



اوتوریتی کبھسا ان کسلامتن
کھیئتین دان عالموسکیتز
Safety, Health and Environment
National Authority

SELF ASSESSMENT CHECKLIST: WSH OFFICER / CO-ORDINATOR

DOC NO.:
SHENA/CID/REG/5-204
(REV.1)
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IMPORTANT

This self-assessment checklist is a tool to ensure that Employers, Employees, Occupiers and Principals are aware of the requirements for appointment of Workplace Safety and Health (WSH) Officer or Co-ordinator at the workplace under the Workplace Safety and Health Order, 2009. This checklist only acts as a guide and should not be construed as implying any liability nor should it be taken to encapsulate all the responsibilities and obligations of the Employers, Employees, Occupiers and Principals under the law. If you answer 'No', you are advised to fix the gaps or hazards that you have identified at your workplace. You may need to do more than one assessment and you are advised to reassess your workplace as and when required to ensure you maintain a safe workplace at all times.

This Checklist does not require submission to SHENA unless SHENA explicitly instructs you to do so. However, a copy of the filled in checklist should be kept by the HSE focal point of your company/organization at all times.

For further references on WSH Officer and Co-ordinator, you can refer to the Workplace Safety and Health (Workplace Safety and Health Officer) Regulations, 2014, Workplace Safety and Health (Constructions) Regulations, 2014 and 2022/IGN/02 (01) on Requirements of Workplace Safety and Health Officer & Workplace Safety and Health Co-ordinator at SHENA website. SHENA reminds all Employers, Employees, Occupiers and Principals to comply with their legal obligations under the laws of Brunei Darussalam including, but not limited to, the Employment Order, 2009 (S 37/2009) and the Worker's Compensation Act (Chapter 74).

NAME OF COMPANY & ADDRESS			
PROJECT TITLE (as relevant)			
WORKSITE ADDRESS (If not the same as company address)			
TOTAL NUMBER OF WORKERS AT WORKSITE	NAME AND PHONE NO OF KEY CONTACT PERSON		
	EMAIL ADDRESS OF KEY CONTACT PERSON		
PROJECT/ CONTRACT VALUE (for construction work only)	EXPECTED DATE OF COMPLETION (for construction work only)		

		YES	NO	N/A	REMARKS/ JUSTIFICATION/ EXPLANATION
A	WORKPLACE DESCRIPTION				
1	Please tick the most appropriate description of your workplace:				
	i. Shipyard.				
	ii. Factory used for processing petroleum or petroleum products .				
	iii. Any building operation or work of engineering construction (BOWEC) with contract sum of more than BND 10 million .				
	iv. Handling, sorting, packing, storing, processing, or manufacturing of any goods or products with 100 or more workers .				
	v. Handling, sorting, packing, storing, processing, manufacturing, use, disposal of any hazardous substance (excluding petroleum or petroleum products as 1.ii) with 100 or more workers .				
	vi. Repair, construction or manufacturing of any vessel or vehicle with 100 or more workers .				
	vii. Operation or maintenance of any facility or system related to the provision of any public utility such as road, telecommunication, water supply, etc. or with 100 or more workers .				
	viii. Any other Factories as listed in Section 5 (3) WSHO, 2009 with 100 or more workers .				
	ix. Any building operation or work of engineering construction (BOWEC) with contract sum of less than BND 10 million .				
	x. None of the above.				

If you ticked 'yes' on part i-viii, your workplace is legally mandated to appoint a **WSH Officer**; please proceed to **item B.1**.

If you ticked 'yes' on part ix, your workplace is legally mandated to appoint a **WSH Co-ordinator**; please proceed to **item B.2**.

If you ticked 'yes' on part x, your workplace does not need to appoint a **WSH Officer** or **WSH Co-ordinator**.

B APPOINTMENT OF WSH OFFICER / CO-ORDINATOR				
1	Do you have a SHENA registered WSH Officer appointed for your workplace?			
	i. If 'yes', please provide the reference number of the Certificate of Approval.	Ref. No.:		
<i>Please proceed to Section C only.</i>				
	ii. If 'no', are you planning to appoint a WSH Officer and register them with SHENA?			Expected date of registration with SHENA: _____
2	Do you have a SHENA registered WSH Co-ordinator appointed for your workplace?			
	i. If 'yes', please provide the reference number of the Certificate of Approval:	Ref. No.:		
<i>Please proceed to Section D only.</i>				
	ii. If 'no', are you planning to appoint a WSH Co-ordinator and register them with SHENA?			Expected date of registration with SHENA: _____
C LEGAL DUTIES AND POWERS OF WSH OFFICER				
1	Does the WSH Officer perform risk assessment(s)?			
2	Does the WSH Officer provide recommendations (on health and safety) to the Occupier of the workplace?			
3	Does the WSH Officer implement the safety and health management system of the workplace?			
4	Is the WSH Officer appointed as the Secretary for the WSH Committee of your company?			
5	For COMAH facilities, is the WSH Officer involved in the development and review of safety cases?			
6	Does the WSH Officer carry out the following?			
	i. Enter, inspect, and examine the workplace/worksite at any reasonable time.			
	ii. Inspect and examine any machinery, equipment, plant, installation or article in the workplace/worksite.			
	iii. Request, inspect and examine workplace/worksite records, certificates, notices and any other relevant documents.			
	iv. Examine and inquire about any person at work at that workplace/worksite.			
	v. Assess the level of noise, illumination, heat, harmful or hazardous substances in the workplace/worksite and the exposure levels to persons at work.			
	vi. Investigate any accident, dangerous occurrence or occupational disease that occurred within the workplace/worksite.			
D LEGAL DUTIES AND POWERS OF WSH CO-ORDINATOR				
1	Does the WSH Co-ordinator perform hazard/ unsafe work practice identification?			
2	Does the WSH Co-ordinator provide recommendations (on health and safety) to the Occupier of the workplace?			
3	Does the WSH Officer have the power/ authority to carry out the following?			
	I. Enter, inspect, and examine the workplace/worksite at any reasonable time.			
	II. Inspect and examine any machinery, equipment, plant, installation or article in the workplace/worksite.			
	III. Request, inspect and examine workplace/worksite records, certificates, notices and any other relevant documents.			
	IV. Examine and inquire about any person at work at that workplace/worksite.			

V.	Assess the level of noise, illumination, heat, harmful or hazardous substances in the workplace/worksite and the exposure levels of persons at work.				
VI.	Investigate any accident, dangerous occurrence or occupational disease that occurred within the workplace/worksite.				

Any Occupier of a workplace within the prescribed class or description of workplaces specified in the Second Schedule of the WSH (Workplace Safety and Health Officers) Regulations, 2014 who fails to have a WSH Officer appointed is guilty of an offence and liable on conviction to a fine not exceeding \$10,000 and, in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part thereof during which the offence continues after conviction.

Similarly, any occupier of a worksite who does not appoint a WSH Co-ordinator as stipulated under the WSH (Constructions) Regulations, 2014 is guilty of an offence and liable on conviction to a fine not exceeding \$10,000 and in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part thereof during which the offence continues after conviction.

In addition, no person shall act as a WSH Officer or WSH Co-ordinator without the approval of SHENA. Any person found to be acting in such positions without approval from SHENA is liable to a penalty of a fine not exceeding BND5,000, imprisonment for a term not exceeding 6 months or both.

	PREPARED BY:	VERIFIED BY:
Name		
Designation		
Date		

**SHENA SEEKS THE SUPPORT OF ALL RELEVANT STAKEHOLDERS
TO ENSURE BRUNEI A SAFE PLACE TO WORK AND LIVE**

For further inquiries and clarification, please contact us
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