Being a Safety Committee Member

Training Short

**Objective:** To outline the role, requirements, and responsibilities of a safety committee member.

An organization’s safety committee plays a crucial role in promoting safe practices and reporting unsafe conditions. Safety committee members recognize risks before they happen, increase communication about safety, and work to improve the safety program for everyone.

**Requirements**

For an effective committee, a member should be proactive and able to:

* Lead by setting a positive example as a role model.
* Inquire about safety concerns from fellow employees and present them at the safety committee meeting.
* Mentor and coach new employees on the importance of safety.
* Assist in training employees on the organization’s safety policies and procedures.
* Identify unsafe conditions and recommend corrective measures.
* Maintain a focus on the continual improvement of the organization’s safety culture.

**Responsibilities**

Members must:

* Attend and actively participate in safety committee meetings.
* Elicit employee involvement and input from the area you are representing before each meeting in the form of safety-related suggestions and hazard reports.
* Participate in regular workplace safety inspections with other safety committee members, and conduct a survey of your department prior to each safety committee meeting.
* Review all incidents and near misses to:
* Help establish root causes.
* Develop corrective actions to prevent more serious accidents or similar incidents.
* Assist with implementing the identified corrective actions.
* Actively participate in all safety training, including both regular training and training specific to the safety committee.
* As a part of the safety committee, review the organization’s Safety and Health Program and continually make recommendations for improvement.

This form documents that the training specified above was presented to the listed participants. By signing below, each participant acknowledges receiving this training.

Organization: Date:

Trainer: Trainer’s Signature:

**Class Participants:**

Name: Signature:

Name: Signature:

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