

SCHOOL SAFETY COMMITTEE SELF-ASSESSMENT CHECKLIST

Committee Name: _____

School/Site: _____

Completed By: _____

Date: _____

The School Safety Committee can conduct a self-assessment to see if the committee is set up and functioning as required (e.g., as part of an annual OH&S program review). The self-assessment process is made up of two parts:

- Self-Assessment Checklist – identifying items that make the committee compliant and effective
- Action Plan – identifying items that need attention

Self-Assessment Checklist – Directions

- Answer each statement by checking yes or no

Terms of Reference

1.	Committee has written Terms of Reference that establish the committee's rules of procedures. Terms of Reference should include information on: <input type="checkbox"/> Name of occupational health and safety committee <input type="checkbox"/> Constituency <input type="checkbox"/> Statement of committee purpose <input type="checkbox"/> Duties and functions <input type="checkbox"/> Records <input type="checkbox"/> Meetings <input type="checkbox"/> Agendas and Meeting Reports <input type="checkbox"/> Composition <input type="checkbox"/> Co-chairs <input type="checkbox"/> Terms of Office <input type="checkbox"/> Assistance in Resolving Disagreements <input type="checkbox"/> Amendments	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Membership

2.	There are a minimum of 4 members, worker and employer representatives from and representing the workplace.	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	At least 50% of members are worker representatives.	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	Worker representatives have selected 1 co-chair.	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Employer representatives have selected 1 co-chair.	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Names and work locations of committee members and alternates are posted.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Duties and Functions

7.	Identify unhealthy or unsafe workplace situation and advice on effective systems for responding to those situations.	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.	Consider and quickly deal with complaints relating to the safety and health of workers.	<input type="checkbox"/> Yes <input type="checkbox"/> No
9.	Consult with workers and employer on issues related to OH&S and work environment.	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.	Advise employer on workplace programs and policies required under the OH&S Regulation and monitor their effectiveness.	<input type="checkbox"/> Yes <input type="checkbox"/> No
11.	Advise employer on proposed changes to the workplace or work processes that may affect the health and safety of workers.	<input type="checkbox"/> Yes <input type="checkbox"/> No
12.	Make recommendations to the employer on educational programs promoting safety and health of workers and compliance with the OH&S Regulation, and monitor program(s) effectiveness.	<input type="checkbox"/> Yes <input type="checkbox"/> No
13.	Ensure accident investigations and regular inspections are carried out as required.	<input type="checkbox"/> Yes <input type="checkbox"/> No
14.	Assign representatives to participate in inspections as required.	<input type="checkbox"/> Yes <input type="checkbox"/> No
15.	Assign representatives to participate in accident investigations as required.	<input type="checkbox"/> Yes <input type="checkbox"/> No
16.	Assign representatives to participate in inquiries as required.	<input type="checkbox"/> Yes <input type="checkbox"/> No

