a way that protects the safety and health of all other Workers, property, equipment and the environment.

- b. Understand and comply with all Community Centre safety rules, policies and procedures. Workers are responsible to talk to their Supervisor if there is anything about which they are unclear. Workers should not undertake work if they are not sure of the safe way of doing that work.
 - c. Report to their Supervisors all hazards, near misses, unsafe conditions and incidents.
 - d. Follow all Safe Work Practices & Safe Job Procedures and wear all required Personal Protective Equipment (PPE).
 - e. Participate in safety and health activities such as inspections of their work area, equipment and tools.
 - f. Take care to properly maintain tools, equipment and PPE.
 - g. Consult and cooperate with the Workplace Safety and Health Representative.
4. WSH Representative
- a. Participate in workplace safety inspections and special assignments or activities.
 - b. Inspect the workplace and the work processes and procedures at the workplace at least once before each regularly scheduled meeting. Refer to inspection policies and procedures.
 - c. Take a leadership role in promoting safety and health in the workplace.
 - d. The receipt, consideration, and disposition of concerns and complaints respecting the safety and health of Workers and/or visitors.
 - e. Participate in the identification of risks to safety and health arising from, or in connection with activities undertaken by THE COMMUNITY CENTRE.
 - f. May be called upon to assist Management in the assessment of new projects, equipment or processes prior to being introduced into THE COMMUNITY CENTRE operations, and to assist with adequate and effective hazard identification and controls.
 - g. Establish an effective means of communication with all Workers about safety and health information and issues.
 - h. Cooperate with any Safety and Health Officer who is exercising his/her duties under the Workplace Safety and Health Act.
 - i. Maintain records in connection with the receipt and disposition of concerns, complaints and all matters relating to the duties of the Representative.
 - j. Participate in work refusals and investigate incidents.
5. Contracted Employers/ Self-employed Persons (i.e for projects where no more than one contractor is involved).
- As far as reasonably practicable to:
- a. Take reasonable care to work safely, and in a way that protects the safety and health of all other workers, property, equipment and the environment.
 - b. Report all hazards, near misses, unsafe conditions and incidents to your supervisor and designated representative.
 - c. Understand and comply with all safety rules, policies and procedures. Contracted Employers/ Self-employed Persons are responsible to talk to their supervisor or a representative of THE COMMUNITY CENTRE if there is anything about which they are unclear.

- d. If working under a prime contractor, advise the prime contractor of any other sub-contractor or self-employed person with whom you have hired to perform work on the project.
 - e. Abide by all reporting procedures outlined in this Safety Management System.
 - f. Abide by rules outlined in this Safety Management System.
6. Prime Contractors (i.e. the contractor that you've hired to oversee other contractors of 2 or more subcontractors).

As far as reasonably practicable to:

- a. Co-ordinate, organize and oversee the performance of all work at the construction project site.
 - b. Conduct their own activities in such a way as to ensure, that no one is exposed to risk to his or her safety or health arising out of, or in connection with activities at the construction site.
 - c. Ensure that every person working on the project complies with the Manitoba Workplace Safety and Health Act and Regulations.
7. THE COMMUNITY CENTRE as the Prime Contractor
- a. Establish an effective system to ensure that all parties involved on a construction project meet all legal safety and health responsibilities. See Part 21 of this Safety Management System.
 - b. Co-ordinate, organize and monitor work on a construction project site to ensure reasonable and practical precautions are in place to effectively control safety and health hazards.
 - c. Ensure sub-contractors:
 - i. are evaluated and monitored so that they contribute to a safety and health work environment for all,
 - ii. receive an orientation to the Safety Management System requirements and the worksite before work commences and
 - iii. is held accountable to all safety policies, procedures and rules.

SAFE WORK IS EVERYONE'S RESPONSIBILITY.

1.3: COMPANY RULES

Scope: Applies to all workers, contracted employers and self-employed persons
Reference(s): Workplace Safety and Health Act, Section 4(1), (2), 4.1, 5, 7.4(5) (d) as amended
Form(s): H - Record of Enforcement and Disciplinary Action

All workers, contractors and self-employed persons have a duty to work in a manner that protects their safety and health, as well anyone else who may be affected by their work. Workers can be held accountable under the Manitoba Workplace Safety and Health Act for their acts or omissions if another person suffers harm. Therefore, in the best interests of all stakeholders, THE COMMUNITY CENTRES Rules are a condition of employment; violation may result in disciplinary action, leading to termination.

1. **Alcohol, drugs, firearms, or other weapons** are prohibited on any worksite. Anyone believed to be in possession of, or under the influence of illegal drugs, will be suspended.
2. **All hazards, near misses, and incidents must be reported** to your supervisor.
3. **All personal protective equipment must be worn and maintained** in a safe manner.
4. **Equipment, machinery, and tools** are to be operated and maintained safely. Defects must be reported to the supervisor for correction. Do not use defective or malfunctioning tools or equipment.
5. **Lockout procedures** must be strictly followed for all work involving energized sources. This includes electrical, hydraulic, pneumatic and thermal energy. Where lockout is not possible, written Safe Job Procedures must be developed to provide equal or greater protection than the lockout procedure.
6. **All servicing and repairs** to equipment, machinery and tools must be done by authorized worker. Any alterations or modifications that could impair safe operation are prohibited.
7. **Workers are encouraged to get help** or to use a mechanical lifting device when a lifting task may be more than can be handled safely.
8. **Control all sources of ignition** when working with, or adjacent to, flammable materials such as natural gas, gasoline, cleaning solvents, paint thinners, propane, and other fuels. Do not cut, grind, weld, or do anything which will produce sparks or open flames. **All flammable petroleum fuels** must be stored and dispensed from approved safety containers.
9. **Do not use tools**, machinery or equipment without proper safety guards in place.
10. **NEVER stand, walk, or work under a suspended load** (e.g. forklift, crane). Watch out for swinging loads. **NEVER** move a load over the heads of workers.
11. **All straight ladders** must be tied off or otherwise secured from movement.

All Workers are prohibited from:

1. Wearing loose clothing, dangling neckwear or jewelry that could pose a hazard. All workers with long hair must tie it back or otherwise secure it from entanglement in machinery
2. Horseplay in the workplace

3. Backing up equipment with an obstructed view; a guide with an unobstructed view must be assigned
4. Theft, vandalism or any other abuse of property or equipment
5. Worker harassment of any kind
6. Working off the top two steps of any portable or step ladder
7. Smoking, Cannabis, Alcohol

1.4: ENFORCEMENT & DISCIPLINARY ACTION

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons
Form(s): H - Record of Enforcement and Disciplinary Action, H1 Enforcement and Disciplinary Action Policy Acknowledgement

POLICY

THE COMMUNITY CENTRE is committed to maintaining a safe, healthy and productive workplace. Behavior that is incompatible with this objective will be dealt with in a firm, fair and effective manner. Documentation of all disciplinary action is required.

THE COMMUNITY CENTRE and its management and supervisors recognize that a lack of enforcement of safe and responsible work practices is a lack of due diligence and a liability to our operations. Therefore it is the responsibility of all supervisors and any other person that directs how work is done to enforce THE COMMUNITY CENTRE safety policies, procedures and rules. Failure to do so will result in this disciplinary action policy being applied to management and supervisors.

The following steps outline THE COMMUNITY CENTRE's progressive discipline process. These steps are not absolute and may vary depending on the nature and severity of the infraction. The principle of progressive discipline is to ensure that the worker is well aware of the job's requirements, THE COMMUNITY CENTRE policies, procedures, and expected safety outcomes.

Progressive discipline for common Workplace Safety and Health infractions is as follows:

- Step 1: Verbal warning;
- Step 2: Written warning
- Step 3: Final written warning
- Step 4: Termination of employment

TERMINATION OF EMPLOYMENT

Termination of employment with THE COMMUNITY CENTRE may occur following a worker committing multiple violations of THE COMMUNITY CENTRE policy, after the logical steps for progressive disciplinary action have been taken or immediately following a serious violation.

Some safety infractions may be grounds for immediate dismissal rather than a progressive discipline. These include but are not limited to: gross misconduct, endangering the safety of others, and negligence.

2.1: HAZARD ASSESSMENT & CONTROL POLICY & PROCEDURE

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons
Reference(s): Workplace Safety and Health Act, Section 4(2) a, 7.4(5) b
MR 217/2006 as amended, Sections 2.1(1), (2), (3), 2.1.1
Form(s): A – Hazard and Near Miss Report; B – Safe Job Plan; C – Inventory of Critical Tasks; D – Job Hazard Analysis; E – Worksite Set-up Safety Checklist

OBJECTIVES

THE COMMUNITY CENTRE is committed to ongoing identification, communication and control of all known and potential hazards. Therefore, THE COMMUNITY CENTRE will maintain a system that will strive to:

Identify, assess and correct hazards, so far as is reasonable and practicable.

1. Use regular hazard assessments to assist in the selection of tools and equipment, and to decide how jobs will be completed safely.
2. Control incident loss to Workers, property, equipment and the environment.

RESPONSIBILITIES

1. Employer
 - a. Ensure an ongoing system to identify existing and potential hazards including measures to reduce, eliminate or control those hazards.
 - b. Enforce Safe Work Procedures and the reporting of hazards.
2. Supervisors
 - a. Ensure all Workers under their supervision:
 - i. follow THE COMMUNITY CENTRE safety and health policies and procedures
 - ii. use all devices and wear all PPE where supplied and required for their protection
 - iii. are advised of all known and reasonably foreseeable risks to safety and health in the area that they are performing work
 - iv. report ALL known and potential hazards, unsafe acts, and near misses
 - b. Take corrective action on any unsafe condition or stop work until safe conditions are restored.
 - c. Ensure Hazard Assessments are conducted along with Workers prior to the start of each job.
 - d. Take disciplinary action to enforce compliance with Workplace Safety and Health policies and procedures.
3. Workers / Volunteers / Contracted Employers / Self-employed Persons Workers / Volunteers / Contracted Employers / Self-employed Persons
 - a. Report to their Supervisor all **known and potential hazards, unsafe acts and near misses**.
 - b. Follow Safe Work Procedures and wear all PPE where supplied and required.

- c. Take every precaution to protect his/her safety and health, and the safety and health of other Workers or persons who may be affected by their acts or omissions.
- 4. WSH Representative
 - a. Participate in monitoring the effectiveness of the Safety Management System. Monitoring should include reviewing Hazard and Incident Reports, formal and unplanned inspections of the workplace, discussions with, and observation of Workers.

POLICY

- 1. THE COMMUNITY CENTRE will strive to control hazards to people, property, process and the environment through:
 - a. hazard reporting
 - b. regular workplace/ worksite inspections
 - c. Job Hazard Analysis
 - d. implementation of Safe Work Procedures
- 2. All workplace hazards, near misses, and dangerous occurrences that result in, or have the potential to result in personal injury, property, process or environmental damage, must be reported.
 - a. Workers must report to Supervisors.
 - b. Supervisors must keep a record of corrective actions for all medium and high hazards identified. The **Hazard – Near Miss Report** (FORM A) should be used.
- 3. When known or potential hazards, near misses, and dangerous occurrences are identified, the risk of those hazards causing harm or loss shall be assessed immediately by the Worker reporting the hazard and their Supervisor, who must ensure that appropriate corrective action is taken

PROCEDURES

- 1. THE COMMUNITY CENTRE will maintain an inventory of critical jobs, and through a hazard ranking system, will determine whether low, medium or high risks to safety and health exist. Refer to the **Inventory of Critical Tasks** (FORM C) forming part of this policy and procedure.
- 2. THE COMMUNITY CENTRE will strive to, where reasonably practicable, eliminate or control risks through; the design of the workplace; the design of the work process; or the use of engineering controls. Any remaining risk will be reduced, so far as reasonably practicable, through Safe Job Procedures and, as a last line of defense, the use of PPE.
- 3. Job Hazard Analyses will be performed for all jobs and equipment that have the potential to cause loss to Workers, equipment, property or the environment.
- 4. From the Job Hazard Analysis, Safe Work Procedures will be developed and implemented.

THE COMMUNITY CENTRE Inspection Program (see Inspection Policies and Procedures) will be maintained in order to identify potential hazards on an ongoing basis.
- 5. The Supervisors and the Workplace Safety and Health Representative will be responsible for leading Job Hazard Analyses and development of Safe Work Procedures.

6. Conditions change from job to job, therefore, all new worksites and jobs must be assessed for hazards, and safe work must be planned.
 - a. The Supervisor is responsible for leading job planning and will ensure a **Safe Job Plan** (Form B) is completed.
 - b. In addition, a Safe Job Plan should be completed whenever a task arises that is unusual or is done infrequently.
7. When hazards, near misses, and dangerous occurrences are reported or identified, they shall be addressed immediately by the Worker if safe to do so. The Worker must inform his/her Supervisor, and if required, the Supervisor will assist with the hazard assessment and control measures.

HAZARD CONTROL TIMELINES

	Hazard Ranking	Definition
High Priority	High Hazard high probability of causing harm	Any condition or practice that has potential to cause loss of life, body part or extensive loss of equipment, property of environment.
Medium Priority	Medium Hazard could lead to injury	Any condition or practice with potential for causing serious injury, illness or property damage that is disruptive, but not extensive.
Low Priority	Low Hazard unlikely to lead to injury	Any condition or practice with a probable potential for causing a non-disabling injury or non-disruptive property damage.

Some hazards may need to be controlled immediately. When in doubt always scale severity up!

8. It is the responsibility of Supervisors to ensure that hazard controls are appropriate, and to keep records of corrective action and follow-up.
9. Information regarding existing hazards must be communicated to all Workers so that they know what to do to prevent injuries and incidents.
10. Hazard Reports should be sent to the Employer and to the WSH Representative for their review.

POLICY & PROCEDURE REVIEW

The General Council of Winnipeg Community Centres in consultation with the City of Winnipeg Community Centres will review the effectiveness of this policy and procedure every three years at a minimum.

Marlene Amell, Executive Director

Date

2.2: HAZARD ASSESSMENT & CONTROL GUIDELINES

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons

Where does hazard assessment and control succeed?

1. Trained teams with the WSH Representative, for the actual tasks, are involved in the process.
2. It's developed for the specific job and the specific workplace.
3. Controls which are critical to safety and health are part of regular inspections or behavior observation programs.
4. Controls which are critical to safety and health become part of standard operating procedures.
5. Job Hazard Analysis and Safe Work Procedures are reviewed periodically and as part of all incident investigations.

Where does hazard assessment and control fail?

1. Attitude – complacency. *“Nothing could ever go wrong, I’ve done it this way a thousand times before, I know what I’m doing, I’ve already thought out all the angles.”*
2. No worker involvement in the development of Safe Work Procedures.
3. No formal training of Workers on the development of Safe Work Procedures.
4. Using the JHA's from another organization without reviewing them to ensure they are applicable to the specific work in your workplace.
5. Never reviewing, modifying and updating the Safe Work Procedures.

The Hazard Identification, Assessment and Control Process

1. **Identify the people** required to complete the hazard assessment and to implement controls. Who does the jobs? Who works in the area? Who are the Supervisors?
2. **Tour** the area, **assess** the possible hazards and **develop** an inventory of critical tasks such as:
 - a. jobs that have a past history of incidents and injuries
 - b. all jobs involving sources of energy
 - c. jobs with potential for incidents or injuries
 - d. new jobs or equipment
 - e. jobs involving inexperienced Workers
 - f. routine jobs that may breed complacency
 - g. keep asking “what if?” and “what’s the worst that could happen?” in all discussions
3. **Rank the hazards** by risk to identify which ones most urgently require controls. Hazard ranking is done by assessing the **severity** of all incidents that could arise from the hazard, and the **probability** of the incident actually occurring based on the degree of exposure.

Probability x Severity = Risk

Severity: *is the consequence of injury or loss*

Probability: *is the likelihood of the event occurring*

Risk: *is the expected loss in relation to the likelihood and severity of the harm*

SEVERITY

In ranking the Severity of a hazard, all incidents and injuries must be examined, not just those that have already occurred. Anticipate the worst credible outcome.

When assessing risk, consideration should be given to:

- how many people could be hurt
- the seriousness of the potential harm
- how quickly danger could arise
- the work environment
- hazard monitoring and control requirements
- near misses that could be more serious
- the tools and materials being used
- how well current controls or monitoring is working

PROBABILITY

When assessing risk, consideration should be given to:

- how quickly danger could arise
- the number of Workers exposed to the hazard
- frequency of exposure to the hazard
- experience of the Workers that are exposed
- the likelihood of the hazard actually causing harm
- how well current controls or monitoring is working
- hazard monitoring and control requirements

HAZARD RANKING MATRIX

SEVERITY

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	Very Low negligible, violation of standard or criteria	Low minor injury/not affect health or cause property damage	Moderate non-serious injury or minor illness resulting in lost time or property damage	High severe injury, illness or major property damage	Very High death or permanent injury
Very High very likely to occur immediately	5	10	15	20	25
High likely to occur within a short period of time	4	8	12	16	20
Moderate probably will occur in time	3	6	9	12	15
Low possible to occur in time	2	4	6	8	10
Very low unlikely to occur	1	2	3	4	5

Hazard Ranking			Control Within
High Priority	> 10	High Risk	high probability of causing harm
Medium Priority	5 - 10	Moderate Risk	could lead to injury
Low Priority	< 5	Low Risk	unlikely to lead to injury

Some hazards may need to be controlled immediately. When in doubt scale severity up!

Tips:

- Always assess for **Worst Credible Severity**
- When in doubt, **Scale Severity Up**
- Note that **Worst Credible** does not = **Worst Conceivable**
- Risk Assessment IS NOT a substitute for conforming to applicable Regulations, Codes, and standards. Regulation-worthy Systems may still pose Untenable Risk!

4. **Conduct a Job Hazard Analysis** for all high and moderate risk jobs. This involves:
 - a. Breaking down each job into its steps, as detailed as possible.
 - b. Analyzing the hazards present at each step.
 - c. Developing controls for those hazards.
 - d. Writing Safe Work Procedures based on each analysis.
 - e. Testing, revising, and implementing the written work procedures.
 - f. Regularly reviewing each job procedure and keeping it current.
5. **Develop and implement controls** wherever there is the potential for harm; use the Hierarchy of Controls:
 - a. First Priority: Control At The Source
 - i. *Elimination* - often the best way of protecting Workers.

- Does the task need to be done? E.g. the use of mechanical device instead of manual lifting.
 - ii. *Substitution* – replace hazardous substances with something less dangerous.
 - Can something else be used that has less risk? E.g. reduction in the size and weight of an item, using water based instead of solvent based paint.
 - iii. *Engineering Controls* – involve the design of the workplace and its related processes.
 - Can equipment be used to reduce the risk?
 - Can the layout of the workplace, workstations, work processes, and jobs be redesigned to prevent hazards? e.g. local exhaust ventilation, guarding, lighting, enclosures
 - iv. *Isolation* – isolating, containing or enclosing the hazard is often used to control chemical and biological hazards.
 - Can distance / barriers / guards be used to prevent worker exposure to the hazard? e.g. access controls, distance, engineering controls, time
 - v. *Automation* – dangerous processes can sometimes be automated or mechanized.
- b. Second Priority: Control Along The Path
- i. *Barriers* – a hazard can be blocked.
 - equipment guards
 - lockout systems
 - ii. *Absorption* – baffles can block or absorb noise.
 - iii. *Dilution* – e.g. general (dilution) ventilation might dilute the concentration of a hazardous gas with clean, tempered air from the outside.
 - Local exhaust ventilation can remove toxic vapors, dusts, and fumes at the point of origin.
 - iv. *Relocation* – e.g. move a dangerous work process to a less populated area of the workplace.
- c. Third Priority: Control at the Level of the Worker
- i. *Implement Safe Work Procedures*
 - Can procedures be used to specify the safe way of doing work to reduce risks? E.g. require permits for specific work, develop checklists and process maps, and conduct JHA.
 - ii. *Education and training* - train Workers and students re:
 - how each substance causes harm
 - what harm is involved
 - how serious the harm can be
 - the risks of being harmed
 - how to reduce exposure
 - how to prevent harm
 - Safe Work Procedures

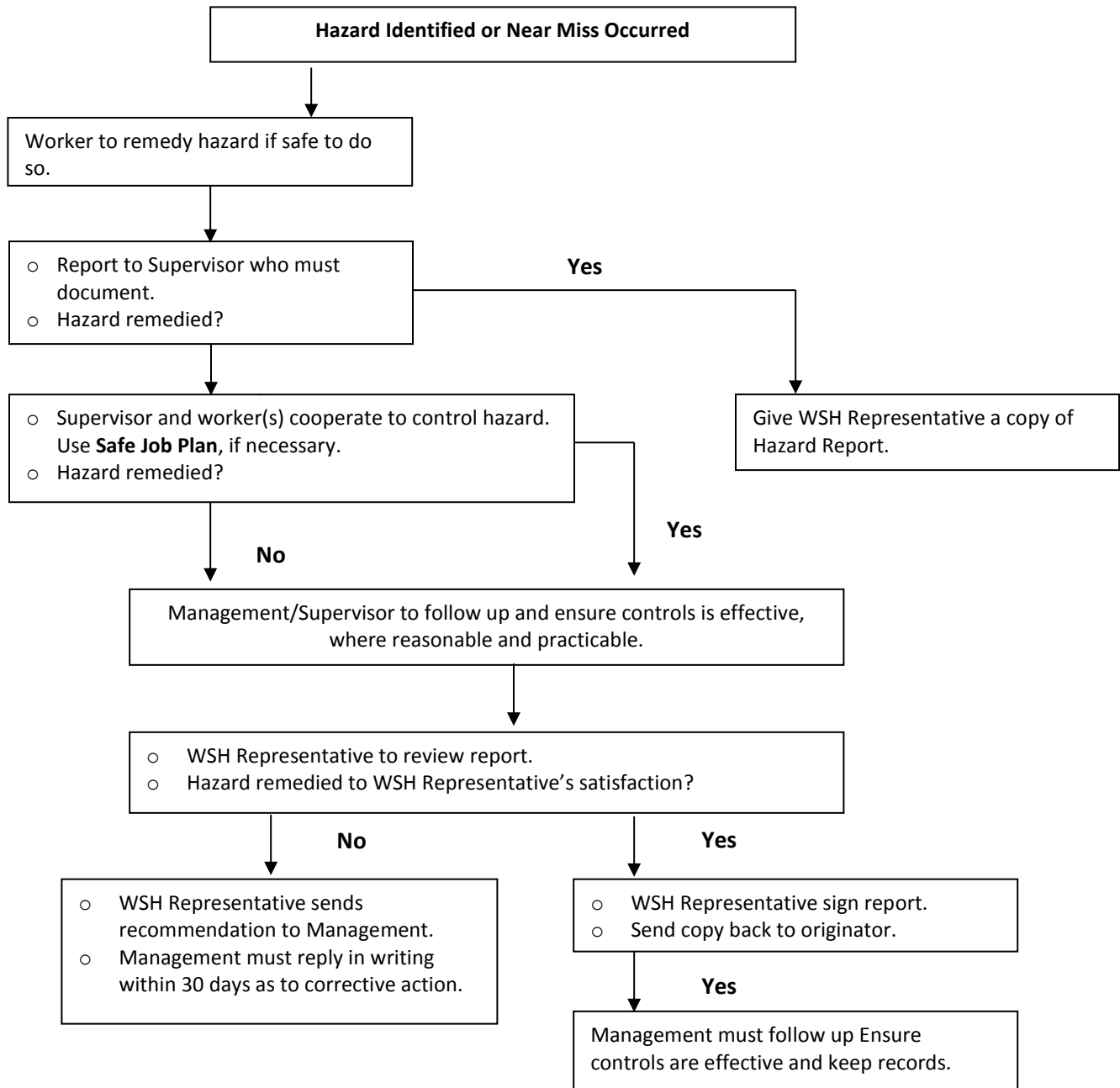
- what to do during an incident or emergency
- iii. *Require personal protective equipment (PPE)*
 - Is it suitable and sufficient for the task?
 - E.g. respirator, fall arrest equipment, goggles gloves etc.

Control at the level of the worker usually does not remove the risk posed by a hazard. It only reduces the risk of the hazard injuring the worker and lessens the potential seriousness of an injury. This is the least effective method and should not be relied upon solely. It should be used in conjunction with other controls such as engineering and substitution controls.

6. ***Summarize the controls identified in the JHA into Safe Work Procedures.***
 - a. Keep the content as simple as possible.
 - b. Use bullet points for easy reading and comprehension.
7. ***Inventory of worker education and training requirements.***
 - a. Train Workers in Safe Work Procedures and the use of Protective Personal Equipment (PPE).
 - b. Maintain records of training.
8. ***Make critical safety procedures/equipment part of standard operating procedures.***
 - a. E.g. lockout, confined space entry, etc.
9. ***Incorporate Safe Work Procedures into regular workplace inspections.***
 - a. Ensure that the controls are effective.
 - b. Make adjustments where necessary.
 - c. Be open to, and encourage feedback from Workers.
 - d. Review the JHA during all incident investigations. At what step did the event occur?
10. ***Create a system to track:***
 - a. critical job inventories
 - b. Job Hazard Analysis (JHA) and Safe Work Procedures: dates of completion and updates
 - c. revisions to JHA and Safe Work Procedures
 - d. inspections, associated deficiencies and remedial action
 - e. Worker education and training
 - f. enforcement of Safe Work Procedures and of Company Rules

2.3: HAZARD / NEAR MISS REPORTING FLOW CHART

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons



3.1: SAFE WORK PROCEDURES POLICY

Scope: Applies to all Workers, Contracted Employers and Self-employed Workers
Reference(s): Workplace Safety and Health Act, Part 4(2) a, 7.4(5) b,
MR 217/2006 As amended Part 2.1.1 – 2.2
Form(s): D – Job Hazard Analysis; G – Safe Work Procedures

***Safe Work Procedures** are ways to complete a task with minimum risk to people, property, process and the environment. They are based on legislation, industry standards and best practice. Examples include use of ladders, specific tools, equipment and materials (e.g. chainsaws, compressed air, solvents, etc.).*

OBJECTIVE

To mitigate risks to people, property, process and the environment through written Safe Work Procedures.

RESPONSIBILITIES

1. Employer
 - a. Ensure that the right Safe Work Procedures are available to all Workers.
 - b. Ensure that all Workers understand and can demonstrate the safe way of doing work.
2. Supervisors
 - a. Ensure Workers are trained in Safe Work Procedures and that they are enforced.
 - b. Use disciplinary action, where necessary.
3. Workers / Volunteers/ Contracted Employers / Self-employed Persons
 - a. Adhere to all THE COMMUNITY CENTRE Safe Work Procedures.
 - b. When unsure about working safely, communicate with the Supervisor.

POLICY

1. THE COMMUNITY CENTRE will strive to ensure that all Workers are trained and educated in Safe and Responsible Work Procedures.
2. Safe Work Procedures must be developed in writing and be specific to the work undertaken by THE COMMUNITY CENTRE. Therefore, Safe Work Procedures adopted from outside sources must be reviewed by THE COMMUNITY CENTRE. Workers to ensure that they apply and that they control hazards specific to THE COMMUNITY CENTRE operations.
3. Workers shall be consulted in the development of Safe Work Procedures since they are affected by the practices and are likely to best understand the nature of the work.
4. Safe Work Procedures must be reviewed whenever there are incidents, near misses or changes in equipment or operations.
5. All changes or modifications to any Safe Work Procedure must be kept in THE COMMUNITY CENTRE records to demonstrate on-going due diligence.

6. Prior to the development of Safe Work Procedures, wherever reasonable and practicable risks to the safety and health of workers will be eliminated or controlled through one or a combination of the design of the workplace, the work process or the use of engineering controls.

4.1: PERSONAL PROTECTIVE EQUIPMENT (PPE) POLICY

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons

Reference(s): Workplace Safety and Health Act, Section 4(2) c, 4.1 (a) iii, 5(b);
MR 217/2006 as amended Part 6

RESPONSIBILITIES

1. Employer

Ensure that all Workers are provided with appropriate PPE for the job and that they are familiar with its use, care and limitations.

2. Supervisors

- a. Ensure that all Workers under their supervision use PPE as required by THE COMMUNITY CENTRE policies.
- b. Ensure all Workers understand the proper use, care and limitations of PPE.
- c. Use disciplinary action for non-compliance, as stated in the Company Rules Policy.

3. All Workers / Volunteers/ Contracted Employers / Self-employed Persons

- a. Use all devices and wear all articles of clothing and PPE required for the job, and maintain it in good condition.
- b. Report to the Supervisor any problems or concerns regarding their PPE.
- c. Take every precaution to protect their safety and health, as well as the safety and health of all other Workers, by using appropriate PPE.

POLICY

- 1. As a responsible Employer, THE COMMUNITY CENTRE will strive to ensure that all Workers are provided with, and understand the requirements and importance of, PPE to their safety and health while on the job. In addition, Workers must understand the proper use, maintenance and limitations of PPE so that the highest degree of safety may be achieved.
- 2. All PPE must be CSA approved and/or meet the standards established for PPE as prescribed in MR 217/2006 as amended, Part 6.
- 3. PPE is the least effective method, and last resort, when controlling hazards in the workplace, since the hazard itself is not eliminated. Therefore, THE COMMUNITY CENTRE will strive to implement all other possible controls wherever reasonable and practicable.
- 4. Where required, Workers are to provide CSA approved safety footwear. All other PPE, including PPE designed for specific jobs, will be provided by THE COMMUNITY CENTRE.
- 5. Workers are required to maintain THE COMMUNITY CENTRE issued PPE in good condition. THE COMMUNITY CENTRE will maintain all specialty type PPE according to manufacturer's specifications.
- 6. All Workers required to use PPE must be trained and educated in the proper use, care, maintenance and limitations of all such equipment.
- 7. Signs must be posted in all work areas where PPE is required.

8. In the event of an emergency in the workplace, including a spill or discharge of a hazardous substance, Workers must wear required PPE.
9. The Company Enforcement Policy will be strictly adhered to for non-compliance regarding the use and requirements for PPE.

PPE REQUIREMENTS

1. Moving Parts of Equipment

- a. Where Workers could contact moving parts of equipment, all Workers :
 - i. must wear clothing that fits tightly around the body, especially around the neck, wrists and ankles
 - ii. are prohibited from wearing jewelry (i.e. necklaces, bracelets, finger rings) or like articles (i.e. neck ties) that may pose a potential hazard
 - iii. with hair long enough to become entangled in machinery must ensure that it is secured to prevent entanglement

2. Respiratory Protection

- a. Respiratory equipment must be used where ever there is danger from harmful concentrations of gases, vapors, fumes, mists, dusts, or oxygen deficiency.
- b. Where respiratory equipment is required, it must be selected in accordance with CSA Standard Z94.4-02, Selection, Use and Care of Respirators. Respiratory equipment must be NIOSH approved. The Supervisor is responsible for determining the conditions for which a respirator is to be worn, and for ensuring the correct respirator is available for use.
- c. Workers must be trained by a competent person in the proper fit, testing, maintenance, use and cleaning of the equipment and its limitations.

3. Safety Headwear & Footwear

- a. CSA approved hard hats are required on all construction sites and any other time there is a danger of a head injury.
- b. CSA approved non-conductive headwear is required where Workers are exposed to electrical hazards.
- c. Grade 1 CSA approved (green triangle) safety footwear is required at all times on the worksite.

4. Eye & Face Protection

- a. CSA approved safety glasses with side shields or goggles are mandatory whenever Workers are subject to materials that may injure the eye, such as flying objects or particles, injurious light or heat rays, chemicals, etc.
- b. Eye glasses ARE NOT safety glasses unless they are CSA approved.
- c. Eye protection must also be worn when:
 - i. working with compressed gasses
 - ii. drilling or cutting materials

- iii. operating a chainsaw or a quick cut-off saw
 - iv. or any other time there is danger of an eye injury
 - d. CSA approved chemical splash goggles must be worn when:
 - i. handling any hazardous material that may cause an eye injury
 - ii. chemical spraying
 - iii. handling acids or alkali
 - e. CSA approved face shield must be worn if there is a risk of injury to the face. Safety glasses or splash goggles MUST also be worn under the face shield to protect the eyes. Face shields should be worn when:
 - i. Grinding
 - ii. Handling corrosive chemicals (battery acid)
 - f. CSA Approved Welding Helmets must be worn when welding or torch cutting
5. High Visibility Clothing
- a. CSA approved high visibility clothing must be worn when workers:
 - i. are exposed to the risk of injury from a moving vehicle or powered mobile equipment
 - ii. are not visible to other persons because of environmental or other conditions, e.g. dust, night, fog, etc.
6. Fall Protection
- a. CSA approved fall protection is required where Workers are in danger of falling:
 - i. more than 3 metres
 - ii. into unprotected operating machinery
 - iii. into or onto hazardous substances
 - iv. into water
 - b. In addition, where there is a risk of drowning, such as Workers working over water:
 - i. a coastguard approved personal flotation device (PFD) must be worn
 - ii. rescue equipment must be available, including approved PFDs for all involved in rescue operations
 - iii. at least two Workers must be trained and designated to perform rescue operations
 - c. Prior to using fall arrest equipment, Workers must be trained in the proper use, maintenance, inspection and limitations of the equipment.
7. Hearing Protection
- a. THE COMMUNITY CENTRE will make hearing protection available for all Workers.
 - b. Where noise exposure is over 85 dBA, hearing protection is mandatory and must be enforced to prevent Workers from suffering hearing loss. As a general rule, hearing protection should be worn whenever the noise is such that a worker must raise their voice to be heard.

8. Hand Protection

- a. Suitable gloves should be worn where materials or conditions may cause damage to hands from:
 - i. sharp edges, heat, extreme cold
 - ii. skin contact with oils, grease, solvents or corrosives
- b. Gloves should not be worn around machinery with moving parts as the risk of hand injury increases. (i.e. tablesaws)

9. Arm, Leg and Body Protection

- a. Should be used as appropriate when using equipment such as a chainsaw, weed wacker, etc.

4.2: INVENTORY OF PPE

PPE	Associated Hazards / Requirements	Who will Supply?	Areas Required
1. Safety Headwear with liner in the winter.	Construction sites, Falling objects, lateral (side) impact, exposed energized electrical conductor	Employer Sub-Contractor	As required or designated areas.
2. Safety Footwear	Crushing, falling objects, sharp objects. Hot, corrosive or toxic substances	Worker	As required or designated areas.
3. Eye / Face Protection	Flying objects or particles, splashing liquids or molten metal, ultraviolet, visible or infrared radiation, any other material, substance or matter	Employer Sub-Contractor	As required or designated areas.
4. High Visibility Clothing	Moving vehicle or powered mobile equipment. Environmental such as poor lighting, fog, dust	Employer Sub-Contractor	As required or designated areas.
5. Hearing Protection	Noise above 80 dBA Lex	Employer Sub-Contractor	As required or designated areas.
6. Respiratory Protection	Dusts, mists, vapours, fumes, gasses, fibres, oxygen deficiency, biological	Employer Sub-Contractor	As required or designated areas.
7. Fall Protection	Working at heights over 3m, over hazardous objects / chemicals / water	Employer Sub-Contractor	As required or designated areas.
8. Hand Protection	Sharp object, abrasion, chemicals, heat, cold, vibration	Employer Sub-Contractor	As required or designated areas.
9. Long Sleeved Shirts and Long Pants	UV light, abrasive objects,	Worker	As required or designated areas.

5.1: TRAINING AND COMMUNICATION POLICY

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons
Reference(s): Workplace Safety and Health Act, Section 4(2)b, 4(4)a, 7.4(5)e
MR 217/2006 as amended Part 2
Form(s): B – Safety Talk; J – Worker Orientation; K – Contractor Orientation;
L – Record of Safety Talk

OBJECTIVES

1. Ensure that all Supervisors have the knowledge, education and training to supervise and direct the work of others to best protect the safety and health of all.
2. Ensure that all Workers have the knowledge, education, and training to do their jobs in a manner that protects the safety and health of all.
3. Continuously enhance the safety and health competency of all Workers

RESPONSIBILITIES

1. Employer
 - a. Provide training to workers in such a manner that ensures that they are able to apply the training provided to protect the safety and health of themselves and others. Jobs that require practical skill components must have practical skill development training. I.e. Lockout, confined space, fall protection and working with power mobile equipment.
 - b. Ensure that a Workplace Safety and Health training plan for Supervisors and Workers is developed and implemented.
 - c. Provide the required resources to ensure the training plan is well implemented.
 - d. Monitor the effectiveness of training and ensure retraining or additional training where required.
 - e. Maintain Training Records.
2. Supervisors
 - a. Ensure Workers are orientated to THE COMMUNITY CENTRE Safety Management System prior to beginning work.
 - b. Ensure Workers are educated, trained and competent to perform their tasks in a safe manner.
 - c. Conduct and document monthly “safety talks” safety education meetings of at least 15 minutes in duration.
 - d. Enforce safe work through disciplinary action or by stopping work where necessary.
 - e. Keep records of on-the-job training provided to Workers and maintain records of all training attended.
3. Workers / Volunteers/ Contracted Employers / Self-employed Persons
 - a. Fully participate in training provided by the employer, supervisor or other person.
 - b. Perform their jobs and tasks consistent with the training provided.

POLICY

THE COMMUNITY CENTRE recognizes that safety and health education and training is critical to an effective Safety Management System. Therefore the Employer, in consultation with the Workplace Safety and Health Representative, will ensure a THE COMMUNITY CENTRE training plan is developed and implemented.

1. Workplace specific training is required:
 - a. before a new worker begins work or existing workers are transferred to a new job
 - b. when workers may be affected by relevant new equipment, processes or procedures introduced into the workplace
 - c. when unacceptable safety and health performance is demonstrated
 - d. when non-routine or irregular tasks need to be planned and executed
2. Training of new workers
 - a. All new workers must have an orientation to the COMMUNITY CENTRE Safety Management System which must include at a minimum:
 - i. rights and responsibilities of workers and how to report and deal with concerns
 - ii. relevant aspects of the Safety Management System such as:
 - THE COMMUNITY CENTRE rules and disciplinary policy
 - reporting of hazards and incidents
 - worker involvement-how to participate in Workplace Safety and Health
 - general first aid and emergency equipment / procedures
 - general workplace safety / Safe Work Procedures
 - working alone policy and procedure
 - all personal protective equipment
 - WHMIS, where applicable
 - iii. standards and requirements for record keeping
3. Supervisor Training Plan
 - a. Supervisors have authority over other workers and direct how work is done; therefore they have greater responsibility for safety and health in the workplace. THE COMMUNITY CENTRE recognizes that Supervisors require additional training to ensure they are competent to oversee and direct the safe work of others.
4. Workplace Safety and Health Representative

The Workplace Safety and Health Representative is charged with specific duties, and as such requires specific training. This training is critical to their effectiveness in the Safety Management System.

 - a. The Workplace Safety and Health Representative shall be allowed a minimum of 2 days educational leave, without loss of pay or other benefits, for the purposes of attending Workplace Safety and

Health Training seminars, programs or courses. A request for educational leave must be submitted in writing to Management.

- b. Refer to the training plan for complete training requirements for all workplace parties.

5.2: TRAINING AND COMMUNICATION TRAINING PLAN

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons
 Reference(s): Workplace Safety and Health Act, Section 4(2)b, 4(4)a, 7.4(5)e
 Form(s): J – Worker Orientation, K – Contractor Orientation

Required Elements	Management	Supervisors	Workers	WSH Representative	Notes
WSH Orientation	X	X	X		mySafetyAssistant online training
Supervisor Training	X	X			mySafetyAssistant online training
Hazard Awareness			X		mySafetyAssistant online training
Hazard Identification & Control (JHA)	X	X	X		How to put together a JHA
Emergency Response Procedures	X	X	X		
Workplace Safety & Health Representative Training				X	mySafetyAssistant online training
Workplace Inspections		X		X	mySafetyAssistant online training
WHMIS	X	X	X		everyone who works with, or in the vicinity of Controlled Products
Incident Investigation		X		X	should be at least one Supervisor and one WSH Representative Worker rep
First Aid		X	X		select Workers as per the First Aid Regulation MR 217/2006 as amended, Part 5
Electrical Safety		X	X		General electrical safety
Fire safety & extinguisher use		X	X		Everyone required to respond to a small fire and/or be fire watch for hot work.
Hearing Conservation	X	X	X		only if exposed to noise levels over 80 dBA mySafetyAssistant online training
Safe Job Procedures	X	X	X		as relevant to that worker
Lockout Procedure		X	X		Review of Lockout/TagOut procedures
PPE		X	X		Review Personal Protective Equipment Policy & Procedure

Safety Management System

Ice Resurfacing Machine		X	X		Everyone who operates the ice resurfacing machine. Requires both theory and practical assessment.
Ladder Safety		X	X		mySafetyAssistant Online Training
Confined Space Entry & Rescue		X	X		Everyone who works in confined spaces or as a standby person. Requires both theory and practical assessment.
Musculoskeletal Injury Prevention	X	X	X		Ergonomics Safety.
Violence and Harassment	X	X	X		mySafetyAssistant online training

6.1: INSPECTION POLICY AND PROCEDURE

Scope: Applies to all buildings, structures, equipment, tools, processes, etc. Applies to all Workers, Contracted Employers and Self-employed Persons

Reference(s): Workplace Safety and Health Act, Section 7.4(5)b, 40(10) b, h, MR 217/2006 as amended Part 2.4(1)

Form(s): B – Inspection; M – Safety, Health and Loss Control Inspection Checklists

RESPONSIBILITIES

Detailed responsibilities and timelines for conducting inspections are located in the Internal Inspection Schedule in this Policy.

1. Employer

- a. Ensure a quality inspection program is developed and implemented so that the workplace, work processes, and the Safety Management System itself, are monitored on a regular basis.
- b. Review planned Inspection Reports and ensure that corrective action is appropriate and effective.
- c. Conduct random, unplanned inspections of people, processes and work areas to effectively manage risk.

2. Supervisor

- a. Conduct **planned inspections** as set out in the internal inspection schedule.
- b. Maintain constant safety awareness and conduct **unplanned inspections** throughout the work day.
- c. Take corrective action when hazards are identified and stop work, if necessary, until safe working conditions are restored.
- d. Review and sign planned Inspection Reports, and ensure that corrective action is appropriate and effective.
- e. Ensure Inspection Reports are sent to the Workplace Safety and Health Representative.
- f. Keep records of inspections and subsequent corrective action.

3. Workers / Volunteers/ Contracted Employers / Self-employed Persons

- a. Participate in worksite inspections and report known or potential hazards to their Supervisor immediately.

4. Workplace Safety and Health Representative

- a. Inspect the workplace and the work processes and procedures at the workplace at least once before each regularly scheduled meeting.
- b. Keep records of inspections, including recommendations and corrective action.
- c. Assist in monitoring the Safety Management System by reviewing THE COMMUNITY CENTRE Inspection Reports.

POLICY

THE COMMUNITY CENTRE recognizes that workplace inspections are a critical part of an effective safety Management system. The objective of the inspection program is to:

1. Identify and record potential and actual hazards associated with people, buildings, equipment, processes and practices.
2. Ensure existing hazard controls are functioning as they should, and where appropriate, recommend corrective action.

INSPECTIONS

1. Planned Inspections

- a. THE COMMUNITY CENTRE will develop and maintain a system for ongoing inspections that strives to:
 - i. mitigate risks to safety and health of Workers , clients and the general public
 - ii. prevent loss to process, property and the environment
 - iii. meet the requirements of the Workplace Safety and Health Act and Regulations.
- b. Inspection schedules must:
 - i. identify what will be inspected, the frequency of inspections and who will perform inspections
 - ii. include inspections of work procedures and processes
 - iii. provide for risk assessment and corrective action
- c. A schedule of required inspections has been developed and forms part of this policy and procedures, and are the minimum requirements.
- d. Responsibility for inspections will be assigned to specific groups or individuals on the inspection schedule.
- e. Formal workplace inspections are required as part of every serious incident investigation as set out in the Incident Investigation Policy.

2. Unplanned Inspections

- a. THE COMMUNITY CENTRE expects consistent safety awareness from all Workers .
- b. Whenever known or potential hazards are recognized in daily work activity, Workers are expected to take corrective action, provided it is safe for them to do so. Serious hazards must be reported to the Supervisor, even if corrective action has been taken to control the hazard.
- c. Documentation by the Supervisor to show ongoing due diligence is required only where hazards requiring corrective action are reported.

INSPECTION SCHEDULE

What	Check-List #	Frequency	Due By	By Whom
Inspection – General Physical Conditions	M1	Quarterly		Employer, Supervisors / WSH Representative
Inspection – Environmental Health	M3	Quarterly		Employer, Supervisors / WSH Representative
Ice Resurfacing Machine General Pre-Operational Checklist		Pre-Use		Operator
Fall Protection Equipment Inspection Checklist	M8	Pre-Use		Operator
Vehicle Pre-Operational Checklist	M9	Pre-Use		Operator
Ladder Pre-Use Inspection Checklist	M12	Pre-Use		Worker
Emergency Response Plan Checklist	Q	Annually		Employer, Supervisors / WSH Representative
ERP Drill Checklist	Q2	Annually		Employer, Supervisors / WSH Representative
Emergency Equipment Checklists	R	Monthly		Employer, Supervisors / WSH Representative, Worker
Fire Extinguisher Inspection Maintenance Record	R1	Monthly		Employer, Supervisors / WSH Representative, Worker
First Aid Kit Checklist	R2	Monthly		Employer, Supervisors / WSH Representative, Worker
Inventory of Controlled Products	U	Annually		Employer, Supervisors / WSH Representative, Worker
WHMIS Implementation and Inspection Checklists	V	Annually		Employer, Supervisors / WSH Representative, Worker
Power tools and electrical cords		Visual – pre-use		Worker
Personal Protective Equipment		Pre-shift		Worker
Confined Space entry & rescue equipment		Pre-shift		Worker

NEW MATERIAL PROCESSES

1. Employer/Supervisors must consult with the Workplace Safety and Health Representative whenever the following are introduced into the workplace that could pose a risk to safety and health:
 - a. new equipment
 - b. changes in operating procedures
 - c. new chemicals, substances or materials
2. The employer, along with the WSH Representative, must give priority to considering the implications to Workplace Safety and Health.
 - a. Inspection procedures, checklists, and worker training must be developed or amended to ensure the highest practical degree of safety, health and risk management.

TRAINING

1. Inspections are best carried out by persons with specialized training. Persons responsible for inspections shall receive Inspection Training.
2. Inspections must be conducted by those most knowledgeable of the work process and area.

PROCEDURE

1. Planned inspections will be conducted at intervals indicated in the Internal Inspection Program Schedule.
2. Inspections should not be taken lightly. Regular inspections have been shown to reduce incidents and occupational illness. They can also prevent loss to equipment, process, property and the environment by identifying hazards before they pose a problem.
3. Workers must cooperate in the inspection of their immediate work area.
4. Effective inspections concentrate on fact finding and not fault finding or blame fixing.
5. Communicate with Workers throughout the inspection process. Explain that you are doing a Safety and Health inspection and ask Workers about their concerns.
6. Accurately document your findings on the Inspection Report.
7. All Inspection Reports must be signed by the Worker conducting the inspection and by the Supervisor, and sent to the WSH Representative for their review.
8. Where hazards are identified, they must be assessed and dealt with as per Hazard Assessment and Control Policies and Procedures.

FOLLOW-UP

1. The WSH Representative will review all workplace safety Inspection Reports and ensure that corrective action is satisfactory. Corrective action must be documented on the Inspection Report.
2. Subsequent workplace inspections will review the items from the previous inspection to ensure the corrective action has resolved the concern
3. The Employer is ultimately responsible for reviewing the Inspection Reports, and ensuring that appropriate corrective action is taken.

7.1: INCIDENT REPORTING AND INVESTIGATION POLICY AND PROCEDURE

Scope:	Applies to all Workers, Contracted Employers and Self-employed Persons, Customers and Visitors
Reference(s):	Workplace Safety and Health Act, Section 7.4(5) (I) MR 217/2006 as amended 2.7(1)
Form(s):	N – Incident Report; O – Incident Investigation Report; O1 Return to Work form; P – First Aid Log

RESPONSIBILITIES

1. Employer/THE COMMUNITY CENTRE Management
 - a. Notify the City of Winnipeg for any serious incidents as defined in the Manitoba legislation
 - b. Ensure the existence of procedures to report and investigate incidents and to take corrective action, and that these are a consistent part of workplace operations.
 - c. Conduct investigations in cooperation with the WSH Representative.
 - d. Ensure that root causes of incidents are identified and controlled.
 - e. Ensure the scene of a serious incident is preserved for at least 24 hours after notice is given to MB Workplace Safety and Health Division, except for the following conditions:
 - i. If it is necessary to free a trapped person,
 - ii. To avoid the creation of an additional hazard.
 - iii. If directed by a Workplace Health and Safety officer
 - f. Ensure the Incident Investigation report is protected with solicitor client privilege.
 - g. Provide investigation training to persons who may be directly involved in incident investigations. (i.e. WSH Representative & supervisors)
2. Supervisors
 - a. Ensure Workers report all incidents and near misses.
 - b. Participate in the investigation of serious incidents and ensure that root causes are identified and controlled.
 - c. Follow up on corrective action and ensure that it is effective.
 - d. Contact the WSH Division of The Department of Labour in the event of a serious incident, as identified in this policy.
 - e. Send records of incidents, near misses and investigations to the WSH Representative for their review.
3. Workers /Contracted Employers / Self-employed Persons/Volunteers
 - a. Report all incidents and near misses and cooperate with all investigations.
4. Workplace Safety & Health Representative
 - a. Participate in the investigation of serious incidents and serious near misses.

- b. Review Incident Reports and ensure the appropriate corrective action is taken.
 - c. Monitor corrective action and keep records.
5. A representative of the City will be appointed to investigate and participate in “serious incidents”
- a. Will be trained in investigations.
 - b. Will have the authority to respond to external investigating officers demands.
 - c. Ensure a lawyer knowledgeable in Workplace Safety and Health reviews the incident report before providing it to the WSH division.
 - d. Co-ordinate an internal incident investigation separate from that of the Workplace Safety and Health Representative.
 - e. Ensures the following:
 - i. all evidence such as documents taken during internal investigation,
 - ii. witnesses and subject matter expert statements are taken,
 - iii. any other evidence is obtained and preserved for a minimum of 5 years.

CRITICAL INJURIES

In the event of critical injury or fatality, the following procedure must be followed:

1. **Priority #1** – Assess the scene for safety for the victim, rescuers and bystanders. If safe to do so, ensure first aid/medical attention is provided to the victim and the EMS System has been activated (911).
2. **Priority #2** - Notify a Supervisor immediately. This person will be responsible to ensure the following persons are notified:
 - Workplace Safety and Health Division (204) 204-945-3446
 - Management
 - WSH Representative and any other appropriate authorities or resources
 - City of Winnipeg

The Workplace Safety and Health Division must be notified immediately using “the fastest means possible”.

3. **Priority #3** - Secure the incident scene so there is no risk of further injury and so that evidence is preserved for the investigation. Lockout all equipment and machinery. No person may interfere with, disturb, destroy, alter, or carry away anything at the scene, or anything connected with the occurrence, unless a Workplace Safety and Health Officer has given permission to do so.

Exception - to release an injured person or to avoid creating additional hazards.

NOTE: The EMPLOYER must ensure to preserve a scene of a serious incident for at least 24 hours after notice is given to MB Workplace Safety and Health, except for the following conditions:

- i. If it is necessary to free a trapped person,
 - ii. To avoid the creation of an additional hazard.
 - iii. If directed by a Workplace Health and Safety officer
4. **Priority #4** - The family of the injured worker will be notified by Management.
5. The incident must be investigated by management/supervisor with the participation of a member of the Workplace Safety and Health Representative.
 - a. THE COMMUNITY CENTRE will conduct a separate internal investigation from that required by the Workplace Safety and Health Representative.

POLICY

THE COMMUNITY CENTRE requires that all incidents be reported to determine root causes, to implement controls, and to revise procedures where necessary in order to prevent recurrences. Near misses with a potential to be serious and serious incidents must be investigated for the same reasons.

Unless root causes are determined and eliminated, the same incidents will likely be repeated.

INCIDENT REPORTING

1. All incidents and near misses must be reported.
 - a. **“Serious Incidents”**: must be reported immediately to the WSH Division at 204-945-3446. (see procedure) A representative of the City is responsible to report.
 - b. Workers must immediately report incidents to their Supervisor and complete an Incident Report form.
 - c. Incidents requiring supplies from any First Aid Kit must be recorded in the First Aid Log. First Aid Logs are located in every First Aid Kit.
2. The purpose of incident reporting is to control risk and not to find fault, therefore incident reporting may be confidential.
3. Incident Reports must be signed by the Supervisor to whom the incident or near miss was reported.
4. The Supervisor must ensure that the root causes of incidents are identified and that corrective action is taken.
5. The Workplace Safety and Health Representative must review and sign Incident Reports, and is expected to participate in monitoring the corrective action and to ensure it is effective.

INVESTIGATIONS

THE COMMUNITY CENTRE will ensure that all serious incidents are investigated.

The following incidents must also be investigated:

1. any injury or illness resulting in time loss
2. injuries or illnesses resulting in acute or chronic occupational illness
3. equipment or property damage resulting in costs of more than \$500.00
4. any chemical spill more than 1 L
5. any incidence of fire or explosion
6. near misses that could have resulted in any of the above incidents
7. injuries requiring medical attention

PROCEDURE - Incidents / Near Misses

Reporting of Serious Incidents to the Workplace Safety and Health Division

1. All incidents and near misses must be reported to the Supervisor.
2. The following work related incidents must be reported to The Manitoba Workplace Safety and Health Division immediately by the fastest means of communication. **Phone (204) 945-3446**
 - a. a fatality of a worker
 - b. a collapse or structural failure of a building, tower, crane, hoist, temporary construction support system or excavation
 - c. an uncontrolled spill or escape of a toxic, corrosive, or explosive substance
 - d. explosion, fire or flooding
 - e. failure of an atmosphere-supplying respirator
 - f. any of the following critical injuries to a worker:
 - i. fracture of the skull, spine, pelvis, arm, leg, hand or foot
 - ii. amputation of an arm, leg, hand, foot, finger or toe
 - iii. permanent or temporary loss of sight
 - iv. third degree burns
 - v. unconsciousness as the result of a concussion
 - vi. injury resulting from electrical contact
 - vii. cut or laceration requiring medical treatment at a hospital
 - viii. asphyxiation or poisoning
3. When a serious incident occurs at the workplace, the employer must provide the Manitoba Workplace Safety and Health division with the following information:
 - a. The name and address of each person involved in the incident

- b. The name and address of the employer, and if any person involved in the incident is employed by another employer, the name and address of that other employer
 - c. The name and address of each person who witnessed the incident
 - d. The date, time and location of the incident
 - e. The apparent cause of the incident and the circumstances that gave rise to it. If cause is unknown or incident is still under investigation, advise the WSH Division of this. Do not jump to conclusions or guess what the cause is until a thorough investigation is conducted.
4. If the employer becomes aware that the above information given to the division was inaccurate or incomplete, the division must be contacted immediately to be given to the correct information.

SERIOUS INCIDENT PROCEDURE

1. Assess the scene for safety for the victim, rescuers and bystanders. If safe to do so, ensure first aid/medical attention is provided to the victim and the EMS System has been activated (911).
2. Contact a supervisor immediately to ensure the following are notified:
 - a. Management
 - b. Workplace Safety and Health Branch (204) 945-3446
 - c. WSH Representative / Committee and any other appropriate authorities or resources
3. Secure the incident scene so there is no risk of further injury and so that evidence is preserved for the investigation. Lockout all equipment and machinery. No person may interfere with, disturb, destroy, alter, or carry away anything at the scene, or anything connected with the occurrence, unless a Workplace Safety and Health Officer has given permission to do so.

Exception: To release an injured person or to avoid creating additional hazards.

NOTE: The EMPLOYER must preserve a scene of a serious incident for at least 24 hours after notice is given to MB Workplace Safety and Health, except for the following conditions:

- If it is necessary to free a trapped person,
 - To avoid the creation of an additional hazard.
 - If directed by a Workplace Health and Safety officer
4. The family of the injured worker will be notified by management.
 5. The incident must be investigated with a supervisor and the participation of the WSH Representative / Committee.
 - a. Management reserves the right to conduct a separate internal investigation from that required by the WSH Representative / Committee.

INVESTIGATIONS

THE COMMUNITY CENTRE will ensure that all serious incidents are investigated.

The following incidents must also be investigated:

1. any injury or illness resulting in time loss
2. injuries requiring medical attention
3. injuries or illnesses resulting in acute or chronic occupational illness
4. equipment or property damage resulting in costs of more than (_____ Insert amount here)
5. any chemical spill as per Manitoba Conservation Guidelines
6. any incidence of fire or explosion
7. near misses that could have resulted in any of the above incidents

INVESTIGATION PROCEDURE

1. Designated Incident Investigators will be the worker co-chair of the WSH Representative / Committee and a designate.
2. Incident Investigation Kits are recommended and the contents, at minimum, should include:
 - a. investigation checklist & form
 - b. high visibility tape
 - c. graph paper, ruler, pencils
 - d. camera
 - e. plastic bags
 - f. tape measure
3. An Incident Investigation Kit shall be located in the administration office
4. Minor Worker Injuries and Near Misses - All workers who are injured while at work, or who have a near miss, must complete an Incident Report and forward it to their supervisor. All reports will be sent to the WSH Representative / Committee for review.
5. Serious Incidents and Near Misses - The WSH Representative / Committee will be notified and an investigation will occur immediately.

Reporting Incidents to WCB (Workers Compensation Board)

Employer

In the event of a reportable injury the employer must report the injury to the WCB within five business days. Business days are Monday to Friday with the exception of statutory holidays.

A reportable injury is an injury that arises out of, and in the course of employment, or which is claimed by the worker concerned to have arisen out of and in the course of such employment, and in respect of which any of the following conditions are present or subsequently occur:

1. The worker loses consciousness following the accident, or
2. The worker is transported, or directed by a first aid attendant or other representative of the employer to a hospital or other place of medical treatment, or is recommended by such person to go to such place, or
3. The injury is one that obviously requires medical treatment, or
4. The worker states that he/she intends to seek medical treatment, or
5. The worker has received medical treatment for the injury, or
6. The worker is unable or claims to be unable by reason of the injury to return to his or her usual job function on any working day subsequent to the day of the injury, or
7. An injury resulting in the breakage of an artificial limb, eye glasses, contact lenses, dentures, hearing aid, or any other prosthetic device, or
8. The WCB has requested that an employer forward a report of the injury or occupational disease to the WCB, or the worker has filed a claim.

The obligation of the employer to report the incident resulting in an injury to the WCB begins when a supervisor, first aid attendant, or other representative of the employer first becomes aware of any one of the conditions listed above, or when notification of any such condition is received at the local or head office of the employer.

Worker Responsibilities

1. Report the injury to your employer as soon as possible. If your employer does not have a form for you to complete, complete the Notice of Injury to Employer form. Your employer must also report the injury to the WCB within 5 days of the day of the injury or within 5 days of the day you advised your employer of the injury, whichever is sooner.
2. Workers, who miss time from work or see a healthcare provider because of a work-related injury, must report the injury to the WCB by phone, fax or mail.

By phone:

- a. In Winnipeg at 204-954-4100, and a Claim Information Representative will take injury details. Outside Winnipeg, call toll free, 1-855-954-4321.

By fax:

- b. Fax your completed Workers' Report of Injury Form to the WCB at 204-954-4999, or toll free outside of Winnipeg 1-877-872-3804.

By mail:

- c. Mail your completed Workers' Report of Injury Form to the WCB at the following address:

The Workers Compensation Board of Manitoba 333 Broadway, Winnipeg MB R3C 4W3

The forms can be filled out on your computer or you can obtain the paper forms by calling **204-954-4922**.

3. Be sure to get medical attention. Let your doctor know that you will be making a claim with us. Your doctor will then complete a medical report on your injury and fax it to us at 204-954-4999 or toll free outside Winnipeg at 1-877-872-3804.
4. Keep in contact with your employer and let them know how you're recovering. Keeping in touch can really help to ease your return to work.
5. Be sure to follow the advice of your medical professional. Take your medications and participate in any physical rehabilitation programs they prescribe. An active recovery is the best way to minimize the negative effects of your injury. Your WCB benefits may be stopped if you aren't following your doctor's treatment plan.

WCB will consider that an employer has reported an accident resulting in an injury on the date that an employer has communicated the details of the reportable injury to the WCB in one of the following ways:

- By handling a report
- By courier
- By electronic mail
- By telephone
- By means of the Internet using the On-Line Accident Reporting System
- By facsimile, or
- By regular mail

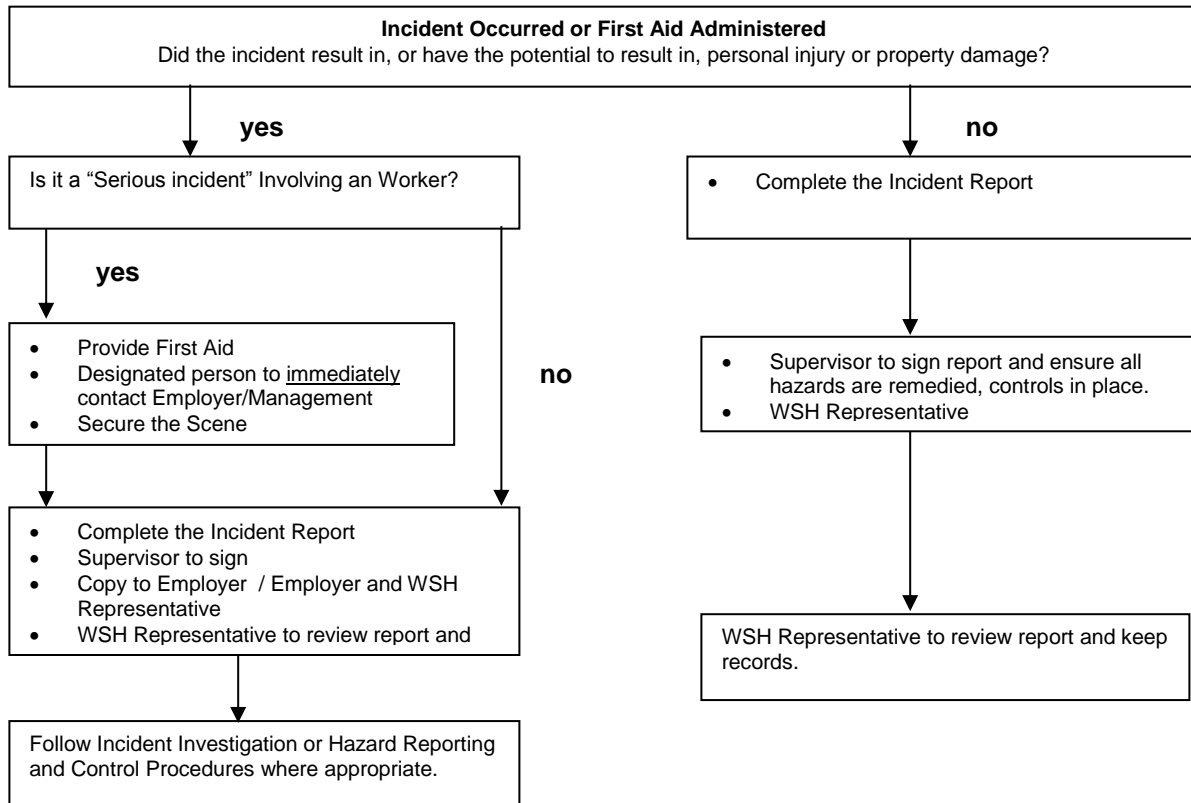
If an employer disagrees with the validity of the claim, he or she must still report the incident that results in an injury, but may include a written statement of disagreement within the specified reporting period.

DOCUMENTATION

THE COMMUNITY CENTRE will ensure all records are kept for a minimum of 5 years.

7.2: INCIDENT REPORTING FLOW CHART

Scope: Applies to all serious incidents involving Workers, Visitors, Contractors or Self-Employed Persons working on a THE COMMUNITY CENTRE job site.



The following work related incidents must be reported to The Manitoba Workplace Safety and Health Division immediately by the fastest means of communication. **Phone: 204-945-3446**

- a. a fatality of a worker
- b. a collapse or structural failure of a building, tower, crane, hoist, temporary construction support system or excavation
- c. an uncontrolled spill or escape of a toxic, corrosive, or explosive substance
- d. explosion, fire or flooding
- e. failure of an atmosphere-supplying respirator
- f. any of the following critical injuries to a worker:
 - i. fracture of the skull, spine, pelvis, arm, leg, hand or foot
 - ii. amputation of an arm, leg, hand, foot, finger or toe
 - iii. permanent or temporary loss of sight
 - iv. third degree burns
 - v. unconsciousness as the result of a concussion
 - vi. injury resulting from electrical contact
 - vii. cut or laceration requiring medical treatment at a hospital
 - viii. asphyxiation or poisoning

8.1: EMERGENCY PREPAREDNESS POLICY AND PROCEDURE

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons

Reference(s): The Workplace Safety and Health Act, Section 7.4(5)(c).

Form(s): Q – Emergency Response Plan Checklist; R – Emergency Equipment Checklists

RESPONSIBILITIES

1. Employer
 - a. Ensure the Emergency Response Plan (ERP) is communicated, implemented and maintained.
2. Supervisors
 - a. Be familiar with all aspects for the ERP.
 - b. When notified by the Worker who discovered the emergency, initiate the ERP.
3. Worker Discovering the Emergency
 - a. Be familiar with all emergency procedures in THE COMMUNITY CENTRE ERP. (E.g. evacuation procedures, use of fire extinguishers, etc.).
 - b. When an emergency is discovered:
 - i. Assess the scene, secure the scene and ensure safety for themselves and any other Workers , contractors or visitors.
 - ii. Order everyone to evacuate the area, if necessary.
 - iii. Notify the Supervisor/Management as quickly as possible.
 - iv. If required, ensure 911 has been called.
 - v. Stay on scene, and if safe, offer assistance.
4. Emergency Response Coordinator (ERC) – City of Winnipeg
 - a. Assume responsibility for all activities directly related to the ERP.
 - b. When informed of an emergency:
 - i. Confirm the incident. If possible, determine the cause and severity. E.g. number of casualties, quantity of chemical released, etc.
 - ii. Initiate the Emergency Response Procedures, if not already activated.
 - iii. Ensure all Workers are evacuated safely and are accounted for.
 - iv. Retain and direct off-site resources where required for assistance, containment or clean-up.
 - v. Contact the appropriate authorities, such as Manitoba Conservation, Workplace Safety and Health Division, etc.
 - vi. Ensure the completion of cleanup, remedial action and reporting.
5. Designated Worker
 - a. Monthly inspection of:
 - i. Fire extinguishers

- ii. CO detectors, where equipped
- iii. Smoke detectors, where equipped
- iv. First Aid Kits (refer to Inspection Checklists)
- v. Emergency Lighting, where equipped
- vi. Eye wash stations and emergency showers, where equipped.

POLICY

THE COMMUNITY CENTRE will develop and maintain an Emergency Response Plan (ERP), and will train and educate Workers in its use to ensure timely and appropriate response to emergencies. The Plan will identify potential emergencies and hazards, and will include procedures to mitigate the effects of an emergency or disaster.

The specific objectives of the Emergency Response Plan are:

1. Strive to ensure that emergencies are avoided through effective risk Management practices.
2. Proactively develop a state of readiness so that, in the event of an emergency, losses to people, process, property and the environment are minimized.
3. Provide an understanding of the type and extent of potential emergencies (risk/exposures) that THE COMMUNITY CENTRE may experience.

IDENTIFICATION OF EMERGENCIES

Emergency Response Procedures have been developed in the ERP for the following types of emergencies:

- | | |
|---------------------------------------|-------------------------------|
| 1. Evacuation Procedures | 10. Electrocution |
| 2. Fire | 11. Lightning |
| 3. Injury | 12. Vehicle Collision |
| 4. Explosion | 13. Gas rupture |
| 5. Spill | 14. Confined space rescue |
| 6. Physical Threat/Workplace Violence | 15. Heart Attack/ Stroke/ AED |
| 7. Carbon Monoxide Poisoning | 16. Medical Sharpe |
| 8. Tornado | |
| 9. Extreme Temperatures | |

FIRE AND CO (CARBON MONOXIDE) SAFETY

1. All Workers are expected to maintain good housekeeping practices in their work area, keeping it free of clutter and garbage.
2. Solvent soaked rags must be disposed of in approved metal disposal receptacles.

3. Emergency exits must be clearly signed and have clear access at all times. Any worker who notices a blocked emergency exit should take action to have it cleared immediately.
4. Fire extinguishers must be highly visible, signed with clear access at all times.
5. Fire extinguishers are required in the following locations:
 - a. Office areas
 - b. Community Centres
6. THE COMMUNITY CENTRE will ensure fire extinguishers are located throughout the work area.
 - a. Testing and maintenance logs must be kept for all equipment.
7. Workers will be educated in fire safety and the safe use of fire extinguishers.
8. Storage of combustibles near any hot surfaces, equipment or electrical panels/outlets is prohibited.

Fire Classifications & Extinguishers

Classification	Extinguisher
Class A Fires involving ordinary combustible materials such as wood, cloth, paper	Use water (dry chemical extinguisher can also be used)
Class B Fires involving flammable liquids such as solvents, greases, gasoline, and oil	Dry chemical foam, CO ₂
Class C Fires involving electrical equipment	Non-conducting agents (e.g., dry chemical or carbon dioxide)
Class D Fires involving combustible metals such as magnesium, sodium, lithium, powdered zinc	Special dry powder medium or dry sand

It is imperative to have the right fire extinguisher for the type of fire that could be expected.

TRAINING

Training is mandatory to ensure competency of THE COMMUNITY CENTRE worker to respond to emergencies in an efficient and responsible manner. THE COMMUNITY CENTRE training plan must ensure:

1. All Workers are trained in general Emergency Response Procedures.
2. Everyone understands the roles and responsibilities of team members.
3. Familiarity with emergency response equipment and, PPE and response.

Training of the ERP should be provided in the following situations:

1. For new Workers during their orientation period.
2. For existing Workers when there is a change in their duties.
3. When new equipment or materials are introduced.
4. When emergency procedures are revised.
5. When a drill indicates need for improvement.

PRACTICE DRILLS

Practice drills will be held annually to develop worker skills and to evaluate the quality of the ERP. The objectives of a drill include evaluation of the following:

1. practicality of the plan (structure and organization)
2. adequacy of communications and interactions among parties
3. emergency equipment effectiveness
4. adequacy of first aid and rescue procedures
5. adequacy of training
6. public relations skills
7. evacuation and muster procedures

Drills may be conducted in various forms such as:

1. on-site practical scenarios
2. table top or paper exercises
3. computer-synthesized simulations

Emergency Contact List**(Please complete to make specific to your Community Centre)**

THE COMMUNITY CENTRE WORKERS		
Contact Person	Home	Cell or Other
OUTSIDE AGENCIES		
ALL EMERGENCIES: POLICE-FIRE-AMBULANCE	911	
St Boniface Hospital – Emergency Dept.	(204) 237-2260	
Victoria General Hospital Switchboard	(204) 269-3570	
Health Sciences Center	(204) 787-3661	
Concordia Hospital	(204) 661-7194	
Seven Oaks Hospital	(204) 632-7133	
Grace General Hospital	(204) 837-8311	
Poison Hotline	(204) 787-2591	
MB Hydro Electrical & Natural Gas Leak 24 hr. Emergency	(204) 480-5900	1-888-624-9376 (1-888-MBHYDRO)
Water and Waste Department	311	
Water and Waste 24 hr. Emergency	311	(204) 986-2626
Workplace Safety and Health (WSH) Division	(204) 945-3446	1-866-888-8186
WSH Division After Hours Emergency	(204) 945-0581	
Environmental Incident Reporting - 24 hr.	(204) 945-4888	
1Life Workplace Safety & Health	(204) 231-5433	1-866-223-7374
Canutec – 24 hr.	(613) 996-6666	<i>Provides comprehensive information on chemical hazards, spills, etc.</i>

Emergency Response Plan Reportable Quantities

Call Local Police AND 945-4888

Classification (Under Transportation of Dangerous Goods Act)	Hazard	Reportable Quantity or Level
1	Explosives	All
2.1	Compressed gas (flammable)	100 L
2.2	Compressed gas	100 L
2.3	Compressed gas (toxic)	All
2.4	Compressed gas (corrosive)	All
3	Flammable liquids	100 L
4	Flammable solids	1 kg
5.1 Packing groups I and II	Oxidizer	1 kg or 1 L
Packing group III	Oxidizer	50 kg or 50 L
5.2	Organic peroxide	1 kg or 1 L
6.1 Packing group I	Acute toxic	1 kg or 1 L
Packing group II and III	Acute toxic	5 kg or 5 L
6.2	Infectious	All
7	Radioactive	Any discharge or radiation level exceeding 10 mSv/h at the package surface and 200 uSv/h at 1m from the package surface.
8	Corrosive	5 kg or 5 L
9.1	Miscellaneous (except PCB mixtures)	50 kg
9.1	PCB mixtures	500 g
9.2	Aquatic toxic	1 kg or 1 L
9.3	Wastes (chronic toxic)	5 kg or 5 L

Emergency	Contact	Phone Number	Additional
Chemical Spill or Release(refer to reportable quantities)	Manitoba Conservation 24 hour emergency line	204-945-4888	ALSO fax the Environmental Incident Report Form at 204-945-2420
Serious Injury of a worker, including hazmat exposure	Manitoba Workplace Safety and Health	204-945-0581	Complete Incident Reporting Procedures
Public Exposed to Hazardous Material	Medical Officer of Manitoba Health	204-945-6190 Or 204-945-0183	Complete Incident Reporting Procedures

GENERAL PROCEDURES – WHAT TO DO IN AN EMERGENCY

In all cases, Management will ensure that the following are notified:

- ***WSH Division*** if there has been a “Serious Incident”
- ***Manitoba Conservation*** if there has been a release of a reportable quantity of hazardous material.

No work site is without risk and in spite of all efforts to create and maintain a safe work environment; workers must be prepared for emergencies.

At a minimum, each work area must be capable of:

1. providing Emergency First Aid and CPR to an injured person
2. providing transportation to the injured to obtain medical assistance (DO NOT hesitate to call an ambulance if required)
3. dealing with fire, injury, minor explosion or spill
4. promptly contacting outside agencies for assistance
5. implementing emergency response and evacuation procedures

1. Evacuation Procedures

There are two types of evacuations:

1. Area Evacuation – for localized spills, fires or other emergencies
2. General Evacuation – for a major fire, explosion, or chemical release

The muster points for all evacuations will be determined by each community centre and posted in the workplace.

Area Evacuation

1. If an area evacuation is required, such as a minor chemical spill, fire, etc., all Workers must leave the area immediately.
2. Supervisor must:
 - a. Secure the area.
 - b. If required, ensure 911 has been called.
 - c. Take a head count and ensure everyone is accounted for.
 - d. Provide assistance and emergency first aid to injured people.
 - e. Clean up the spill, if safe.
 - f. Notify the City ERC.

General Evacuation

1. If there is a major event such as a fire, explosion, or chemical spill, the entire building must be evacuated.
2. The person discovering the emergency will warn others in the immediate area and promptly contact the Supervisor or Management.

3. Supervisor/Management will initiate the Emergency Response Plan, as follows:
 - a. Sound the alarm.
 - b. Clear all Workers from the building.
 - c. Ensure 911 has been called.
 - d. Advise ERC of the emergency.
 - e. Attend to any injured people.
 - f. Take and head count and ensure everyone is accounted for.
 - g. Assist any outside agency as directed.
4. If you are advised to evacuate:
 - a. Act quickly and follow the orders of the Supervisor, ERC or emergency services personnel. Every situation will be different, so follow special instructions.
 - b. Stay with the group, DO NOT go off on your own.
 - c. Do not leave the muster point until advised by Management or the authorities that it is safe.

2. Fire Procedures

1. Your safety should always be your primary concern when attempting to fight a fire.
2. If you discover a fire, restrict access and secure the area.
3. Can the fire be controlled in 30 seconds?
4. If the fire is contained, small and you are able to, attempt to extinguish.
5. If fire cannot be extinguished:
 - i. Call 911.
 - ii. Account for all Workers.
 - iii. Notify the Supervisor, who will notify the ERC.
 - iv. Evaluate potential hazards (fuel or dangerous chemicals).
 - v. Evacuate the area.
 - vi. Close all doors behind you.
 - vii. Assist authorities as required.

3. Injury Procedures

1. Ensure safety for you, the victims and other Workers.
2. *If the area is not safe, can it be made safe?*
3. If it CAN, assist injured Workers.
4. If it CANNOT, then:
 - a. Restrict access to the area.

- b. Call 911.
- c. Notify the Supervisor, who will notify the ERC.
- d. Account for all Workers.
- e. Assist authorities.

4. Explosion Procedures

- 1. Restrict access and secure the area.
- 2. Call 911.
- 3. Evaluate potential for secondary explosion or associated hazard.
- 4. Evacuate the area.
- 5. Notify the Supervisor, who will notify the ERC.
- 6. Account for all Workers.
- 7. Assist authorities.

5. Spill Procedures

- 1. Restrict access and secure the area.
- 2. Take a scene survey.
- 3. Evacuate the area and account for all Workers.
- 4. Notify the Supervisor, who will notify the ERC.
- 5. Investigate the spill (source, amount, escape), if safe.
- 6. Is the amount reportable? (See table of Reportable Quantities in this Policy.) If yes, notify Manitoba Conservation.
- 7. Contain and clean up if safe to do so – consult the MSDS or call Canutec for cleanup procedures.
- 8. Assist authorities.

6. Physical Threat and/or Workplace Violence

- 1. Get away from the perpetrator. DO NOT try to restrain them.
- 2. Notify all Workers in the area.
- 3. Evacuate the area.
- 4. Call 911 from a safe location.

7. Carbon Monoxide (CO) Poisoning Procedures

Exposure to CO can cause loss of consciousness and death. Recovered Workers may have long term Central Nervous System (CNS) impairment. Summon Medical Attention Immediately!

General

1. CO is a poisonous gas produced by the incomplete combustion of any carbonaceous products, including coal, wood, oil, gasoline and propane.
2. It is colourless, odourless, tasteless and non-irritating, and can overcome an exposed Worker without warning.
3. Recognizing early warning signs of CO exposure is difficult.

Workplace exposures to CO can come from equipment such as:

1. gasoline powered pressure washers, compressors, pumps, small engines, lawn mowers, snow blowers, etc.
2. cars, trucks and forklifts – both gasoline and propane fueled
3. fuel fired heating systems, including overhead direct-fired units
4. gas appliances and fireplaces
5. welding equipment

Recognizing CO Poisoning

The most common symptoms of CO poisoning are:

- | | |
|--------------|---------------|
| 1. headache | 5. vomiting |
| 2. dizziness | 6. chest pain |
| 3. weakness | 7. confusion |
| 4. nausea | |

Myth Busters

- The use of a gasoline powered engine indoors with a window open IS NOT safe.
- The use of a gasoline powered engine indoors if the windows and doors are open and an exhaust fan is running IS NOT SAFE.

Workplace Controls

1. Gasoline/propane powered equipment or tools should be located outside and away from fresh air intakes.
2. When engines are operated indoors (e.g. motor repairs), local exhaust ventilation is required.
3. CO detectors must be located throughout the work areas.
4. Ensure that equipment, such as forklifts, are maintained within recommended emission limits.
5. Ensure adequate ventilation is provided for mobile equipment that is used indoors.
6. Educate Workers regarding CO sources and conditions that may result in CO poisoning.
7. Learn to recognize the warning symptoms of CO poisoning.
8. Wherever possible, use engines and tools powered by electricity or compressed air instead of gasoline powered equipment for indoor applications.

Never use generators, pressure washers or any other gasoline, propane, natural gas, or charcoal-burning devices inside the workplace, even near open doors and windows.

Procedure

If you suspect someone is suffering from CO poisoning:

1. DO NOT enter the area; you could become the next victim.
2. If the Worker is conscious:
 - a. Ask them to come out of the area.
 - b. Assist them as required.
 - c. Call 911.
 - d. Notify the Supervisor, who will notify the ERC.
3. If the Worker is unconscious:
 - a. Call 911.
 - b. Notify the Supervisor, who will notify the ERC.
4. In all cases:
 - a. Restrict access and secure the area.
 - b. Shut off all sources of CO, if safe.
 - c. Open all doors, windows; turn on all exhaust systems, if safe.
 - d. Account for all Workers.
 - e. Assist authorities as required.

8. Major Industrial Motor Vehicle Incident Procedures

1. If there is a major industrial incident near the worksite, DO NOT rush to the scene immediately. This kind of emergency may make approaching the scene dangerous due to hazardous chemicals, explosions or fires. It may be safer for you to stay at a distance or indoors.
2. Close all windows and doors, if possible, and evaluate the scene from a safe distance. Look for placards on the vehicles that may indicate the presence of hazardous materials.
3. Call 911 and give an accurate report including number of people involved, describe any placards or chemicals involved, and the nature of the injuries as best you can tell from your safe vantage point.
4. Notify the Supervisor and other Workers in the area, and stay inside until the scene is assessed.
5. If you smell or suspect the presence of hazardous materials like chemicals or gas, the ventilation system and all other sources of outside air, such as air conditioners, must be shut down. The ERC will ensure it is done.

6. If it is necessary to remain inside the building, the best area for shelter is a room with as few windows and doors as possible. For chemical events, this room should be as high in the building as possible to avoid vapours (gases) that settle in low-lying areas.
7. Turn on news stations to get updates and additional information.
8. Do not try to shelter in a vehicle unless you have no other choice. Vehicles are not airtight enough to give you adequate protection from poisonous vapours.
9. Act quickly and follow the instructions of the ERC or local emergency services personnel, as every situation will be different.
10. If /when you leave the shelter, follow instructions from local emergency services personnel to avoid any contaminants outside. Think about the source of the hazards, prevailing winds, secondary hazards, etc.

Chemical Contamination

1. If this type of incident results in a large chemical release, it may cause you to come in contact with hazardous materials. You must decontaminate as soon as possible to prevent rapid absorption through the skin or contamination of other people.
2. Every situation can be different, so the ERC or local emergency worker might have special instructions for you to follow.
3. The three most important things to do if you think you may have been exposed to a hazardous material are to:
 - a. *Quickly remove your clothing:*
 - i. Any clothing that has to be pulled over your head should be cut off. Do not pull clothing over your head.
 - ii. If you are helping other people remove their clothing, try to avoid touching any contaminated area. Use gloves.
 - b. *Wash yourself:*
 - i. Wash any chemicals from your skin with large amounts of soap and water.
 - ii. If your eyes are burning or your vision is blurred, rinse your eyes with water for 10 to 15 minutes. If you wear contacts, remove them and put them with the contaminated clothing. Do not put the contacts back in your eyes (even if they are not disposable contacts).
 - c. *Dispose of your clothing:*
 - i. Place contaminated clothing inside a plastic bag using rubber gloves. Anything that touches the contaminated clothing should also be placed in the bag. Place that bag inside another plastic bag.
 - ii. The ERC or emergency services personnel will arrange for further disposal. Do not handle the plastic bags yourself.

9. Tornado Procedures

Signs of an Approaching Storm

1. Tornadoes can strike rapidly and without warning.
2. DO NOT depend on seeing a funnel cloud or hearing a thunderstorm.
3. Weather signs that may indicate a tornado is approaching:
 - a. a dark or green-colored sky
 - b. a large, dark, low-lying cloud
 - c. large hail
 - d. a loud roar that sounds like a freight train
4. If you notice any of these weather conditions:
 - a. warn others in the area
 - b. take cover immediately
 - c. keep tuned to local media or to a weather station

Sighting a Funnel Cloud

1. Take shelter immediately.
2. If you spot a tornado that is far away, help alert others to the hazard by reporting it to local media before taking shelter.
3. Use common sense and exercise caution: if you believe that you might be in danger, seek shelter immediately.
4. The key to surviving a tornado and reducing the risk of injury lies in planning, preparing, and practicing what you will do if a tornado strikes.

On the Road

1. The least desirable place to be during a tornado is in a motor vehicle. Cars, buses, and trucks are easily tossed by tornado winds.
2. **DO NOT TRY TO OUTFRAN A TORNADO IN YOUR CAR.** If you see a tornado, stop your vehicle and get out. Do not get under your vehicle. Follow the directions for seeking shelter outdoors (see next section).

Outdoors

If you are caught outside during a tornado and there is no adequate shelter immediately available:

1. Avoid areas with many trees.
2. Avoid vehicles.
3. Lie down flat in a gully, ditch, or low spot on the ground.
4. Protect your head with an object or with your arms.

In a Building

5. A long-span building, such as an industrial plant, is especially dangerous because the roof structure is usually supported solely by the outside walls. Most such buildings hit by tornados cannot withstand the enormous pressure, and collapse.
 - a. Stay away from windows and glass doorways.
 - b. Get to the lowest level of the building, the basement if possible, and stay away from the windows.
 - c. If there is no time to get to a tornado shelter or to a lower level, try to get under a door frame or get up against something that will support or deflect falling debris.
 - d. Remember to protect your head.
6. Office, shop, etc.
 - a. Move away from windows and glass doorways.
 - b. Go to the innermost part of the building on the lowest possible level.
 - c. Do not use elevators because the power may fail, leaving you trapped.
 - d. Protect your head and make yourself as small a target as possible by crouching down.

After a Tornado

1. Fifty percent of the tornado-related injuries are sustained during rescue attempts, cleanup, and other post-tornado activities such as stepping on nails, falling and unsecured objects.
2. Because tornadoes often damage power lines, gas lines, or electrical systems, there is a risk of fire, electrocution, or explosion.
3. If there has been structural damage, shut off electrical power, natural gas, and propane tanks to avoid fire, electrocution, or explosions IF SAFE TO DO SO.
 - a. If you see frayed wiring or sparks, or if there is an odour of something burning, shut off the electrical system at the main circuit breaker if you have not done so already.
 - b. If you smell gas or suspect a leak, turn off the main gas valve, open all windows, and leave the building immediately.
 - i. Notify the supervisor who will in turn notify the ERC, the gas THE COMMUNITY CENTRE , the police, or fire departments.
 - ii. Do not turn on the lights, light matches, smoke, or do anything that could cause a spark.
 - iii. Do not return to the workplace until you are told it is safe to do so.

Injuries

1. Check for injuries. Do not attempt to move seriously injured people unless they are in immediate danger of further injury. Follow injury procedures.
2. If you are trapped, try to attract attention to your location.

General Tornado Safety Precautions

1. Do not enter any damaged structure.
2. Be aware of hazards from exposed nails and broken glass.
3. Do not touch downed power lines or objects in contact with downed lines. Report electrical hazards to Supervisor who will notify the police and the utility and THE COMMUNITY CENTRE .

4. Hang up displaced telephone receivers that may have been knocked off by the tornado, but stay off the telephone, except to report an emergency.
5. Cooperate fully with Management and safety officials. Respond to requests for volunteer assistance by emergency worker, but do not go into damaged areas unless assistance has been requested. Your presence could hamper relief efforts, and you could endanger yourself.

10. Extreme Temperature Procedures

Extreme Heat

Be aware of yours and others' risk for heat stroke, heat exhaustion, heat cramps, and fainting. To avoid heat illness, you should:

1. Drink some water every 15 to 20 minutes and at least 2-3 L each day.
 - a. Avoid alcohol and caffeine. They both dehydrate the body.
2. Wear light-coloured, loose-fitting clothing.
3. When indoors without air conditioning, open windows if outdoor air quality permits and use fans.
4. If you feel dizzy, weak, or overheated, inform your Supervisor. Go to a cool place, sit or lie down, drink water, and place a wet, cold cloth on your face and neck. If your condition does not improve quickly, seek medical attention.

Heat stroke is the most serious heat illness and can cause death or permanent disability. It happens when the body can't control its own temperature and its temperature rises rapidly. Sweating fails and the body cannot cool down. Body temperature may rise to 106°F or higher within 10 to 15 minutes.

Warning signs of heat stroke vary but can include:

1. red, hot, and dry skin (***no sweating is a deadly sign – get medical attention immediately!***)
2. rapid, strong pulse
3. throbbing headache
4. dizziness, nausea, confusion, or unconsciousness
5. an extremely high body temperature (above 103°F)

If you suspect that someone has heat stroke, follow these instructions:

1. Immediately call for medical attention.
2. Get the person to a cooler area and cool by rapidly by immersing in cool water, shower, or spraying or sponging with cool water. If the humidity is low, wrap the person in a cool, wet sheet and fan vigorously.
3. Do not give the person alcohol to drink. Get medical assistance as soon as possible.
4. If emergency medical assistance does not arrive quickly, call the hospital emergency room for further instructions.

Extreme Cold

Hypothermia is a condition where a person's core body temperature is lower than 35°C (95°F). Hypothermia has three levels: acute, sub-acute, or chronic.

Causes of Hypothermia

1. cold temperatures
2. improper clothing, shelter, or heating
3. wetness
4. fatigue, exhaustion
5. poor fluid intake (dehydration)
6. alcohol intake

Preventing Hypothermia

1. Wear several layers of clothing, as layers of clothing can be removed or replaced depending of physical activity.
2. Move around, physical activity raises body temperature.
3. Water cooler than 75°F (24°C) removes body heat more rapidly than can be replaced. The result is hypothermia. To avoid hypothermia:
 - a. Wear high rubber boots if working in water.
 - b. Ensure clothing and boots have adequate insulation.
 - c. Avoid working alone, if there is a risk of hypothermia.
 - d. Take frequent breaks out of the water.
 - e. Change into dry clothing when possible.
 - f. Keep hydrated by drinking warm liquids. If possible do not eat snow or drink cold water, as your body uses critical energy to warm these liquids.

Helping Someone Who Is Hypothermic

As the body temperature decreases, the person will be less awake and aware and may be confused and disoriented. Because of this, even a mildly hypothermic person might not think to help himself/herself.

1. Even someone who shows no signs of life should be brought quickly and carefully to a hospital or other medical facility.
2. Do not rub or massage the skin.
3. People who have severe hypothermia must be carefully rewarmed and their temperatures must be monitored. Do not use direct heat or hot water to warm the person.
4. Give the person warm beverages to drink.
5. Do not give the person alcohol or cigarettes; blood flow needs to be improved, and these slow blood flow.

11. Electrical Contact Procedures

Electrical Shock

If you believe someone has suffered electrical shock, take the following steps:

1. Look first. Don't touch. The person may still be in contact with the electrical source. Touching the person may pass the current through you.
2. Call 911.
3. Turn off the source of electricity if possible. If not, move the source away from you and the affected person using a non-conducting object made of cardboard, plastic or wood.
4. Once the person is free of the source of electricity, check the person's breathing and pulse. If either has stopped or seems dangerously slow or shallow, begin cardiopulmonary resuscitation (CPR) immediately if trained to do so, or summon first aider. See #3 Injury Procedures.
5. Do not move the person unless absolutely necessary, they could have a head or spine injury as a result of the current passing through them.
6. Don't touch burns, break blisters, or remove burned clothing. Electrical shock may cause burns inside the body. Ensure the person seeks medical attention.

Power Line Hazards and Vehicles

1. If a power line falls on a vehicle, the SAFEST PLACE IS IN THE VEHICLE. Warn people not to touch the vehicle or power line.
2. Call or ask someone to call 911.
3. The only circumstance in which you should consider leaving the vehicle is if the vehicle catches on fire.
 - a. Open the door.
 - b. Do not step out of the car. You may receive a shock.
 - c. Jump free of the car so that your body clears the vehicle before touching the ground.
 - d. Once you clear the vehicle, shuffle at least 150 feet away, with both feet on the ground. ALWAYS KEEP YOUR FEET TOGETHER.
4. Do not try to help someone else from the car while you are standing on the ground.

12. Lightning**Signs you are close to lightning**

1. Thunder can be a good indicator of lightning - loud crackling means its close, whereas rumbling means the storm is further away.
2. Because light travels faster than sound, you will see lightning before you hear the thunder. Each second between the flash and the thunderclap represents about 300 metres. If you can hear thunder, you are within striking distance.

Plan ahead. When you first see lightning or hear thunder, head for a well-constructed building or an enclosed metal vehicle. Lightning often comes before rain - don't wait for the rain to start before taking action.

1. If you are in a building:
 - a. Stay away from windows, door and fireplaces.
 - b. Stay away from anything that will conduct electricity, such as metal pipes, sinks, electrical appliances or regular telephones.

- c. Use battery operated devices, such as cordless phones.
- 2. If you are in a vehicle:
 - a. do not touch any metal parts of the car (steering wheel, seat belt, metal frame, plugged in cell phone, etc.) and remove any metal that you may be wearing (watch, coins in pocket etc.). Keep your hands on your lap.
 - b. Do not get out of the car while lightning is within 10 kilometers (6 miles).
 - c. Do not park near trees or other objects that could fall onto vehicle.
 - d. Beware of downed power lines that may be touching your car. Do not get out. It is safest to remain in vehicle until emergency personnel instruct you to exit vehicle.
- 3. If you are outdoors:
 - a. Take shelter in low lying areas, such as valleys or ditches if not water filled.
 - b. Avoid water, high ground and open spaces.
 - c. Avoid all metal objects, such as electric wires, fences and machinery.
 - d. Unsafe places include under canopies, rain shelters, greenhouses, tents, small non-metal sheds, and picnic shelters and near trees.
 - e. Crouch down on the balls of your feet and put your feet together. Wrap your arms around your knees and bend forward. You need to touch as little of the ground as possible. Do not lie flat.
 - f. If you are with a group of people, spread out several meters from each other.
 - g. Place your hands over your ears so they don't get damaged by the thunder.
- 4. If someone has been struck by lightning, remember that injured people do not carry an electric charge. Administer First Aid if you are qualified to do so. Call an ambulance and send for help immediately.

13. Vehicular Collision Procedures

A collision is an action where a vehicle may come into contact with another vehicle, person, object, animal where there may be damage, injury or death.

- 1. Stop your vehicle immediately.
- 2. Check for injured people. If there are injuries call 911 to get medical assistance, then call the police. Provide first aid and obtain assistance from bystanders to protect the area until responders arrive.
- 3. Do not move vehicles in serious collisions.
- 4. In property damage only situations, in which the police are not attending, take a series of photographs from several angles and viewpoints.
- 5. Move the vehicles out of intersections or roadways so further collisions do not occur. Remove debris from the roadway that may cause further situations.
- 6. Exchange driver's license information, registration information and insurance information with the other driver. Write down all of the pertinent information including names, addresses, policy numbers. You are required to provide this information to police or to the other driver if the police will not be attending.

7. If you suspect that alcohol or drugs are involved, while speaking with the other driver, call the police.
8. If there are unlicensed drivers, unregistered vehicles etc., call the police and request that they attend. If a person tries to talk you out of calling the police, there may be a reason such as a driving suspension etc. If Police do not attend, attempt to take a photograph of the driver.
9. Obtain the names, addresses, and phone numbers of all persons who were witnesses to the collision.
10. If you collide with an unattended vehicle or property you should leave behind a note with your contact information and a telephone number. Call the police to advise that you were involved and that you are reporting the collision to avoid a "hit and run" scenario.
11. Take note of the date, time, road conditions, weather, visibility and all other circumstances that may play a role in the collision.

In Manitoba, a written collision report must be made within 7 days of the collision in property damage situations.

Tips:

- Remain calm... In most situations where there is property damage, the insurance companies will sort out the details. If emotions are running high, attempt to calm things down until police arrive.
- Most smart phones are able to take photographs and video which will show information that may support your insurance claim / police report. If you are using camera and recording features, be sure to double check that these features are working properly.
- When talking to persons at the collision do not make any admissions or take responsibility for the collision.

14. Gas Rupture

1. Alert others, turn off all equipment, eliminate sources of ignition and leave the area immediately.
2. Contact emergency services ie: 911 and Manitoba Hydro 24 hour emergency # 1-888-624-9376 (1-888-MBHYDRO) province-wide or 204-480-5900.
3. DO NOT use a cell phone close to the gas leak as the phone can generate a spark and ignite the gas causing an explosion.
4. Notify the Supervisor, who will notify the ERC.
5. Account for all Workers.
6. Restrict access to area.
7. Assist authorities as requested.
8. Follow incident reporting and investigation procedures.

15. Confined Space Rescue

1. NEVER enter a confined space to perform a rescue without training in confined space rescue AND following all Safe Work Procedures. 60% of victims are would be rescuers; YOU may become the next victim.
2. Restrict access and secure the area.

3. Call 911.
4. Notify the Supervisor, who will notify the ERC.
5. Effective voice communication must be maintained at all times between workers engaged in the rescue or evacuation and the person directing the rescue.
6. A rescue worker must not enter a confined space unless there is at least one additional worker located outside to render assistance.
7. A self-contained breathing apparatus, or air supplied respirator with escape bottle, must be used during rescue operations in an unknown or IDLH atmosphere.
8. Rescue procedures must apply every possible effort to eliminate, control or reduce the risk to emergency personnel responding to emergency situations including the use of mechanical ventilation.
9. Assist authorities once they arrive.
10. Follow incident reporting and investigation procedures.

16. Medical Sharps

If you are get pricked by a needle or other medical sharp:

1. Get Immediate First Aid
 - a. Encourage bleeding of the injury site
 - b. Wash injury site thoroughly with soap and water
 - c. Cover area with sterile dressing if necessary

If you get exposed to any bodily fluids:

2. For eye/mucus exposure:
 - a. Flush with fresh water for 15 continuous minutes
 - b. Consult MSDS (if applicable)
 - c. Seek medical advice within 2 hours
 - d. Bring immunization records if possible

What to do if you have found a needle:

When viruses in needles are exposed to the air, the viruses usually die quickly. There is no way to know how long a needle has been lying where you found it, so even though you are very unlikely to be infected by poking yourself, it is best to be safe.

In most cases, you can safely dispose of a needle yourself:

1. Find a sturdy container with a lid, like a bleach bottle or a plastic pop bottle. Do not use glass jars because they can break, or thin plastic containers that a needle could pierce. Or, if you need a plastic container, you can get one by calling Street Connections. Set the container on a stable surface.
2. Put on thick gloves that are not easily pierced.
3. Use a pair of tongs, pliers, or tweezers to pick up the needle. Do not try to put the cap back on.

4. Pick up the needle and point the tip away from you. Put it in the container and tape the lid tightly closed (duct tape if possible) for extra security.
5. Put the container in the regular garbage or a city dumpster, not into recycling.
6. If you have a small number of needles, you can bring them to needle drop boxes located around Winnipeg. If you have a larger number, you can bring your container to certain community agencies. Look for locations offering 'Needle drop-off' on our interactive map for these locations.

When should I call for help?

- If you are not able to safely pick up a needle.
- If you see many needles in a pile, for example, in a stairwell or behind a dumpster.
- If you see broken needles scattered on the ground.
- If you need help picking up a needle:
 - On public property, call 311.
 - On private property, call [Street Connections at 204-981-0742](tel:204-981-0742).

Emergency First Aid:

1. *Eye*: flush with copious amounts of water for 15 minutes. Eyelids should be held apart and away from eyeball for thorough rinsing.
2. *Skin*: flush with copious amounts of water for 15 minutes while removing contaminated clothing and shoes. Exercise caution when removing contaminated clothing as it may be frozen to the skin. Do not rub or apply ointment on affected area.
3. *Inhalation*: remove to fresh air. Administer oxygen or artificial respiration if necessary.
4. *Ingestion*: if conscious, give large amounts of water to drink or may drink orange juice or citrus to counteract ammonia.
5. Do **NOT** induce vomiting.

SEEK IMMEDIATE MEDICAL HELP FOR ALL EXPOSURES!

17. Heart attack/ Stroke/ AED

Recognizing the first signs of a heart attack is critical. Here are some of the most common symptoms:

- Squeezing chest pain
- Problems breathing
- Abdominal or back pain (more common in women)
- Nausea and vomiting
- **Denial** (The most dangerous of all the heart attack symptoms. Some people may try to treat their "indigestion" with antacids, others think that they simply need a rest, or refuse to seek help for fear of being seen as weak. The most dangerous words associated with chest pain are "Maybe it will go away")

- Cold, sweaty skin
 - Skin that is paler or bluish
1. Check:
 - a. Check the scene for danger
 - b. If safe, check the person
 - c. Summon for first aider's assistance and have them proceed with this procedure.
 - d. Ask if they have medication, (i.e. nitroglycerine) NOTE: You are never permitted to administer medication to someone else. You are only allowed to assist a person in retrieving their medication. Then you may help prepare them to take their own medication.
 2. Call:
 - a. After the person rests or administers their nitroglycerin and the symptoms have not gone away, have someone call EMS/9-1-1. If you are alone, call emergency services yourself, and then return to care for the person.
 3. Care:
 - a. Make sure the person is resting comfortably.
 - b. Ask the person if he/she has taken any drugs for erectile dysfunction ((such as Viagra®, Levitra®, Cialis®). Do not allow person to take nitroglycerin if so. WARNING: ERECTILE DYSFUNCTION DRUGS CAN CAUSE A FATAL LOWERING OF BLOOD PRESSURE IF TAKEN IN CONJUNCTION WITH NITROGLYCERIN.
 - c. Help the person take nitroglycerin and/ or ASA (aspirin). ASA is located in the First Aid kit.
 - d. Nitroglycerin dose may be repeated every five minutes up to a maximum of three doses has been administered
 - e. Continue to provide care until EMS arrives.

IMPORTANT: Before offering ASA, ask if the person has an allergy to it or has asthma. If the answer to either question is yes, do not give ASA.

Stroke

Recognizing the first signs of a stroke is critical. Here are some of the most common signs and symptoms:

Remember **FAST**:

FACE – facial numbness or weakness, especially on one side.

ARM – arm numbness or weakness, especially on one side.

SPEECH – slurred speech or difficulty speaking or understanding.

TIME – call EMS/9-1-1 immediately.

Other symptoms:

- Sudden, severe headache
- Dizziness or confusion
- Unconscious or temporary loss of consciousness
- Sudden loss of bladder control

First Aid for a Stroke

1. Check:
 - Check scene for danger.
 - If safe, check the person.
2. Call:
 - Have someone call EMS/9-1-1. If you are alone, call emergency services yourself, and then return to care for the person.
3. Care:
 - Make sure ABCs (Airway Breathing Circulation) are present.

AED

AED's should be used by persons trained and authorized to do so. At a minimum, training must include:

- a. Certification in CPR A
- b. It is preferable that they have additional AED Training – All training must conform to the standards of the Heart and Stroke Foundation of Canada and the Canadian Red Cross.

Note: AEDs are user-friendly devices that untrained bystanders can use to save the life of someone having a heart attack.

INDICATIONS FOR USE

- a. 8 years of age AND
- b. Patient is unconscious AND
- c. Patient is not breathing

PRECAUTIONS

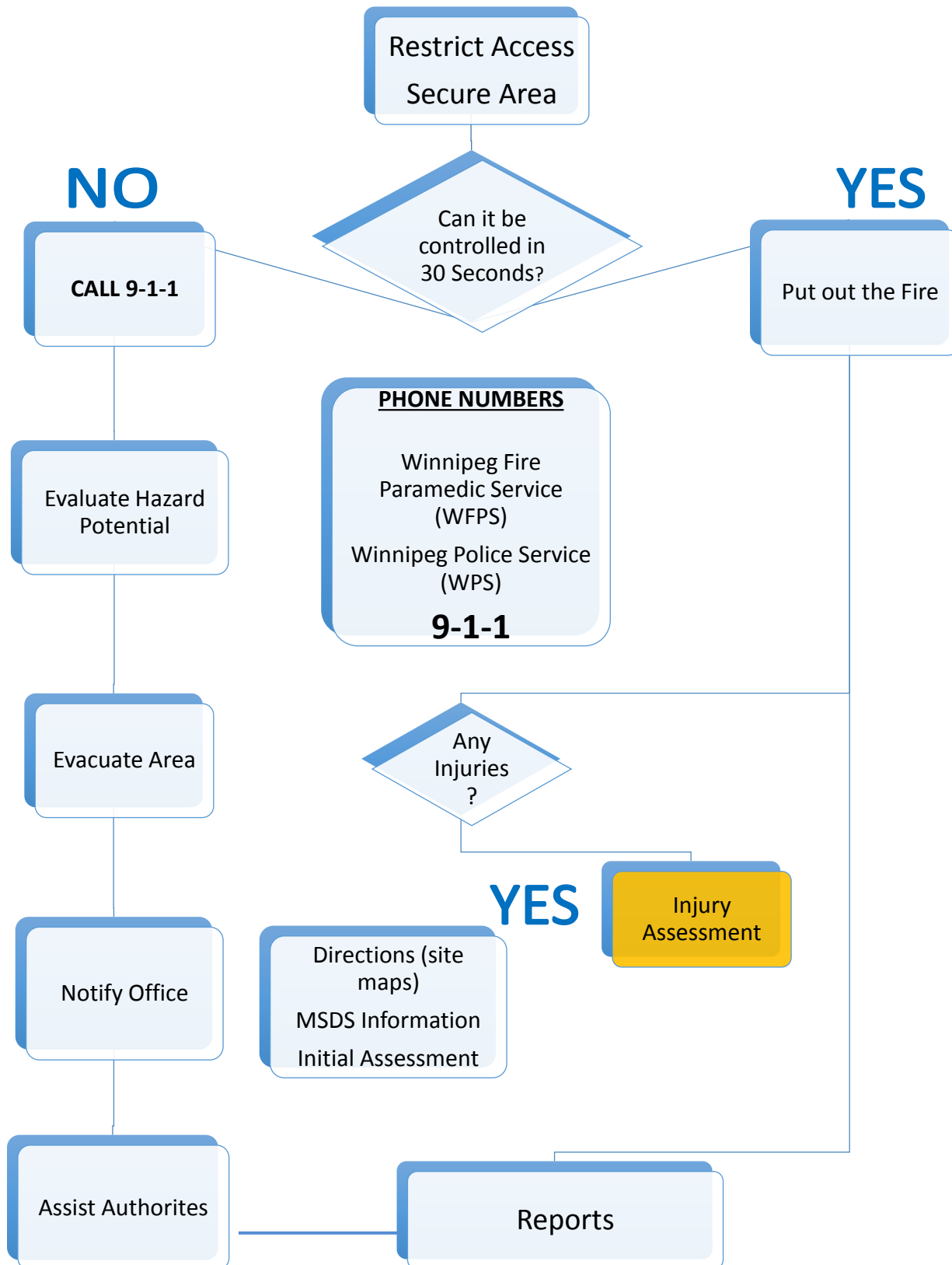
1. Take universal precautions – always use gloves and a mask
2. Remove any medical patches with a gloved hand
3. Remove jewelry from patients neck
4. Do not place electrodes over implanted pacemaker; ensure it is at least 1 inch away
5. Remove patient from standing water
6. While analyzing and delivering a shock:
 - a. Ensure no patient movement
 - b. Clearly state “stand clear, everyone stand clear”

STEPS TO DEFIBRILLATION

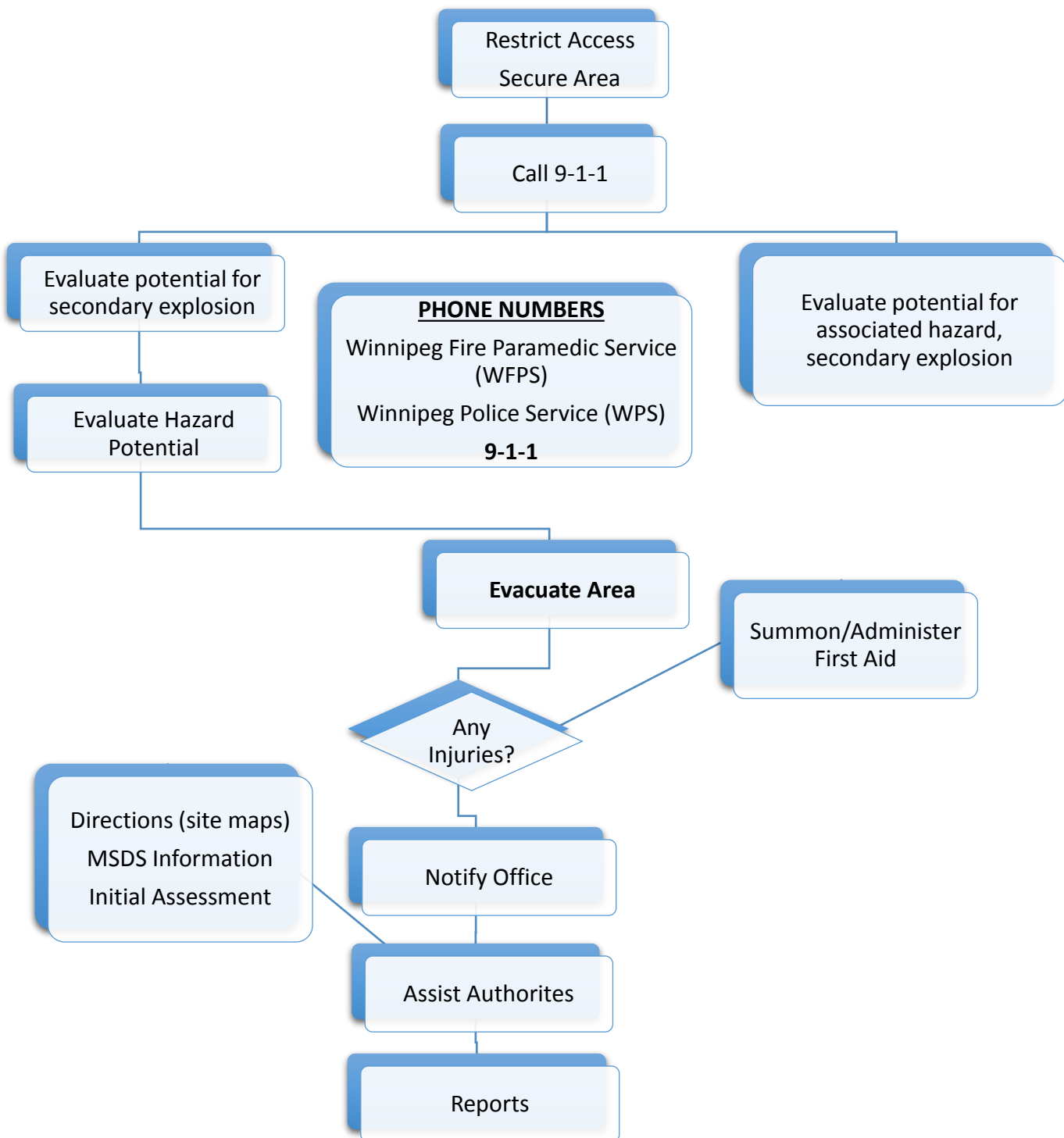
1. **Check the scene for safety** for you, bystanders, and the patient BEFORE approaching the patient for hazards:
 - a. Electrical, chemical, moving equipment, fire or flammable gasses, threatening persons etc.
2. **Check the patient for responsiveness** – pinch and shout
3. **Call EMS / 911 as required.** This MUST NOT be delayed!
4. **Check ABC's**
 - a. A – Open the airway
 - b. B – Check breathing for no more than 10 seconds
If NO BREATHING give 2 breaths
 - c. C – Check for signs of circulation. *If there are no signs of circulation (normal breathing, coughing or movement), call for or get the AED. Ensure 911 has been called.*
5. **Perform CPR until the AED arrives.**
6. **Stop CPR when the AED has been readied.**
 - a. Open AED, ensure electrodes are attached to the unit, and turn on (via GREEN “ON” button)
 - b. Shave chest with disposable razor if indicated. Dispose of razor in safe manner.
 - c. Wipe chest with towel if it is wet.
7. **Follow the AED's voice prompts** until EMS arrives.



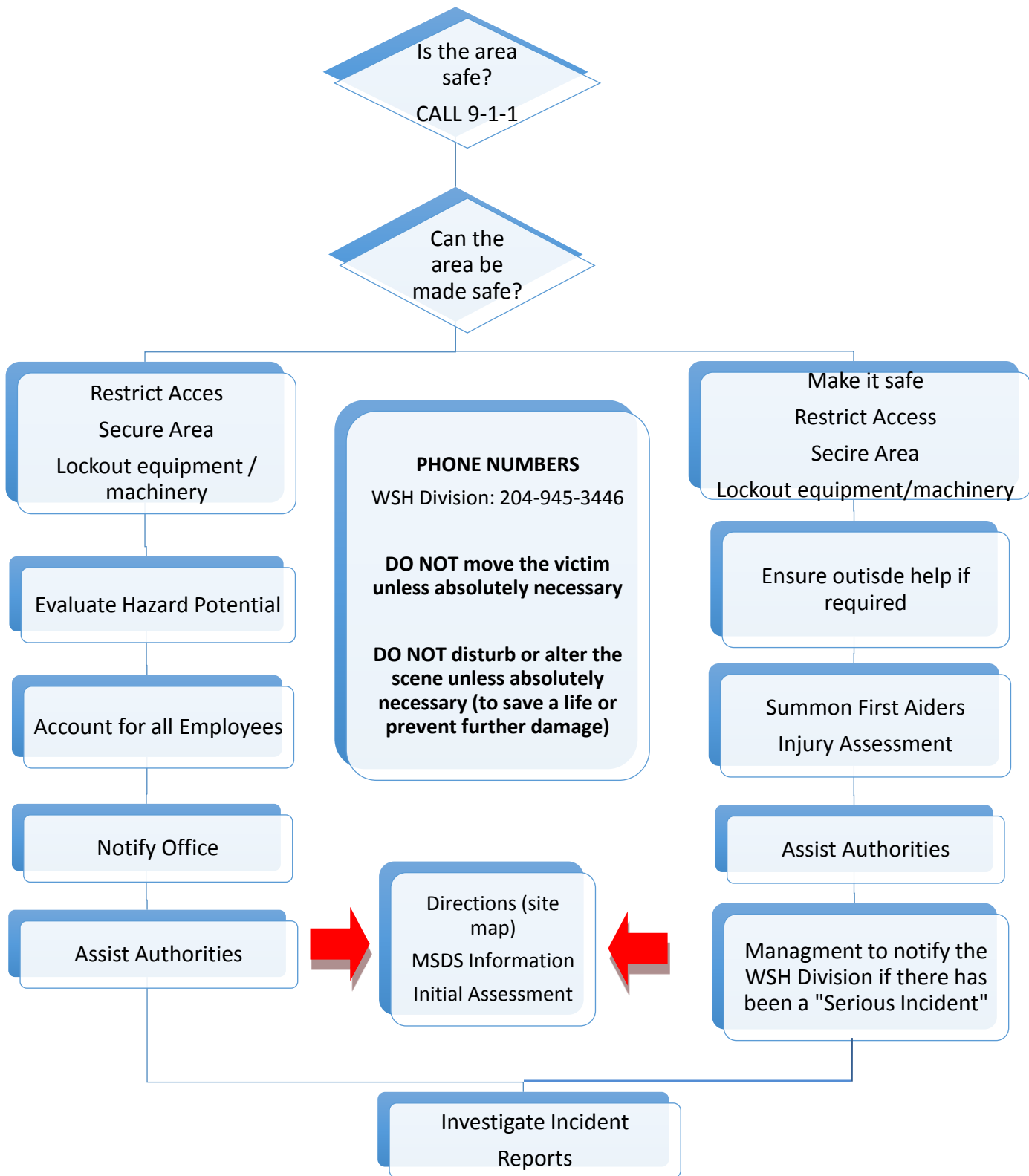
EMERGENCY RESPONSE - FIRE



EMERGENCY RESPONSE - EXPLOSION



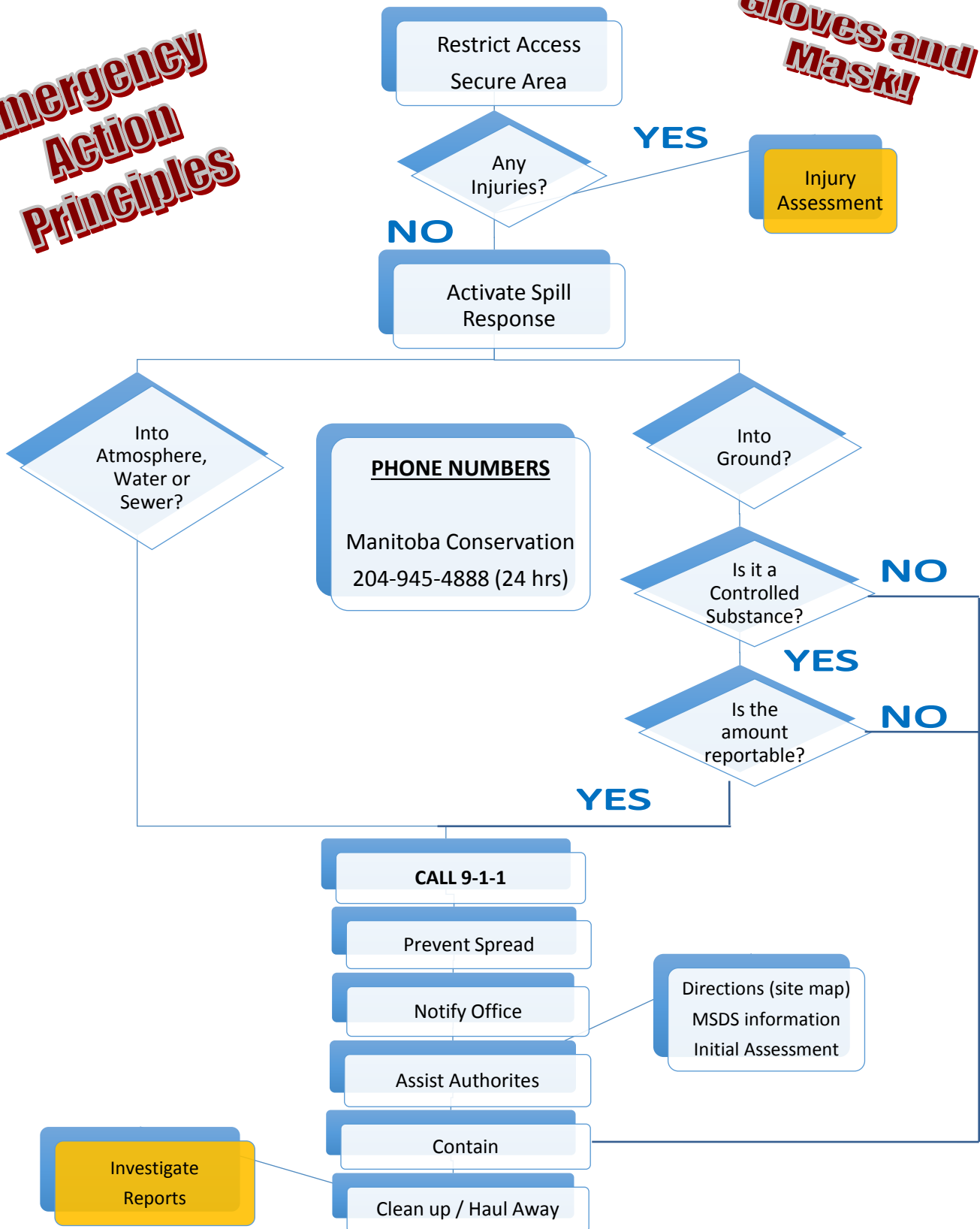
EMERGENCY RESPONSE – INJURY / INCIDENT



EMERGENCY RESPONSE - SPILL / INCIDENTAL RELEASE

**Emergency
Action
Principles**

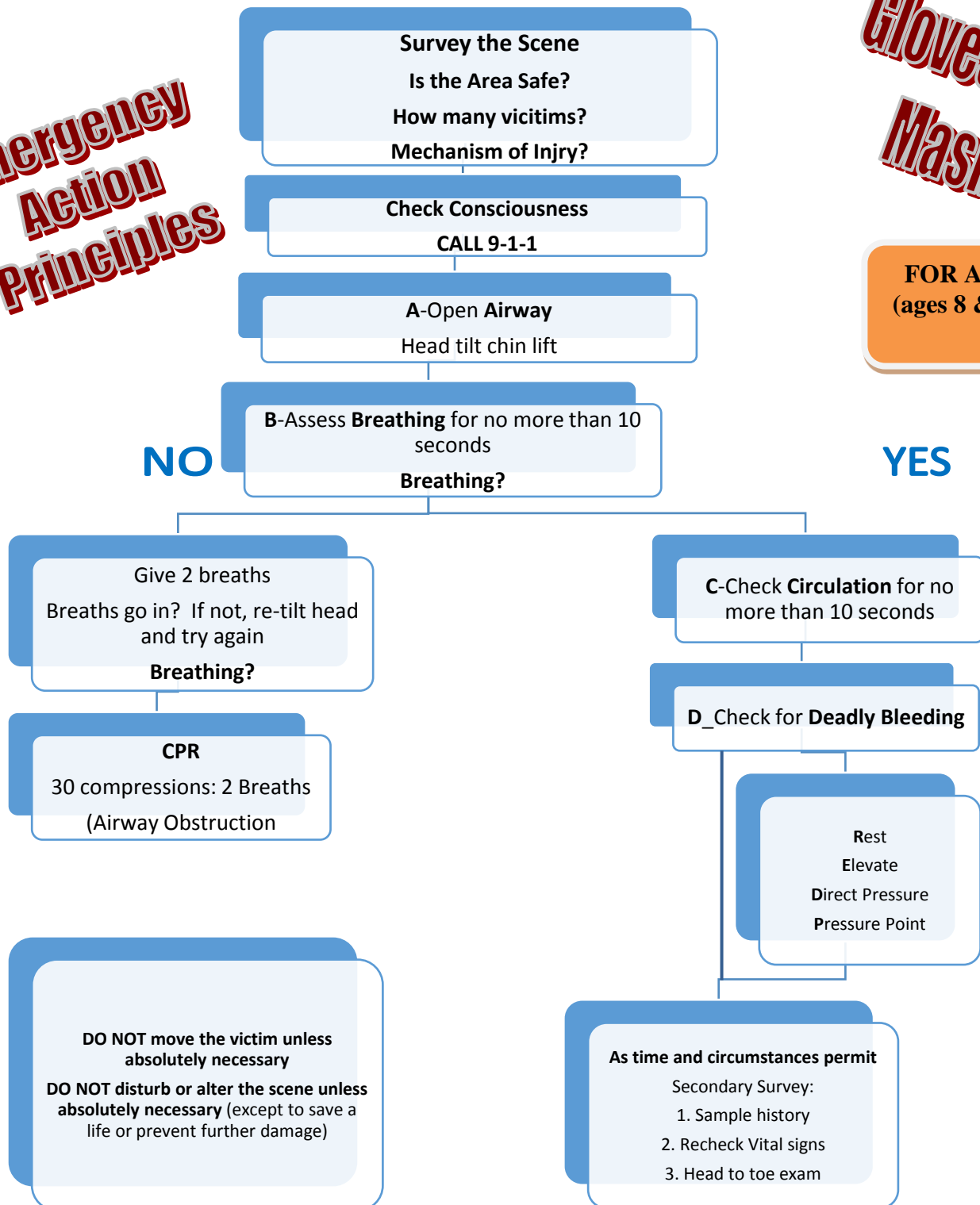
**Gloves and
Mask!**



**Emergency
Action
Principles**

**Gloves and
Mask!**

**FOR ADULT
(ages 8 & older)**



9.1: WORKPLACE SAFETY AND HEALTH REPRESENTATIVE POLICY

Scope: All Employees
Reference(s): Workplace Safety and Health Act, Sections 40 and 41,
MR 217/2006 as amended, Part 3
Form(s): T1 - Worker Representative Request for Educational Leave
T2 - Workplace Safety & Health Representative Meeting Minutes
T4 - Workplace Safety & Health Bulletin Board Checklist
T5 - Workplace Safety & Health Rep Agenda Template

OBJECTIVES

The purpose of a Worker Representative is to provide a forum for Management and Workers to enhance the ability of the company to reasonably and cooperatively identify, evaluate, resolve and record safety and health concerns.

RESPONSIBILITIES

1. Employer
 - a. Establish and maintain an effective Worker Representative as described in this policy.
 - b. Consult and cooperate with the Worker Representative regarding the responsibilities with which they are charged.
 - c. Ensure that the Worker Representative is trained to fulfill his/her duties.
2. Worker Representative
 - a. Attend Workplace Safety and Health Representative Meetings with Manager, as scheduled.
 - b. Participate in workplace safety inspections, special assignments and activities.
 - c. Prepare the agenda the week prior to the meeting, circulate to Management and post on the WSH bulletin board.
 - d. Review the minutes and sign them before distribution.
 - e. Assign special or ongoing projects.
 - f. Take a leadership role in promoting safety and health in the workplace.
 - g. The receipt, consideration, and disposition of concerns and complaints respecting the safety and health of Workers and/or sub-contractors.
 - h. Participate in the identification of risks to safety and health arising out of, or in connection with, activities at THE COMMUNITY CENTRE.
 - i. The Worker Representative may be called upon to assist Management in the assessment of new products, processes or equipment prior to being introduced into THE COMMUNITY CENTRE.
 - i. Hazards must be assessed prior to implementation.
 - ii. Assessments should err on the side of caution.
 - iii. If a product or equipment is questionable, an engineer should be consulted to certify the safety of the item.

- iv. THE COMMUNITY CENTRE reserves the right to remove any product, equipment or process deemed unsafe.
- j. Establish an effective means of safety and health communication between the Worker Representative and all Employees.
- k. Cooperate with a Safety and Health Officer who is exercising his/her duties under the Workplace Safety and Health Act.
- l. Develop and promote programs to educate and inform Workers about safety and health at THE COMMUNITY CENTRE.
- m. Communicate safety and health related matters to Management.
- n. Maintain records in connection with the receipt and disposition of concerns, complaints and all matters relating to the duties of the Worker Representative for a minimum of five years.
- o. Participate in work refusals.
- p. Inspect the workplace, work processes and procedures at least once before each regularly scheduled meeting of the Worker Representative.
- q. Participate in incident investigations.

POLICY

1. A Worker Representative will be established and maintained by THE COMMUNITY CENTRE.
2. The Worker Representative will meet with Management at a minimum, once every three months.

9.2: WORKER REPRESENTATIVE RULES OF PROCEDURE

Scope: All Worker Representatives

Reference(s): Workplace Safety and Health Act, Section 40 & 41
MR 217/2006 as amended Part 3

1. Election of the Worker Representative

- a. Management shall appoint one or more Employees, not associated with Management, to co-ordinate the election of the Worker Representative. The election shall be conducted in a manner consistent with recognized democratic practices.

2. Term of Office

- a. The term of office of a Worker Representative shall normally be two years, however there is no limitation on the number of years a member may serve, and all members are eligible for re-election.

3. Community Centre Accountability Binder

- a. Management will provide a Community Centre Accountability binder at the workplace for the use of the Worker Representative. The Accountability binder must be accessible to all Employees. Information posted in the binder shall include:
 - i. The name of the Worker Representative, how to contact him/her and his/her term of office expiry date.
 - ii. The scheduled dates of meetings.
 - iii. The agenda for each meeting, posted 1 week in advance of the meeting
 - iv. The minutes of each meeting, signed by the Worker Representative and management. Minutes must remain posted until all matters recorded have been resolved.
 - v. Any improvement order, report or other documentation applicable to the workplace issued by or recommended to be posted by a safety and health officer.

4. Meeting Guidelines

- a. When a Worker Representative is designated at a workplace, an employer must meet their representative at regular intervals not exceeding three months to discuss safety and health matters. The subsequent meeting time and date shall be scheduled at each meeting and shall be posted with an agenda on the WSH Bulletin Board.
- b. The Worker Representative may call a special meeting with the employer to deal with matters of urgent concern, including but not limited to serious incidents, accidents, dangerous occurrences or matters believed to constitute a serious risk to the safety or health of a worker or another person.
- c. An employer must meet with the Worker Representative when the Worker Representative calls a special meeting.
- d. The meetings will be restricted to safety and health related issues and concerns.

5. Educational Leave

- a. The Worker Representative shall be allowed educational leave of two normal working days per year, without loss of pay or other benefits for the purposes of attending Workplace Safety and Health training seminars, programs or courses.
- b. The Worker Representative must submit a request for educational leave in writing to Management.
- c. The Worker Representative attending educational programs and seminars will be required to report back to management and workers regarding the learning received.

6. Procedures to Resolve Concerns

- a. Employers and Workers have unique and specific responsibilities described in the Workplace Safety & Health Act and Regulations. These responsibilities are in no way reduced by the existence and activities of a Safety & Health Representative.
- b. The Worker Representative will function best if he/she believes that the safety and health of all persons at the workplace is the responsibility of everyone.

7. Reporting of Concerns

- a. All Workers shall make every effort to resolve safety and health concerns with the appropriate Supervisor.
- b. If the concern cannot be resolved by the Supervisor, see #8 Procedure for Handling Concerns.
- c. If requested, the Worker Representative contacted directly by an Employee shall keep confidential the identity of the person who forwarded the concern.

8. Procedure for Handling of Concerns

a. First Stage - Direct Resolution

- i. Where a safety and health concern is identified, the Employee and Supervisor shall attempt to remedy or resolve the matter.
- ii. Concerns resolved in this manner should be recorded and forwarded to the Worker Representative for review. It should be recorded in the minutes of the next meeting, although the Worker Representative may choose not to record matters of a minor nature.

b. Second Stage - Representative Involvement

- i. Where a satisfactory resolution is not achieved in Stage 1, the Worker Representative shall ensure that the concern is placed on the agenda of the next regular Worker Representative meeting for the purpose of resolving the concern.
- ii. The matter shall be placed on the agenda of each successive meeting until it is resolved. Beside the agenda item shall be placed the date on which the concern first arose.
- iii. All Workers and Management shall cooperate with the Worker Representative in resolving the concern.

c. Third Stage - Outside Assistance

If the Worker Representative is unable to resolve the concern they shall request assistance from the Workplace Safety & Health Division of the Department of Labor and Immigration.

They may also request assistance from other appropriate consultation services. While it is preferable that management and Worker Representative should agree with the request for assistance, such an agreement is not required.

9. Examination of Dangerous Conditions

- a. Where an Employee believes that a dangerous condition exists in his/her workplace an inspection shall be undertaken, or a special meeting shall be held by the Worker Representative and Management, for the purposes of examining the condition and resolving the concern. This provision is in addition to the rights of the Employee, under the WSH Act, to report that condition to a Safety & Health Officer and to refuse to work under that condition.

10. Decision or Recommendation of the Worker Representative

- a. A person who has reported a safety and health concern to the Worker Representative shall be notified of any decision or recommendation made by the Worker Representative relating to that concern.

11. Warning of Dangerous Conditions

- a. Where the Worker Representative and management agrees that a condition existing in the workplace is dangerous or unusually dangerous, or that work required to remedy a condition may itself be dangerous, the Worker Representative shall so advise all persons at the site or location likely to be affected by the condition or the danger.

12. Response of Management to Concerns

- a. When Management receives written recommendations from the Worker Representative, identifying anything that may pose a danger to the safety and health in the workplace, Management will respond back to the Worker Representative in writing no later than 30 days after receiving the recommendations.
- b. If Management has satisfactorily addressed all recommendations within 30 days of receiving the recommendations, then response in writing is not required.

13. Workplace Inspections

a. Importance of Inspections

- i. The ability of Safety & Health Representative to contribute to the resolution of safety and health concerns at the workplace will be greater if they become informed of the types of tasks performed, and the operating methods used throughout the workplace, as well as the types of hazards and problems which may be encountered in the course of workplace operations.

b. Detailed Workplace Survey

The Worker Representative shall carry out safety and health inspections as indicated in the Inspection Policy for the purposes of:

- i. **familiarization** with the types of tasks performed and the operating methods used throughout the workplace
- ii. **identification** of Employee concerns related to safety and health in the workplace
- iii. **identification** of safety and health hazards, including working conditions, operating procedures, and technical methods with the objective being the elimination of those hazards.

c. Regular Inspections

The Worker Representative must inspect the workplace and the work processes and procedures at least once before each regularly scheduled meeting with management.

14. New Materials Processes, etc.

- a. The Worker Representative shall be advised whenever THE COMMUNITY CENTRE is planning to introduce into workplace new equipment, changes in operating procedures, new chemicals or other substances or materials with the potential to cause harm.
- b. The Worker Representative shall in turn give priority to considering the safety and health implications of such plans for Workers and visitors.
- c. The objective of the Worker Representative should be the recommendation of measures to be incorporated at the same time as the planned introductions.

15. Inspection Visits by Government

- a. The Worker Representative shall accompany a government Safety and Health Officer during any inspection.
- b. They may be joined by the Employer or his designate.
- c. Both the Worker Representative and management designates shall be present during the discussion of the Inspection Report and shall sign the report indicating they have read it.
- d. Copies of the report shall be provided by the Officer to both management and the Worker Representative.

16. Records

a. Minutes

- i. Minutes must be taken at all Worker Representative and Management meetings and shall consist of matters relating to the receipt and disposition of safety and health concerns and other important considerations. Minutes shall be recorded on forms provided by the Workplace Safety and Health Division and must be signed by both parties.
- ii. The original minutes shall be retained in the Worker Representative files for a period of ten years.

b. Posting of Minutes

Minutes of meetings shall be posted on the WSH bulletin board within seven days of that meeting and where possible remain posted for not less than one month after the next meeting or until all matters of concern recorded in the minutes have been resolved.

10.1: HEARING CONSERVATION AND NOISE CONTROL POLICY AND PROCEDURE

Scope: All Workers

Reference(s): MR 217/2006 as amended Part 12

OBJECTIVES

1. To monitor workplace operations and activities that may produce excessive noise.
2. Ensure that noise exposure that could cause hearing impairment is identified, assessed, and controlled.
3. To maintain a hearing surveillance program where Workers are exposed to sound levels greater than 80 decibels.

RESPONSIBILITIES

1. Employer
 - a. Ensure a system to identify, control and communicate noise exposure that could cause hearing impairment.
 - b. Ensure the implementation of a hearing surveillance program in the workplace.
2. Supervisors
 - a. Ensure hearing and noise policies and procedures are enforced.
 - b. Ensure that hearing education and protection is provided for all workers exposed to sound levels greater than 80 dBA.
3. Workers / Volunteers/ Contracted Employers / Self-employed Persons
 - a. Report all concerns regarding noise exposure.
 - b. Wear hearing protection in identified areas of the workplace.
4. Workplace Safety and Health Representative
 - a. To cooperate with Management to identify, assess and control sound levels in the workplace.

POLICY

1. All worker concerns with regards to noise must be reported to their Supervisor.
2. Hearing protection is mandatory at all times while working in identified areas and will be strictly enforced. For example: Hearing protection is mandatory at all times while working in the shop.
3. Sound level testing will be conducted annually, at a minimum, to determine levels throughout the workplace. If noise levels are found to be 80 dBA or lower, no hearing controls are required.
4. Where the equivalent sound exposure level is found to be above **80 dBA (lex)** Management will:
 - a. Ensure hearing protection is available and is provided to workers upon request.
 - b. Monitor noise levels and worker exposure.
 - c. Provide education to workers about the:

- i. hazards of exposure to excessive noise and how it can be prevented
 - ii. selection, use and care of hearing protection
5. Where the equivalent sound exposure level is found to be above **85 dBA (lex)** Management will:
- a. Take all measures as required where noise levels are in excess of 80 dBA (lex).
 - b. Consult with the Workplace Safety & Health Representative to explore methods of reducing the sound exposure level to less than 85 dBA.
 - c. Enforce wearing of hearing protection. Not optional.
 - d. Conduct annual audiometric testing on Workers working in these areas.
 - e. Post signs at all entrances to the work area stating that hearing protection is required.

PROCEDURE: HEARING SURVEILLANCE PROGRAM

1. A hearing surveillance program will be implemented in all areas where the equivalent sound exposure level is greater than 80 dBA.
2. THE COMMUNITY CENTRE will engage a physician, an audiologist, or a licensed industrial audiometric technician to conduct an audiometric test for every worker who is, or is likely to be, exposed to an equivalent sound exposure level of greater than 85 dBA. This must take place 70 days after a worker is initially exposed to that noise level; and annually thereafter.
3. The results of audiometric testing will be evaluated by a health care professional (physician, audiologist, or registered L.I.A.T.) to determine if there needs to be further assessment. If the results are abnormal, the worker must be referred to a physician or audiologist to determine whether there has been any hearing loss, and whether the loss is the result of sound exposure inside or outside the workplace. THE COMMUNITY CENTRE will obtain a report from the physician or audiologist, complete with recommendations, and provide a copy to the worker.
4. An annual report of audiometric testing and noise surveillance is prepared as required under the Hearing Conservation and Noise Control Regulation and is distributed to the Workplace Safety and Health Representative, the Workplace Safety and Health Division and is posted on the Workplace Safety and Health bulletin board.
5. Details of the annual report must include sound control measures taken and statistics on the number of workers:
 - a. whose hearing was assessed
 - b. who were referred to a physician or audiologist
 - c. who were found to have no hearing loss
 - d. who were found to have hearing loss
 - e. who had hearing loss resulting from non-work exposure
 - f. who had hearing loss resulting from work exposure
6. The annual report must not contain confidential medical information.

Records

1. Worker health records will be produced and will include the results of audiometric testing, any health history, and opinions about a worker's hearing loss conducted by a physician, audiologist or industrial audiometric technician. The report will also include prepared results of audiometric testing, any health history, opinions about a worker's hearing loss conducted by a physician, or audiologist as a result of a referral and the report prepared.
2. Workplace sound records will be produced and will include the results of the workers' equivalent sound level exposure, the hearing surveillance program annual report, and any variance issued by the Chief Occupational Medical Officer to annual audiometric testing. Also included will be the physician's or audiologist's interpretation (not medical data) of referrals made for assessment of hearing loss.
3. Workplace sound records will be kept for at least 10 years after the record is made. These records must also be made available at the request of the Workplace Safety and Health Division.

11.1: LOCKOUT/TAGOUT POLICY AND PROCEDURE

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons

Reference(s): MR 217/2006 as amended Part 16

THE RULE IS: ONE WORKER, ONE LOCK, ONE KEY!

RESPONSIBILITIES

1. Employer
 - a. Ensure that lockout procedures are developed, communicated and implemented.
 - b. Ensure all Workers required to lockout are trained, understand and use Safe Work Practices in regards to locking out and tagging out of energized sources.
2. Supervisors
 - a. Comply with and enforce THE COMMUNITY CENTRE lockout procedures.
 - b. Issue and keep track of personal locks issued to workers.
3. Workers / Volunteers/ Contracted Employers / Self-employed Persons
 - a. Be aware of the procedures in this document and to ensure that these procedures are complied with.

POLICY

Failure to follow this policy and procedures could cause serious harm or death. Therefore, failure to appropriately isolate equipment, to properly lockout and tag controls or inappropriate removal of locks or tags, will result in disciplinary action.

1. No worker or any other person may work on equipment unless the equipment is secured against incidental startup, movement, or release of electrical, mechanical, hydraulic, pneumatic, chemical, or thermal energy.
2. Each worker required to regularly lockout shall be issued personal locks with I.D. tags and keys which shall only be used for lockout procedures.
3. Workers must not borrow another person's lock, nor allow another person to borrow his/her assigned lock. If additional locks are required, contact the Supervisor.
4. A designated person, and ONLY that person, must keep the duplicate key. The designated person may remove the lock in an emergency, provided that the key used to lock the lock is not available and it is safe to remove the lock. The worker who locked out the machine must be advised that his/her lock has been removed and a logbook must be kept to record the use of the duplicate key. The designated person is responsible to ensure they have updated the logbook.
5. Only the person who installed a lockout lock shall remove it.
6. Tags DO NOT suffice as effective lockout and must only be used along WITH lockout locks.

7. All outside Workers such as contractors and self-employed persons shall follow THE COMMUNITY CENTRE lockout procedures, and must use THE COMMUNITY CENTRE locks assigned to him/her unless they have their own suitable locks.

LOCKOUT PROCEDURES – GENERAL

1. Notify all affected Workers that servicing or maintenance is required on a machine or equipment, and that the machine or equipment must be shut down and locked out.
2. The authorized worker shall identify the type and magnitude of the energy that the machine or equipment utilizes, shall understand the hazards of the energy and shall know the methods to control the energy. If the worker has any uncertainty they must contact their Supervisor prior to proceeding with work.
3. If the machine or equipment is operating, shut it down by the normal stopping procedure (depress the stop button, open switch, close valve, etc.).
4. De-activate the energy isolating device(s) so that the machine or equipment is isolated from the energy source(s).
5. Lockout the energy isolating device(s) with assigned lock(s) and I.D. tag on the lock.
6. Stored or residual energy (such as that in capacitors, springs, elevated machine members, rotating flywheels, hydraulic systems, and air, gas, steam, or water pressure, etc.) must be dissipated or restrained by the appropriate methods such as grounding, repositioning, blocking, bleeding down, etc..
7. Ensure the equipment is disconnected from the energy source(s) by first checking that no workers are exposed, and then verify the isolation of the equipment by operating the push button or other normal operating control(s), or by testing to make certain the equipment will not operate.
8. Return operating control(s) to neutral or "off" position after verifying the isolation of the equipment.
9. The machine or equipment is now locked out.
10. The key must remain with the last worker involved in performing the repairs or maintenance.

Restoring Equipment to Service

When the servicing or maintenance is completed and the machine or equipment is ready to return to normal operating condition, the following steps shall be taken.

1. Check the machine or equipment, and the immediate area around the machine. Ensure that nonessential items have been removed and that the machine or equipment components are operationally intact.
2. Check the work area to ensure that all Workers have been safely positioned or removed from the area.
3. Verify that the controls are in neutral.
4. Remove the lockout devices and reenergize the machine or equipment. Note: The removal of some forms of blocking may require reenergizing of the machine before safe removal.
5. Notify affected Workers that the servicing or maintenance is completed and that the machine or equipment is ready for use.

Multiple Workers

1. If more than one person is working on a machine or system, all other persons are required to attach their personal locks to the lockout device.
2. The person applying the first lock in a lockout procedure is responsible to immediately test Ensure that the locked out machinery or system cannot be operated.
3. Each worker must remove his/her own lock when the maintenance procedure is completed. **Workers are forbidden to remove a lock belonging to another worker**
4. Where more than one lock has been used in a lockout procedure, the removal of the last lock is a serious act. Prior to removing the last lock, the worker is responsible to ensure that the machinery or system can be operated safely without endangering any other person.

In-line Plugs

1. Before repairs are begun on a machine or tool, it must be disconnected from its power source.
2. Press the off button or move switch to the off position.
3. Make sure the machine has completely stopped.
4. Disconnect the power supply by unplugging the machine.
5. Place the male end of the plug on the machine. The male end of the plug must be visible to the person doing the repairs.
6. **DO NOT** leave the male end of the plug on the floor.
7. Try the start button to make sure the machine is out of operation.
8. Push stop button.
9. Proceed with the necessary work.
10. Plug the machine back in only when the work is finished.
11. If the machine must be left unattended while under repair a lockout device must be applied over the male end of the plug on the machine.

110 Volt - 220 Volt Breaker Panels

1. Where electrical devices or electrically powered machinery is powered from a breaker panel, the breaker shall be locked out prior to beginning work.
2. If a piece of machinery is to be worked on, shut down the equipment using the main power switch button, etc.
3. Ensure the machine has stopped.
4. Locate the correct breaker and switch it to the off position.
5. Apply your own lock and I.D. to the individual circuit breaker lockout device, or if the panel door is equipped with a lockable hasp, close the door and place your own lock on the hasp.
6. Attempt to operate the machine to ensure that the power is disconnected. Ensure that the machine's power switch is deactivated. Proceed with the necessary work.

7. Remove your lock and I.D. only when the work is completed.

Main Control Panel Switches

1. Machines or devices controlled from main panels must be disconnected and locked out prior to doing any work or repairs.
2. Shut down the equipment using the main power switch, button, etc., and ensure that the machine is stopped.
3. Locate the correct main panel switch.
4. Standing to the side of the main panel switch, turn your face away from the switch and de-activate the switch with your left hand.
5. Apply a safety clip to the main switch.
6. Apply your own lock and I.D.
7. Attempt to operate the machine to make sure it is out of operation. Ensure that the machine's power switch is deactivated.
8. Proceed with the necessary work.
9. Remove your lock and I. D. only when the work is finished.

Steam, Air, Gas and Hydraulic and Gravity Powered Devices and Machinery

1. The appropriate lockout procedure for electrically powered machinery and tools shall be followed.
2. Where a machine or device is connected to a piping system containing hazardous material, the supply valve must be closed and locked out prior to work. Where piping may introduce hazardous products during the repair process, the piping shall be disconnected, or effective blanks or blinds installed. Blocking and/or restraints shall be put into place to prevent any elevated parts from falling during repairs.
3. Residual or stored energy must be relieved or restrained prior to repair work commencing.
4. Commence repairs only when **All** lockout devices, blinds or blanks are in place.
5. Pneumatic powered tools must be disconnected from a compressed air supply before adjustment or service to the tool.

12.1: WORKING ALONE OR IN ISOLATION POLICY AND PROCEDURE

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons

Reference(s): MR 217/2006 as amended Part 9

Form(s): H2 Working Alone Plan Agreement

DEFINITIONS

“Working alone” means the performance of any work function by a worker who a) is the only worker for that Employer at that workplace at any time, and b) is not directly supervised by the Employer, or another person designated as a Supervisor by the Employer, at any time.

“Working in isolation” means working in circumstances where assistance is not readily available in the event of injury, ill health or emergency.

RESPONSIBILITIES

1. Employer
 - a. In accordance with this policy, ensure that Working Alone Plans are developed, communicated and implemented, and ensure that the plans have the agreement of all Workers affected.
2. Supervisors
 - a. Comply with and enforce the Working Alone Policy.
3. Workers /Volunteers/ Contractor / Self-employed Persons
 - a. Comply with the Working Alone Policy and Procedures.

POLICY

1. THE COMMUNITY CENTRE is committed to the safety, health and wellbeing of all Workers. Therefore, THE COMMUNITY CENTRE will implement and maintain a Working Alone Plan to protect the safety and health of all Workers who may be working alone, so far as is reasonable and practical. The plan must include a means of securing assistance a lone worker in the event of illness or injury.
2. Workers are prohibited from working alone when performing certain jobs. Examples: working in a confined space, working from heights over 3 metres, etc.
3. Upon assessing the conditions or circumstances under which a worker is required to work alone, the THE COMMUNITY CENTRE will strive to ensure that all reasonable and practicable controls are implemented to minimize risks arising out of, or in connection with, that activity.
4. Workers are not permitted to work alone outside regular working hours, including weekends or stat holidays without pre authorization of their supervisor or manager.
5. Ensure all applicable workers are trained in this policy and understand their legal workplace safety and health rights, including their right to refuse dangerous work.

PROCEDURES

Working Alone: Away from the Office/Shop

All Workers working alone and away from the office / shop on THE COMMUNITY CENTRE business must:

1. Notify their supervisor and know the designated contact person.
2. Notify their contact person of their intention to work alone, their destination and itinerary for the day. Should the itinerary change during the day, the changes must be communicated to the contact person.
3. Carry a cell phone and charge cord.
4. Check in with contact person every four (4) hours.
5. Notify the contact person when the work is complete.
6. Read, understand and agree to the working alone plan specific to the jobsite.

Overdue Worker

1. Management will be responsible to locate Workers who fail to report on time.
2. If the Worker working alone fails to check in, or calls with an emergency, the designated contact person will immediately inform the worker supervisor.
3. Arrangements will be immediately made to proceed to the worker's location. If necessary, the supervisor will call 911.
4. The employer will be notified of the situation.

13.1: WORKPLACE HAZARDOUS MATERIALS INFORMATION SYSTEM (WHMIS)/GLOBAL HARMONIZED SYSTEM (GHS) POLICY

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons
Reference(s): MR 217/2006 as amended Part 35 and Part 36, WHMIS Guideline
Form(s): U – Inventory of Controlled Products; V – WHMIS Implementation and Inspection Checklists

OBJECTIVES

1. Wherever possible to reduce the risks associated with controlled products and restricted consumer products in the workplace.
2. Ensure all Workers working with, or in the vicinity of, controlled products and/or restricted consumer products:
 - a. are aware of the associated hazards
 - b. know how to protect themselves from the hazards
 - c. know what to do in the case of an emergency
 - d. know where to find additional information on the hazards

RESPONSIBILITIES

1. Employer
 - a. Ensure a system to educate and protect Workers from the hazards associated with controlled products and restricted consumer products.
 - b. Ensure that a workplace specific WHMIS program is developed and maintained for all controlled products that are produced, handled, or stored by the THE COMMUNITY CENTRE .
2. Supervisors
 - a. Coordinate the WHMIS education and training program for all Workers who work with or in the vicinity of controlled products.
 - b. Develop inventory, labeling and MSDS/SDS system for controlled products.
 - c. Ensure proper labeling and storage of all controlled products and restricted consumer products in your work area.
 - d. Ensure all Workers under your supervision understand the key WHMIS concepts and the hazards of the products with which they may come into contact.
 - e. Ensure WHMIS policies and procedures are enforced.
 - f. Ensure all personal protective equipment in your work area is inspected, used, cleaned, maintained and stored properly
 - g. Annually, or sooner, audit the effectiveness of the WHMIS program using the WHMIS Inspection Checklist, and ensure:
 - i. proper labels are in place

- ii. MSDS are available and current (must be < 3 yrs. old)
- iii. inventories and records are up to date
- h. the effectiveness of worker training
- 3. All Workers / Volunteers/ Contracted Employers / Self-employed Persons
 - a. Read and understand labels on any controlled and restricted consumer product they use.
 - b. Place workplace labels on all controlled or restricted consumer products that they decant.
 - c. Know where MSDS/SDS are located and understand how to use them.
 - d. Follow all applicable Safe Work Procedures and wear all personal protective equipment provided when working with controlled products.
- 4. Workplace Safety and Health Representative
 - a. Assist with identification, assessment, and control of hazards associated with controlled products.

POLICY

- 1. THE COMMUNITY CENTRE prohibits the use, storage, or handling of any controlled product unless all requirements of this policy are met.
- 2. Training
 - a. All Workers shall receive WHMIS/GHS training and education prior to working with, or in the vicinity of, controlled products and/or restricted consumer products. Training shall be workplace specific and should result in all Workers being able to apply the knowledge. Training must be provided on the following:
 - i. general WHMIS information with respect to labels, classification and MSDS/SDS
 - ii. hazards of specific products with which they are working (or near)
 - iii. Safe Work Procedures and PPE for specific products with which they are working
 - iv. what to do in the case of an emergency (e.g. spill or exposure)
 - b. The training plan and worker education shall be reviewed annually by the Workplace Safety and Health Representative , or sooner if there is a change in work conditions or hazard information.
- 3. Records of worker education and training must be kept by each Community Centre.
- 4. Supplier Labels
 - a. All controlled products must have a legible supplier label. If a supplier label is not present upon the delivery, the controlled product must be either returned to the supplier or locked up until a supplier label is received.
 - b. Supplier labels must not be removed, defaced, or modified as long as any amount of controlled product remains in the container in which it was received. If the supplier label is removed or is no longer legible, it may be replaced with a workplace label.
- 5. Workplace Labels
 - a. Where supplier labels are damaged, or controlled products are decanted into other containers, a workplace label must be applied and must contain the following information:

- i. a product identifier
- ii. safe handling information
- iii. a reference to the availability of an SDS

6. Safety Data Sheets (SDS)

- a. SDS must be present for all controlled products and be less than three years old.
- b. SDS shall be readily available to all Workers who may be exposed to controlled products.
- c. All SDS must be retained for a period of 30 years.
- d. MSDS must be readily available to the Workplace Safety and Health Representative, to qualified first aiders and to emergency medical services.

7. Inventory











- a. An inventory of controlled products must be developed and maintained. The inventory list must be updated within 15 days of a new substance being introduced into the workplace.

13.2: WHMIS GUIDELINE

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons

Reference(s): MR 217/06 as amended Part 35 and Part 36

WHMIS/GHS Classes and their Meaning 2015

WHMIS 2015 Pictograms			
	This pictogram is used for indicating flammable gases, aerosols, liquids and solids; pyrophoric liquids, gases and solids; self-heating substances and mixtures; substances and mixtures that produce flammable gases when in contact with water; organic peroxides; and self-reactive substances and mixtures.		For hazardous products that can cause death or acute toxicity after exposure to small amounts of the products, this Pictogram is used to warn users of the potential dangers. It is placed on labels of materials with acute oral, dermal and inhalation toxicity. For instance, the pictogram can be used on containers for cleaning chemicals
	The pictogram is flame over a circle plus a distinctive red "diamond" shaped border. It is used to indicate oxidizing gases, liquids and solids.		This Pictogram is used to indicate a product that causes or is suspected of causing serious health effects. It forms part of labels of products that cause respiratory sensitivity, skin toxicity, germ cell mutagenicity, carcinogenicity, reproductive toxicity, aspiration hazard, specific target organ toxicity after single exposure, and specific target organ toxicity after repeated exposure.
	This pictogram is used to indicate the hazard of gases under pressure such as dissolved gas, liquefied gas, compressed gas and refrigerated liquefied gas.		Used for hazardous products that cause less serious health effects, the Exclamation Mark Pictogram indicates acute toxicity (oral, dermal or inhalation), skin corrosion (irritation), eye irritation, skin sensitivity, respiratory damage, and specific target organ toxicity on single exposure.
	The corrosive pictogram indicates a substance that can irritate the skin and eyes, and damage metals. It is used for hazardous products that are corrosive to metals, cause skin irritation (corrosion), and cause serious eye irritation or damage.		Indicates the presence of organisms or toxins that can cause diseases in humans and animals, The Biohazardous Infectious Materials pictogram has been retained from WHMIS 1988. The pictogram is used on labels of biohazardous infectious materials. For instance, it is used on growths of micro-organisms like E. coli or salmonella bacteria cultures.
	Used to indicate explosion or reactivity hazards, the Exploding Bomb Pictogram is placed on the labels of self-reactive substances and mixtures, and on labels of organic peroxides.		This GHS pictogram has not been integrated into WHMIS, however it stands for Environmental Hazards.

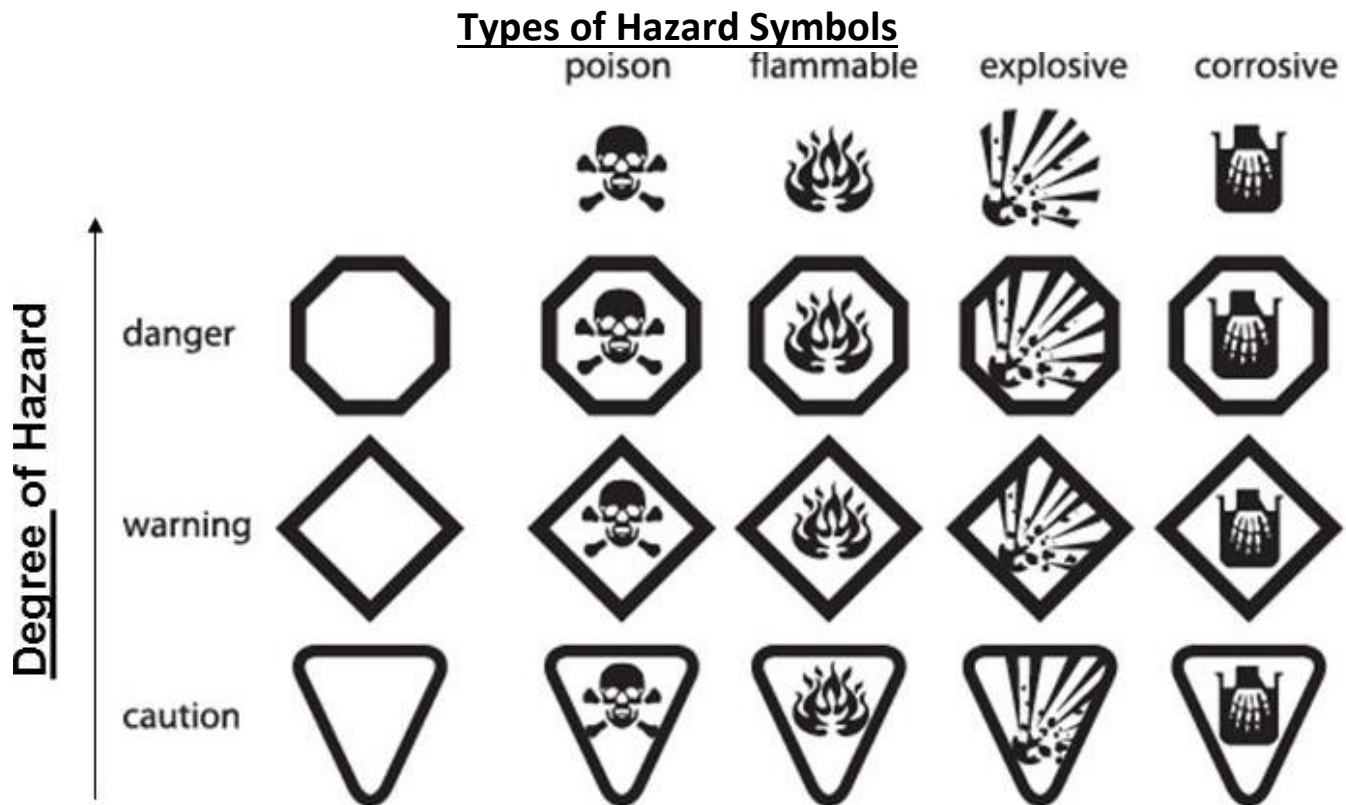
3 Key Elements of WHMIS:

1. labeling of containers of hazardous materials
2. provision of material safety data sheets (MSDS)
3. provision of worker education and training programs

Under WHMIS everyone has a right to know about hazardous materials in the workplace

RESTRICTED CONSUMER PRODUCTS

1. are packaged as a consumer product
2. must be available through retail stores or door-to-door and clearly intended for personal or household use
3. it must not be packaged in a size greater than reasonable for this purpose
4. if a product in the workplace is labeled with a hazard symbol, WHMIS is partially applied
5. Workplace labels and education are required



LABELS

1. A label is any mark, sign, device, stamp, seal, sticker, tag or wrapper.
2. Employers must ensure that all containers have labels indicating their contents for:
 - a. controlled products
 - b. restricted consumer products
3. Labels may be applied by the supplier or applied in the workplace.

LABEL EVERYTHING!

Purpose of WHMIS Labels

1. to identify a product as a controlled product
2. to indicate the nature and type of hazard
3. to provide basic safe handling instructions and precautions

Types of Labels

1. Supplier Labels
2. Workplace Labels

Labels are legally required on WHMIS controlled products.

Supplier Labels Must:

1. have a cross hatched border
2. be printed or embossed
3. be legible and durable
4. contain:
 - a. Product Name
 - b. Supplier Name
 - c. Hazard Symbols(s)
 - d. Reference to the MSD
5. And if more than 100 mL:
 - a. Risk Phrases
 - b. Precautionary measures
 - c. First Aid Measures

Workplace Labels

Don't need a cross hatched border. They must:

1. identify the controlled product
2. provide safe handling information
3. state that an MSDS/SDS is available.

Workplace Labels are required for:

1. all decanted products
2. controlled products produced or present in the workplace
3. inner containers
4. containers with missing or illegible supplier labels
5. imported controlled products
6. bulk shipments
7. employer produced products
8. controlled products in piping systems and vessels



SAFETY DATA SHEETS

1. Provide detailed information about the hazards of a controlled product.
2. They are critical for developing Safe Work Procedures and control measures.
3. They are a key element of worker education and training.
4. Employers are required to obtain MSDS/SDS from suppliers.
5. The Employer is required to have hazard information for products that are partially exempt from WHMIS.
6. Many suppliers will provide MSDS/SDS for partially exempt products.
7. Controlled products from Laboratory Supply Houses are exempt from the MSDS requirement.

Rules for MSDS/SDS

1. must be no more than 3 yrs. old, from the date of issue
2. must have a minimum of 9 sections of information, but may have more
3. require 54 items of information
4. specific hazardous ingredients must be disclosed (no trade secrets allowed unless a claim has been registered)
5. any abbreviations must be explained
6. information must be specific
7. no blanks are allowed
8. no contradictory information is allowed

There is no standard format for MSDS under WHMIS

Availability of MSDS/SDS

MSDS must be readily available in hard copy to:

1. Workers who may be exposed to controlled products
2. the WSH Representative

14.1: MUSCULOSKELETAL INJURIES POLICY

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons

Reference(s): MR 217/2006 as amended Part 8, Manitoba Workplace Safety and Health Division's Ergonomic Guidelines (version 1.2)

Form(s): W – Risk Assessment for Musculoskeletal Injury

OBJECTIVE

To eliminate or minimize risks leading to musculoskeletal injury at work, and to comply with the Manitoba Workplace Safety and Health Regulation Part 8: "Musculoskeletal Injury." This requires that employers ensure that procedures are implemented for musculoskeletal injury prevention. Musculoskeletal Injury is one of the most costly injuries for organizations; these injuries are often chronic, and as such, compensation costs may be incurred over the life of the Worker.

DEFINITION

Musculoskeletal injury (MSI) is "an injury or disorder of the muscles, tendons, ligaments, joints, nerves, blood vessels or related soft tissue including a sprain, strain and inflammation, that may be caused or aggravated by work." MSI is sometimes also referred to as work-related musculoskeletal disorder, cumulative trauma disorder, repetitive strain injury, or activity-related soft tissue disorder. MSI typically affects the back, neck, shoulders, elbows, wrists, hands, knees, or ankles. It usually develops over time as a result of one or more of the following risk factors:

1. force
2. repetition
3. awkward posture
4. static posture
5. contact stress

RESPONSIBILITIES

1. Employer
 - a. Develop, implement, and maintain a musculoskeletal injury prevention procedure.
 - b. Establish a process to ensure that all managers and supervisors are accountable for MSI prevention in their areas.
 - c. Ensure that existing policies and procedures encourage participation in the MSI prevention procedure.
 - d. Include the program in all strategic planning, budgeting, and human resources plans.
 - e. Consult with workers and the Workplace Safety and Health Representative regarding MSI prevention.
 - f. Ensure that all managers, supervisors, and workers follow MSI prevention requirements.

- g. Ensure that orientation of new workers includes MSI prevention education and training.
- h. Ensure an annual review of the MSI policy and prevention procedure.

2. Supervisors

- a. Ensure that all workers under your direct supervision comply with this policy.
- b. Ensure that the risks of MSI are identified, assessed, and controlled for all jobs.
- c. Ensure that all workers under your supervision know the early signs and symptoms of MSI, their potential health effects, and what to do if they have signs or symptoms.
- d. Ensure that all workers under your supervision are trained in safe work practices and MSI control measures.
- e. Encourage and support workers reporting of MSI signs and symptoms.
- f. Encourage and support investigations in response to reported MSI signs and symptoms.
- g. Ensure that workers have the necessary equipment and use it properly.
- h. Ensure consultation with the Workplace Safety and Health Representative, and workers regarding MSI prevention, when required.

3. All Workers / Volunteers/ Contracted Employers / Self-employed Persons

- a. Comply with, and actively participate in, all aspects of the MSI prevention policy and procedures.
- b. Follow MSI prevention safe work practices.
- c. Know the early signs and symptoms of MSI, including potential health effects and control measures for prevention.
- d. Participate in education and training on established safe work practices and the use of equipment.
- e. Report risks of MSI to managers or supervisors.
- f. Report signs and symptoms of MSI to managers, supervisors, and first aid attendants.
- g. Cooperate in the investigation of risk factors or incidents.
- h. Cooperate in the development and implementation of control measures.
- i. Use personal protective equipment and safety equipment provided by the employer.

4. Workplace Safety and Health Representative

- a. Evaluate the MSI prevention procedure and make recommendations to improve it, if required.
- b. Collaborate with all levels of the organization during the MSI prevention process.

POLICY

THE COMMUNITY CENTRE aims to provide a safe and healthy work environment for its workers by ensuring that risk factors that may contribute to the development of musculoskeletal injuries are identified, assessed and eliminated or mitigated.

Training

All Workers shall receive training and education in identifying and controlling MSI. This training shall be delivered prior to commencing work and shall be workplace specific. Specialized training must be provided for workers to handle new tasks.

Hazard Identification

An analysis of the workplace is required in order to identify jobs and workstations that may pose MSI hazards. The causes of these hazards must be determined before controls can be identified.

Development of Controls

Once MSI hazards have been identified, controls must be developed in order to eliminate or reduce these hazards by changing the jobs, workstations, tools or environment to fit the worker.

Medical Management

Medical management is the effective use of available healthcare resources to prevent or manage MSI. A workplace-based medical management program is composed of three aspects:

1. *Injury Prevention*: worker involvement, training and education, and hazard identification and controls
2. *Injury Management and Early Intervention*: an injured worker is given a professional, timely assessment, and is involved in a return-to-work program
3. *Chronic Injury*: disability management is required

15.1: VIOLENCE PREVENTION POLICY AND PROCEDURE

Scope: Applies to all Employer(s), Owner(s), Workers, Contracted Employers and Self-employed Persons

Reference(s): MR 217/2006 as amended Part 11

OBJECTIVES

Workplace violence can have devastating effects on workers' quality of life and organizational productivity. Violence is against the law and an organization, owner, employer, manager or worker can face charges under the Criminal Code if they are accused of violence. THE COMMUNITY CENTRE is committed to a safe, healthy and rewarding work environment for all Workers. Violence will not be tolerated. If you as a worker experience an act of violence while at work, exercise your rights and follow our Company's Violence Prevention Policy and Procedures.

This violence prevention policy is not intended to discourage or prevent anyone from exercising any other rights, actions or remedies that may be available under the law. THE COMMUNITY CENTRE will take every reasonable precaution necessary to protect our workers from a potential violent situation if we become aware, or believe that violence is a risk.

DEFINITION

"Violence" is the attempted or actual exercise of physical force against anyone, or any threatening statement or behavior that gives a person reason to believe that physical force will be used against them.

RIGHTS

Every worker is entitled to:

1. a working environment free of violence,
2. file a complaint with the Human Rights Commission,
3. exercise any other legal rights pursuant to any other law and
4. Confidentiality when they file a violence claim.

RESPONSIBILITIES

1. Employer
 - a. Promote a violence-free workplace for all Workers.
 - b. Assess the risk of violence to a worker at THE COMMUNITY CENTRE in consultation with the WSH Representative.
 - c. Ensure that measures and procedures in the violence prevention policy are implemented and enforced.

- d. Hold management and supervisors accountable for responding to and resolving complaints of violence.
 - e. Ensure workers are trained and comply with this prevention policy.
 - f. Ensure that this violence prevention policy has the consultation of Workers.
 - g. Inform each worker about the nature and extent of the risk of violence to a worker in the workplace. Note: the personal information provided will be the minimum amount necessary to accomplish the purpose.
 - h. Track and analyze incidents for trending prevention initiatives.
 - i. Investigate an incident of violence as soon as reasonably practicable after it has occurred.
 - j. Promptly implement control measures that are identified as a result of an investigation to eliminate or control the risk of violence to a worker.
 - k. Prepare an annual violence report. See Part 7 of the violence policy.
2. Supervisors
- a. Promote a violence-free workplace for all Workers.
 - b. Ensure workers continuously comply with this violence prevention policy.
 - c. Train workers in this violence prevention policy
 - d. Report acts of violence to senior management as soon as possible
 - e. Investigate an incident of violence as soon as reasonably practicable after it has occurred.
3. All Workers / Volunteers/ Contracted Employers / Self-employed Persons
- a. The first responsibility of all Workers is to promote safety and guard against harm to themselves and other Workers.
 - b. Follow established procedures for the prevention and reporting of incidents of violence.
 - c. Work together in a professional manner and resolve issues in a non-violent manner.
 - d. Report incidents of violence to management as soon as possible, and cooperate in the investigation of a violent incident.
 - e. Co-operate with any investigations of violent incidents.
 - f. Contribute to violence prevention risk assessments as required.

POLICY

1. THE COMMUNITY CENTRE, in cooperation with our WSH Representative, is committed to a healthy, violence-free workplace.
2. Anyone aware of violence, or the potential for violence in the workplace, must bring it to the attention of Management so that it can be addressed immediately. THE COMMUNITY CENTRE will deal quickly and effectively with all alleged acts of violence.

3. Unless prohibited by law, the employer will advise all potentially affected Workers at risk of violence as to the nature and extent of the risk. This includes any information in THE COMMUNITY CENTRE 's possession, including personal information related to the risk of violence from persons
4. Management in consultation of the WSH Representative will assess the risk of violence in all jobs and in the workplace as a whole. A risk assessment will be conducted every three (3) years, as well as when new positions are created or job descriptions are changed substantially or as incidents / near misses occur. (Form D1-“List of known or potential violent worksites or job functions”).
5. This Violence Policy must be posted in a conspicuous place and all Workers must be informed of its contents.
6. THE COMMUNITY CENTRE will prepare an annual report that includes the following:
 - a. Records of violent incidences to a/or any worker(s) in the workplace.
 - b. Results on any investigations of violence incidents, including a copy of recommended control measures taken, changes to the violence prevention policy and any report of a serious incident that was a result of a violent act.
 - c. Control measures that were implemented as a result of violent incident investigations.

The annual report will be provided to the WSH Representative.

PROCEDURES TO FOLLOW IF INVOLVED IN A CURRENT VIOLENT SITUATION

1. **Save yourself.** Your number one priority is your own safety.
 - a. If you are attacked, yell as loud as you can. Run to where other people are if possible, yelling the entire time.
 - b. If the perpetrator is demanding a personal possession or cash, give into demands.
 - c. Act as quickly as possible and don't argue with the perpetrator.
 - d. If there is anything that could startle or surprise the perpetrator, let them know. If you must reach for something or move in any way, let them know. If there is another worker nearby and could startle them, let them know.
 - e. Never chase the perpetrator. Many people have been seriously hurt by doing so.
 - f. Protect and free yourself from the situation. Use any means possible to free yourself.
 - g. If you get out of a dangerous situation, never go back.
 - h. If you are in a secure location, call out for help. Then summon immediate assistance by phoning 911 immediately. Report the time of the crime, a description of the perpetrator and the direction they left if applicable.
 - i. Once 911 have been called, notify your supervisor as promptly as possible.
 - j. Protect the crime scene by ensuring that other people stay clear of the area and nothing is touched or moved. If there were any other witnesses, ask them to wait for police.

PROCEDURES FOR REPORTING

1. If there is an immediate risk of violence, take all necessary steps to resolve the situation, including involving external resources (i.e. police).
2. All incidents, threats, attempted or actual violence connected to THE COMMUNITY CENTRE or carried out on THE COMMUNITY CENTRE's property, must be reported to the immediate Supervisor. Note: If your direct supervisor is involved in the act, you must report directly to THE COMMUNITY CENTRE President.
3. Where there is a risk of violence, THE COMMUNITY CENTRE will complete the following steps to ensure the safety of Workers :
 - a. Unless prohibited by law, advise all potentially affected Workers at risk of violence as to the nature and extent of the risk. This includes any information in THE COMMUNITY CENTRE's possession, including personal information related to the risk of violence from persons who have a history of violent behaviour and whom workers are likely to encounter in the course of their work.
 - b. If the perpetrator has no direct connection to the organization or a personal relationship with the worker, your Supervisor will consult THE COMMUNITY CENTRE President and contact the Police Department.
 - c. Any worker or visitor engaged in a violent behaviour will be removed from the premises as quickly as safely permits. They may be banned from access to THE COMMUNITY CENTRE's premises pending the outcome of the investigation and possibly indefinitely.
4. THE COMMUNITY CENTRE will do its utmost to protect the anonymity of those involved in an incident. In the case of a complaint, the name of the complainant will not be disclosed to anyone, other than where the disclosure is;
 - a. necessary in order to investigate the complaint
 - b. required in order to take corrective action in response to the complaint
 - c. required by law
5. No person who in good faith reports an incident of violence or potential violence, or assists with an investigation will be subject to retaliation or discipline. Any person who participates in any such retaliation will be subject to disciplinary action.
6. The worker will file a hazard report form located in community center office and provide a copy of it to their Supervisor.
7. Workers who have been the victim of violence are encouraged to seek medical attention / treatment or referral for post-incident counseling if appropriate.

PROCEDURES FOR INVESTIGATING

1. Investigations will commence immediately after a violent incident has occurred,

2. Community Centre President or his/her delegate will contact THE COMMUNITY CENTRE's legal counsel for advice and instructions. Depending on the situation, legal counsel may be required to participate in the investigation.
3. The investigation will be conducted by management.
4. Interview alleged victim and gather all pertinent evidence such as photographs, video surveillance and emails. Focus on specific facts such as date, time, names of person involved or witnesses. It is important to document the actual words used by the victim or witnesses. If capable, they must fill out their own detailed hazard report.
5. Based on the victim's report, create an outline of events and a listing of the potential witnesses to each event.
6. Interview the witness (es).
 - a. Inform the witness that the purpose of the meeting is to investigate a claim made by another worker, they are not the targets of the investigation and their identities will be kept confidential, other than where required by law.
 - b. Explain that there will be no retribution for their sharing of information.
 - c. Witnesses will need to be informed that their interview is a private matter and they are not to disclose the information or nature of the interview to any other person.
 - d. If possible, the interviews will be conducted without disclosing names.
7. Depending on the nature of the complaint and if the alleged perpetrator is a worker, interview him/her.
8. A decision whether or not a violent act was committed will be made depending on the outcome of the interviews and evidence. Management will decide how proceed with disciplinary action if necessary.
9. If the review of the incident identifies a risk of violence to workers, control measures and systems must be implemented to eliminate or control the risk. Workers must be advised of the risk of violence, as well as the control measured in place to mitigate those risks. The control measures may include but are not limited to the following:
 - a. Elimination (i.e. worker handles complaints over the phone instead of in person)
 - b. Engineering controls (i.e. physical barrier such as "Plexiglas" window placed between customer service rep and the customer)
 - c. Administrative controls (i.e. training and working alone policies)

EXTERNAL COMPLAINTS

A worker retains the right to exercise any other legal avenues available.

16.1: CONTRACTED EMPLOYERS AND SELF-EMPLOYED PERSONS POLICY AND PROCEDURE

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons

Reference(s): Workplace Safety and Health Act, Section 7.4(5)g,
MR 217/2006 as amended Part 2.4(2)

Form(s): K - Contractor Orientation; X – Contracted and Self-employed Persons
Safety Agreement

OBJECTIVE

THE COMMUNITY CENTRE will strive to ensure the safety of contracted employers and self-employed persons. Unless associated hazards are appropriately controlled, it is not only the contracted employer or self-employed person at risk, but also THE COMMUNITY CENTRE and its Workers. Care must be taken in the evaluation, selection and monitoring of contracted workers to ensure they make a positive contribution towards preventing workplace incidents.

RESPONSIBILITIES

1. Employer
 - a. Ensure there is a criterion in place for evaluating and selecting contracted Employers and self-employed persons that strive to meet all THE COMMUNITY CENTRE safety requirements.
 - b. Specifically, the Employer will ensure that all contracted workers and self-employed persons are evaluated annually to ensure they meet THE COMMUNITY CENTRE requirements for safe work.
2. Supervisors
 - a. Take reasonable measures to ensure contracted employers and self-employed persons comply with THE COMMUNITY CENTRE Safety Policies and Procedures.
 - b. Strive to ensure that the activities of contracted employers and self-employed persons are monitored so that work is completed in a safe manner, and that safety requirements are met.
 - c. Ensure all contracted employers and self-employed persons receive a safety orientation prior to working on any worksite.
3. Contracted Employers and Self-employed Persons
 - a. Cooperate with the contractor, prime contractor, the Workplace Safety and Health Representative and all other employers and workers in protecting the safety and health of everyone at the worksite.
 - b. Notify the Prime Contractor BEFORE they bring new workers or new sub trades onto the work site.
 - c. Comply with the Safety and Health Policies and Procedures of THE COMMUNITY CENTRE.

POLICY

1. If a construction project involves more than one employer or self-employed person, and THE COMMUNITY CENTRE does not contract with someone else to coordinate and manage work on a

construction project, then THE COMMUNITY CENTRE must take on the responsibilities of the prime contractor. The prime contractor is legally responsible for:

- a. ensuring everyone involved in the work project meets their legal safety and health obligations
 - b. coordinating, organizing and monitoring work on the project to ensure reasonable and practical precautions are in place to effectively control safety and health hazards
2. All contractors and subcontractors undertaking work with THE COMMUNITY CENTRE shall as part of their contract, agree to comply with all THE COMMUNITY CENTRE safety policies and procedures.
 3. Potential contractors and subcontractors shall, as part of the tendering process, submit to THE COMMUNITY CENTRE a completed Contractor Safety Evaluation. If a contractor or a subcontractor does not have a safety program that meets THE COMMUNITY CENTRE standards, then they must be orientated to THE COMMUNITY CENTRE safety program.
 4. Only contractors and self-employed persons, who have been approved and have signed a Contracted Worker Safety Agreement, shall conduct work for THE COMMUNITY CENTRE.
 5. All contractors and self-employed persons must meet with a designated THE COMMUNITY CENTRE Worker to complete a Job Safety Orientation prior to beginning work.
 6. THE COMMUNITY CENTRE shall designate one of its Workers to be the Project Supervisor.
 7. Contracted Employers and self-employed persons shall be responsible for taking every reasonable precaution on the project to ensure the safety of all Workers, visitors and the general public on a jobsite.

PROCEDURE

Before being awarded a contract or beginning any work, all contracted employers and self-employed persons shall:

1. be pre-approved by THE COMMUNITY CENTRE stating that they meet Company Safety Standards using a Contractor Evaluation (Form X)
2. sign a "Contractors Safety Agreement"
3. complete a "Job Orientation" specific to the job site and the work being done

17.1: REFUSALS TO WORK POLICY AND PROCEDURE

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons
Reference(s): Workplace Safety and Health Act, Section 2.2(e.i-e.iv), 7.4(5)(i), 43, 44
Form(s): Y – Work Refusal Report

DEFINITION

Dangerous work: work involving safety and health risks that are not normal for the job, or a situation for which the worker is not properly trained, equipped, or experienced.

RESPONSIBILITY

1. Employer
 - a. Ensure a system to resolve work refusals and ensure the right of every worker to a safe and healthy workplace.
2. All Workers / Volunteers/ Contracted Employers / Self-employed Persons
 - a. Exercise their right to refuse work if they believe that there is imminent danger to themselves or anyone else.
 - b. Follow THE COMMUNITY CENTRE Work Refusal Procedures in the event of a Work Refusal situation.
3. WSH Representative
 - a. Participate in investigations of refusals to work.
 - b. Keep records of investigations on file and ensure that the refusing worker and the Employer receive a copy of the final report.

POLICY

THE COMMUNITY CENTRE recognizes that it is the right of every individual to refuse work where they have reasonable grounds to believe that the work is dangerous to the safety and health of themselves or others, therefore:

1. When hazards involving safety and health risks are encountered, which are not normal for the job, they shall be reported to the Supervisor immediately in order to prevent injury or illness.
2. Should a worker refuse work, they will be temporarily assigned to alternate work while the situation is being remedied. They shall remain at the workplace for normal working hours unless given permission to leave by their Supervisor.

PROCEDURES FOR WORK REFUSAL

Stage 1

1. The worker must immediately report to the Supervisor his/her intention to refuse unsafe work, and must state the reason(s).
2. The refusing Worker and his/her Supervisor must attempt to resolve the concern. If the Supervisor resolves the matter to the Worker's satisfaction, the Worker shall go back to work.

3. The Supervisor and the worker shall both complete a Work Refusal Report and a copy shall be sent the Workplace Safety and Health Representative for review.
4. If the work refusal cannot be resolved...

Stage 2

1. WSH Representative, or a person who represents Workers, must be involved.
2. Working with the Supervisor and the refusing worker, the WSH Representative must make every effort to resolve the matter internally. If the matter is resolved to the Worker's satisfaction, the Worker shall go back to work.
3. The WSH Representative, the Supervisor and the Worker shall complete a Work Refusal Report and a copy shall be sent the WSH Representative for review.
4. If the work refusal cannot be resolved....

Stage 3

1. Any of the persons present during the inspection in Stage 2 may notify a Safety and Health Officer of the Manitoba Department of Labor of the refusal to work.
2. The Officer will investigate the matter and decide whether the refused job or task constitutes a danger to the safety and health of the Worker, or any other Worker or person at the workplace.
3. The Officer will provide a written decision. Anyone directly affected by the decision may appeal it to the Workplace Safety and Health Division.

18.1: STRATEGY FOR WORKER PARTICIPATION

Scope: Applies to all Workers, Contracted Employers and Self-employed Persons

Reference(s): Workplace Safety and Health Act, Section 7.4(5)(j)

OBJECTIVE

Establish and maintain an effective Workplace Safety and Health Representative.

RESPONSIBILITIES

1. Employer
 - a. Demonstrate commitment to continuous improvement of the health and safety program by supporting worker participation including:
 - i. supporting training resources and time
 - ii. ensuring an effective WSH Representative and supporting them in their duties and activities
 - iii. providing necessary safety devices and equipment, etc.
 - iv. responding promptly when concerns of health and safety are brought to their attention
 - b. Ensure all workers are familiar with the parts of the Safety, Health and Risk Management Program that apply to them, understand their rights under The WSH Act, and how to handle concerns.
 - c. Make workplace health and safety a part of every worker's job description and hold them accountable.
2. Supervisors
 - a. Incorporate safety and health into the workday and work talks on a regular basis.
 - b. Require workers to report hazards, accidents and near misses, and to deal with them promptly.
 - c. Consult with the WSH Representative and consider the implication of new products, equipment and processes.
 - d. Converse with workers to obtain their input when conducting regular inspections.
3. All Workers / Volunteers/ Contracted Employers / Self-employed Persons
 - a. Participate in health and safety activities such as inspections of their work area and reporting of hazards, incidents and near misses
 - b. Conduct work in a manner which protects the health and safety of self and all others who may be affected by their acts or omissions.
 - a. Consult and cooperate with the WSH Representative.

POLICY

1. Relevant Workplace Safety and Health discussions and training will be incorporated into worker meetings at regular intervals.

2. Hazard reporting – immediate hazard reporting by all workers to their supervisor is required. When hazards are reported, risks will be assessed and controls will be implemented where appropriate. All reasonable health and safety concerns and suggestions reported by workers shall be taken seriously and dealt with promptly.
3. At no time shall workers be subject to disciplinary action for raising concerns or making suggestions. In addition, workers will be kept informed about the status of any corrective action required.
4. Worker WSH Orientation - All new workers complete an orientation to The Safety, Health and Risk Management Program. The orientation must include:
 - a. rights and responsibilities of workers
 - b. how to report and deal with concerns
 - c. relevant aspects of the Safety and Health Program
 - d. requirements for hazard, incident and near miss reporting, work refusals
 - e. function of and relationship to WSH Representative
 - f. worker involvement (how to participate in the WSH program)
 - g. Personal Protective Equipment (PPE) policies and procedures
 - h. general first aid and emergency procedures
 - i. general workplace safety requirements
 - j. working alone policy and procedures
 - k. enforcement policy
 - l. required documentation
 - m. Refer to *New Worker Orientation Guide* in the Program Training Section
5. WSH Accountability Binder - A health and safety Accountability Binder is maintained by the WSH Representative to inform workers of work related health and safety issues and activities such as newsletters, bulletins, posters, etc. The Accountability Binder is to be located in a place that is accessible to workers at all times.
6. Inspections - All workers participate in inspections of their work area along with the WSH Representative and control or report any hazards discovered.
7. Incident investigations - Both the worker involved in a workplace accident, near miss, or work refusal, and a worker member of the WSH Representative participate in the investigation and subsequent recommendations.
8. Involvement of specific work groups - Every effort is made to involve specific work groups in the development of safety and health policies and procedures for their work area.
9. Workplace Safety and Health Representative – is committed to maintaining an effective WSH Representative. Management will strive to:
 - a. Ensure that the WSH Representative consists of workers representing all work groups with distinct concerns.
 - b. Provide training resources and time for WSH Representative to perform their duties as far as is reasonably practicable.

- c. Support the WSH Representatives as they perform their duties.
- d. Consult with the WSH Representative from time to time regarding issues of workplace safety and health.
- e. Act promptly when the WSH Representative reports hazards or makes recommendations.

19.1: EVALUATION OF THE SAFETY MANAGEMENT SYSTEM

Scope: This policy applies to senior management and the Workplace Safety and Health Representative.
Reference(s): Workplace Safety and Health Act, Section 7.4(5)k
Form(s): Z - Workplace Safety Management System Evaluation Checklist

OBJECTIVE

To ensure that The Safety, Health and Risk Management System is functioning effectively, controlling new and existing hazards, and kept current with changes to legislation.

RESPONSIBILITIES

1. Employer
 - a. Ensure the all aspects of this safety management system are current and effective.
 - b. Ensure each element within the safety management system is evaluated and revised every three years at a minimum.
2. Workplace Safety and Health Representative
 - a. To consult with senior management during the evaluation process, and oversee corrective actions.
 - b. The Representative may pay particular attention to areas where problems have been identified through inspections, concerns brought forth to the Representative, audits and investigations.

POLICY

The Safety, Health, and Risk Management System will be reviewed at a minimum **every 3 years**. Reviews and revisions will take place sooner when:

1. Changes occur in Workplace Safety and Health legislation.
2. Changes occur in the workplace that may affect the health and safety of workers. Changes may include the introduction of new technologies, or hazards.
3. Problems are identified through inspections, concerns, audits, or accident investigations.
4. Improved ways of completing the task are identified.

PROCEDURE

1. Any or all the following will be used to evaluate and measure the effectiveness of our safety management system:
 - a. Inspection reports
 - b. Hazard, Incident and Near Miss Reports
 - c. Annual Statistical Analysis (i.e. WCB reports & time loss reports)
 - d. Incident Investigations

- e. Communications with workers; including safety talks and WSH Representative meetings
 - f. Workplace Safety Management System Evaluation Checklist
 - g. Audits and Gap Analysis'
 - h. Industry Benchmarks
2. THE COMMUNITY CENTRE will ensure that recommended actions and records are kept from the evaluation for a minimum of five years. These include:
- a. Inspection records
 - b. Interviews
 - c. Reviewed documents
 - d. Comments / notes made from the evaluation
 - e. Audits or Workplace Safety and Health Program Evaluation Checklists

20.1: RETURN TO WORK (RTW) POLICY & GUIDELINES

Scope:	Applies to all Workers, Contracted Employers and Self Employed Persons
Reference(s):	Workplace Safety and Health Regulation Section 5
Forms:	O1: Return to Work Restrictions Report O2: RTW Letter to Physician O3: RTW Letter to Worker O4: Modified/Alternate Work Offer O5: RTW Worker Contact Record O6: RTW Physical Demands Analysis

OBJECTIVE

THE COMMUNITY CENTRE objective is to minimize the effects of an injury and optimize a worker's recovery. Return to Work is a vital component in achieving this goal.

Prevention is the most effective way to reduce injury costs but an effective RTW program is the best way to minimize the impact of an injury.

A RTW program is premised on the belief that many workers can safely perform meaningful and safe work as they recover from an injury or illness.

RESPONSIBILITIES

1. Employer

- a. Co-operate in the early and safe return to work of a worker by,
 - contacting the worker as soon as possible after the injury occurs and maintaining contact during recovery;
 - attempt to provide suitable modified/alternate work consistent with the worker's abilities and restrictions.
- b. Ensure all necessary forms as required by WCB and your Return to Work Program, are completed.
- c. Understand that, through prevention and a Return to Work program, WCB injury costs can be reduced.
- d. Ensure the Return to Work policy and procedure is implemented and consistently communicated to all workers

2. Supervisors

- a. Know and understand their responsibilities in applying the Return to Work policy and procedure.
- b. Complete all necessary forms as required by WCB and your Return to Work policy and ensure the procedure is communicated to workers.
- c. Support worker during their recovery.
- d. Retrain existing staff when they are transferred to a new job

- e. Maintain regular contact with injured workers to stay updated about progress, quickly identify and resolve issues and keep the worker involved with the workplace.
 - f. Monitor when workers return to work to assess how workers are coping and ensure health care restrictions are followed.
3. Workers
- a. Immediately report all accidents and illnesses and obtain necessary first aid and/or health care.
 - b. Participate actively in the RTW plan as agreed.
 - c. Attend all physician/healthcare appointments, follow the prescribed treatment plan and help them understand the type of work you do.
 - d. Keep in touch with the supervisor or designate and WCB case manager to let them know how the recovery is progressing.
 - e. Assist the company in identifying suitable modified/alternate work consistent with their restrictions and capabilities.

POLICY

THE COMMUNITY CENTRE values the goal of prevention of injuries and illnesses through maintaining a safe and healthy workplace. Consistent with this value is the company's commitment to the successful recovery of injured and ill workers by assisting in early intervention and return to safe work.

All workers who sustain a work related injury are to report the incident immediately. Should a worker sustain an injury that causes them to require substantial time away from work, or create a disability that restricts their ability to work, the worker will be expected to return to work as soon as it is safe to do so, under the guidance of their physician.

THE COMMUNITY CENTRE and its workers are committed to co-operate and participate in the success of the Return to Work Program.

For THE COMMUNITY CENTRE to properly transition a worker into a modified/alternate work program, it is important that workers provide the company with detailed information pertaining to their capabilities and limitations through medical documentation. Workers are required to have their physician complete the required documentation. Dependent on restrictions and work availability, workers will be assigned modified/alternate work in accordance with medical restrictions.

Workers who are having difficulties or increased symptoms related to the RTW program must report to their supervisor and WCB Case Manager.

Prior to a worker returning to full duties a physician's note may be required showing the worker is fit to return to work.

EMPLOYER PROCEDURES

1. Work with the WCB case manager assigned to your firm.

2. Provide WCB case manager with information about the Return to Work program.
3. Provide a list of available modified/alternate work duties to the treating medical practitioner.
4. Communicate with worker(s) regularly throughout recovery.
5. Complete all necessary reports and forms.

WORKER PROCEDURES

1. Immediately report all accidents and illnesses and obtain necessary first aid and/or health care.
2. Have medical practitioner complete Return to Work Restrictions report.
3. Return completed Restrictions report before start of next shift, or provide a copy to the company immediately if not returning to work the next day.
4. Assist the company in identifying suitable modified/alternate work consistent with their restrictions and capabilities.
5. Co-operate in their RTW and communicate updates to their Supervisor or designate.

RETURN TO WORK (RTW) GUIDELINES

This Return to Work Program will provide a basic “how-to” guide to assist in managing worker injuries from the time of the incident to the return to full duties.

Return to Work programs act as a component of an injured workers therapy and recovery by helping them stay at work, or return to work as soon as possible. RTW programs are premised on the belief that many injured workers can safely perform productive work during their recovery. Having a RTW program is good for business and can save you money on your WCB premiums.

The success of a RTW program is dependent on managing incidents, maintaining contact between all parties, and providing temporary modified/alternate work. The injured worker should play an active role in all elements of the program.

Worker Benefits

- Assist in recovery following an injury and facilitates a quicker return to normal work and home activities.
- Continue co-workers relationships
- Maintain and keep work skills up to date
- Assists in maintaining psycho-social well being
- Reduces the impact an injury has on you and your family
- Lessens financial uncertainty that is often present from being away from work

Employer Benefits

- Retain experienced and valued employees
- A reduction in costs related to training and recruiting replacement workers
- Maintain productivity and group dynamics

- Maintain worker morale
- Reduce the costs of injuries
- Assist employers meet legal requirements (Human Rights and WCB re-employment legislation)
- Ensures a safe and timely return to work
- Keeps the employer informed and involved with the recovery process

The following set of guidelines is designed to provide you with the steps to effectively manage a worker's injury. The first step deals with the injury itself, while the subsequent steps involve a guideline of how to effectively assist your injured worker to return to work as soon as safely possible.

Step 1 – Injury Response

How an employer responds to a workplace injury can significantly influence the time frame for an employee's return to work.

When a worker is injured, make sure that they receive immediate first aid. The first aider will provide first aid and determine if the injured worker requires medical assistance. Minor injuries, cuts, bruises, and soft tissue injuries (sprains/strains), are often managed at the workplace.

Determine if the worker is able to stay at work and return to regular duties, or if the worker requires modified duties.

Option 1: Stay at Work – Minor Injury (No Medical Treatment Required)

- If the worker is able to return to work after receiving treatment from first aid personnel, monitor the worker for the duration of their shift.
- If the worker requires modified duties, the supervisor will identify temporary restrictions based on the first aider's injury assessment and worker feedback.
- Monitor the worker regularly (at least daily) to ensure that they are progressing back to regular duties. If no improvement is noted, or the worker's condition worsens, the worker may need medical treatment.

Option 2: Medical Care

- If the injured worker requires more than first aid, the worker will be transported for medical treatment.
- Provide the worker a Return to Work package. Instruct the worker to have the physician fill out the forms during their visit and return the Restrictions Report to their supervisor.

Step 2 - Determine Temporary Restrictions

If no medical treatment is required, simply ask the worker which tasks they are capable of performing. If the worker is not capable of performing certain tasks, modify the work.

If the worker received medical treatment, they should have returned a Restrictions Report, filled out by their attending physician. The physician will have advised you what restrictions the injured worker has.

Step 3 – Offer Modified/Alternate Work

Studies show that workers who do not miss time from work have better outcomes and recover significantly quicker than those who miss time from work.

Once temporary restrictions have been determined, identify what modified/alternate duties are available to the worker. Working co-operatively benefits both the employer and the injured worker.

Once the worker has received medical treatment, use their completed Return to Work Restrictions Report (filled out by attending physician) to determine suitable duties and make them a written offer using the Return to Work Modified/Alternate Work Offer form. The offer should be signed and dated by both the worker and the employer.

NOTE: Injured workers will return to their normal duties earlier and more safely if the employer is easily able to accommodate the worker's injury.

If the worker has been absent from work for an extended period of time and is returning to work in a modified/alternate duty capacity, the returning worker should receive a new orientation with the supervisor to ensure that the worker understands the duties and can perform them safely.

Modified/alternate duties considerations:

- Ensure the duties are safe considering worker restrictions
- Ensure the duties will not slow the workers recovery time
- Assign work that fits the workers' skills and abilities
- The work should be meaningful and productive

Workplace accommodations might include:

- Altering the job to fit worker abilities and restrictions
- Making physical changes to the work area
- A gradual return to work
- Providing special tools or equipment
- Allowing for additional stretch breaks or rest periods for the injured worker

If modifying the workers current job is not possible, consider:

- Assigning worker to a different job
- Creating a special project for the worker
- Assigning worker to training sessions for upgrades

Step 4 – Monitor Progress

It is the employers' role to ensure that the worker transitions back to regular duties in a safe and timely manner over a specified time frame.

Collaboration with injured workers should be regular and consistent throughout the recovery process. During your first meeting with the injured worker, review the Restrictions Report and the Modified/Alternate Work Offer and establish expectations. Schedule follow-up meetings and inform the worker to contact their supervisor if they have any questions or concerns.

Make a note of each communication with the worker on the Worker Contact Record form.

If the worker is not progressing as planned, or the Return to Work process will be longer than three weeks, or the worker is refusing to participate in the Return to Work program, you may want to contact your WCB representative for further advice.

Step 5 – Documentation

Using the Modified/Alternate Work Offer form, document the workers progress on the Worker Contact Record form. Also document any communications you have with the workers physician as well as any communications with the WCB. ***Ensure this form is kept confidential.***

Step 6 – Full Return to Work

The conclusion of the Return to Work program is a collaborative process between the worker, employer and physician. Confirming that restrictions have been lifted and regular duties/hours can be performed/worked is an important step to ensure the safety of your worker and workers around them.

To avoid an injury relapse, ensure the workers physician signs-off before returning the worker to full duties.

Modified Duty Sample Work List

Often injured workers can perform some, but not all, of their regular job tasks. This is referred to as modified duty work.

To be proactive before an injury ever occurs, you should establish a list of modified duty work that is available for workers.

Being proactive will assist in returning the injured worker back to work quickly. To create the list, all parties should work cooperatively, this includes; management, workers, safety and health representative and where applicable, unions.

When creating the modified duty list, consider the following:

- The work should be within the worker's restrictions.
- Modified work can be all or a portion of an existing job.

- Modified duty is temporary. As the injured worker's restrictions change, so should the tasks they are performing.
- Modified duty work can be a gradual return to work or full time and can occur on different shifts.
- Consider the types of injuries and physical restrictions that workers are most likely to have.

When identifying work for modified duty, consider:

- Special projects that need to be completed,
- Work that needs to be done that will assist another worker and free up some time to do other work.
- Is there a backlog of work that needs to be done?
- The injured worker's abilities. Does the worker have expertise that could assist others?

Modified/Alternate duty work does not have to be a "make work project". It has the ability to add value by reducing WCB costs and contribute to the well-being of the worker.

Sample List of Modified/Alternate Duties

The modified/alternate duties assigned will change depending on the industry, the nature of the work, worker skills and the restrictions provided to the worker.

- | | |
|--|---|
| • Answer phones | • Fix or replace broken fixtures |
| • Take messages | • Touch up painting |
| • Greet customers | • Repair and replace signs |
| • Key data | • Maintain and clean break rooms and restrooms |
| • File correspondence | • Review and update safety manuals |
| • Arrange files | • Do online safety classes |
| • Order supplies | • Watch safety videos |
| • Fold and stuff mailings | • Performing site safety audits |
| • Open and sort incoming mail | • Checking and updating personnel training files |
| • Put away office supply orders | • Update Toolbox topics and MSDS notebook |
| • Shred documents | • Monitor confined space entry |
| • Phone calls | • Monitor set up and use of fall protection equipment |
| • Plan and schedule company meetings | • Monitor construction site housekeeping |
| • Take inventory | • Monitoring vehicle and pedestrian traffic on-site |
| • Operating forklift | • Installing temporary signs and barrier tape on-site |
| • Receiving tools and equipment | • Testing and cleaning respirators |
| • Putting away tools and equipment | • Light janitorial |
| • Dispensing tools and equipment | • Safety inspections |
| • Scheduling equipment and tool maintenance and repair | |
| • Equipment and tool maintenance and repair | |
| • Wash vehicles and equipment | |

21.1: DEFINITIONS

Audiometer: an electro-acoustical device that meets the requirements of:

1. International Electro technical Commission (I.E.C.) Publication 645-1979 "Audiometers"
2. Canadian Standards Association (C.S.A.) Standard CAN3-Z107.4-M86 "Pure Tone Air Audiometers for Measurement of Hearing and for Screening", and (b) provides pure tones of selected frequencies at calibrated outputs and is used _to measure pure-tone air conduction hearing threshold levels

Committee: means a Workplace Safety and Health Committee established under section 40 of the WSH Act.

Competent: means possessing knowledge, experience and training to perform a specific duty.

Confined Space: Refers to an enclosed or partially enclosed space that:

1. except for the purpose of performing work, is not primarily designed or intended for human occupancy
2. has restricted means of access or egress

Examples: crawl spaces, cisterns, wells, man holes, boilers, ducts, furnaces, sewers, attics, vats etc.

Contractor: means a person who pursuant to one or more contracts directs the activities of one or more employers or self-employed persons involved in work at a workplace.

Controlled Product: is any product, material, or substance specified by the regulations made pursuant to paragraph 15(1)(a) of the Hazardous Products Act to be included in any of the Classes listed in Schedule II of that Act, and includes:

1. Class A compressed gas
2. Class B flammable and combustible material
3. Class C oxidizing material
4. Class D poisonous and infectious material
5. Class E corrosive material
6. Class F dangerously reactive material

dBA: the sound level in decibels as measured using the "A"-weighting network and slow meter response on a sound level meter that ("audiometer") meets the requirements for a type 2 meter as specified by:

1. International Electrotechnical Commission Publication 651-1979 "Sound Level Meters"
2. The American National Standards Institute (A.N.S.I.) S1.4 (1983) for Sound Level Meters"

Dangerous Goods: means goods defined in section 2 of the *Transportation of Dangerous Goods Act* (Canada) and regulated in the federal regulations. Dangerous goods include explosives, compressed and liquefied gases, flammable and combustible materials, oxidizing materials and organic peroxides, poisonous and infectious substances, radioactive materials, corrosives, and miscellaneous dangerous goods.

Dangerous Occurrence: any event that could have resulted in loss to people, property, process or the environment, but did not.

Dangerous work: work involving safety and health risks that are not normal for the job or a situation for which the worker is not properly trained, equipped, or experienced.

Decibel: a unit of measurement of sound pressure level that is equal to 20 times the logarithm to the base 10 of the ratio of the pressure of a sound, divided by the reference pressure of 20 micropascals; "hearing level" means the amount in decibels by which the threshold of audibility of the ear of a person differs from the reference equivalent threshold level of an audiometer that is used to test the hearing of that person.

Emergency: means, in the context of these guidelines, an accidental situation involving the release or imminent release of dangerous goods or other substances that could result in serious adverse effects on the health and/or safety of persons or the environment. An emergency may be the result of man-caused or natural occurrences such as, but not limited to, process upsets, uncontrolled reactions, fires, explosions, threats, structural failures, tornados, earthquakes, floods, and storms.

Emergency Response (Contingency) Plan: means a detailed program of action to control and/or minimize the effects of an emergency requiring prompt corrective measures beyond normal procedures to protect human life, minimize injury, to optimize loss control, and to reduce the exposure of physical assets and the environment from an accident.

Employer includes:

1. Every person who, by himself or his agent or representative, employs or engages one or more workers.
2. The Crown and every agency of the government.

Harassment: means:

1. objectionable conduct that creates a risk to the health of a worker; or
2. severe conduct that adversely affects a worker's psychological or physical well-being.

Hazard: is any activity, situation or substance that could result in loss. Workplace hazards are divided into two broad categories: (1) health hazards, and (2) safety hazards.

1. A *health hazard* is any agent, situation, or condition that can cause an occupational illness. Chemical and biological hazards, physical agents (energy sources), work design (ergonomics) and harassment or violence are all health hazards.
2. A *safety hazard* is anything that could cause injury. Such things as slipping or tripping hazards, moving parts of machinery or tools, work at a height, pressure systems etc. are all examples of safety hazards.

Hazardous Product: is any prohibited product, restricted product, or controlled product

Health: means the condition of being sound in body, mind and spirit, and shall be interpreted in accordance with the objects and purposes of the WSH Act.

Hearing Level: the amount in decibels by which the threshold of audibility of the ear of a person differs from the reference equivalent threshold of an audiometer that is used to test the hearing of that person.

Hearing Protector: a device that is designed and manufactured to be worn by a person for the purpose of reducing that person's exposure to sound

Job hazard analyses (JHA) involves breaking down each job into its steps, analyzing the hazards present at each step, developing controls for those hazards, writing Safe Work Procedures based on each analysis, testing,

revising, and implementing the written work procedures, regularly reviewing each job procedure and keeping it current. Refer to and use the Job Hazard Analyses Form in this section of the WSH Program Binder.

Label: includes any mark, sign, device, stamp, seal, sticker, ticket, tag, or wrapper

Lex: the level of a workers total exposure to noise in dBA, averaged over the entire work day based on a 3 decibel exchange rate as measured by a noise dosimeter.

Lockout: means the disconnection, blocking or bleeding of all sources of energy that may create a motion or action by any part of a machine and its auxiliary equipment.

Material Safety Data Sheet (MSDS): is a document disclosing the information referred to in subparagraphs 13(a)(i) to (v) of the Hazardous products Act. A technical bulletin which provides detailed hazard and precautionary information on a controlled product.

On Scene Responder: means the person who first discovers the emergency and must take a course of action.

Prime Contractor: means the prime contractor for a construction project referred to in section 7 of The Act.

Product Identifier: in respect of a controlled product, the brand name, code name, or code number specified by a supplier or the chemical name, common name, generic name, or trade name.

Risk: describes the odds that a hazard will cause harm. It refers to the probability and severity of potential incidents, dangerous occurrences, near misses and emergencies (fires, etc.).

Risk Assessment: means the quantitative evaluation of the probability of undesired events and the probability of harm or damage being caused by them, together with the value judgments made concerning the significance (or consequences) of the results.

Safety: means the control of accidental loss to people, property, process or the environment.

Safety and Health Officer: means a person designated as a safety and health officer under the WSH Act.

Severity is the seriousness of the harm that could result from a hazard. It is often categorized as: catastrophic (death and/or permanent injury), critical (serious injury), marginal (minor injury) or negligible (no injury).

Sound Control Measure: means any measure taken in respect of the workplace to eliminate, control, or reduce a worker's exposure to sound including:

1. the replacement, modification or elimination of noisy equipment
2. the modification of a building or structure
3. the modification of any operation or work practice

But does not include the use of any form of hearing protection worn by a person.

Spill: means an unauthorized release or discharge of a dangerous good into the environment.

Supervisor: Under the WSH Act, means a person who has charge of a workplace or authority over a worker.

Supplier Label: is a label provided by a supplier disclosing the information and displaying the hazard symbols referred to in paragraph 13(b) of the Hazardous products Act.

Training: means more than just providing information. It requires a practical demonstration that each worker has acquired the skill or knowledge to complete the job safely.

Table Top Exercise: means an activity in which key staff with emergency management responsibilities is gathered informally to discuss actions to be taken during an emergency based on the THE COMMUNITY CENTRE emergency plan and standard operating procedures. The primary characteristic is a verbal “walk through” of a response to an emergency situation. The table top exercise is designed to elicit constructive discussion by the participants, without time constraints as they examine and resolve problems based on the ERP. The purpose of the table top is to have participants practice problem solving and resolve questions of coordination and assignment of responsibilities in and non-threatening format under minimum stress. Tabletop Exercises typically involve a limited demonstration of operational response and / or internal coordination activities. In many cases, responders from only a few local agencies are involved. Post exercise evaluation activities are usually limited to an oral critique session during which recommendations for improvement may also be prepared.

Violence means:

1. the attempted or actual exercise of physical force against a person
2. any threatening statement or behaviour that gives a person reasonable cause to believe that physical force will be used against the person

Worker includes:

1. Any person employed by an employer to perform a service whether for gain or reward, or hope of gain or reward.
2. Any person engaged by another person to perform services, whether under a contract of employment or not:
 - a. who performs work or services for another person for compensation or reward on such terms and conditions that he is, in relation to that person, in a position of economic dependence upon that person more closely resembling the relationship of any worker than that of an independent contractor.
 - b. who works or performs services in a workplace that is owned or operated by the person who engages him to perform the services
3. Any person undergoing training or serving an apprenticeship at an educational institution or at any other place. Students in a science lab, industrial arts or technical-vocational program.

Worker safety and health representative: means the person designated as a worker safety and health representative under the WSH Act.

Workplace: means any building, site, workshop, structure, mine, mobile vehicle, or any other location whether indoors or outdoors in which one or more workers, or self-employed persons, are engaged in work or have worked.

Workplace Label: is a label which discloses:

1. a product identifier;
2. information for the safe handling of the controlled product; and
3. that a material safety data sheet, if supplied or produced, is available.

22.1: LIST OF FORMS

Form	Title
A	Hazard and Near Miss Report
B	Safe Job Plan / Inspection / Tool Box Talk
B1	Job Hazard Assessment
C	Inventory of Critical Tasks
D	Job Hazard Analysis
D1	List of Known and Potential Violent Worksites or Job Functions
D2	Violence Risk Assessment
D3	Violence Risk Assessment Employee Questionnaire
D4	Fall Protection Plan
E	Worksite Set-up Safety Checklist
E1	Company Vehicle Safety Setup Checklist
F	Safe Work Practices
G	Safe Job Procedures
H	Record of Enforcement and Disciplinary Action
H1	Enforcement and Disciplinary Action Policy Acknowledgement
H2	Working Alone Plan Agreement
H3	Working Alone Hazard Analysis
I	Record of Maintenance
I1	Record of Defective Tool, Machine, Equipment Repair Logbook
I2	Inventory of Fall Protection Systems
J	Employee Orientation
K	Contractor Orientation
L	Record of Safety Talk
M	Jobsite Inspection Checklist
M1	Safety, Health and Loss Control Inspection Checklist
M4	Forklift Pre Shift Checklist
M8	Fall Protection Equipment Inspection Checklist
M9	Vehicle Pre-Operational Checklist
M12A	Ladder Pre Use Inspection Checklist

Form	Title
M12B	Ladder Pre Use Inspection Checklist
M13	Harness Inspection Checklist
M14	Power Tool Inspection Checklist
M15	ATV Pre-Operational Checklist
	Ice Resurfacing Machine Pre-Use Inspection Checklist
N	Incident Report
O	Incident Investigation Report
O1	Return to Work – Restrictions Report
O2	Return to Work – Physician Letter
O3	Return to Work –Worker Letter
O4	Return to Work – Modified Duty Offer Form
O5	Return to Work – Employee Contact Record
O6	Return to Work – Physical Demands Analysis Form
P	First Aid Log
Q	Emergency Response Plan Checklist
Q1	Emergency Contact List
Q2	ERP Drill Checklist
R	Emergency Equipment Checklists
R1	Fire Extinguisher Inspection Maintenance Record
R2	First Aid Kit Checklist
S	Record Keeping and Statistics
T	Workplace Safety & Health Representative Member Sign-In
T1	Workplace Safety & Health Representative Request for Educational Leave
T2	Workplace Safety & Health Representative Minutes
T3	Workplace Safety & Health Representative Checklist
T4	Workplace Safety & Health Bulletin Board Checklist
T5	Workplace Safety & Health Rep Agenda Template
U	Inventory of Controlled Products
V	WHMIS Implementation and Inspection Checklists
W	Risk Assessment for Musculoskeletal Injury

Form	Title
X	Contracted and Self Employed Persons Safety Evaluation and Agreement
Y	Work Refusal Report
Z	Workplace Safety Management System Evaluation Checklist