

# Health & Safety Manual (General Version)





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## PURPOSE

This Health & Safety Manual briefly documents policies and procedures that enable The Links at Brunello to implement an effective Safety Program, and has been developed to accomplish the following:

- Protect and promote the health and safety of Employees and others that may be affected by our activities.
- Comply with all pertinent regulatory obligations.
- Assure that safety issues are addressed in each department and are given the proper priority and attention, while achieving the required results.
- Coordinate safety activities among all departments while maintaining consistency in procedures and the required level of performance.

Further information is always available on the Staff Portal of our website, the JH&S Boards throughout Brunello and upon request.

## PHILOSOPHY

The Links at Brunello is committed to promoting a safe and healthy workplace for its Employees while establishing the maintenance of safe working practices through proper procedures and policies. Safety is everyone's responsibility. It rests with all levels of management and each Employee. Should any worker experience an injury or illness, every effort will be made to accommodate that worker to ensure their attendance at work through the company's Health and Safety Program.

This policy does not supersede either the provincial requirements of the Workers' Compensation Board of Nova Scotia (WCB) or the Nova Scotia Occupational Health and Safety Act (NSOHS), but is meant to supplement these regulations while providing specific guidelines.

All Links at Brunello management and staff have a responsibility for their own health and safety, and for the health and safety of others. Everyone has a duty to report, as soon as possible, all hazardous conditions, injuries, illnesses and near misses related to the workplace. Everyone is encouraged to offer suggestions or ideas to improve health and safety.

Managers and supervisors are directly responsible for maintaining a safe workplace and for ensuring that the Employees under their supervision comply with our health and safety policy. Managers, supervisors, and all Employees must take all reasonable care to ensure the safety of all staff, guests, and others who enter the Brunello community.

To ensure that we maintain a safe and healthy work environment, The Links at Brunello commits to working in a spirit of consultation and cooperation with all Employees, through our Health and Safety Committee. The HSC plays a critical role in our health and safety success.



## ***IT STARTS WITH YOU***

This Health and Safety Manual and Nova Scotia OHS Legislation are founded on the **Internal Responsibility System** (or **IRS**). Under the IRS, everyone in the workplace shares in the responsibility for health and safety. The IRS is based on the following six points:

- I. Every individual in our workplace has the responsibility to participate in identifying OHS problems and seek solutions.
- II. Everyone, at every level, is involved and included in the IRS.
- III. Everyone's goal must be the same: the protection of life and Health, and the elimination of accidental loss to facilities, equipment, and other aspects of our work environment.
- IV. Open communication is essential. There must be no secrets when it comes to health and safety!
- V. Rather than wait until injuries and illnesses occur, everyone should proactively seek to identify hazards and take appropriate action to prevent losses.
- VI. For the IRS to function effectively, everyone must be held accountable.
- VII. The IRS is the "people framework" within this OHS System. For the system to be successful, the IRS must work like a problem-solving machine. Each person's mission is to identify hazards and opportunities for safety improvement.

Health & Safety Committee (HSC) members assist in managing health and safety by recommending, advising, and monitoring the effectiveness of this OHS system. HSC members must not be viewed as Safety Cops! Safety is everyone's job, and everyone has individual responsibilities.

Employees have the right to know about hazards in the workplace and to be provided with the information, instruction, and training necessary to protect their health and safety. This openness is essential, so that people can do a better job identifying problems and opportunities for improvement.

Employees have the right to refuse dangerous work, where the employee has reasonable grounds for believing that the act is likely to endanger the employee's health or safety or the health or safety of any other person.

Most safety concerns should be resolved through open communications. The Links at Brunello encourages open communication on health and safety issues. It is essential to providing an injury-free and productive work environment.

Employees are encouraged to inform their Supervisor or Manager of any matter they perceive to be an actual or potential workplace hazard. Communication can be written or oral, and may be submitted anonymously, if desired.

Contractors are important partners in providing and maintaining services on our golf course. Contractors are responsible for working safely and meeting the same high standards for OHS that we set for ourselves.



## **POLICY**

### ***Management***

It is the responsibility of Senior Management to establish and maintain adequate standards, policies, procedures, work practices and maintenance of buildings and equipment to provide a safe working environment and ensure that risk management is integrated into all aspects of planning and decision making.

### ***Supervising Staff***

Managers and Supervisors are responsible to provide Employees with instruction and training in safe work practices and to promote the implementation and adherence of the policies, procedures and work practices contained within the Health & Safety Manual.

### ***Employees***

It is the responsibility of every Employee to observe WCB and NSOHSA regulations and The Links at Brunello's policies and procedures, to work in a prudent and safe manner, and to report any real or potential safety or health hazard to their Manager or the Health & Safety Committee.

### ***Contractors***

Contractors are responsible for working in a prudent and safe manner, and meeting the same high workplace safety standards as all Employees of The Links at Brunello. All Contractors will have the same responsibility as The Links at Brunello Employees, and must report any real or potential safety or health hazard immediately to the General Manager of The Links at Brunello.

### ***Health & Safety Committee Members***

It is the responsibility of committee members to promote safe work practices and conditions and to assist in creating a safe place of work by recommending actions to improve the effectiveness of the health and safety program.

## **ASSIGNMENT OF RESPONSIBILITY**

### ***Management***

- Foster a culture of safety in the workplace, with appropriate leadership.

### ***Supervising Staff***

- Be accountable for the health and safety of workers under their supervision.
- Ensure that machinery and equipment are safe and that Employees work in compliance with established safe work practices and procedures.
- Ensure that Employees receive adequate training in their specific work tasks to protect their health and safety.
- Review all incident reports under their jurisdiction.
- Ensure representation at health and safety meetings.
- Promote a hazard-free workplace.
- Conduct and/or assist with health and safety inspections of workplace/work areas to



- identify and control any and all hazards to Employees, and ensure that necessary risk control and emergency response measures are identified, documented, communicated and implemented promptly.
- Ensure occurrences (including incidents and near-misses) are investigated to identify any changes necessary to prevent reoccurrences.
  - Maintain first aid supplies and secure prompt medical attention for injured Employees.
  - Notify the Health & Safety Committee of all accidents involving injury, possibility of injury or damage to public or company property.
  - Employee orientation and training including:
    - ⇒ Informing Employees of their rights and responsibilities in the workplace
    - ⇒ Familiarization and training of job duties, equipment and procedures.
    - ⇒ Recognition of potential hazards with relation to the activity, equipment and environment.
    - ⇒ Correct use of personal protective equipment (PPE).
    - ⇒ Machine operations, repairs, guards and protective devices.
    - ⇒ Emergency procedures.
    - ⇒ Location and correct use of First Aid kits, MSDS sheets, etc..
  - Follow-up to assure Employees are performing in safe manner.

## Employees

- Protect the Employee's own health and safety by working in compliance with the law, and with safe work practices and procedures established by the company.
- Learn the posted emergency plan detailing procedures pertaining to: fire, weather, or medical emergency.
- Use all personal protective equipment (PPE) provided and take every reasonable precaution in the circumstances to ensure that protective devices, equipment or clothing required by the employer, the Act or the regulations are used or worn.
- Use only machinery and equipment for which training and authorization to operate has been received.
- Make suggestions to improve safety conditions.
- Promptly report any injury.
- Report all unsafe conditions immediately to the Manager/Supervisor or the Health & Safety Committee, remembering that the employee has the right to refuse work that can be reasonably believed to endanger the Employee's health or safety or the health or safety of any other person.
- Not work while impaired by alcohol, drugs or suffering from fatigue.



## HEALTH & SAFETY COMMITTEE

### *Objective*

The Health & Safety Committee will assist management in establishing and maintaining a safe and efficient workplace environment.

### *Activity & Duties*

The Health & Safety Committee shall meet at least 5 times per year to review and action any items needing addressing.

The HSC shall also discuss past accidents, near accidents, new training requirements, Employee suggestions or complaints, future educational needs as they relate to safety and submit recommendations for improvement.

Other actions should include:

- Record and post meeting minutes.
- Ensure all relevant information related to health and safety is accessible and posted where appropriate.
- Carry out inspections, investigations, and refer worker safety concerns to the appropriate person(s).
- Ensure any corrective actions have been implemented





## WORKPLACE INSPECTIONS

The Links at Brunello workplace inspection and monitoring program is implemented for the detection and control of workplace hazards. All buildings, structures, grounds, tools, equipment, machinery, work methods and practices used at this place of business shall be inspected as directed in this program, which includes:

### *Planned Inspections*

Formal workplace inspections shall be conducted as per WCB regulations. These inspections shall include both the observation of work practices and conditions of the workplace. The inspections will be held once a quarter and will be conducted prior to a Health & Safety Committee meeting. This allows for the correction of minor housekeeping items before the meeting in order that the Health & Safety Committee can concern itself with items of more significance. If the corrective action is not to the satisfaction of the committee, then the item should be discussed at the next meeting.

Before conducting the inspection, the Health & Safety Committee will review the previous inspection report to ensure that follow-up corrective action has taken place.

The Links at Brunello Health & Safety Committee will use the **Workplace Inspection Checklist** for reference while performing inspections. The **Inspection Report Form** will be filled out and signed by the committee member(s) conducting the inspection.

### *Equipment Inspections*

The Links at Brunello is committed to training each Employee in the safe use and operation of machinery used in the operation of the business. Each worker will only operate equipment they have been authorized to use.

Records of all Equipment Inspections will be kept on file for three years.

### *Special Inspections*

The Links at Brunello will ensure special inspections are performed when required by malfunction, accident or when required to facilitate a worker's return after injury. Records of these special inspections will be kept on file for three years.



## ACCIDENT/INCIDENT INVESTIGATIONS

The Links at Brunello's goal is to prevent reoccurrence of accidents or incidents by conducting accident investigations.

A Manager and worker representative must investigate any injury that requires medical treatment, accident resulting in death or any near misses or incidents that held potential to cause serious injury or death.

The purpose of workplace investigations of incidents/accidents is to:

- Determine the cause(s).
- Identify any unsafe conditions, acts or job procedures that contributed to the result.
- Develop and implement corrective action to prevent a recurrence.

Information must be recorded on the **Incident Report Form** and presented to:

- Health & Safety Committee.
- Supervisor
- General Manager
- Employee File (if applicable)

The H&S Committee, General Manager and the **Prevention Division of the WCB** must be notified immediately of any accident resulting in serious injury or death or any accident resulting from a major structural failure or release of a toxic or hazardous substance.

### **Injured Worker Responsibility**

Any injured Employee is responsible to follow the **Employee Accident Reporting Procedures** outlined in their Employee handbook. The First Aid Attendant will inform the worker's supervisor and Health & Safety Committee to initiate an accident investigation once the injured worker is sent, or taken, for medical treatment.



## FIRST AID

The Links at Brunello is committed to providing and maintaining the appropriate first aid services and equipment as required by the Nova Scotia Occupational Health and Safety Regulations of the WCB. It is critical that workers know where to go for first aid in case they suffer an injury or illness.

### *Employee Responsibility*

- Keep a record of all injuries, even minor ones, and note any First Aid care that was given.
- Ensure you are aware of:
  - ⇒ The location of first aid kits and first aid rooms, if any.
  - ⇒ Names and locations of certified first aid attendants.
  - ⇒ Emergency procedures.
  - ⇒ Emergency phone numbers

**Review the H&S Bulletin Board for the most up-to-date Information**



## HAZARDOUS MATERIALS

The Workplace Hazardous Materials Information System (WHMIS) requires suppliers to provide information in the form of labels and material safety data sheets (MSDS) for all controlled products.

### *Training*

At the end of the education and training program, a worker should have the ability to answer four general questions:

- 1. Where can I get hazard information?**
  - ⇒ Workers should demonstrate that they know how to get the information provided by the labels and MSDSs.
  - ⇒ They should know about the supplier and workplace labels and other ways used to identify the products and what these labels mean.
  - ⇒ They must also know how to get the MSDS (either by the binder location or by accessing a computer) so that they have a way to obtain information significant to his or her health and safety.
  
- 2. What are the hazards of the controlled product?**
  - ⇒ The worker should be able to read and understand the label and MSDS as well as be aware of any possible harmful effects of the material in question.
  
- 3. How am I protected from those hazards?**
  - ⇒ An understanding of the controls used in the workplace is necessary whether these controls are accomplished by means of the engineering, administration, or by personal protective equipment.
  
- 4. What do I do in the case of an emergency?**
  - ⇒ Understanding the procedures to follow in the event of a spill, release, fire or poisoning involving a controlled product is required. Included in the understanding is the use of personal protective equipment that may be necessary only in the case of emergency.



## ***Personal Protective Equipment***

The Links at Brunello will ensure you are provided with the correct Personal Protective Equipment (PPE) to be worn for each task when it is impossible to entirely eliminate a hazard (this is always the desired course of action). It is then the employee's responsibility to follow the use and wear the required PPE. Examples of PPE include:

- ⇒ Hearing protection.
- ⇒ Eye/face protection.
- ⇒ Head protection.
- ⇒ Hand and foot protection.
- ⇒ Respiratory protection.

## ***PPE General Guidelines***

- Workers using PPE must be given pre-job instruction by the employer to understand its use, limitations, and its maintenance requirements. Always refer to the operator's manual for equipment and machinery to be sure.
- Workers wearing or using PPE need to test/inspect the equipment before each use, and must not wear it if it is defective.
- Properly fitting, long- or short-sleeved shirts and long pants are best to prevent injury from the sun as well as scratches and bites.
- High-top, lace-up shoes and boots with traction soles and steel-reinforced toes provide support and protection to the workers' toes, feet and ankles.
- Face shields or goggles protect eyes from dust and flying particles when using chainsaws or brush cutters.
- Wraparound sunglasses with UVA and UVB protection to reduce the risk of cataracts from sun exposure.
- Appropriate hearing protection devices (ear muffs, ear plugs) provide protection from noise produced by equipment.
- Proper respiratory protection may be necessary in extremely dusty conditions or when working with or around chemicals.
- Appropriate head protection is indicated when working under low branches or where there may be a hazard from falling objects (i.e. Cages around mowing equipment to protect from airborne golf balls)
- Gloves should be selected based upon the task to be performed. Various glove styles provide hand protection from hazards such as cuts, scrapes, chemical / thermal burns and vibrating equipment.



## **Hearing Conservation**

According to the World Health Organization, noise-induced hearing impairment is the most common irreversible (and preventable) occupational hazard world-wide. Additionally, noise creates other safety concerns. It interferes with communication, can mask the sound of alarms (i.e. back-up alarms, smoke alarms), and can increase fatigue and decrease mental alertness especially during prolonged exposure.

If The Links at Brunello cannot eliminate the noise hazard entirely, efforts will first be made to reduce the hazard as much as possible and then providing CSA-approved hearing protection to exposed workers. Additionally, workers will be trained on the proper use and care of PPE and appropriately supervised to ensure PPE is being properly used.

## **Environmental Conditions**

Working outdoors may expose a worker to serious hazards that are not normally considered in an indoor work area.

### **Heat Stress**

Although the human body is very resilient and adaptable, working in a hot work environment can be dangerous. Heat, humidity, and physical exertion are factors that, when combined, can create a hazard to workers. Heat cramps, heat exhaustion, and heat stroke can result.

### **Sun Safety**

Workers need to protect themselves from sunburn and possible skin cancer by covering up with lightweight clothing and using sunscreen. Also wearing sunglasses with UVA/UVB protection is important.

### **Bites & Stings**

Working outdoors in the summer months introduces exposure to bees, wasps, stinging ants, mosquitoes and other pests. While most of these creatures can be simply a nuisance, a few are capable of delivering painful and even fatal stings or bites. As a precaution, staff should wear protective clothing and consider using insect repellent. All incidents must be reported, no matter the severity of a worker's reaction. Additionally, there are biological hazards that exist for workers who come in contact with animals. Animal bites or attacks can cause injury and transfer bacteria from the animal to a worker. If a worker is required to remove a dead animal or bird from the workplace, the employer must ensure that safe and non-hazardous removal procedures are in place and that they are properly followed.

### **Lightning**

Severe weather can be a safety risk to workers who work outdoors. When you see lightning, or think a thunderstorm is on the way, get indoors. If you can't get inside a building quickly enough, find a low spot and crouch down. Never take shelter under a tall tree. Victims struck by lightning get a bad electrical shock and maybe burns, but they carry no electrical charge and can be moved safely. A person struck by lightning can often be revived by prompt administration of CPR (Cardio Pulmonary Resuscitation) and oxygen.



## APPENDICES

- I. **Incident Report Form**
- II. **Injury Reporting Process**
- III. **Emergency Preparedness**
  - a. Emergency Cascade Tree
  - b. Medical Emergencies
  - c. Emergency Procedures
  - d. Preparedness & Evacuation
  - e. Evacuation of Persons with a Disability
  - f. Fire & Fire Types
  - g. Power Failure
  - h. Spills
- IV. **Hearing Conservation Program**
- V. **WCB Injury Report Form**
- VI. **Additional Resources**
- VII. **Acknowledgement and Employee Agreement**



I. **INCIDENT REPORT FORM**



**INCIDENT REPORT**

- COPIED TO:**
- Supervisor
  - H&S Committee
  - Employee File
  - General Manager

<b>A. Injured Person Information</b>			
Role at time of incident/injury: <input type="checkbox"/> Employee <input type="checkbox"/> Unpaid Student <input type="checkbox"/> Visitor <input type="checkbox"/> Volunteer			
First Name Last Name :			
Address:			
City, Province, Postal Code:			
Home Phone:		Sex: <input type="checkbox"/> M <input type="checkbox"/> F	
Cell Phone:		Date of Hire:	
Department:		Date of Birth:	
Was the injury related to a paid work activity? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>B. Incident/Injury Details</b>			
Type of Incident: <input type="checkbox"/> No injury-Near Miss <input type="checkbox"/> Hazard <input type="checkbox"/> Property Damage <input type="checkbox"/> First Aid <input type="checkbox"/> Medical (Doctor/Hospital) <input type="checkbox"/> Lost Time <input type="checkbox"/> Other _____			
Date of Incident:	Time of Incident: <input type="checkbox"/> AM <input type="checkbox"/> PM	Date Reported to Supervisor:	Time Reported: <input type="checkbox"/> AM <input type="checkbox"/> PM
Name of Links at Brunello supervisor that incident/injury was reported to?			
Specific Location of incident/illness (building/ hole number/ parking lot, etc.):			
Are you aware of any witnesses or persons involved in this accident/illness? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide name(s), position(s), and phone number(s).			
The day after the accident, did the person: <input type="checkbox"/> return to regular work <input type="checkbox"/> return to modified work <input type="checkbox"/> lose work time and/or earnings <input type="checkbox"/> unknown			





# INCIDENT REPORT

- COPIED TO:**
- Supervisor
  - H&S Committee
  - Employee File
  - General Manager

Describe what caused the incident/injury and what the worker/visitor was doing at the time. Include the resulting injury and any details of equipment, materials, environmental conditions that may have contributed (e.g. work area, temperature, noise, chemical, gas, fumes, or other person). Attach additional page if necessary.  
 For a condition that occurred gradually over time, please include a description of the physical activity required to do the work.

**Type of Accident/Illness (please Check all that Apply):**

- Struck/Caught
- Fall from height
- Harmful Substances/Environmental
- Overexertion
- Animal
- Motor Vehicle Incident
- Repetition
- Assault
- Other \_\_\_\_\_
- Slip/Trip
- Fire/Explosion

**Area of Injury/Affected Body Part (Check all that Apply)**

	Left	Right	Left	Right	Left	Right	
<input type="checkbox"/> Head	<input type="checkbox"/> Eye	<input type="checkbox"/>	<input type="checkbox"/> Shoulder	<input type="checkbox"/>	<input type="checkbox"/> Hip	<input type="checkbox"/>	<input type="checkbox"/> Upper Back
<input type="checkbox"/> Face	<input type="checkbox"/> Ear	<input type="checkbox"/>	<input type="checkbox"/> Arm	<input type="checkbox"/>	<input type="checkbox"/> Thigh	<input type="checkbox"/>	<input type="checkbox"/> Lower Back
<input type="checkbox"/> Teeth			<input type="checkbox"/> Elbow	<input type="checkbox"/>	<input type="checkbox"/> Knee	<input type="checkbox"/>	<input type="checkbox"/> Abdomen
<input type="checkbox"/> Neck			<input type="checkbox"/> Forearm	<input type="checkbox"/>	<input type="checkbox"/> Lower Leg	<input type="checkbox"/>	<input type="checkbox"/> Pelvis
<input type="checkbox"/> Chest			<input type="checkbox"/> Wrist	<input type="checkbox"/>	<input type="checkbox"/> Ankle	<input type="checkbox"/>	<input type="checkbox"/> Other
			<input type="checkbox"/> Hand	<input type="checkbox"/>	<input type="checkbox"/> Foot	<input type="checkbox"/>	_____
			<input type="checkbox"/> Finger(s)	<input type="checkbox"/>	<input type="checkbox"/> Toe (s)	<input type="checkbox"/>	



# INCIDENT REPORT

**COPIED TO:**

- Supervisor
- H&S Committee
- Employee File
- General Manager

**C. Immediate Action Taken**

Detail any First Aid Rendered and Transportation arrangements if any.

**D. Corrective Action/ Investigation**

Have you determined the cause of incident? What changes have been made or will be made to ensure it does not re-occur in your workplace? If full investigation has not yet been completed, please submit report form, then forward investigative results once determined.

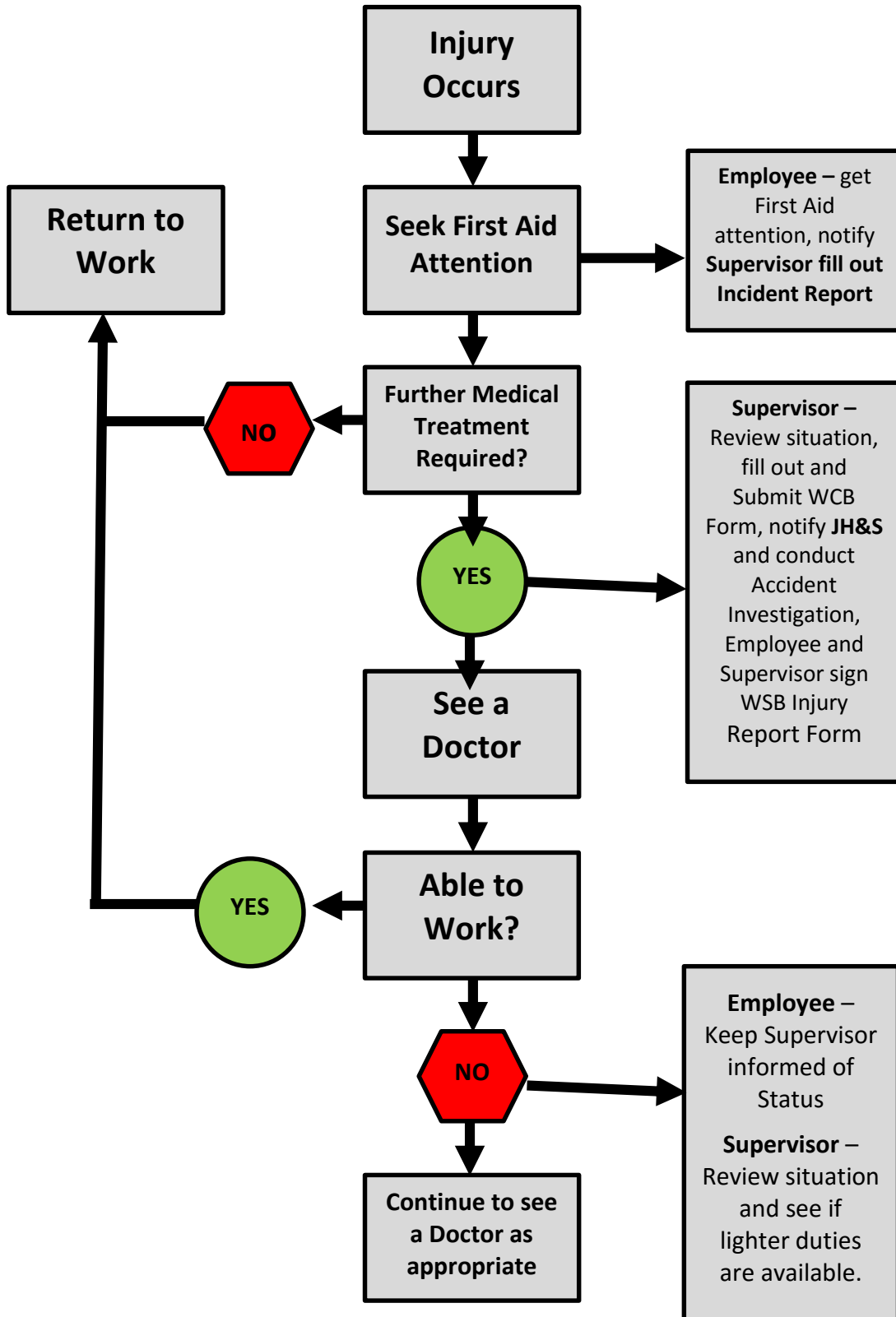
**What action has or will be taken to prevent a recurrence?**

Action Taken	Person Responsible	Target Date for Completion

Supervisor name and Signature:

Date;

## II. INJURY REPORTING PROCESS





### **III. EMERGENCY PREPAREDNESS**

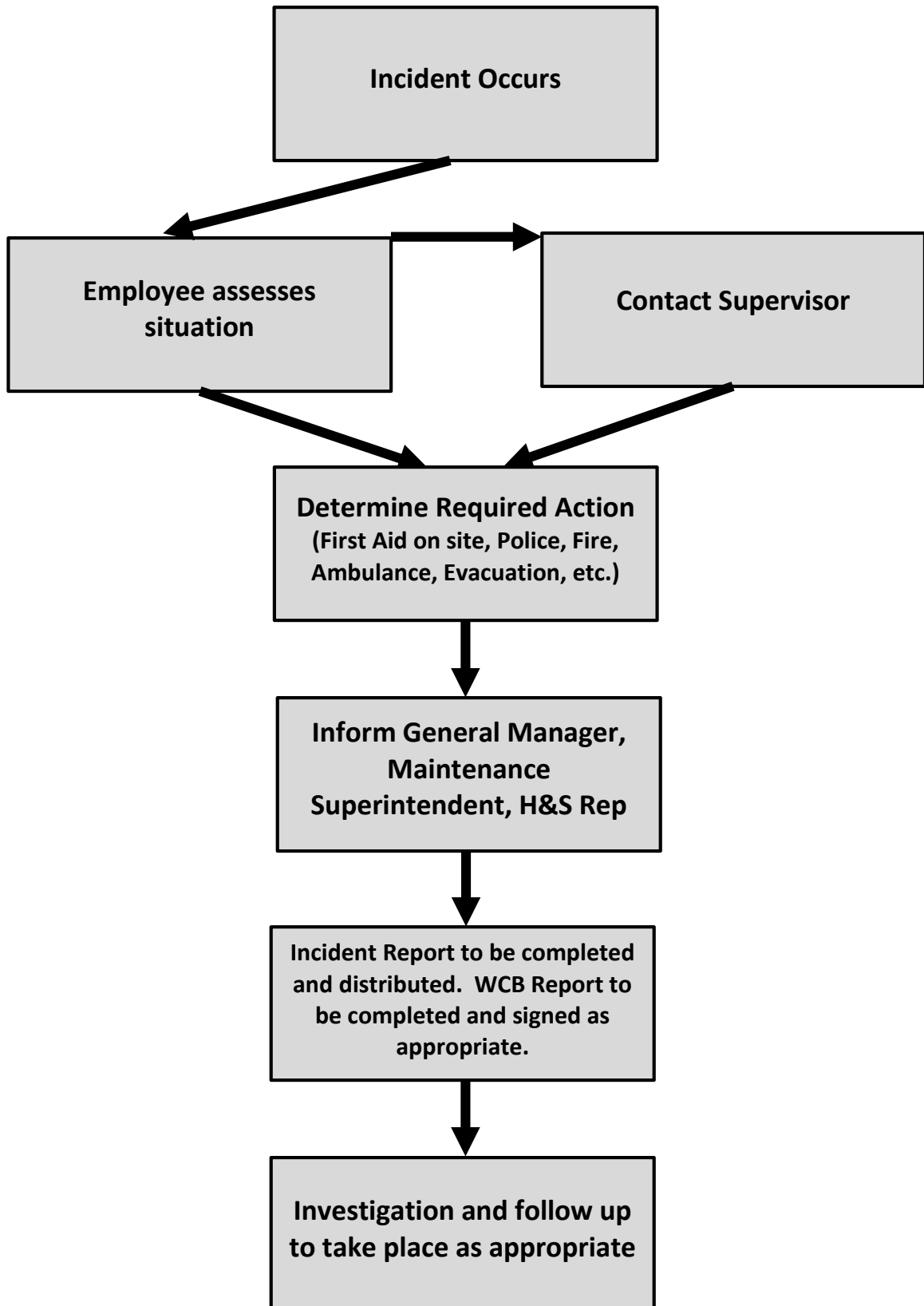
Emergency procedures have been developed for all Employee safety and protection. It is the Supervisors responsibility to ensure all Employees are aware of the procedures and the appropriate actions/roles each Employee is responsible for (i.e. First Aid).

#### ***Emergency Procedures***

The immediate response to any emergency will determine how that emergency is handled. The seven important points to remember are:

1. Remain calm and look after yourself FIRST.
2. Look after other occupants and persons NEXT.
3. Assess the emergency and REMEMBER DETAILS.
4. Notify someone. Include the nature of the emergency, the location, your name and the telephone number where you can be reached.
5. Assist to the degree that you have been trained.
6. Record details.
7. Never risk your own safety or the safety of others trying to save the day.

*Emergency Cascade Tree*





## **Medical Emergencies**

The Links at Brunello will have the first aid facilities and personnel as specified by the WCB Occupational First Aid Regulations. First Aid Attendant(s) are individually and collectively the front line of first aid for any medical emergency occurring to Employees and guests. The First Aid Attendant is completely in charge of all first aid decisions, unless someone with a higher level of first aid training or medical knowledge is available to take over the situation (I.e. Doctor, Emergency room Nurse or Paramedic). First aid for medical emergency will normally occur at the location of the injured person. The following are the steps to be followed in case of a medical emergency:

- Ensure your safety and the safety of other occupants and guests first. If necessary, remove people from the immediate area.
- Assess the scene determine:
  - ⇒ Number of victims.
  - ⇒ Type and severity of injuries/illness.
  - ⇒ Immediate hazards Assistance required (Ambulance, First Aid, Police, Fire Department).
- Contact your Supervisor or call the golf shop at 902-876-7649
  - ⇒ Report your name, location, as well as the type of the emergency and your assessment.
- Assist the victim to the degree that you have been trained. Remember to identify yourself and your first aid qualifications, if any.
- Reassure the victim
- Protect the victim by:
  - ⇒ Removing immediate hazards.
  - ⇒ Giving first aid as qualified
  - ⇒ Asking others to assist or stand back.
- Stay with the victim until assistance arrives.
- Provide information to the responding assistance.
- If the victim(s) declares themselves well, ask them to give you their name(s), contact information, and any pertinent details if possible.
- Report status to your supervisor.
- Complete an Incident Report Form.



### ***Preparedness And Evacuation***

Be familiar with your work area and the building. Know exit routes and the locations of stairs and fire extinguishers. Keep necessary personal items such as medications and eyeglasses on hand.

Prepare yourself and coworkers so they will know what to do, where to go and how to cope until the situation is under control.

- Move people to safety if asked. Use a loud, calm, in-control voice to direct people to the nearest exit or other safe location. Ask for assistance from nearby people, if possible.
- Sweep the area for stragglers.
- Proceed to a designated area outside of the building in the parking lot. Be calm and keep people informed who have been evacuated. If assistance is available, assign someone else to do this while evacuation is in progress.
- Verify each Employee is outside and safe by checking with the Supervisor of Employees in each area.
- If you have a radio, do this as soon as possible. If you do not, wait until everyone is removed from danger. Then use any telephone to call 911.
- Complete an Incident Report

### ***Evacuation Of Persons With A Disability***

- Ask persons with a disability that requires help to proceed to a designated Area of Refuge and wait for assistance.
- Report the location of persons in these areas by using any telephone located in that area.
- It is preferable to have a non-ambulatory person wait for assistance in an area of refuge. However, if it is determined that leaving a non-ambulatory person in this area is not safe, ask another person to help.
- If the area has not been cleared when evacuation of your area is complete, proceed there to provide reassurance. If you decide to assist persons with a disability to evacuate, get help from another person.



## **Fire**

The Fire Alarm indicates that a fire emergency is in progress. If a fire is such that evacuation is necessary, normal evacuation procedures will be followed and a fire bell will be heard.

- Ensure your safety and the safety of other occupants and guests first. If necessary, remove people from the immediate area.
- Assess the scene and remember:
  - ⇒ What is the source?
  - ⇒ Is smoke and/or flame present?
  - ⇒ Are the sprinklers working?
  - ⇒ Will the fire spread?
  - ⇒ What area and how many people are affected?
- Notify your Supervisor
- Report your name and location as well as the type of emergency and your assessment.
- If it is safe to do so, use an extinguisher to control the fire.
- Await further instructions from your supervisor, manager or emergency response team.
- Complete an Incident Report.

## **Power Failure**

The lights going off indicate a power failure has happened or is about to happen.

- When the power goes out, there will be a delay until the emergency lighting comes on. Stay where you are and remain calm.
- Ensure your safety and the safety of other occupants and guests first.
- Assess the scene looking for injuries, degree of outage and other concerns.
- Report your name and location as well as the type of emergency and your assessment.
- Turn off computer equipment and any other electrical equipment in your area.
- Await further instructions from your supervisor or manager.
- Unplug all electrical equipment, TV sets, computers, etc. and turn off any unnecessary light switches. When power is restored, there may be a surge causing damage to electrical and computer equipment.



## *Spills*

Any spilled substance left un-cleared can become hazardous due to slips and falls. If you encounter a spilled non-hazardous substance, clean it up immediately or guard the area and obtain assistance.

- If you encounter a spill and are not sure as to its identity, consider the spilled substance to be potentially hazardous.
- Avoid contact with the spilled substance.
- Clear people from the immediate area.
- Assess the scene:
  - ⇒ Identify the substance – if possible without contact, read the label on the piping, container or equipment and the WHMIS symbol.
  - ⇒ Immediate risk – if fire hazard exists, remove adjacent ignition sources. If fumes are extreme, evacuate the affected area.
  - ⇒ Injuries – provide or obtain first aid if necessary.
- Notify the Golf Shop. Report location, the identity or type of substance, the extent of the spill, injuries and our action so far.
- Prevent access to the affected area. If necessary, obtain assistance from nearby staff to post a temporary guard,
- Remain in the area (removed from danger) until arrival of assistance or the emergency response.
- Provide information to the responding persons.
- Complete an Incident Report.







**WORK SAFE. FOR LIFE.**  
WORKERS' COMPENSATION BOARD OF NOVA SCOTIA

**HALIFAX:**  
5668 South Street, PO Box 1150  
Halifax, Nova Scotia B3J 2Y2  
Tel: (902) 491-8999 Fax: (902) 491-8001  
Toll Free: 1-800-870-3331

**SYDNEY:**  
404 Charlotte Street, Suite 200  
Sydney, Nova Scotia B1P 1E2  
Tel: (902) 563-2444 Fax: (902) 563-0512  
Toll Free: 1-800-880-0003

<b>SOCIAL INSURANCE NUMBER</b>
<b>WCB Claim No.</b>

## WCB INJURY REPORT

EARNINGS / EMPLOYMENT INFORMATION (Please TYPE required information.)	
If you answered YES to either time loss or earnings loss in question 5, please complete this section.	
The earnings information provided will normally be used to establish the benefit amount. We may request additional earnings information from both the employer and the worker to determine a more accurate benefit amount. Benefits provided by the Canada Pension Plan may affect the amount WCB pays.	
13. Has the worker been employed with this company for the 12 months preceeding the earnings loss? YES NO	17. Usual number of hours/days worked: _____ <input type="checkbox"/> Hours <input type="checkbox"/> Days <input type="checkbox"/> Per Day <input type="checkbox"/> Per Week <input type="checkbox"/> Other:
14. Indicate the worker's employment type: A. <input type="checkbox"/> Permanent <input type="checkbox"/> Casual/Temporary <input type="checkbox"/> Seasonal/Irregular B. <input type="checkbox"/> Sub-contractor <input type="checkbox"/> Vehicle Owner/Operator <input type="checkbox"/> Courier Service <input type="checkbox"/> Logging/Chain Saw Operator <input type="checkbox"/> Self-employed <input type="checkbox"/> Other: _____  Note: if you check any box in B above, the worker must submit a detailed income and expense statement. If this information is not readily available, the WCB will estimate the worker's employment expenses.	Show usual days of work: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> S  If shift or casual worker, please attach the first three weeks of schedule after the earnings loss began. If the worker works on a fixed rotation schedule, please attach a sample of the rotation schedule.
15. If the worker is part-time, seasonal, or casual, please indicate the date the <b>original</b> employment began: _____ DATE (dd/mm/yyyy)	18. Indicate the worker's tax deduction (TD) code: _____
16. A. Worker's normal gross earnings at the time of the injury: \$ _____ per hour per day per week bi-weekly per month other (please specify): _____  Note: complete B only if you are unable to complete A, above. (Usually applies to seasonal, irregular or casual workers).  B. Gross earnings for the period of one year or less: \$ _____ From: (12 months or less prior) _____ To: (Date before injury) _____ DATE (dd/mm/yyyy)	19. Number of hours <b>scheduled</b> on day time/earnings loss began: _____ Number of hours <b>worked</b> on day time/earnings loss began: _____ Number of hours <b>paid</b> on day time/earnings loss began: _____
	20. Did the worker return to work after the injury or onset of symptoms? YES NO If yes, give the date and time: _____:____:____ AM PM DATE (dd/mm/yyyy) TIME  Did the worker return to <b>regular</b> duties? YES NO If yes, give the date and time: _____:____:____ AM PM DATE (dd/mm/yyyy) TIME
	21. Will you be making any payments to the worker while the worker is off work due to the injury or illness? YES NO If yes, type of benefit paid: _____ How long will payments continue? _____
Please provide any additional injury/illness information that you feel is relevant:	

## **XII. ADDITIONAL RESOURCES**

There are many specific health and safety resources on the WEB. Below are some non-profit sources. They will have references to further information as well..

1. **Canadian Council for Occupational Health and Safety (CCOHS)**  
Phone: 1-800-263-8466 Fax: 906-572-4500 [www.ccohs.ca/](http://www.ccohs.ca/)
2. **Industrial Accident Prevention Association (IAPA)**  
[www.iapa.on.ca/](http://www.iapa.on.ca/)
3. **National Institute for Occupational Safety and Health (NIOSH)**  
[www.cdc.gov/niosh/](http://www.cdc.gov/niosh/)
4. **Workers Compensation Board of Nova Scotia**  
Phone: 902-491-3331 <http://www.wcb.ns.ca> <http://worksafeforlife.ca>
5. **OH&S Nova Scotia**  
Phone: 902-424-5400 <http://novascotia.ca/lae/healthandsafety/>

Work safe bulletins provide health and safety details for different sectors:

6. **Canada's National Occupational Health and Safety website**  
<http://www.canoshweb.org/en/topics.html>
7. **Guide to Workplace Safety for Golf Courses and Groundskeeping**  
[www.wcb.pe.ca](http://www.wcb.pe.ca)
8. **Guide for Determining Hazards at Work**  
<http://www.iapa.ca/Main/documents/pdf/SIGHAZWEB.pdf>
9. **Glossary of terms**  
[http://www.iapa.ca/Main/documents/pdf/iapa\\_glossary.pdf](http://www.iapa.ca/Main/documents/pdf/iapa_glossary.pdf)



#### **XIV. ACKNOWLEDGMENT AND AGREEMENT**

I, [ \_\_\_\_\_ ] , acknowledge that I have read and understand The Links at Brunello Health & Safety Handbook. I agree to adhere to this agreement in its entirety and will ensure that Employees working under my direction adhere to this Policy.

I understand that if I fail to comply with information contained in The Links at Brunello Health & Safety Handbook, or engage in conduct which creates risk for an Employee, contractor, customer or visitor, will result in disciplinary action up to, and including termination. The Links at Brunello considers the failure to report health or safety violations as gross negligence, and reserves the right to pursue legal, and punitive damages.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Witness Signature: \_\_\_\_\_