

What you need from orientation

Asked	Need to Ask	Questions to ask as a New & Young Worker
		<p>What is/are my specific job/task responsibilities?</p> <p>Essential Tasks Non-Essential Tasks</p>
		What does a normal day in this job look like?
		Has anyone ever gotten hurt doing this job/task?
		Will I ever have to climb or work at heights?
		Will I have to lift and carry heavy objects?
		Will I have to go into any confined spaces?
		What kind of training and instructions am I going to receive to make sure I am safe?
		What kind of protective equipment are you going to give me to use, will there be training on how to use it, and if there is a problem with my PPE what is done about it?
		Will I be working with chemicals? Will you be giving me training on how to use, handle, store, dispose of them to keep myself and my coworkers safe?
		What happens if I am not feeling well, or I am tired at work?
		As my supervisor, how do I get a hold of you, and where do you work?
		As my supervisor, will you provide me with on-the-job feedback?
		Can I report safety concerns to you as my supervisor?
		What do I do if I or my co-worker gets injured at work?
		If I get hurt at home and can't come into work, what do I have to do?
		Do I know what my rights are?
		Will I have co-workers that will be comfortable with me asking them for help?
		How will you tell me about Health and Safety information? (email, boards, talks, etc.)
		If I don't feel comfortable doing something, who would you talk to about it?
		Who is the Health and Safety Representative/Joint Health and Safety Committee Members?
		Will you show me how to operate the equipment safely until I feel comfortable?

For more information, contact your local
WSN Health and Safety Specialist.



1-888-730-7821 Toll-free Ontario
705-474-7233

workplacesafetynorth.ca



Worker:			
Position and/or Tasks:			
Trainer:			
Date of Hire:		Date of Orientation:	

Topic	Trainer (Initials)	Worker (Initials)	Comments
1. Supervisor: _____ Telephone #: _____			
2. Procedures have been explained for the following; a. Time Cards / Hours of Work / Rest & Break policy Call-in procedures when absent b. Work Permits c. Overtime d. Personal Use of Electronic Devices e. Vacation / Sick Time f. Disciplinary Policy			
3. Mandatory Health & Safety Awareness Training			
4. Health and Safety Policy Statement including the rights and responsibilities of workplace parties a) General duties of employers, workers, and supervisors b) Worker right to refuse unsafe work and procedure for doing so c) Worker responsibility to report hazards and procedure for doing so			
5. Workplace health and safety rules a) _____ b) _____ c) _____ d) _____			
6. Known hazards and how to deal with them a) _____ b) _____ c) _____ d) _____			

Topic	Trainer (Initials)	Worker (Initials)	Comments
7. Safe work procedures for carrying out tasks a) _____ b) _____ c) _____ d) _____			
8. Procedures for working alone or in isolation			
9. Measures to reduce the risk of violence in the workplace and procedures for dealing with violent situations			
10. Personal protective equipment (PPE) — what to use, when to use it, and where to find it a) _____ b) _____ c) _____ d) _____			
11. First aid a) First aid attendant name and contact information b) Locations of first aid kits and eye wash facilities c) How to report an illness, injury, or other accident (including near misses)			
12. Emergency procedures a) Locations of emergency exits and meeting points b) Locations of fire extinguishers and fire alarms c) How to use fire extinguishers d) What to do in an emergency situation			
13. Hazardous materials and WHMIS a) What hazardous materials are in the workplace? b) Purpose and significance of hazard information on product labels c) Location, purpose and significance of material safety data sheets (MSDSs) d) How to handle, use, store and dispose of hazardous materials safely e) Procedures for an emergency involving hazardous materials, including clean-up of spills			

Have	Need	Orientation Review
		Has the employer provided an Orientation that is; <ul style="list-style-type: none"> • Instructional • Hands On • Specific to the role and tasks to be performed • Covering specific topics and hazards such as Struck By, Overexertion, and Caught in or Compressed by Objects or Equipment?
		Have gone on a tour of the facility/jobsite to familiarize yourself with your workspace?
		Have been introduced to all the members of your crew/shift including the supervisor?
		Have you been provided with a Peer Job Shadow or Mentor and has the supervisor or employer informed you of what this mentorship will consist of?
		Are you visually identifiable in your workplace as new to the position in some way?
		Have you discussed any concerns with your Mentor or Supervisor regarding your position? If yes; What?
		Have you discussed with your employer and supervisor any psychological vulnerabilities and support needs (i.e. anxiety or depression), physical limitations or medical conditions?

Worker Acknowledgement

I have received the above orientation and I understand my obligations to work in compliance with the company’s health and safety program.

Worker Signature:		Date:	
Supervisor Signature:		Date:	
Employer Signature:		Date:	

The trainer and worker must initial each topic once the topic has been covered and/or demonstrated. Any feedback or comments are to be placed in the comment’s column. If the topic is irrelevant, mark “N/A” in the comment’s column.

Congratulations! You have completed your Orientation, but orientation is not training, it is an overview and introduction to the workplace. Now we move onto Training you to be successful in your position. Training will be specific to the workplace and will be an ongoing process, not just a one-time deal.