



PROVINCIAL 
WOODWORKERS
 LIMITED

Safety Policy

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Phone: 902 468-3034
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Company Health and Safety Policy

Scope

This policy will apply to Provincial Woodworkers Limited / Provincial Lab Systems Limited and all of its locations.

Policy

Provincial Woodworkers Limited / Provincial Lab Systems Limited are committed to providing a healthy and safe work environment for its employees and preventing occupational illness and injury. Because we know that our employees are our greatest asset. We are dedicated to the objective of eliminating the possibility of injury and illness. To express that commitment, we issue the following policy on occupational health and safety.

As president, owner, and CEO of Provincial Woodworkers Limited and Vice President of Provincial Lab Systems, I give you my personal promise to make every effort to prevent harm to workers.

Managers and supervisors (Project Managers and shop foremen) will be trained and held responsible for ensuring that the employees, under their supervision, follow this policy to the best of their ability. They are held accountable for ensuring that employees use safe work practices and receive training to protect their health and safety.

Managers and supervisors (Project Managers and shop foremen) also have a general responsibility for ensuring the safety of equipment and facility.

The management & staff of Provincial Woodworkers Limited / Provincial Lab Systems Limited **will be required to support and co-operate with health and safety initiatives of the company** and with the Occupational Health and Safety Act and anyone exercising authority under the applicable laws.

It is the duty of all personnel employed by this company to report to management, as soon as possible, any hazardous conditions, injury, accident, or illness related to the workplace. Also, employees must protect their health and safety by complying with applicable Acts and Regulations and to follow policies, procedures, rules and instructions as prescribed by Provincial Woodworkers Limited /Provincial Lab Systems Limited.

Provincial Woodworkers Limited / Provincial Lab Systems Limited will strive to eliminate hazards and, thus, the need for personal protective equipment. If that is not possible, and where there is a requirement, employees will be required to use safety equipment, clothing, devices and materials for personal protection. Provincial Woodworkers Limited recognizes the employee's duty to identify hazards and supports and **encourages employees to play an active role in identifying hazards and to offer suggestions or ideas to improve the health and safety program.**

President: _____ (Steve Mageau)

Date: __, __, ____ (mm/dd/yyyy)

ASSIGNMENT OF RESPONSIBILITIES

ASSIGNMENT OF RESPONSIBILITY AND ACCOUNTABILITY FOR SAFETY

Managers

1. To provide information, instructions, and assistance to all supervisory staff in order to protect the health and safety of all our employees.
2. To understand and enforce our incident prevention policy as well as the Occupational Health and Safety Act.
3. To provide all supervisory staff with an understanding of our incident prevention program as well as relevant sections of the Occupational Health and Safety Act.
4. To provide all supervisory staff with proper, well maintained tools and equipment, plus any other special personal protective devices which may be required.
5. To provide on going safety education programs and approved first aid training as required.
6. To monitor departments and projects and hold them accountable for their individual safety performance.

Employee

1. To read, understand, and comply with this firm's safety policy, safe work practices, procedures, and rules.
2. To wear the safety equipment and personal devices and clothing required by regulations and his/her employer.
3. To notify his/her supervisor of any unsafe conditions or acts that may be of danger to other workers or himself/herself.
4. To report all incidents and injuries and near misses to his/her supervisor as soon as possible.
5. To take every reasonable precaution to protect the safety of other workers and himself/herself.



Sub-Contractor Safety Policy
&
Pre-Job Hazard Assessment

Sub-Contractor Policy

Sub-Contractors working at any Provincial Woodworkers Limited / Provincial Lab Systems Limited sites shall, prior to starting work, complete a *Pre-Job Hazard Assessment* which identifies all hazards and potential hazards and the action taken to control them.

While working on Provincial Woodworkers Limited projects, the Sub-Contractor shall participate in all *Work-Safety Minutes* and play an active role as a member of the *Work-Site Safety Committee*.

General Inspections and *Tool Box Meetings* shall be carried out according to Provincial Woodworkers Limited Safety Policies.

Sub-Contractors will provide documentation to Provincial Woodworkers Limited / Provincial Lab Systems Limited to verify compliance with this policy.

Sub-Contractors must submit a safety plan for each project that includes a signed declaration stating that all employees on site have completed the required training necessary to safely perform their job.

President: _____ (Steve Mageau) Date: __, __, ____ (mm/dd/yyyy)

Sub-Contractor Policy Supplemental

To be signed by Sub-Contractor

Sub-Contractors working at any Provincial Woodworkers Limited / Provincial Lab Systems Limited sites shall, prior to starting work, complete a *Pre-Job Hazard Assessment* which identifies all hazards and potential hazards and the action taken to control them.

While working on Provincial Woodworkers Limited projects, the Sub-Contractor shall participate in all *Work-Safety Minutes* and play an active role as a member of the *Work-Site Safety Committee*.

General Inspections and *Tool Box Meetings* shall be carried out according to Provincial Woodworkers Limited Safety Policies.

Sub-Contractors will provide documentation to Provincial Woodworkers Limited / Provincial Lab Systems Limited to verify compliance with this policy.

Acknowledged By: _____

Subcontractor

Company Name

Date

Note: A copy of this signed statement and completed Pre-Job Hazard Assessment will be kept with the job file for reference.

Pre- Job Hazard Assessment

Job # _____ Job Name: _____

Date: ____, ____, ____ (mm,dd,yyyy) Location: _____

Assessment Performed by - Names, Position: _____

	YES	NO	N/A		YES	NO	N/A
Safety Requirements				On Site Conditions			
Safety Manual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Excessive Noise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety Policies Posted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Particle in the Air	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job Procedures/Safe Work Practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lighting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OH&S Act and Regulations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Temperature - Hot, Cold	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspection / Investigation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Falling Objects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First Aid Personnel / Facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stacking of Material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First Aid Kits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Entrance/Exits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Exits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ventilation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PPE Hard Hats, Safety Boots, Safety Glasses, Ear Protection, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Building - Windows, Doors, Stairs, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Warning Signs Visible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electric Over Head Door	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Numbers / Procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Material Storage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job Specific Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sanitation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General House Keeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Snow and Ice Removal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Site Rules				Chemicals			
Non Smoking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WHMIS Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Required PPE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WHMIS Labels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hours of Operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MSDS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-Access (danger/secure areas)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PPE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Security (Alarm)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Flammable/Explosive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Site Equipment				Reactive/Corrosive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Faxes, Copier ,Computers, Phones	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Power Tools			
Chairs, Tables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(See equipment/tool inspection)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pre- Job Hazard Assessment Equipment Inspection

Job # _____ Job Name: _____

Assessment Performed by - Names, Position: _____

Equipment, Tools Materials, Conditions	Potential Health and Injury Hazards	Priority	Required Action	Responsibility	Date Completed

Other Considerations

Comments

- Hazard Priority Key:
- A** A condition of practice likely to cause permanent disability, loss of life, or extensive property loss; e.g. an unguarded saw
 - B** A condition or practice likely to cause serious injury or illness, resulting in temporary disability or moderate property damage; e.g. slippery walkways
 - C** A condition or practice likely to cause minor, non-disabling injury or illness or non-disruptive property damage; e.g. handling common solvents without proper protective gloves.

