



EMPLOYEE NEEDS ASSESSMENT

Training, Tools, & Equipment

Abstract

A package to assist employers in determining the safety needs of employees.

Construction Safety Nova Scotia
Construction Safety Culture

Employee Needs Assessment
Training, Tools, & Equipment

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Employee Needs Assessment

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Purpose

To determine the training, tool, & equipment needs of employees. Measured by employee feedback, existing records, and legislative requirements.

Creating Competency

Competency is defined as having the required training, knowledge, and experience in a particular subject area. Before an individual can develop true knowledge and gain experience, they should first obtain the required training. From there, competency can grow. When employees feel they have the necessary tools, equipment, and training to do their job safely, they are more likely to focus on skill development. Understanding and valuing employee needs can help with employee retention and ultimately, over time, help cultivate a trained, knowledgeable, experienced, and competent workforce.

Assessment Methods:

All methods of assessment should seek only to gauge the realistic safety needs of employees (both physical and psychological). Employees should be encouraged to be as honest as possible. Management and supervisors should endorse participation. Some assessment examples include (but are not limited to):

1. **Surveys/Needs Assessments** – Using a needs assessment allows employees the chance to anonymously request/suggest the training, tools, and equipment they need to feel safe on the job. (See Appendix 1, 2, & 3 for needs assessment samples.)
2. **Evaluate Training Records** – Actively maintaining and evaluating your training records can help identify gaps in training as well as expiries, and prompt training/certificate renewal if applicable. Have your training records been maintained and updated? Evaluate employee training needs based on their job tasks and cross reference with your training matrix. (Have all compliance based, supervisor/management based, and in-house training requirements been met? Is the training current and valid? Does it meet legislative requirements? What have employees identified during an assessment?)
3. **Participation & Engagement** – Encourage supervisors to ask individual crew members on site what they could use to make their job safer. This can help determine the safety needs of personnel who may not otherwise speak up. Site-specific needs can vary from job to job. When supervisors are performing hazard assessments and identifying controls that may be needed, there should be consultation and communication with those doing the work regularly. This is a key component in measuring the real-time needs of employees.
4. **Focus Groups** – Reach out to groups of employees with the same job tasks or activities. Engage in a conversation or encourage feedback from people who share common knowledge about the safety hazards in their respective field. Creating an open dialogue among crews can encourage them to share their best practices and suggest improvements that can be made overall.

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Participating in a Needs Assessment (Considerations for Employees)

1. Consider the following:
 - ✓ Your day-to-day activities
 - ✓ Frequency of job activities
 - ✓ Risk level of job activities.
 - ✓ Physical and psychological hazards
 - ✓ Legislative duties and requirements
 - ✓ Commonly used tools and equipment.
 - ✓ Commonly needed personal protective equipment.
 - ✓ Areas for safety-related improvement.
2. Review and complete the appendices. Identify any areas where you feel your **needs are not currently being met**.
3. Provide insight or details at the end of each appendix. Additional information can help your employer fully understand your needs.
4. Be honest. Your employer cannot fulfill the needs of all employees without your input.

Interpreting Assessment Results (Considerations for Employers)

1. Become familiar with the assessment. Determine how you want to view results. By supervisor, trade/job function, worksite, or date. This will allow you a practical way to sort and understand results and interpret any trends that may appear. It is important to consider all viewpoints.
2. Review individual assessments based on your assortment. Take note of any areas that may stand out and require attention. Be sure to pay close attention to the “additional comments” sections. Employees may share valuable information here.
3. Compare your notes to the employee priority ranking forms to see how your initial interpretation matches up with employee’s perception of their needs. Adjust your interpretation accordingly.
4. Develop a written action plan. This can include a form to track priorities from highest to lowest, corrective actions, and target dates. Ensure your plan is communicated to all employees involved in the assessment.
5. Put your plan into action. Follow up on action items to ensure follow through.

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Appendix 1: Training Needs Assessment

DATE:
SUPERVISOR:
JOB FUNCTION:
COMMON JOBSITES:

In each section, identify training you do not currently have, that would allow you to do your job in a more safe and efficient manner.

A) Compliance Training – training required to be compliant with the ohs act, regulations, codes of practice and other applicable legislation.		
<input type="checkbox"/> Fall Protection <input type="checkbox"/> Scaffolding Practical <input type="checkbox"/> Confined Space <input type="checkbox"/> Confined Space Rescue <input type="checkbox"/> Emergency First Aid <input type="checkbox"/> Standard First Aid	<input type="checkbox"/> Transportation of Dangerous Goods <input type="checkbox"/> Respirator Fit Testing <input type="checkbox"/> JOHSC Member/ Safety Representative <input type="checkbox"/> WHMIS GHS 2015	<input type="checkbox"/> Traffic Control Person <input type="checkbox"/> Temporary Workplace Signer <input type="checkbox"/> Other (please specify):

B) Management/Supervisory Training – training to enhance necessary skills, cultivate leadership ability, foster positive safety culture practices, understand legislative duties and requirements, and ultimately aid in developing the competency of managers, supervisors, foremen, and safety champions.		
<input type="checkbox"/> Occupational Health & Safety Act <input type="checkbox"/> Hazard Identification & Control <input type="checkbox"/> Principles of Loss Control	<input type="checkbox"/> Conflict Resolution <input type="checkbox"/> Leadership for Safety Excellence <input type="checkbox"/> Practical Leadership Skills <input type="checkbox"/> COR Evaluation	<input type="checkbox"/> Accident/Incident Investigation <input type="checkbox"/> Other (please specify):

C) Human Resources/Other Skills – training that relates to human resources, office applications, and workplace wellness.		
<input type="checkbox"/> Mental Health First Aid <input type="checkbox"/> Inclusion/Diversity <input type="checkbox"/> Harassment Awareness <input type="checkbox"/> Dealing with Difficult Behaviors/Customers	<input type="checkbox"/> EAL (English as an Additional Language) <input type="checkbox"/> Computer Applications (Microsoft Office Suite, Adobe, Internal Databases, etc.) <input type="checkbox"/> Access to an Employee Assistance Program (EAP)	<input type="checkbox"/> An ergonomic assessment <input type="checkbox"/> Defensive Driving <input type="checkbox"/> Other (please specify):

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D) In-House/Job Specific Training – *training needs related to specific tools, equipment, practices/procedures, and emergency plans related to the job/organization. Includes refreshers and generalized awareness training such as scaffolding awareness, rigging awareness, asbestos awareness, H2S, etc.*

Safe Work Practices/Safe Job Procedures/Company Safety Program (please specify):

Tool/Equipment Operation/Orientation (please specify):

Emergency Plans/Procedures (please specify):

Awareness (please specify):

Other (please specify):

Additional Comments: *Please provide any additional comments, clarification, or feedback that relate to your training needs.*

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Appendix 2: Tool & Equipment Needs Assessment

DATE:
SUPERVISOR:
JOB FUNCTION:
COMMON JOBSITES:

Consider items that you need to do your job in a safe and efficient manner. In each section, identify items that you do not have, or are not in good working condition (i.e.: guards missing, cut or frayed wires, wear and tear, rusting, broken, not inspected, etc.).

A) Tools <i>(Please list specific tools.)</i>		
Hand Tools	Power Tools	Powder Actuated Tools

B) Are the following items adequate, available, and/or inspected? - If the piece of equipment does not apply to you, mark it as not applicable.	YES	NO	N/A
Ladders (Correct type for job)			
Rigging equipment			
Work platforms/scaffolding			
Lifts (scissor lift, boom lift, etc)			
Rescue equipment			
First aid supplies (kits, eyewash, AED, etc.)			
Fire Extinguishers			
Signage (Muster Station, warning, speed, PPE, identification, etc.)			
Other (please specify):			

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C) Technology/Office <i>(Please select items applicable to your job that you require.)</i>		
<input type="checkbox"/> Laptop/Tablet	<input type="checkbox"/> Keyboard/Mouse (<input type="checkbox"/> Wireless)	<input type="checkbox"/> Other (Please specify):
<input type="checkbox"/> Cell phone	<input type="checkbox"/> Printer/Scanner	
<input type="checkbox"/> Desktop computer	<input type="checkbox"/> HDMI/Cables	
<input type="checkbox"/> Monitor	<input type="checkbox"/> Office chair	

D) Basic PPE		
<input type="checkbox"/> CSA Approved Work Boots	<input type="checkbox"/> Safety Vest	<input type="checkbox"/> Face & Body Protection
<input type="checkbox"/> Eye Protection	<input type="checkbox"/> Ear Protection	<input type="checkbox"/> Other (please specify):
<input type="checkbox"/> Head Protection	<input type="checkbox"/> Hand Protection	

E) Specialized PPE		
<input type="checkbox"/> Harnesses & Lanyards	<input type="checkbox"/> SCBA	<input type="checkbox"/> Other (please specify):
<input type="checkbox"/> Electrical Gloves	<input type="checkbox"/> Supplied Air	
<input type="checkbox"/> Respirators	<input type="checkbox"/> Hazmat Suit	
<input type="checkbox"/> Prescription Safety Glasses	<input type="checkbox"/> Radiation Badge	

Additional Comments: *Please provide any additional comments, clarification, or feedback that relate to your tool & equipment needs.*

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Appendix 3: Priority Ranking Form

DATE:
SUPERVISOR:
JOB FUNCTION:
COMMON JOBSITES:

Read the rubric below to learn how to apply the priority ranking. You can rank your selections from 1-5, based on the severity of your needs.

#	MEANING
1	Absolutely, 100% required now and needed to ensure my safety and/or the safety of my coworkers. (Halt job until provided)
2	Important to ensure my safety but I could wait a day or two before it is needed.
3	Important to ensure my safety but I could wait a week or two before it is needed.
4	Important to ensure my safety but I could wait a month or two before it is needed.
5	Not needed right now but would be nice to have.

Fill in the boxes in the rubrics below with your own needs as identified during the associated needs assessment. Write the type of training, piece of equipment, tool, or PPE on the left, then add the priority ranking on the right based on how important it is to do your job safely and efficiently. This form will also help identify company-wide trends and priorities when looking at overall responses.

TRAINING	RANKING

TOOLS, EQUIPMENT, OR PPE	RANKING