



## **HEALTH AND SAFETY CONCERNS**

The Board's Health and Safety Policy advocates an internal responsibility system according to the *Occupational Health and Safety Act*. This system refers to the joint effort between both employees and management in resolving health and safety concerns. Employees have a responsibility to report health and safety concerns to their Principal/Manager and the Principal/Manager has a responsibility to review and endeavour to resolve the concern.

### **1. Reporting Procedures For Urgent, Life-Threatening Concerns**

For urgent or life threatening concerns i.e. gas leak, chemical spill, electrical concerns, etc., employees shall report the concern to their Principal/Manager as follows:

- 1.1. The **employee** shall:
  - 1.1.1. immediately notify the Principal/Manager and occupants in the affected area of the concern;
  - 1.1.2. assist with securing, posting and restricting access to the affected area;
  - 1.1.3. follow up by completing Section 1 of the Health and Safety Concern Reporting Form (APPENDIX A) upon resolution.
- 1.2. The **Principal/Manager** shall:
  - 1.2.1. ensure the safety of all occupants in the affected area and confirm that the area is secured and posted;
  - 1.2.2. initiate remedial action as per Administrative Procedure Memorandum (APM) A7020 "Emergency Preparedness and Procedures";
  - 1.2.3. ensure access to the area is restricted until it has been investigated and declared safe;
  - 1.2.4. ensure emergency services are notified and assist as necessary;
  - 1.2.5. where a critical injury occurs, follow Health and Safety Procedure HS 03-02 "Injuries to Employees - Critical and Fatal", APM A2310 "Injuries to Students and Visitors" and APM A2320 "Reporting of Workplace Injury-Illness", as appropriate;
  - 1.2.6. upon resolution of the urgent life-threatening concern, complete Section 2 of the Health and Safety Concern Reporting Form received from the concerned employee(s).

## 2. Reporting Procedures For Non-Life Threatening Concerns

For non-life threatening concerns e.g. general indoor air quality, ergonomic issues, housekeeping, etc., employees shall report the concern to their Principal/Manager as follows:

- 2.1. The employee initiating the concern shall notify their Principal/Manager and complete Section 1 of the Health and Safety Concern Reporting Form.

**NOTE:** If more than one person has the same concern, they shall complete the reporting form jointly.

- 2.2. The Principal/Manager shall conduct an investigation with the concerned employee(s) as soon as practical after being notified.

- 2.3. If the concern is **resolved**, the Principal/Manager shall complete Section 2 of the Health and Safety Concern Reporting form indicating the resolution and/or any action taken.

- 2.4. If the concern is **not resolved**, the Principal/Manager may request assistance from various Board resources (refer to item 3) to endeavour to resolve the concern.

2.4.1. If the concern remains unresolved after seeking assistance, the Principal/Manager shall notify the employee, indicating reasons in Section 2 of the Health and Safety Concern Reporting form.

2.4.2. Upon completion of the Health and Safety Concern Reporting Form, the Principal/Manager shall maintain a copy on file and forward copies of the report to;

2.4.2.1. the concerned employee(s);

2.4.2.2. Human Resource Services – Health and Safety for distribution to the Joint Health and Safety Committee;

- 2.5. The concerned employee may contact their representative on the Joint Health and Safety Committee in order to have the committee review and recommend or if they have reason to believe that the concern warrants a work refusal, they may initiate the work refusal process as per procedure HS 02-03 “Health and Safety Work Refusals”.

3. **Principal's/Manager's Resources**

- 3.1. Board policies, procedures and various safety related manuals may be referenced e.g. Health and Safety Procedures Manual, Custodial Procedures Manual, Science Safety Manual, Technology Safety Manual.
- 3.2. Based on the concern, the appropriate Board department(s) may be contacted as necessary to obtain information to assist in resolving the health and safety concerns.

For example:

- Human Resource Services – Health and Safety may assist in interpreting health and safety related legislation, procedures and guidelines.
  - Facility Services may provide assistance regarding maintenance, custodial and design and construction issues.
  - Human Resource Services may provide assistance regarding staffing and labour management issues.
  - Instructional Services - Special Education may provide assistance regarding issues such as the student's Individual Education Plan (IEP), Behaviour Management Plan, or the Student Safety Plan.
  - Instructional Services may provide assistance regarding academic issues as well as program related health and safety manuals and guidelines.
  - School Services may provide assistance regarding Board policies and procedures.
- 3.3. An Action Flowchart (APPENDIX B) is provided to assist in following this procedure.

**First Issued:** August 1993

**Reference:** *Occupational Health and Safety Act*

**Revised:** May 2008

**Contact:** Human Resource Services  
Department – Health and Safety

**HEALTH AND SAFETY CONCERN REPORTING FORM**

**SECTION 1: TO BE COMPLETED BY THE EMPLOYEE**

Location (Building): \_\_\_\_\_ Room/Area: \_\_\_\_\_

Reported By: \_\_\_\_\_ Job Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date Reported to Principal/Manager: \_\_\_\_\_

Details of Concern: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Suggested Method(s) to Resolve Concern: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SECTION 2: TO BE COMPLETED BY THE PRINCIPAL/MANAGER WITH THE EMPLOYEE**

Principal/Manager Name: \_\_\_\_\_ Title: \_\_\_\_\_

Date Report Received: \_\_\_\_\_ Date Report Investigated: \_\_\_\_\_

Person(s) Involved in the Investigation: \_\_\_\_\_

\_\_\_\_\_

Other Resources Contacted: \_\_\_\_\_

\_\_\_\_\_

Details of Assistance Provided: \_\_\_\_\_

\_\_\_\_\_

Result of the Investigation:

Concern Resolved – Resolution/Action to be Taken

\_\_\_\_\_

\_\_\_\_\_

Date Action Taken: \_\_\_\_\_

Concern Not Resolved - Reasons

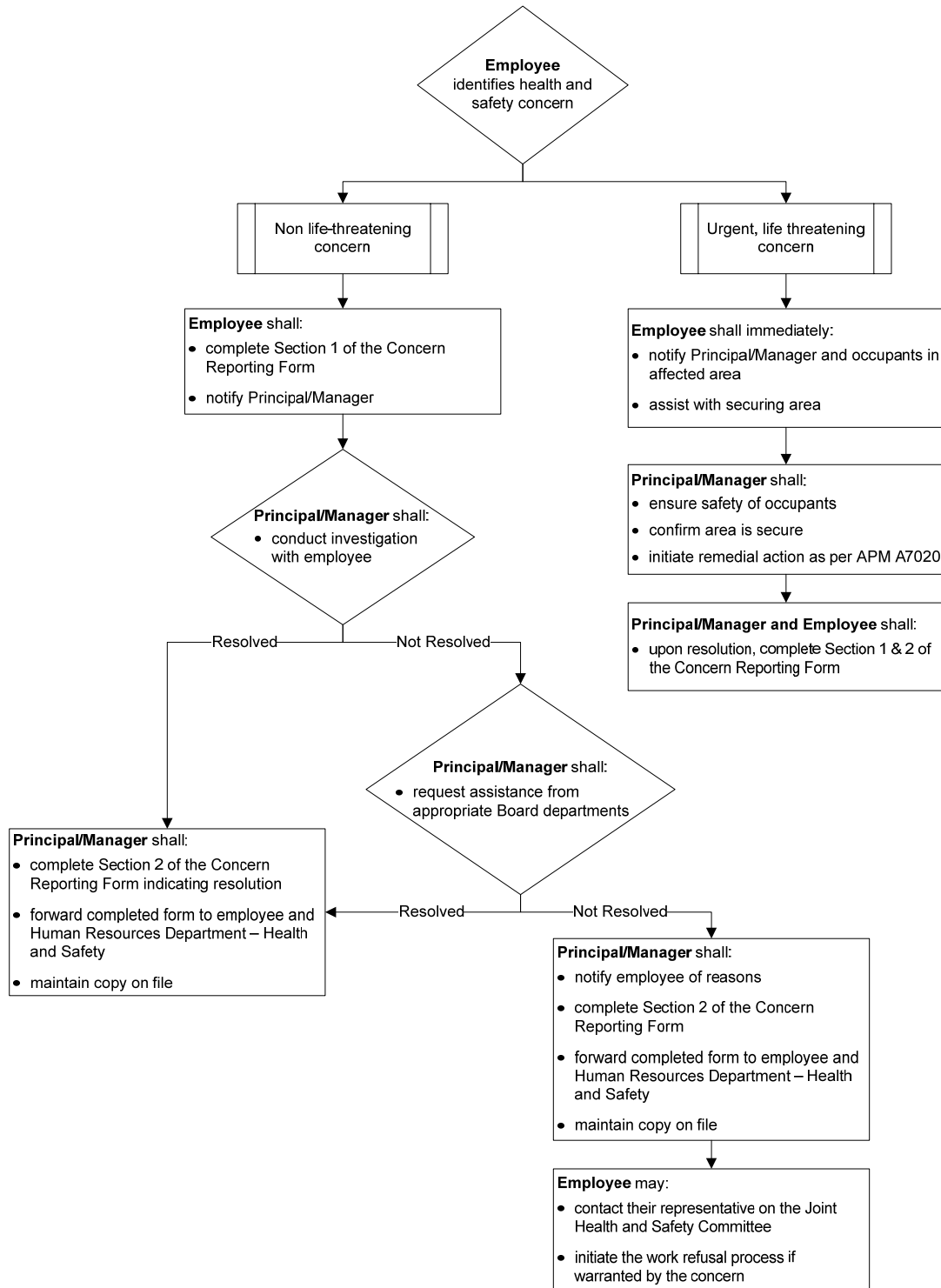
\_\_\_\_\_

\_\_\_\_\_

Date Employee Notified: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ACTION FLOW CHART FOR HEALTH AND SAFETY CONCERNS**



\*Refer to procedure for detailed information.