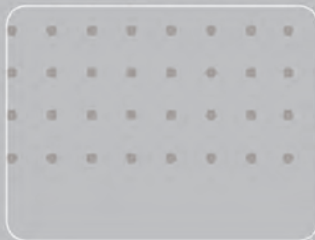


HEALTH & SAFETY POLICY AND PROGRAM



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HEALTH & SAFETY POLICY

STATEMENT

Management of Impact Electrical & Mechanical Limited is vitally interested in the health and safety of its employees. Protection of employees from injury or occupational disease is a major continuing objective. Impact Electrical & Mechanical Limited will make every effort to provide a safe, healthy work environment. All supervisors and workers must be dedicated to the continuing objective of reducing risk of injury.

Impact Electrical & Mechanical Limited, as employer, is ultimately responsible for worker health and safety. As president of Impact Electrical & Mechanical Limited, I give you my personal promise that every reasonable precaution will be taken for the protection of workers.

Supervisors will be held accountable for health and safety of workers under their supervision. Supervisors are responsible to ensure that machinery and equipment are safe and that workers work in compliance with established safe work practices and procedures. Workers must receive adequate training in their specific tasks to protect their health and safety.

Every worker must protect his or her own health and safety by working in compliance with the Occupational Health and Safety Act and applicable Regulations and with safe work practices and procedures established by this company, its clients, and the general contractor(s).

It is in the best interest of all parties to consider health and safety in every activity. Commitment to health and safety must form an integral part of this organization, from the president to the workers.



Don Gorman
President
Impact Electrical & Mechanical Ltd.

HEALTH & SAFETY POLICY

RESPONSIBILITIES

Senior Management

Senior management shall:

- > Ensure that equipment, materials and protective devices are provided and maintained in good condition.
- > Review annually Impact Electrical & Mechanical Limited's written health and safety policy.
- > Provide the necessary resources to implement, support and enforce Impact Electrical & Mechanical Limited's health and safety policy and program within the company.
- > Review all accident reports at least quarterly.
- > Promote the exchange of health and safety information with outside groups.
- > Review site training plans for health and safety and ensure adequate measures are available.
- > Review the site health and safety program with all Impact Electrical & Mechanical Limited's supervisors and all subcontractors to Impact Electrical & Mechanical Limited's, identifying their responsibilities and emphasizing co-operation among all parties.
- > Provide compensation and time necessary to Impact Electrical & Mechanical Limited employees who are selected as a health and safety representative or as a safety committee member.

Supervisors

All Supervisors shall:

- > Ensure that workers use or wear the equipment, protective devices and clothing that Impact Electrical & Mechanical Limited requires to be used or worn.
- > Ensure that workers work in the manner and with the protective devices, measures and procedures required by the Occupational Health and Safety Act and applicable Regulations.
- > Provide orientation for new crew members.
- > Conduct weekly safety talks.
- > Inspect safety equipment weekly.
- > Inspect tools and equipment at least weekly and ensure that they are properly maintained.
- > Review safety aspects of each task with crew.
- > Conduct accident investigations.
- > Report safety problems to Impact Electrical & Mechanical Limited's senior management.
- > Ensure housekeeping is done at least daily.
- > Review MSDSs with crew before using hazardous materials.
- > Review minutes of safety meetings, Ministry of Labour orders, and safety directives with crew.

HEALTH & SAFETY POLICY

Workers

All workers shall:

- > **Work safely in accordance with Impact Electrical & Mechanical Limited's health and safety policy and program, and with the project or client's health and safety program (including the Occupational Health and Safety Act and Regulations).**
- > **Use or wear the equipment, protective devices and clothing that Impact Electrical & Mechanical Limited requires to be used or worn.**
- > **Report hazards or unsafe conditions to their supervisor after taking appropriate immediate action.**
- > **Report all accident, injuries and near misses to their supervisor.**
- > **Clean up their own work area at least daily.**
- > **Inspect personal protective equipment before use and report defects or damage to their supervisor.**

Subcontractors

All subcontractors to Impact Electrical & Mechanical Limited shall:

- > **Work safely in accordance with Impact Electrical & Mechanical Limited's health and safety policy and program, and the project or client's health and safety program (including the Occupational Health and Safety Act and applicable Regulations).**
- > **Ensure that all their employees comply with the site health and safety policy and program.**
- > **Provide training to their employees in the requirements of the site safety policy and program.**
- > **Ensure that their employees are properly licensed, qualified as required by contract or trained for their duties.**
- > **Provide, inspect, and maintain necessary safety equipment as required for their direct-hire employees.**
- > **Monitor site conditions daily and record all injuries, accidents or near misses.**
- > **Notify Impact Electrical & Mechanical Limited's supervision immediately of any lost-time injuries or medical aid cases occurring on the project.**
- > **Conduct clean up of work areas daily (if waste and debris create a hazard and are not cleaned up in a reasonable time, they will be cleaned up by Impact Electrical & Mechanical Limited at the expense of the subcontractor).**
- > **Conduct regular weekly toolbox talks in addition to specific hazard training when required.**
- > **Provide compensation and time necessary to employees who are selected as a health and safety representative or a safety committee member.**

CONFINED SPACES

RESPONSIBILITIES

Senior Management

Senior management shall, before work begins:

- > Notify the local utility or Ontario Hydro for work on electrical vaults.
- > Identify confined space locations and work areas and identify confined space work procedures required.
- > Provide confined spaces training for direct-hire employees.
- > Conduct or arrange for gas testing and monitoring of the confined space atmosphere.

Supervisor

The supervisor shall, before work begins:

- > Obtain “Safe Work Permit” from client if required and follow the confined space work procedures appropriate for the work site.
- > Provide necessary ventilation, breathing apparatus, safety staff and rescue equipment.

Workers

All workers shall:

- > Test respiratory and rescue equipment before use.

Subcontractors

All subcontractors shall:

- > Take responsibility for any confined space equipment and training for their employees.

PROCEDURES

- 1 Before work begins in any manhole, vault or other confined space, a person properly trained to use the appropriate gas detection equipment must test the air.
- 2 Where proper tests competently performed indicate a safe atmosphere, workers may be allowed to enter.
- 3 Where proper tests competently performed indicate a hazardous level of fumes, gases or oxygen deficiency in any confined space, entry must not be allowed until the space has been adequately ventilated and subsequent tests indicate a safe atmosphere.
- 4 Where possible, mechanical venting should be continued in any confined space found to contain hazardous levels of fumes, gases or oxygen deficiency, even after mechanical venting has corrected the hazard. The confined space must also be continuously monitored while personnel are working there.
- 5 Where mechanical venting has corrected hazardous levels of fumes, gases or oxygen deficiency in a confined space but cannot be continuously provided, workers entering the confined space must wear rescue harnesses attached to individual lifelines and a worker must be posted at the entrance prepared and equipped to provide rescue in case of emergency.

TAGGING & LOCKOUT

RESPONSIBILITIES

Senior Management

Senior management shall:

- > Develop a written corporate Tagging and Lockout Procedure.
- > Ensure that work-specific or site-specific tagging and lockout procedures conform with requirements of the company's health and safety program.
- > Provide general and system-specific tagging and lockout training.

Supervisor

The supervisor shall:

- > Provide workers with tags, individual keys, padlocks, and scissors.
- > Consult with management and/or the owner/client if a secure lockout is not possible.
- > Check that all workers are clear of work area before re-energizing the system.
- > Obtain the owner/client's authority to re-energize any system.

Workers

All workers shall:

- > Comply with the corporate Tagging and Lockout Procedure and/or the owner/client's tagging and lockout procedure or risk disciplinary action.

PROCEDURES

- 1 Review drawings of the system to be de-energized and de-activated to determine the switches, power sources, controls, interlocks or other such devices necessary to isolate the system. Confirm with the client/owner where required.
- 2 All apparatus capable of being electrically energized or dynamically activated must be de-energized or de-activated by locking out, physically disconnecting or otherwise rendering the apparatus inoperable.

Switches, power sources, controls, interlocks and other such devices must be appropriately tagged and personally locked out by each worker involved in the operation.
- 3 Test the system with a CSA-certified potential test indicator to ensure that all components are de-energized and de-activated, including interlocking or dependent systems, which could feed into the system being isolated, either mechanically or electrically. Potential test indicators should not be used beyond the voltage limits for which they are related.
- 4 Observe the following safeguards for locking out and tagging:
 - a After the circuit has been de-energized and locked out by the person in charge, workers must be protected by personally placing their own safety lock on the disconnect switch. The worker must retain the key for this lock while the lock is in place.

TAGGING & LOCKOUT

- b** Where several workers or trades are working on the circuit, provision for additional locks must be made through the use of a lockout bar. This arrangement can accommodate any number of locks by placing another lockout bar in the last hole of the previous bar.
- c** In accordance with Section 188 of the current Regulations of Construction Projects, each worker must attach to their lock a durable tag filled out with the following information:
 - > reason the switch is open
 - > name of person responsible for opening the switch
 - > date on which the switch was opened
- 5** The de-energized electrical system must be discharged by short circuit and phase to ground. A temporary ground cable must be attached to the system and remain in place until work is complete.
- 6** A record must be kept of the devices opened, locked out or otherwise rendered inoperable so that all of these devices can be reactivated once work is complete.
- 7** Place signs on the system indicating that it is not to be energized or operated and that guards, locks, temporary ground cables, chains, tags, and other safeguards are not to be tampered with or removed until work is complete.
- 8** Workers testing electrical equipment must:
 - > remove all watches, rings, neck chains or other current-conducting jewellery
 - > wear electric shock resistant footwear
 - > wear safety glasses with side shields

FIRST AID

PROCEDURES

In All Cases Of Injury

The worker shall:

- > Promptly obtain first aid.
- > Notify their supervisor or employer immediately of any injury.
- > If requiring health care, obtain from the employer a completed "Treatment Memorandum" (Form 156) to take to the doctor or the hospital.

When an Accident Occurs:

- 1 The trained person on location will administer first aid.
- 2 Impact Electrical & Mechanical Limited will assess the severity of the injury and ensure that protection has been provided against continuing or further hazards.
- 3 This trained person will have someone notify Don Gorman at Impact Electrical & Mechanical Limited's head office and the health and safety representative.
- 4 Supervisor/Forman will stay with the injured person until help arrives, and will inform medical personnel of first aid treatment given.
- 5 Supervisor/Forman will provide immediate transportation to a hospital, doctor's office or the worker's home, if emergency vehicle transportation is not available.
- 6 Supervisor/Forman will complete and give to the injured worker a "Treatment Memorandum" (Form 156) if health care is needed.

REQUIREMENTS

First Aid Boxes

- 1 Every work site must have a first aid box maintained in accordance with the Workers' Compensation Act.
- 2 The size and contents of the box will vary with the number of workers at the work site.
- 3 Supervisor/Forman will maintain first aid boxes.
- 4 Service crews must keep a first aid box in the service vehicle, located behind the driver's seat.
- 5 Where the site is in the charge of a general contractor, the general contractor shall provide and maintain the first aid box and first aid station.

Trained First Aider

- 6 Management will ensure that the first aid kit is at all times in the charge of a worker who:
 - a Is the holder of a valid St. John Ambulance Emergency First Aid Certificate.
 - b Works in the immediate vicinity.
- 7 Management will ensure that Supervisor/Forman have completed first aid training and

that all workers know their names and posted phone numbers.

Inspection of First Aid Boxes

- 8** Management and/or Forman will inspect the first aid boxes and their contents at least once every 3 months.
- 9** Each first aid box will contain an inspection card with the date of the most recent inspection signed by Supervisor/Forman.
- 10** Supervisor/Forman will monitor the first aid box/first aid station.



ACCIDENT REPORTING & INVESTIGATION

PROCEDURES

- 1 All accidents, regardless of severity, must be reported immediately to the supervisor.**
- 2 The supervisor will then promptly notify senior management.**
- 3 Senior management will initiate an investigation of all**
 - a Critical injuries**
 - b Lost-time injuries**
 - c Medical aid accidents**
 - d Occupational illnesses**
 - e Major close calls**
 - f Any workers fall-arrested by a harness**
 - g Property damage exceeding \$ 500.00**
- 4 The supervisor will ensure that any accidents or incidents requiring investigation are reported immediately to Don Gorman at head office, and to the health and safety representative or health and safety committee.**
- 5 The supervisor will conduct an accident investigation, using the corporate “Accident Investigation Report Form”, for any accident requiring investigation.**
- 6 Preliminary reports must be reported to senior management within 48 hours. Detailed reports are to be submitted within seven days.**

ACCIDENT REPORTING & INVESTIGATION

SAMPLE FORM

ACCIDENT INVESTIGATION REPORT FORM

PART A: Identifying Details

EMPLOYER

Name: _____ Address: _____
Type of Business: _____

INJURED EMPLOYEE

Last Name: _____ First Name: _____
Occupation: _____
Nature of injury: _____

OTHER EMPLOYEE INVOLVED

Last Name: _____ First Name: _____
Occupation: _____
Address: _____

ACCIDENT/INJURY

First Aider: _____ Medical Treatment: _____

Name and address of doctor/surgeon: _____

Hospital: _____

Date and time of accident: _____

Date and time accident reported to supervisor: _____

Date and time accident reported to MOL: _____

Name of MOL representative who took the call: _____

Date and time accident reported to head office: _____

Names and addresses of witnesses:

Name: _____	Address: _____
Name: _____	Address: _____
Name: _____	Address: _____

Description of machinery or equipment involved: _____



ACCIDENT REPORTING & INVESTIGATION

SAMPLE FORM

PART B: Accident Description

Explain what happened (what, where, who, how)

Sketch/Diagram:

CAUSES

Immediate Causes:

Underlying Causes:

How can the accident be prevented from happening again?

Actions taken to prevent recurrence:

Action by:

Report prepared by:

PART C: Reviews of Accident Report (Please include name and date)

HEALTH AND SAFETY REPRESENTATIVE

Name:

Signature:

Date:

JOINT HEALTH & SAFETY COMMITTEE MEMBERS

Name:

Signature:

Date:

CHIEF EXECUTIVE OFFICER

Name:

Signature:

Date:

INSPECTIONS & HAZARD ASSESSMENTS

PROCEDURE

A completed Safety Audit Checklist is to be submitted to Safety Coordinator at Impact Electrical & Mechanical Limited's head office every 90 days.

SAMPLE FORM

SAFETY AUDIT CHECKLIST		
PROJECT/JOBSITE _____		
PERSON(S) CONDUCTING AUDIT _____	DATE _____	
BASIC SAFETY ACTIVITIES		
	Yes	No
1. OH&S Act posted and in good condition?	_____	_____
2. Safety orientation for all employees?	_____	_____
3. Regular safety meetings:		
i. Toolbox Talks?	_____	_____
ii. H&S Committee?	_____	_____
4. Are subcontractors involved?	_____	_____
5. Training or instruction for:		
i. Supervisors?	_____	_____
ii. Workers?	_____	_____
6. All equipment safety-checked before use?	_____	_____
7. Adequate safety promotion?	_____	_____
8. Co. Safety Program communication:		
i. Reviewed?	_____	_____
ii. Handed Out?	_____	_____
COMMENTS:		



WORKER ORIENTATION

RESPONSIBILITIES

Senior Management

Senior management shall:

- > **Prepare a corporate “Orientation Checklist” for all new workers signing on, and compile records of orientation.**
- > **Provide orientation to subcontractors.**
- > **Ensure that new employees and subcontractors receive a written copy of the company’s “Health and Safety Policy and Program”.**

Supervisor

The supervisor shall:

- > **Review the corporate “Orientation Checklist” with each new member of the crew and return a copy to Safety Coordinator at head office for recording.**

Subcontractors

All subcontractors shall:

- > **Provide site orientation to their direct-hire employees and sub trades under their direction.**
- > **Forward copies of completed orientation checklists to Impact Electrical & Mechanical Limited management at head office.**

WORKER ORIENTATION

SAMPLE FORM

ORIENTATION CHECKLIST

EMPLOYEE _____ SUPERVISOR _____

JOBSITE/PROJECT _____

	EMPLOYEE INITIAL	SUPERVISOR INITIAL
Explanation of project and of employee duties.	_____	_____
Provide copy of company safety policy and program.	_____	_____
Requirements for personal protective equipment	_____	_____
Accident reporting procedures.	_____	_____
Location of: <ul style="list-style-type: none">▪ first aid▪ fire extinguishers▪ telephones▪ emergency numbers	_____	_____
Emergency procedures details.	_____	_____
Location and details of specific project hazards.	_____	_____
Location of tool handling and storage area.	_____	_____
Location of parking, lunch area, and toilets.	_____	_____
Project telephone number and absentee reporting procedures.	_____	_____
Name of health and safety representative and/or joint H&S committee members.	_____	_____
Location of any hazardous substances and their MSDSs, and confirmation of WHMIS training.	_____	_____

SIGNATURES: _____ DATE _____
EMPLOYEE _____ SUPERVISOR _____



HEALTH & SAFETY REPRESENTATIVE

SELECTION

- 1 At a project or other workplace where no committee is required under the Occupational Health and Safety Act and where the number of workers regularly exceeds five, the constructor or employer must cause the workers to select at least one Health and Safety Representative from among the workers at the workplace who do not exercise managerial functions.**
- 2 The selection must be made by the workers or by the trade union which represents them.**
- 3 Management and workers must provide the Health and Safety Representative with any information and assistance necessary to carry out inspections in the workplace.**

RESPONSIBILITIES

The Health and Safety Representative shall:

- > Inspect the work areas at least monthly to identify hazards.**
- > Report hazards and make written recommendations to the constructor or employer.**
- > Attend and participate in health and safety meetings on site.**
- > Assist senior management in the annual review of the company's health and safety program.**
- > Help to implement the company's health and safety program.**
- > Assist the supervisor in accident investigation.**

JOINT HEALTH & SAFETY COMMITTEE

SELECTION

- 1** A joint health and safety committee of at least two persons is required:
 - a** At a workplace at which 20 or more workers are regularly employed and work is expected to last 3 months.
 - b** At a workplace, other than a construction project where fewer than 20 workers are regularly employed with respect to which a regulation concerning designated substances applies.
- 2** At least half the committee members shall be workers who do not exercise managerial functions.
- 3** The worker member(s) shall be selected by the workers they are to represent, or by the trade union or unions which represent them.
- 4** The constructor or employer shall select the remaining members from among persons who exercise managerial functions.
- 5** The constructor or employer shall post the names and work locations of committee members on a bulletin board located on job site and/or in job boxes.

RESPONSIBILITIES

Senior management shall, before work begins:

- > Meet at least once every three months.
- > Maintain written minutes of the meetings.
- > Conduct an inspection of the work areas monthly to identify hazards (worker member).
- > Report finding and make written recommendation to senior management.
- > Determine the time needed to conduct inspections.
- > Support the implementation and maintenance of the company safety program.
- > Assist senior management in the annual review of the company health and safety program.
- > Review inspection and accident reports.
- > Review committee membership to keep it representative of workforce.

WHMIS (Workplace Hazardous Materials Information System) gives everyone the right to know about hazardous materials they work with and provides access to that information. The method involves:

- 1 labels
- 2 material safety data sheets (MSDS)
- 3 worker training and education

Labels:

- 1 Impact Electrical & Mechanical Limited will ensure that materials delivered to the work site have WHMIS supplier or workplace labels.
- 2 Impact's head office will keep blank workplace labels in a WHMIS supplies file with the MSDS binder.

Material Safety Data Sheets:

- 3 Impact's head office will obtain and review MSDSs for materials to be used at the work site.
- 4 MSDSs will be kept in readily accessible binder(s) located at head office.
- 5 Subcontractors must provide MSDSs for their materials before materials arrive at the work site.

Training:

- 6 Management will ensure that workers and supervisors have identification indicating completion of WHMIS training.
- 7 Subcontractors will ensure that their employees have identification indicating completion of WHMIS training.
- 8 For workers without WHMIS training, the supervisor will provide instruction on specific hazards prior to work with or near hazardous materials.
- 9 The employer will provide WHMIS training for untrained, direct-hire employees within four (4) weeks of hiring.

HEALTH & SAFETY PLAN AGREEMENT

Every worker who works for or is subcontracted by Impact Electrical & Mechanical Ltd. is expected to read and abide by the Impact Health and Safety Policy and Plan.

I have read the Impact Health and Safety Policy and Plan and agree to abide by its terms.

DATE: _____ COMPANY NAME: _____

NAME (PLEASE PRINT)

SIGNATURE:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please send this form in before _____, to

Impact Electrical & Mechanical Ltd.

219 Dufferin St . Suite 6A

Toronto . Ont

M6K 1Y9

[tel] 416.596.8123

[fax] 416.596.8174

RECORD OF INSTRUCTION

The responsibility to ensure a safe and healthy workplace is everyone's, and Impact Electrical & Mechanical Ltd. is committed to providing a safe job site for all workers. In order to carry out our Healthy and Safety Plan, as required by OHS, Impact Electrical & Mechanical Ltd. requires the following information for all workers who will be working on our project. This information will be kept on file and distributed to our site supervisors as needed.

COMPANY NAME: _____ [tel] _____

PLEASE PROVIDE DATES OF COMPLETION

EMPLOYEE NAME	FIRST AID	WHMIS	FALL PROTECTION	OTHER
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				

Please return to:
 Impact Electrical & Mechanical Ltd.
 219 Dufferin St. Suite 6A
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