This sample procedure should be customized to fit the needs of your company. Refer to your internal program and determine what you need for your requirements. Once you have done that, simply add or delete from this procedure to integrate it into your internal processes.

This procedure is not meant to be used as-is.

**NETWORKING AND PEER LEARNING**

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| --- | --- |
| **Date of Issue:** choose issue date | **Review Date:** choose date for review |
| **Written by:** person(s) who wrote document | **Date:** insert date written |
| **Reviewed by:** person(s) who reviewed | **Date:** insert date written |
| **Approved by:** person responsible for process | **Date:** insert date written |

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| **PURPOSE** |
| Networking and peer learning provides businesses with the opportunity to learn from the experiences of other companies and individuals which involves discussion or dialogue and interaction with others. The purpose of this procedure is to outline the expectations of how (*insert company name*) will network with other companies in order to share and gain health and safety information and best practices. |
| **SCOPE** |
| This procedure applies to the Health and Safety Designate at (*insert company name*) when networking with other companies.  |
| **RELATED DOCUMENTATION** |
| **Internal*** Networking Tracking form

**External*** WSIB Health and Safety Excellence Program
 |
| **DEFINITIONS** |
| Networking  | The action or process of interacting with others to exchange information and develop professional or social contacts. |

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| **ROLES & RESPONSIBILITIES** |
| **Senior Management is responsible for:*** Supporting this program by providing necessary resources to participate in networking activities.
* Designating individuals (Health and Safety Designate, JHSC, supervisors, etc) to participate in training opportunities available through the networking activities (i.e. Health and Safety Conferences), as needed.

**Health and Safety is responsible for:*** Participating in networking and peer learning activities.
* Sharing the information obtained with relevant parties.
* Implementing networking information/ideas as appropriate.
* Evaluating the networking program annually and providing recommendations for improvement to Senior Management.

**Managers/Supervisors are responsible for:*** Supporting this program by attending or allowing their staff (i.e. JHSC Members) to attend the networking activities as requested.
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| **PROCEDURE** |
| * The Health and Safety designate will participate in networking and peer learning activities. The Health and Safety member may send a designate to the activities.
* Networking will be done with at least two other companies annually on relevant health and safety topics each year, using any two of the following mechanisms:
* E-mail, newsgroups, shared documents, conference attendance
* Adoption, adaptation or creation of best practices found on the WSIB’s website
* Personal contacts, visits and/or phone calls
* Exchange policies, documents, guidelines with another company
* Rules specifying what can be exchanged with other businesses. (i.e. policies, documents, guidelines)
* Access external industry-specific information
* Consultation with professional associations
* Health & Safety Associations events and training
* Other
* Each time networking occurs, record of participation and communication shall be documented on the Networking Tracking Form.
* Participants of a networking activities will communicate lessons learned to relevant parties, depending on the knowledge gained. Information may be shared via email exchange, through a face to face meeting or any other method deemed reasonable. Information should be shared with relevant parties after each exchange.
* The Health and Safety Designate will be trained on the requirements of this procedure, as a minimum. The Management team and supervisors will be made aware of the requirements of this procedure at a team meeting. Records of training to be submitted to Human Resources for retention.
* The Health and Safety Designate will evaluate the Networking program on an annual basis to ensure:
* The minimum number of networking activities were attended and documented.
* Information/knowledge gained through the participation was considered and implemented as deemed appropriate.
* Information on the procedure was communicated.
* Identified training needs were met.
* The Health and Safety Designate will forward a report of the evaluation with recommendations for improvement to Senior Management. Senior Management in consultation with the Health and Safety Designate will determine the success of this procedure. Any gaps will be identified and corrected as appropriate.
* Notification of the success of this procedure will be posted on the Health and Safety Notice Board.
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| **CHANGES TRACKING** |
| **DETAILS OF CHANGES** | **DATE CHANGED** |
|  |  |
|  |  |

**Networking Tracking Form**

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| **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Topic:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Participants:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Method of Networking:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
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| **Summary of Networking:** |
|  |
| **Recommendations (detail- what, for who, by when etc.):** |
|  |
| **Training Requirements:** |
|  |
| **Outcomes:** |
|  |
| Signature : \_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |