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| **Position:**  Manager | | | **Name:** | |
| **Daily:** | * Ensure supervisors supervise and are noting same * Ensure that all on site contractors have been oriented and are WSBC coverage is up to date | | | |
| **Weekly:** | * Ensure that any identified safety issue has been or is being corrected | | | |
| **Monthly:** | * Ensure pre-shift inspections are being done * Review first aid logs, incidents and injuries reported. Address any safety issue or matter during a monthly meeting * Confirm new workers or returning workers have been oriented * Identify training needs and arrange for training | | | |
| **Quarterly/ Seasonally:** | * Ensure inspections have been completed | | **Annually:** | * Review of the health and safety program * Conduct training and review of emergency procedures |
| **Position:**  Supervisor - Cow Boss, Farm Boss, Charge hand/lead hand/foreman/… | | | **Name:** | |
| **Daily:** | | * Ensure pre-shift inspections are being done on applicable mobile equipment * Immediately stop unsafe work * Conduct pre-job reviews of safe work practices for high-risk activity or work that has not been performed regularly or recently * Ensure that all on site contractors have been oriented and WSBC coverage is up to date * Ensure work alone policy adhered to and record of same is kept * Make notes of thing like but not limited to:   + Ongoing continuous contact if that is part of your work alone protection   + Good or bad safety behaviour observed, and action taken   + Tailgate or impromptu instruction or talks conducted or observed   + Observed site or activity hazard and any items needing correction or attention   + Direction given to a worker | | |
| **Weekly:** | | * Ensure tail gate meetings are conducted and noted * Ensure new hires and returning workers have been oriented | **Monthly:** | * Attend monthly meeting and bring any safety concerns or resolve of safety concerns to the meeting |
| **Quarterly/ Seasonally:** | | * Conduct or delegate inspections, confirm they have been done and attend to items requiring attention | **Annually:** | * Assist in annual review |

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| **Position:**  Worker | | **Name:** | |
| **Daily:** | * Do pre-shift inspections where required * Adhere to safe work practices * If in doubt don’t! * Seek instruction if you are uncertain of how to safely do a task * Adhere to work alone policy * Wear all required PPE * Report all unsafe conditions | | |
| **Weekly:** |  | **Monthly:** |  |
| **Quarterly/ Seasonally:** |  | **Annually:** |  |
| **Position:**  Contractor | | **Name:** | |
| **Daily:** | * Ensure clearance is current-provide letter * Orientation is completed for the site you are at * Adhere to all site safe work practices * Identify any unsafe physical hazard or worker conduct | | |
| **Weekly:** |  | **Monthly:** |  |
| **Quarterly/ Seasonally:** |  | **Annually:** |  |