Workplace Safety Orientation & Training Needs Assessment & Record Non-Laboratory Guide Faculty of Land and Food Systems

Name	e:				
Start	Date: _	End Date:			
Positio	on:				
		Volunteer Undergraduate Visiting Faculty/Student Graduate Student Postdoctoral Fellow Faculty Member			
Super	visor:				
Name:			Phone#:		
Department:		Email address:			
NON-	-LABOR	ar form is intended for individe RATORY FACILITY within the Laboratory Guide.			
suffici policie to pre	ient info es and p epare yo ctions ir	mber in the Faculty of Land a ormation to safely work in ou procedures and ensure you h ourself for an emergency situ on this guide must be read and ovisor or principal investigato	r facilities. Please ave obtained all thation.	review the following UBC ne appropriate information the the individual and	
	•	ys/security access code(s).	i (i i) prior to gair	ing access to any work	
A. N	ew Mer	mber Orientation Checklis	t		
	(JOHS	and know the name(s) of joir (sC) member(s), your local sa gency contact numbers			
	Know	the address of the facility			
	Know	where the emergency proceed	dures (fire, earthq	uake, etc.) are posted	
		miliar with the location of nearest fire alarms, fire extinguisher, emergency ts, and muster station			
		the location of first responderst Aid)	er phone numbers	(e.g. Hospital, Security	

	Familiar with the UBC Centralized Accident/Incident Reporting System				
	Have access to a copy of facility safety manual				
	Informed of rights to: refuse unsafe work (http://www2.worksafebc.com/publications/OHSRegulation/Part3.asp#SectionNumber:3.12), participate in safety process, and know hazards of the work				
	Provide access to copies of UBC Policies 5 (Sustainable Development), 6 (Environmental Protection Compliance), 7 (University Safety), 8 (Disaster Management) https://universitycounsel.ubc.ca/policies/index/				
	Assess training needs and register for upcoming Health, Safety & Environment sessions				
	Briefed on security issues including best practices, issuing access card, and key(s)				
	Briefed on access to lunch room and room booking procedures				
	Briefed on use of photocopier and fax machine				
	☐ Be respectful of shared space and equipment and keep your work area clean and tidy				
 □ I am aware that I must immediately report all accidents, near accidents, injuries or incidents to my supervisor and the LST. □ I know that I must report all safety concerns to my supervisor. If an incident is not handled to my satisfaction, I am aware that I can contact a member of the LST for assistance. C. Faculty Equipment (includes the use of but not limited to power tools, compressed air and powered garden tools) I have received instruction in the safe use and operation of the following: 					
Equip	ipment D.	ate	Trainee initials	Trainer initials	

D. Information Regarding Working Alone

E.

tra	dividuals are not permitted to work alone unless they have completed the required ining courses. The following guidelines will be applied if a worker must work one after hours (evenings and weekends):
	Worker must setup a buddy system so that someone else is working or studying in the same space if evening or weekend work is required. Have a contact number of a research colleague or friend readily available.
	Keep the work space door closed and locked
	Call campus security in case of an emergency
	Be aware of all hazards in the work space
Pe	rsonal and Campus Safety
or int	rsonal security is an important consideration for everyone regardless of age, gender ability. Please consider some of these options to enhance your safety. Follow your uition about your personal security. If something doesn't feel safe, trust your uition.
	Use <u>AMS Safewalk</u> (604-822-5355) to request accompaniment while walking on campus (7pm until 4am for all faculty, staff, students and visitors)
	Know the location of the <u>UBC Blue Phones</u> . These connect directly to Campus Security.
	Use any of the three Community shuttles on campus.
	Be aware of your surroundings and the people around you
	Let someone know your plans and expected return time.
	Remain alert by not wearing any electronic device that could prevent you
	from hearing any signs of danger.
	Know your location and be able to describe where you are if you need to call
	for help.
	Only accept rides from someone you know well.
	If having a conversation with someone you meet, refer to 'we' to indicate you
	are not alone.
	When entering or exiting a locked residence, ensure that the door is secured
	before proceeding.
	Set the phone number for UBC Campus Security number (604-822-2222) in
	your cell or desk phone speed dial.

If you witness a crime or are being targeted, **call 911 immediately.** If you have information about a crime that has already occurred, contact your local police or Crime Stoppers at **1-800-222-8477 or text 274637 with keyword "BCTIP".**

Criminal Activity? Feeling threatened?

ALWAYS make the call even if you are unsure: Dial 911and ask for UBC RCMP (Police).

Please make sure you know the <u>Muster Location</u> of your building in case of emergency!!

After reading through the above, meet with your supervisor or PI to discuss any points that are unclear. If necessary, consult with a member of the LST. Also, please identify, together with your supervisor or principal investigator, all the training courses required prior to beginning your job/project/thesis.

<u>Mandatory training</u> – You must complete <u>ALL</u> trainings in this section!

F. Risk Management Services Courses

	□New Worker Safety Orientation	Date completed
	□ Preventing and Addressing Workplace Bullying and Harassment Training	Date completed
	☐Workplace Violence Prevention Training	Date completed
	☐Active Shooter Preparedness Workshop	Date completed
	□Privacy and Information Security Fundamentals Training	Date completed
	☐Safety Supervision at UBC*	Date completed
	*Only faculty and staff with supervisory	role must take this course.
<u>Job</u>	Specific (Please check all that apply)	
	I. General	
	☐Floor Warden Training Course	Date completed
	□WHMIS Course	Date completed
	□Othor:	Date completed

II. Human Ethics co	ourse	
	Statement (TCPS2): or Research Involving Huma thics.gc.ca/eng/education/t	
	Date co	ompleted
******	******	******
	t were discussed on this guid ments that must be followed	le, the basics of working safely, and to work in this faculty.
uses chemicals during my advising my supervisor or	tenure with the Faculty of L	chemicals or in any laboratory that and and Food Systems without involved in chemicals, I understand fulfill additional training.
New member:	Orientation by:	Supervisor:
Name (print)	Name (print)	Name (print)
Signature	Signature	Signature
Date		

Upon completion of this form, please send all training completion certificates in Section F and an electronic copy of this form to your supervisor or PI AND Mona Lee at Mona.Lee@ubc.ca.