

## SAMPLE using TEMPLATE 2

<b>Title:</b> 5.2 (a through e) Joint Health and Safety Committee	<b>Date of Issue:</b> July 2005
<b>Approved by:</b> John Idnc	<b>Review / Revise Date:</b> July 2006
<b>Location:</b> all facilities	

The Joint Health And Safety Committee (JHSC) consists of 2 worker members and 2 management members.

The JHSC will meet quarterly or more frequently as necessary. The minutes of the meeting will be recorded and posted.

A list of the JHSC member's names along with work locations will be posted in conspicuous workplace locations.

Selection process for the Joint Health and Safety Committee:

**Worker Member:** Will be elected by their peers. Individuals can volunteer or be nominated. An election will be held to select the appropriate number of worker members.

**Management Member:** The president will select the management members.

The same process as above will be used for both the worker and management members when selecting alternates.

**Worker Certified Member:** The workers will decide who will become the certified worker member.

**Management Certified Member:** The management members on the JHSC will decide who will become the certified management member.

**Replacement Process of Certified Members:** The same process as above will be used to replace the certified member.

**Selection of Worker Co-Chair:** The worker members on the JHSC will decide who will become the worker co-chair.

**Selection of the Management Co-Chair:** The management members on the JHSC will decide who will become the management co-chair.

If the company is having difficulty selecting JHSC members, management will:

- Make additional efforts to promote the benefits of becoming a JHSC member.
- Educate and train the workers in health and safety.
- Provide information to workers on the roles and responsibilities of the JHSC.

As least one worker member and one management member will be certified as per the Occupational Health and Safety Act.

Submission of Recommendations:

**Why:** A function of the Joint Health and Safety Committee/Worker Representative is to make recommendations to the employer and the workers for the improvement of the health and safety of the workers.

**Who can submit:** The Joint Health and Safety Committee

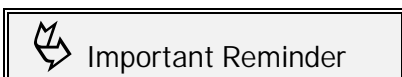
**Who is it submitted to:** The employer (management).

**What can be submitted:** Any health and safety recommendation to rectify a situation that may be a source of danger or hazard to a worker(s).

**When:** As soon as the source of danger or hazard is identified.

**How:** In writing on the company's recommendation form.

<b>Approval signature:</b> <i>John Idnc</i>	
<b>Distribution to:</b> all facilities, Senior Management, JHSC	<b>Document to be posted:</b> Yes – list of JHSC members and contact information



This element refers to employers who have 20 or more workers (this total includes all management up to and including the owner).

## SAMPLE – Joint Health & Safety Committee Recommendations to Management

Facility:

Date(s):

RE:

Reasons for recommendation:

Requirements for implementation (supporting documentation may be attached)

Date presented to management: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year  
(the date of this recommendation becomes the reference number)

Submitted by: \_\_\_\_\_

Recommendation presented to: \_\_\_\_\_

Expected date of response: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Note: The Occupational Health and Safety Act (OHSA) states that an employer who received written recommendations from the joint health and safety committee shall respond in writing within 21 days.

## Sample – Management response to Joint Health & Safety Committee Recommendations

Facility:

Date(s):

RE: Response to recommendations received on

Date recommendation received by management: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Management agrees with the recommendation (circle): Yes No

Note: If management agrees with the recommendation, complete the next section of this form. However, if there is disagreement with or an alternative to the recommendation, please provide reasons or explanation.

Implementation for recommendation (timetable, actions taken, actions to be taken, etc.)

Disagreement with, or, alternative to, recommendations

Date recommendation returned to the Joint Health & Safety Committee:

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Responding Management signature: \_\_\_\_\_

Response received by the Joint Health & Safety Committee on:

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

\_\_\_\_\_  
Management Co-chair

\_\_\_\_\_  
Worker Co-Chair

