

# Due Diligence Checklist

Workplace:

## 1. Does the employer keep the following types of records or documents?

|   |  |
|---|--|
| <input type="checkbox"/> Worker orientation records   | <input type="checkbox"/> Records of worker/supervisor training showing the date, names of attendees, and topics covered (e.g., WHMIS)                        |
| <input type="checkbox"/> Inspection reports and records of corrective actions taken to solve problems                           | <input type="checkbox"/> Incident/accident investigation reports and records of corrective actions taken to solve problems                                   |
| <input type="checkbox"/> Records of meetings and crew talks where safety issues were discussed                                  | <input type="checkbox"/> Supervisor's notes and logs of safety contacts with workers   |
| <input type="checkbox"/> Records showing use of progressive discipline to enforce safety rules and written safe work procedures | <input type="checkbox"/> JHSC meeting reports showing steps taken to address health and safety issues  |
| <input type="checkbox"/> Subcontractor pre-qualification documents  | <input type="checkbox"/> Equipment log books and maintenance records   |
| <input type="checkbox"/> First aid records, medical certificates, hearing tests.  | <input type="checkbox"/> Forms and checklists showing that the employer requires workers to follow safe work procedures (e.g., confined space entry permits) |
| <input type="checkbox"/> Sampling and monitoring records of exposures to harmful substances                                     | <input type="checkbox"/> Emergency response plan and record of drills and any resulting improvements   |
| <input type="checkbox"/> OH&S-related budget items and purchase orders  | <input type="checkbox"/> Statistics on the frequency and severity of accidents   |

## 2. Do the employer's records or documents show an effective OH&S program?

| <b>Do records/documents indicate that the employer/management:</b>   |                              |                             |
|--|------------------------------|-----------------------------|
| 1. States and communicates a clear workplace OH&S policy   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Assigns responsibility and resources for implementing OH&S program to identified person(s)  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Includes workplace OH&S issues on management meeting agendas  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Requires contractors to conform to OH&S regulations   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Ensures records are maintained (See Part 1)   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Reviews statistics on the frequency and severity of accidents, as well as injury and illness trends over time   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Assigns responsibility for identifying hazards and conducting risk assessments  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. Implements appropriate controls (engineering, work practice/administrative, PPE) for identified hazards (machine guarding, lockout, blood-borne pathogens, confined space, falls from height, chemical hazards, repetitive strain injury, etc.) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

|  |                              |                             |
|--|------------------------------|-----------------------------|
| 9. Implements a preventative maintenance schedule as required by manufacturers' and industry recommendations and standards               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10. Addresses Joint Health & Safety Committee or health & safety representative recommendations  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 11. Reviews OH&S Program activities (e.g., once a year) and makes improvements as needed   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <b>Do records/documents indicate that supervisors:</b>   |                              |                             |
| 12. Receive training to perform their safety and health responsibilities   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 13. Give crew talks/conduct safety meetings  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 14. Participate in inspections   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 15. Conduct incident/accident investigations   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 16. Take action to correct reported hazards  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 17. Conduct orientations   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 18. Conduct on-the-job training  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 19. Evaluate training to ensure that it is effective   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 20. Monitor work conditions and practices in areas where they have responsibility  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 21. Correct employees who are not following rules and procedures   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 22. Keep records of progressive discipline   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 23. Have OH&S considered as an element in their performance evaluation   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <b>Do records/documents indicate that workers:</b>   |                              |                             |
| 24. Receive orientation  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 25. Receive specific job instruction   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 26. Receive health and safety training (e.g., responsibilities, hazards, engineering controls, written safe work procedures, use of PPE) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 27. Demonstrate the skills/knowledge necessary to perform their jobs safely  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 28. Report injuries and hazards  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 29. Participate in inspections   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 30. Participate in incident/accident investigations  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

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|--|------------------------------|-----------------------------|
| <b>When dealing with disciplinary procedures for workers, supervisors, and managers who don't follow safety rules or safe work procedures:</b> |                              |                             |
| 31. Are there disciplinary procedures in place?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 32. Are workers/supervisors/managers aware of them?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 33. Are disciplinary procedures used effectively?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 34. Are they monitored by the Joint Health & Safety Committee or health and safety representative?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 35. Are good records kept of progressive discipline used to enforce safety rules and written safe work procedures?                             | <input type="checkbox"/> Yes | <input type="checkbox"/> No |



Download checklist at [ihsa.ca/logbook](http://ihsa.ca/logbook)