SMALL EMPLOYER CERTIFICATE OF RECOGNITION (COR) AUDIT CHECKLIST



In order for AMTA to proceed with the review process, please submit the following:

- □ SECOR request cover letter
- □ Small Employer Audit Information Sheet
- □ Title page
- Company Biography
- Completed Audit tool including action plan
 - Audit must be dated and signed by the auditor, along with your WCB account number and WCB industry code(s) listed.
 - Did you use a Safety Consultant for assistance with the audit process? If yes, this must be acknowledged in the audit.
 - o all Yes/No boxes and the Notes Column are required to be filled out in full
- National Safety Code (NSC) Worksheet (optional)
- □ Last year's action plan (this is n/a if this is your first audit)
- □ <u>All</u> supporting documentation required to support your answers. **DO NOT ATTACH ORIGINAL DOCUMENTATION**, as submissions will not be returned to the employer.
- □ Sign Code Of Ethics and Discipline Policy.



Critical Timelines to Remember:

The auditor has 15 calendar days to start and complete the audit AMTA Calgary office must receive the audit within 21 calendar days from the completion date - Please note → there are no exceptions

Amendment to COR!

If you have ANY changes to your company, such as ownership; WCB account changes (such as account number/industry codes); a name change – Please contact the COR Department for direction, before you proceed with your audit.

Is Your Company Still a Small Employer?

When the number of employees (including owners) goes beyond ten at any point in a given year, Partnerships Standards consider the company to be a Large Employer. Please contact the COR Department for direction before you proceed with your audit.

Filling Out Your Audit - No Pencil Allowed!

Please ensure to complete the audit in pen or on the computer (the audit tool and the information cover page), as we do not accept audits in pencil.

If you have any questions, please call the COR Department at 1-800-267-1003 or 403-243-4161.



SUGGESTED DOCUMENTATION SECOR



The list below contains examples of documentation that can be attached to the SECOR submission to verify the questions listed, if the documents apply to multiple questions, you only need to attach the document once.

External consultants should use the list as a guideline to dictate what should be reviewed to score the listed questions.

(**DO NOT ATTACH ORIGINAL DOCUMENTATION**, as submissions will not be returned to the employer)

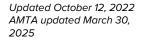
| QUESTIONS | DOCUMENTATION |
|------------------|--|
| 1.1 | Health and Safety Policy |
| 1.2 | Supporting documentation (e.g. meeting minutes, orientations, sign off) showing how employees are advised of the policy's content. |
| 1.3 | Supporting documentation (other than the health and safety policy). (e.g. contracts, job descriptions, and program manuals, etc.) |
| 1.4 | Supporting documentation that verifies employees have been advised of their legislated health and safety rights (right to know, right to participate, and the right to refuse dangerous work) and responsibilities. This can include such items as orientations, meeting minutes, or other training records. |
| 2.1 | Supporting documentation that confirms all employee positions have been identified. (e.g. job descriptions, organizational chart, job inventory, etc.). |
| 2.2, 2.3, 2.4 | All formal hazard assessments. |
| 2.5 | Supporting documentation (e.g. meeting minutes, supervisor logbooks, revised formal hazard assessments, etc.). |
| 2.6 | Documentation that supports employee participation and/or review/revision of formal hazard assessments. (e.g. formal hazard assessments sign off, meeting minutes, etc.). |
| 2.7 | Sample of completed site-specific hazard assessments from the previous 12 months. |
| 3.1 | All formal hazard assessments. |
| 3.2 | Documentation and a note that explains how your organization ensures controls are used/followed by employees. (e.g. inspections process, disciplinary policy, competency assessments, etc.). |



SUGGESTED DOCUMENTATION SECOR



| QUESTIONS | DOCUMENTATION |
|------------------|---|
| 3.3 | Preventative maintenance policy/process and schedule |
| 3.4 | A representative sample of maintenance records (e.g. maintenance logs, work orders, etc.) |
| 3.5 | Violence & Harassment Prevention plan. |
| | |
| 3.6 | Policy/process that verifies the violence and harassment plans are reviewed based on the legislated (Alberta and/or federal) criteria |
| 4.1 | Policies, procedure, meeting minutes, or documentation that can verify that the HS representative has been designated as per legislated (Alberta and/or federal) requirements. |
| 4.2 | Supporting documentation that assigned duties are identified for the HS Representative as per legislated requirements. |
| 4.3 | Training records for the HS Representative. |
| 4.4 | A representative sample of documentation that supports duties are being completed as per legislated (Alberta/Federal) requirements. |
| 4.5 | Policy or procedure for the HS representative to address employee health and safety concerns/complaints and provide recommendations to the employer. |
| 4.6 | Supporting documents to show health and safety concerns/complaints are resolved in a timely manner, as per legislated requirements. |
| 4.7 | Supporting documentation to show health and safety representative contact information readily available to employees, as per legislated requirements, or provide a note that explains where the information is posted or how it is accessible to employees. |
| 5.1 | Orientation policy /process, orientation checklists, orientation records |
| 5.2 | Completed orientation checklists, dated orientation records |
| 5.3, 5.4, 5.6 | Training policy/process, training records, training certificates |
| 5.5 | Completed competency assessments |
| 6.1 | Other parties policy and procedure |



SUGGESTED DOCUMENTATION SECOR



| QUESTIONS | DOCUMENTATION |
|-----------|---|
| 6.2 | Supporting documentation (e.g. emails, meeting minutes, orientation, contracts, etc.). |
| 6.3 | Other parties policy and procedure |
| 6.4 | Other parties policy and procedure, schedule |
| 7.1 | Inspection policy and process, inspection schedule |
| 7.2 | Inspection checklist/form, schedule |
| 7.3 | Completed Inspection records |
| 7.4 | Inspection records and supporting documentation (e.g. work orders, purchase orders, e-mails, memos, meeting minutes, etc.). |
| 7.5 | Hazard reporting policy, sample hazard report forms, blank hazard report forms |
| 8.1 | Emergency response plans |
| 8.2 | Emergency response plans and/or procedures |
| 8.3 | Supporting documentation (training records first aid, first aid kit inventory and inspection checklists etc.) |
| 8.4 | Emergency response training records |
| 8.5 | Records of Emergency Response drills, minutes of health & safety meetings, records of emergency response table-top review exercises |
| 8.6 | Records of revised Emergency Response plans, drill debriefing documents, minutes of health & safety meetings |
| 9.1 | Incident reporting process and/or procedures |
| 9.2 | Investigation process and/or procedures |
| 9.3 | Completed incident investigation reports |
| 10.1 | Supporting documentation (eg. meeting minutes, e-mails. Bulletins etc.) |
| 10.2 | Action plan reflecting deficiencies identified from previous year's audit |
| 10.3 | Completed action plan from previous audit |



SAMPLE COR REQUEST COVER LETTER



ABC Trucking Ltd. Box 1000 Anytown, Alberta T2H 1L1 Tel: (780) 555-000 Fax: (780) 555-1000

(Date)

Alberta Motor Transport Association 285005 Wrangler Way Rocky View, AB T1X 0K3 Attn: COR Administrator, Quality Assurance

RE: Certificate of Recognition Program

Dear COR Administrator:

I would like to apply for the Small Employer Certificate of Recognition and have included all documentation required for the first year Self-Audit.

Please find enclosed our completed audit document, National Safety Code Quiz, and all required supporting documentation. At the front of the Audit Binder is the Small Employer Information Sheet.

Thank you in advance for reviewing this material. If you have any questions, please feel free to contact me at **(XXX) XXX-XXXX** or on my cell at: **(XXX) YYY-YYYY**.

Regards,

(signature)

Joe Smith President/CEO ABC Trucking Ltd.



SAMPLE COMPANY BIOGRAPHY



This document gives us a good background on who you are and what you do. See this as a good item to advertise your company (i.e., positive aspects; good for putting in with your bid for contracts). Following is an example:

ABC TRUCKING LTD.

ABC Trucking Ltd. was founded in the fall of 1979 and incorporated on May 7, 1990.

ABC Trucking is based out of Calgary and is managed by the company's current President/CEO Joe Smith.

The company has been contracted out mainly to the City of Calgary and its various departments that involve hauling sand, gravel, asphalt, mud, loam and various commodities as required. It has maintained continuous seniority status with the City of Calgary since its inception.

We operate 2 tractors, 3 end dump trailers and 3 pup trailers. Our office is located at 123 Any Street where we have a small maintenance shop and office. We operate solely as a Small Employer with five full-time employees and two part-time employees.

Please make sure that your Company Biography contains the following information:

- Name of company
- Date of inception/incorporation
- Name of the owner(s)/president/CEO
- Type of work the company is involved in
- Type of equipment that your company uses
- A description of your office location
- The number of people employed
- Any other information that you think would be helpful





Partnerships in Injury Reduction Small Employer Certificate of Recognition (SECOR) Audit Instrument

Self-Evaluator

Using Range-of-Points Scoring

Audit Instructions

This audit instrument is designed to measure whether or not the small employer has implemented the basics of a health and safety management system. The instrument can be used, by a certified external auditor (to conduct an external audit) or by the owner, a key employee or a trained consultant to submit a SECOR Assessment for review by the Certifying Partner. SECOR Assessments require submission of notes and adequate documentation to allow the CP to verify the status of the small employer's health and safety system and score the questions in the audit instrument. A minimum overall score of 80% is required to pass the audit, and each individual element must score at least 50%.

SECOR employers not legislatively required to have a health and safety representative are allowed to N/A Element 4 but are still required to have 50% in each element and 80% overall for certification. The employer must achieve 60% overall score in maintenance years

Owner/Operators are only required to obtain an overall score of 80% for certification year and 60% for maintenance years.

As per the COR definitions, and Owner/Operator is: An owner/operator is a company where:

- the company qualifies for a WCB account;
- all work is done by the owner;
- there is one owner with the allowance of an unpaid family member doing the administrative work;
- it does not have workers as per COR definition

Anyone conducting a SECOR Assessment must have completed AMTA's HSSB and Self-Evaluator Training.



Instructions for completing a SECOR Assessment

- 1. SECOR Self-Evaluators not required to conduct worker interviews but must fill out the Employee Breakdown and Sampling Details table, except for the sections highlighted in grey.
- 2. Read each question and the guidelines and respond to the question in the Notes fields provided.
- 3. Questions marked with "(D)" indicate that documentation/records must be attached. Where attached documents/record samples are required by the guidelines, attach copies of the requested documentation. Records submitted must be sufficient to verify health and safety activities over the previous 12-month period. DO NOT ATTACH ORIGINAL DOCUMENTATION, as submissions will not be returned to the employer.
- 4. Ensure that documentation is submitted in a logical and orderly manner and avoid submitting more documentation than required by the question guidelines. The CP may reject submissions that are difficult to assess.
- 5. Some questions will require both a written explanation and attached documentation (D).
- 6. While completing the audit document, you will likely identify deficiencies in your health and safety system. For each deficiency identified, consider what steps you could take to improve this area of your system, and enter an appropriate action item in the attached Action Plan.

Tips for completing the SECOR Assessment.

 \square Questions can only be marked as "not applicable" (n/a) if the guidelines allow it, and Assessor notes must fully justify why the question should be "n/a."

☑ Self-Evaluators will not assess a score for each question, or fill out the Summary Score Sheet at the end of the audit. Scoring will be determined by the CP reviewer.

☑ Ensure the SECOR Audit Info Sheet is completed filled out, and signed off as required.

☑ Unless this is your first SECOR Assessment, a completed action plan based on the results of your previous year's audit must be included in the SECOR submission.



| | PARTNER HEALTH AND SAFETY SYSTER | | r |
|--|--------------------------------------|-------------------------------|----------------------------------|
| Employer Legal Name (as registered with WCB): | Click or tap here to enter text. | | |
| Employer Trade Name (if applicable): | Click or tap here to enter text. | | |
| Address: | Click or tap here to enter text. | | |
| WCB Account(s) in scope: | Click or tap here to enter text. | Industry Code(s) in scope: | Click or tap here to enter text. |
| Regulatory Jurisdiction (provincial, federal): | Click or tap here to enter text. | | |
| Contact Person: | Click or tap here to enter text. | Phone Number: | Click or tap here to enter text. |
| Fax Number: | Click or tap here to enter text. | Email: | Click or tap here to enter text. |
| Data Gathering mus | st not exceed 15 days. Completed aud | it must be submitted within 2 | 21 days of audit end date. |
| Audit Start Date: | Click or tap here to enter text. | Audit End Date: | Click or tap here to enter text. |
| Audit Purpose (Certification, Recertification, Maintenance): | Click or tap here to enter text. | | |

| SELF-EVALUATOR / EXTERNAL AUDITOR / CONSULTANT INFORMATION | | | | |
|---|----------------------------------|---------------------------------|----------------------------------|--|
| Self-Evaluator Name (if different than contact): | Click or tap here to enter text. | | | |
| HSPB. HSSB Training Date: | Click or tap here to enter text. | Self-Evaluator Phone Number: | Click or tap here to enter text. | |
| Self-Evaluator Training Date: | Click or tap here to enter text. | Self-Evaluator Email: | Click or tap here to enter text. | |
| Self Evaluator Signature: | | | | |
| | CONSULTANT INFORMA | ATION (IF APPLICABLE) | | |
| Name of Safety Consultant Company use build the Health and Safety Managemen | | | | |

| EMPLOYER INFORMATION COMPANY PROFILE/BIOGRAPHY |
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| Click or tap here to enter text. |
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SELF-EVALUATOR CODE OF ETHICS AGREEMENT

As a trained Self-Evaluator by Alberta Motor Transport Association, I agree to the following:

- ✓ Audits will be conducted with the utmost integrity, confidentiality and with no conflict of interest. As a Self-Evaluator I have read and agree to follow the Code of ethics policy of the Alberta Motor Transport Association.
- ✓ I agree and understand the Alberta Motor Transport Association has the right and responsibility to take disciplinary action if I do not abide by the Code of Ethics as outlined in the policy.
- ✓ I agree to complete the audit information gathering within the 15-day time frame and to submit completed audits within 21 days from last day of onsite activities.
- ✓ I also agree to correct any deficiencies noted in the reviews within 15 days of notice.
- ✓ I also agree to complete my Self-Evaluator refresher training every three years as required by AMTA and Partnerships Standard.

If at any time, I am found to be in breach of this agreement or the Code of Ethics, I understand the Alberta Motor Transport Association has the right and responsibility to cancel my Self-Evaluator certification.

| | Date: |
|--------------------------|-------|
| Self-Evaluator Signature | |

Employee Breakdown and Sampling Details

*Fields in grey (Interviewed) are for use only by external auditors.

| Levels | Total Numbers | Number Interviewed |
|-------------------------------|---------------|--------------------|
| Senior Manager | | |
| Manager | | |
| Supervisor | | |
| Worker | | |
| Total Employees | | |
| Total Employees at Peak Times | | |

| | Total Employees | | | # Interviewed | | |
|--|-----------------|-----------|--------|---------------|-----------|--------|
| Department/shifts List departments, and (if applicable) shifts | Full-Time | Part-Time | Casual | Full-Time | Part-time | Casual |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| Interviewed new hires and experienced employees. Describe: | |
|--|--|
| Interviewed all shifts. Describe: | |

1. Management Leadership and Organizational Commitment

For any health and safety management system to be effective, employers must demonstrate commitment and administer the program.

Audits need to measure the level of the employer's commitment and employee (if applicable) involvement.

| | Questions | Guidelines | Auditor/ CP Assessed Score |
|-------|--|--|-------------------------------------|
| 1.1 | Is there a written health and safety policy signed and dated by the employer? (D) | Attach supporting documentation. The Health and Safety policy must be signed by the employer, dated, and must include: - declaration of management commitment to health and safety that addresses physical, psychological, and social well-being - general health and safety responsibilities of managers, supervisors, workers and contractors - requirement to comply with organization's own health and safety standards and OHS legislation Owner/Operators are only required to have a signed and dated policy and not the subpoints noted in the above guideline. | /0-5 |
| Notes | : | | |
| 1.2 | Are employees advised of the Health and Safety Policy content? (D) | Attach supporting documentation (e.g. meeting minutes, orientations, sign off) showing how employees are advised of the policy's content. This question is not applicable (n/a) if it is an owner/operator. Provide justification. | /0-5 |
| Notes | :: | | |

1. Management Leadership and Organizational Commitment

For any health and safety management system to be effective, employers must demonstrate commitment and administer the program.

Audits need to measure the level of the employer's commitment and employee (if applicable) involvement.

| | Questions | Guidelines | Auditor/ CP Assessed Score |
|-------|---|--|-------------------------------------|
| 1.3 | Are specific health and safety roles and responsibilities written for: (D) a. Managers? b. Supervisors? c. Workers? | Attach supporting documentation (other than the health and safety policy). (e.g. contracts, job descriptions, and program manuals, etc.) Depending on size or nature of the organization, one or more of these categories may not be applicable (n/a). Provide justification. Where the organization has no employees, the owner/operator will be considered the Manager. | /5 /5 |
| Notes | | Attach supporting documentation that verifies employees have been advised of their | |
| 1.4 | Are employees advised of their legislated health and safety roles, rights and responsibilities? (D) a. Managers? b. Supervisors? c. Workers? | legislated health and safety rights (right to know, right to participate, and the right to refuse dangerous work) and responsibilities. This can include such items as orientations, meeting minutes, or other training records. Depending on the size and nature of organization, one or more of these employee types may not be applicable (n/a). This question is not applicable (n/a) if it is an owner/operator. Provide justification. | /5 /5 |
| Notes | : | | |

1. Management Leadership and Organizational Commitment

For any health and safety management system to be effective, employers must demonstrate commitment and administer the program.

Audits need to measure the level of the employer's commitment and employee (if applicable) involvement.

| | Questions | Guidelines | Auditor/ CP Assessed Score |
|--------|---|--|-------------------------------------|
| 1.5 | Is current health and safety legislation, relevant to the | Supporting documentation does not need to be attached for this question. | |
| | employer, readily available? (D) | Identify and list the type of legislation (e.g. federal and/or Alberta) available with the date of publication, and explain how it is made readily available in the notes. | |
| | | | /5 |
| Notes: | | | |
| | | TOTAL POINTS POSSIBLE: | /45 |

All equipment, machinery, work areas and work processes need to be carefully evaluated to identify all hazards and assess their risk.

Audits need to measure the systems in place for identifying and assessing job specific health and safety hazards.

A **formal hazard assessment** takes a close look at the overall operations of an organization to identify hazards, measure risk (to help prioritize hazards), and develop, implement and monitor related controls. Worker jobs or types of work are broken down into separate tasks.

| | Questions | Guidelines | Auditor/ CP Assessed Score |
|-------|--|--|-------------------------------------|
| 2.1 | Are all jobs/positions identified for the purpose of formal hazard assessments? (D) | Attach supporting documentation that confirms all employee positions have been identified. (e.g. job descriptions, organizational chart, job inventory, etc.). | |
| | | | /0-10 |
| Notes | : - | | |
| 2.2 | Is there a list of tasks associated with each | Attach all formal hazard assessments. | |
| | job/position? (D) | Tasks associated with each job/position must be identified. | |
| | | | /0-10 |

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| | Questions | Guidelines | Auditor/ CP Assessed Score |
|-------|--|--|-------------------------------------|
| Notes | s: | | |
| 2.3 | Are health and safety hazards identified for the tasks associated with each job/position? (D) | Attach all formal hazard assessments. Health Hazard: Has the potential to cause an acute or chronic condition, illness or disease from exposure (e.g. noise, dust, heat, etc.). Safety Hazard: Has the potential to cause immediate injury (e.g. shear points, working at heights, etc.) | |
| | | Consider the four categories for health and safety hazards, which include: Physical (e.g. radiological, working at heights, lifting heavy loads, extreme temperatures, violence, ergonomics, etc.) Chemical (e.g. fumes, vapours, gases, waste products, etc.) Biological (e.g. bodily fluids, viruses, bacteria, moulds, etc.) | /0-10 |

All equipment, machinery, work areas and work processes need to be carefully evaluated to identify all hazards and assess their risk.

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| | Questions | Guidelines | Auditor/ CP Assessed Score |
|-------|--|---|-------------------------------------|
| | | Psychological (e.g. harassment and bullying, stress, fatigue, etc.) Note: All hazard categories may not be applicable to every task identified on formal hazard assessments. | |
| Notes |] S: | | |
| 2.4 | Are the identified health and safety hazards evaluated according to risk? (D) | Attach all formal hazard assessments. | /0-10 |
| Notes | 3: | | |

All equipment, machinery, work areas and work processes need to be carefully evaluated to identify all hazards and assess their risk.

Audits need to measure the systems in place for identifying and assessing job specific health and safety hazards.

A **formal hazard assessment** takes a close look at the overall operations of an organization to identify hazards, measure risk (to help prioritize hazards), and develop, implement and monitor related controls. Worker jobs or types of work are broken down into separate tasks.

| Questions | Guidelines | Auditor/ CP Assessed Score |
|--|--|-------------------------------------|
| 2.5 Are the formal hazard assessments reviewed? (D | Attach supporting documentation (e.g. meeting minutes, supervisor logbooks, revised formal hazard assessments, etc.). A requirement to review formal hazard assessments must be established and include the following criteria: On a pre-determined frequency, designed to keep the results up-to-date; When a new work process is introduced; When changes are made to the operation or work-related process; When site-specific hazard assessments identify hazards not identified on the formal hazard assessments; In response to inspection and investigation results. Note: If reviews have not been required in the previous 12 months, attach policy or process that identifies the requirements. | /5 |

All equipment, machinery, work areas and work processes need to be carefully evaluated to identify all hazards and assess their risk.

Audits need to measure the systems in place for identifying and assessing job specific health and safety hazards.

A **formal hazard assessment** takes a close look at the overall operations of an organization to identify hazards, measure risk (to help prioritize hazards), and develop, implement and monitor related controls. Worker jobs or types of work are broken down into separate tasks.

| | Questions | Guidelines | Auditor/ CP Assessed Score |
|-------|--|--|-------------------------------------|
| 2.6 | Do employees participate in the development, and/or review/revision of the formal hazard assessments? (D) | Attach documentation that supports employee participation and/or review/revision of formal hazard assessments. (e.g. formal hazard assessments sign off, meeting minutes, etc.). Note: The purpose of this question is for employees to participate in the development and/or review of formal hazard assessments that relate to their position. This is not an awareness question; therefore, orientations cannot be used to verify this question. This question is not applicable (n/a) if it is an owner/operator, and/or reviews of formal hazard assessments have not been required in the previous 12 months. Provide justification. | |
| Notes | | | /5 |



All equipment, machinery, work areas and work processes need to be carefully evaluated to identify all hazards and assess their risk.

Audits need to measure the systems in place for identifying and assessing job specific health and safety hazards.

A **formal hazard assessment** takes a close look at the overall operations of an organization to identify hazards, measure risk (to help prioritize hazards), and develop, implement and monitor related controls. Worker jobs or types of work are broken down into separate tasks.

A **site-specific hazard assessment** (also called field-level) is performed before work starts at a site and at a site where conditions change or when non-routine work is added. This flags hazards identified at the location (e.g. overhead power lines, poor lighting, wet surfaces, extreme temperatures, the presence of wildlife), or introduced by a change at the work site (e.g. scaffolding, unfamiliar chemicals, introduction of new equipment). Any hazards identified are to be eliminated or controlled right away, before work begins or continues.

| | Questions | Guidelines | Auditor/ CP Assessed Score |
|-----|---|---|-------------------------------------|
| 2.7 | Do site-specific hazard assessments identify a) hazards? b) controls? (D) | Attach a sample of completed site-specific hazard assessments from the previous 12 months. Site-specific hazard assessments may be required when working at other locations or when something changes (i.e. non routine tasks) at the employers own work site(s). If site-specific hazard assessments were not required in the previous 12 months, attach the policy. Site-specific hazard assessments can be conducted in conjunction with other employers as appropriate. 5 points for hazards 0-5 points for controls | a) /5 |
| | | | B)/0-5 |

Notes:

All equipment, machinery, work areas and work processes need to be carefully evaluated to identify all hazards and assess their risk.

Audits need to measure the systems in place for identifying and assessing job specific health and safety hazards.

A **formal hazard assessment** takes a close look at the overall operations of an organization to identify hazards, measure risk (to help prioritize hazards), and develop, implement and monitor related controls. Worker jobs or types of work are broken down into separate tasks.

| Questions | Guidelines | Auditor/ CP Assessed Score |
|-----------|-----------------------|-------------------------------------|
| | Total Points Possible | /60 |

3. Hazard Control

Audits need to measure the systems in place for controlling job specific health and safety hazards

Control measures need to be in place to eliminate or reduce the risk of harm to the employer, employees (if applicable) and equipment.

Implementation of hazard controls will result in the reduction of incidents. Three methods of control are: Engineering (i.e. elimination, substitution, guards, ventilation, sound barriers, etc.); Administrative (i.e. safe work practices, job procedures, job rotation, training, etc.); Personal Protective Equipment (i.e. eye protection, hearing protection, gloves, fire retardant coveralls, etc.).

Preventative Maintenance – involves taking the necessary precautions and actions to prevent incidents or equipment failures from occurring before they happen to reduce the risk of incidents.

| | Questions | Guidelines | Auditor/CP Assessed Score |
|--------|---|---|---------------------------------|
| 3.1 | Are controls identified for the hazards listed in the formal hazard assessments? (D) | Attach all formal hazard assessments. Hazard assessments must include controls for each hazard identified, including engineering, administrative, and PPE controls where applicable. | |
| | | | /0-10 |
| Notes: | | | |
| 3.2 | Does the employer ensure hazard controls are used by employees? (D) | Attach documentation and include a note that explains how your organization ensures controls are used/followed by employees. (e.g. inspections process, disciplinary policy, competency assessments, etc.). | |
| | | This question is not applicable (n/a) to owner/operators. Provide Justification. | |
| | | | /0-10 |
| Notes: | | | |

| 3.3 | Is there a preventative maintenance program for equipment, vehicles, facilities, and machinery? (D) | Attach the preventative maintenance policy/process including the schedule. Documentation must identify ongoing preventative maintenance requirements for | |
|--------|--|---|------|
| | | vehicles, equipment, facilities, and tools. (e.g. overhead doors, cranes, localized ventilation, forklifts, power tools, fire extinguishers, etc.). | /5 |
| Notes: | | | /5 |
| 3.4 | Is the preventative maintenance process in use? (D) | Attach a representative sample of maintenance records (e.g. maintenance logs, work orders, etc.) from the previous 12 months. | |
| | | Documentation must confirm preventative maintenance is completed according to the schedule as identified in the policy/process. | /O.F |
| Notes: | | | /0-5 |
| 3.5 | Is there a written Violence and Harassment | Attach a copy of the written violence and harassment prevention plan. | |
| | Prevention Plan as per legislated requirements? (D) | Ensure the plan meets legislated (Alberta and/or federal) requirements as applicable to the operation. | |
| | | | /10 |
| Notes: | | | |
| | | | |
| | | | |
| | | | |

| 3.6 | Is there a policy/process for review of the Violence and Harassment Plans as per legislated requirements? (D) | Attach the policy/process that verifies the violence and harassment plan is reviewed based on the legislated (Alberta and/or federal) criteria | |
|--------|--|--|-----|
| | | | /5 |
| Notes: | | | |
| | | | |
| | | | |
| | | | |
| | | TOTAL POINTS POSSIBLE: | /45 |

Health and safety representation is a key element of the internal responsibility system. The role brings work site parties together to work on topics such as hazard identification and control, investigation of health and safety incidents, and responding to reports of unsafe work.

If an employer chooses to go above the legislation and establish a health and safety committee, then the committee documentation is used to answer the question to this element.

| | Questions | Guidelines | Auditor/ CP Assessed Score |
|------|---|---|-------------------------------------|
| 4.1 | Has a HS representative been designated as per legislated requirements? (D) | Attach policies, procedure, meeting minutes, or documentation that can verify that the HS representative has been designated as per legislated (Alberta and/or federal) requirements. This question can be marked n/a if the employer is not required by legislation to have a HS representative. Provide justification. | |
| Note | s: | | /5 |
| 4.2 | Are against duties identified for the HC representative as | Attach aumonting documentation | |
| +.2 | Are assigned duties identified for the HS representative as per legislated requirements? (D) | Attach supporting documentation. Duties of the HS representative must be written and meet legislated (Alberta/federal) requirements. This question can be marked n/a if the employer is not required by legislation to have a HS representative. Provide justification. | /5 |
| Note | S: | | 75 |

Health and safety representation is a key element of the internal responsibility system. The role brings work site parties together to work on topics such as hazard identification and control, investigation of health and safety incidents, and responding to reports of unsafe work.

If an employer chooses to go above the legislation and establish a health and safety committee, then the committee documentation is used to answer the question to this element.

| | Questions | Guidelines | Auditor/ CP Assessed Score |
|-----|--|---|-------------------------------------|
| 4.3 | Is the HS representative trained for their role as per | Attach training records for the HS representative. | |
| | legislated requirements? (D) | This question can be marked n/a if the employer is not required by legislation to have a HS representative. Provide justification. | |
| | | Training needs to cover roles and responsibilities of the HS representative, worker rights, and obligations of work site parties, to ensure they are trained as per legislated requirements (Alberta) or to Federal legislation for federally regulated employers | |
| | | | /5 |

| Notes: | | |
|--------|--|--|
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Health and safety representation is a key element of the internal responsibility system. The role brings work site parties together to work on topics such as hazard identification and control, investigation of health and safety incidents, and responding to reports of unsafe work.

If an employer chooses to go above the legislation and establish a health and safety committee, then the committee documentation is used to answer the question to this element.

| | Questions | Guidelines | Auditor/ CP Assessed Score |
|-----|---|--|-------------------------------------|
| 4.4 | Is the HS representative completing their duties as per legislated requirements? (D) | Attach a representative sample of documentation that supports duties are being completed as per legislated (Alberta/Federal) requirements. This question can be marked n/a if the employer is not required by legislation to have a HS representative. Provide justification. | |
| | | | /5 |

| Notes: | | |
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| | | |

Health and safety representation is a key element of the internal responsibility system. The role brings work site parties together to work on topics such as hazard identification and control, investigation of health and safety incidents, and responding to reports of unsafe work.

If an employer chooses to go above the legislation and establish a health and safety committee, then the committee documentation is used to answer the question to this element.

| | Questions | Guidelines | Auditor/ CP Assessed Score |
|-------|--|--|-------------------------------------|
| 4.5 | Is there a system in place for the HS representative to address employee health and safety concerns/complaints | Attach the policy or procedure. | |
| | and provide recommendations to the employer? (D) | This question can be marked n/a if the employer is not required by legislation to have a HS representative. Provide justification. | |
| | | | /5 |
| Notes | : | | |

| 4.6 | Are health and safety concerns/complaints resolved in a timely manner, as per legislated requirements? (D) | Attach supporting documentation | |
|-----|---|--|------|
| | | This question may be marked "n/a" if there were no concerns/complaints in the previous 12 months. Provide justification. | |
| | | | |
| | | | |
| | | | /0-5 |

Health and safety representation is a key element of the internal responsibility system. The role brings work site parties together to work on topics such as hazard identification and control, investigation of health and safety incidents, and responding to reports of unsafe work.

If an employer chooses to go above the legislation and establish a health and safety committee, then the committee documentation is used to answer the question to this element.

| | Questions | Guidelines | Auditor/ CP Assessed Score |
|------|--|---|-------------------------------------|
| Note | s: | | |
| 4.7 | Is health and safety representative contact information readily available to employees, as per legislated requirements? (D) | Attach supporting documentation or provide a note that explains where the information is posted or how it is accessible to employees. This question can be marked n/a if the employer is not required by legislation to have a HS representative. Provide justification. | /5 |
| Note | S: | | , , , |

Health and safety representation is a key element of the internal responsibility system. The role brings work site parties together to work on topics such as hazard identification and control, investigation of health and safety incidents, and responding to reports of unsafe work.

If an employer chooses to go above the legislation and establish a health and safety committee, then the committee documentation is used to answer the question to this element.

| Questions | Guidelines | Auditor/ CP Assessed Score |
|-----------|------------------------|-------------------------------------|
| | TOTAL POINTS POSSIBLE: | /35 |

5. Qualifications, Orientations and Training

Employers and employees require training to ensure they can do their jobs safely. Audits need to measure whether employers and employees (if applicable) are trained to perform their assigned tasks.

| | Questions | Guidelines | Auditor/CP Assessed Score |
|--------------|--|---|---------------------------------|
| 5.1 | Do orientations cover individual OHS rights and critical health and safety information? (D) | Attach completed supporting documentation. If this process have not been required in the previous 12 months, attach a blank orientation document. These must, at minimum include: - Right to know - Right to participate - Right to refuse dangerous work - Emergency response procedures - Rules of enforcement - Highest Risk hazards - Hazard reporting - Incident reporting This question is not applicable (n/a) for owner/operators. | |
| | | (4, 4) | /10 |
| Notes 5.2 | | Attach completed orientation records from the previous 12 months and describe | |
| 5.2 | Are employee orientations completed prior to starting regular duties? (D) | when they are completed. Orientations must be dated showing they are completed before regular duties. This question is not applicable (n/a) to owner/operator, or if orientations have not been required in the previous 12 months. Provide justification. | /0-5 |

5. Qualifications, Orientations and Training

Employers and employees require training to ensure they can do their jobs safely. Audits need to measure whether employers and employees (if applicable) are trained to perform their assigned tasks.

| | Questions | Guidelines | Auditor/CP Assessed Score |
|-------|--|--|---------------------------------|
| Notes | 5: | · | |
| | | | |
| 5.3 | Is job-specific training completed? (D) | Attach supporting documentation. | |
| | | Job-specific training must include: | |
| | | Specific job hazards (e.g. H2S, Confined Space, etc.) (0-5 points) | |
| | | Job-specific controls (e.g. safe work practices, procedures, etc.). (0-5 points) | |
| | | Owner/operator are allowed to answer with a validation note and are not required to supply documentation. | |
| | | | |
| | | | /0-10 |
| Notes | 5: | | |
| | | | |
| | | | |
| 5.4 | Does job-specific training include a practical | Attach supporting documentation. | |
| | demonstration by the trainee? (D) | Training must include a practical demonstration completed by a trainee to confirm they have acquired the necessary knowledge or skill related to the subject matter. | |
| | | Examples of training documents may include a combination of reviewing policies, | |
| | | procedures, practical demonstrations, safe work practices, hazard assessments and training certificates/manuals (e.g. WHMIS 2015, Confined Space Entry, TDG, tasks | |
| | | specialized to the employer, using specialized tools and equipment, etc.). | /0-5 |

5. Qualifications, Orientations and Training

Employers and employees require training to ensure they can do their jobs safely. Audits need to measure whether employers and employees (if applicable) are trained to perform their assigned tasks.

| | Questions | Guidelines | Auditor/CP Assessed Score |
|-------|--|--|---------------------------------|
| | | Due to the nature of some tasks, a practical demonstration may not be suitable. However, there are tasks that require job-specific or specialized training to ensure the trainee can competently complete the task (e.g. tasks associated with forklifts, ladders, hand tools, pallet wrappers, etc.). | |
| | | If this is an owner/operator, or if job specific training was not required in the previous 12 months, this question is marked not applicable (n/a) . Provide justification. | |
| Notes | : | | |
| 5.5 | Are competency assessments completed when operational changes require them? (D) | Provide documentation around completion of competency assessments when operational changes require them (which can include adding new or re-assigning workers). | |
| | | This question can be marked not applicable (n/a) if it is an owner/operator, or if competency assessments have not been required in the previous 12 months. | /5 |
| Notes | : | | |
| 5.6 | Is refresher training completed at set intervals or when | Attach the organization's training schedule and supporting documentation. | |
| | operational changes require it? (D) | If refresher training was not required in the previous 12 months, verify through review of the schedule and provide justification in the notes. | |
| | | Refresher training frequency must meet the training schedule and/or occur when operational changes take place. | /0-5 |

5. Qualifications, Orientations and Training

Employers and employees require training to ensure they can do their jobs safely. Audits need to measure whether employers and employees (if applicable) are trained to perform their assigned tasks.

| | Questions | Guidelines | Auditor/CP Assessed Score |
|-------|-----------|--|---------------------------------|
| | | Some certifications (e.g. First Aid, trade certificates, etc.) also have requirements for re-training/refresher training on a set schedule. Employers must document any refresher training requirements, and ensure schedules are met. | |
| | | Owner/operator are allowed to answer with a validation note and are not required to supply documentation. | |
| Notes | <u> </u> | | |
| | | TOTAL POINTS POSSIBLE: | /40 |

6. Other Parties at or in the Vicinity of the Worksite

When an employer is contracting out work to other employers, the employer must ensure these parties have been included in the OHS management system.

Employers must also ensure the health and safety of persons in the vicinity of their work site, including but not limited to ensuring that visitors understand their health and safety responsibilities while on-site.

| rocess in place to address the protection of others | | Score |
|--|---|-------|
| nder the employer's direction? (D) | Attach the process that demonstrates the protection of other workers, visitors and other persons not under the employer's direction, but in the vicinity of the work site. This question cannot be marked not applicable (n/a) . | /5 |
| | | |
| ere a process to ensure hazards and controls are nunicated to external work site parties? (D) | Attach supporting documentation (e.g. emails, meeting minutes, orientation, contracts, etc.). This process is related to both those conducting activities at the employer work site(s) or receiving products/materials. External work site parties include: contracting employer, suppliers, service providers, prime contractor, temporary staffing agencies, and other employers. | /5 |
| | | |

6. Other Parties at or in the Vicinity of the Worksite

When an employer is contracting out work to other employers, the employer must ensure these parties have been included in the OHS management system.

Employers must also ensure the health and safety of persons in the vicinity of their work site, including but not limited to ensuring that visitors understand their health and safety responsibilities while on-site.

| | Questions | Guidelines | Auditor/CP Assessed Score |
|-------|---|---|---------------------------------|
| 6.3 | Is a system in place for selecting other employers? (D) | Attach supporting documentation. | |
| | | A system must be in place and identify health and safety criteria to evaluate and select other employers for hiring purposes. | |
| | | If the employer does not use other employers , this question is marked not applicable (n/a) . Provide justification. | |
| | | | /10 |
| Notes | • | | |
| | | | |
| | Is a system in place to regularly monitor other employers? (D) | Attach supporting documentation. The system must identify how other employers' health and safety performance is regularly monitored. | |
| 6.4 | Is a system in place to regularly monitor other | | |

6. Other Parties at or in the Vicinity of the Worksite

When an employer is contracting out work to other employers, the employer must ensure these parties have been included in the OHS management system.

Employers must also ensure the health and safety of persons in the vicinity of their work site, including but not limited to ensuring that visitors understand their health and safety responsibilities while on-site.

| Questions | Guidelines | Asse | tor/CP essed core |
|-----------|------------------|--------|-------------------------|
| | Total Points Pos | SIBLE: | /25 |

7. Ongoing Inspections

The formal inspection process can proactively identify new potential hazards, as well as confirm the effectiveness of controls already in place.

| | Questions | Guidelines | Auditor/CP Assessed Score |
|--------|---|---|---------------------------------|
| 7.1 | Does the employer have an inspection process in place? | Attach documentation. | |
| | | The process must include responsibilities and stated frequencies for inspections to be completed. | |
| | | | /5 |
| Notes: | | | |
| 7.2 | Is a checklist/form used to conduct formal inspections? | Attach a copy of the inspection checklist/form in use. | |
| | (D) | The checklist/form must include | |
| | | Location of inspection (e.g. office, shop, yard, etc.). | |
| | | Frequency of inspections (e.g. weekly, monthly, yearly, etc.). | ,_ |
| Notes: | <u> </u> | | /5 |
| 110000 | | | |
| 7.3 | Are formal inspections completed as required? (D) | Attach inspection records from the previous 12 months. | |
| | | If no points are awarded in 7.1, then 0 points are awarded for this question. | |
| | | | /0-10 |
| Notes: | | | |

7. Ongoing Inspections

| | Questions | Guidelines | Auditor/CP Assessed Score |
|-----|---|---|---------------------------------|
| 7.4 | Are corrective actions implemented for identified deficiencies? (D) | Attach a representative sample of documentation that supports implementation of corrective actions. (e.g. work orders, purchase orders, e-mails, memos, meeting minutes, etc.). If no deficiencies were found in the previous 12 months, this question can be marked not applicable (N/A). Provide a justification note. | |
| | | | /0-10 |
| | S: | | |
| | | Attach supporting documentation. | |
| | Is there a system in place that employees can use to report existing or new hazards? (D) | Attach supporting documentation. This question can be marked as not applicable (n/a) if Owner/operator. Provide justification. | // |
| 7.5 | Is there a system in place that employees can use to report existing or new hazards? (D) | This question can be marked as not applicable (n/a) if Owner/operator. Provide | /! |
| | Is there a system in place that employees can use to report existing or new hazards? (D) | This question can be marked as not applicable (n/a) if Owner/operator. Provide | / |

8. Emergency Response

An emergency response plan helps ensure appropriate and efficient actions will take place in the event of an emergency or disaster.

| | Questions | Guidelines | Auditor/CP Assessed Score |
|-------|--|--|---------------------------------|
| 8.1 | Are there written emergency response plans developed for potential emergencies applicable to the operation? (D) | Attach the emergency response plans. Emergency response plans must be specific to the employer operations. (e.g. fire, severe weather, medical emergencies, violence, etc.). | |
| | | | /0-10 |
| Notes | : | | |
| 8.2 | Does the employer have a communication system in place for emergencies? (D) | Attach the emergency response plans and/or procedures. An employer must have a communication system in place for use when there is an emergency. The system may include alarms, procedures for contacting both internal and external emergency contacts, emergency phone numbers more than "911",etc. | /5 |
| Notes | ! : | | , |
| 8.3 | Does first aid equipment, supplies, number of first aiders, and facilities meet legislated requirements applicable to the employer's operation? (D) | Attach supporting documentation. Owner/operator are allowed to answer with a validation note and are not required to supply documentation. | |
| Notes | : | | /10 |
| | | | |

8. Emergency Response

An emergency response plan helps ensure appropriate and efficient actions will take place in the event of an emergency or disaster.

| | Questions | Guidelines | Auditor/CP Assessed Score |
|-------|---|---|---------------------------------|
| | | | |
| 8.4 | Are employees trained on their responsibilities under the ERP? (D) | Attach supporting documentation that verifies training has taken place. | |
| | | This question can be marked as not applicable (n/a) if owner/operator. Provide justification. | |
| | | | /0-5 |
| Notes | S: | | |
| | | | |
| 8.5 | Are planned emergency response drills/testing | Attach ERP drills/testing conducted in the previous 12 months. | |
| | conducted at least annually? (D) | Drills applicable to the operation are required at least once every 12 months to measure the plans effectiveness. | |
| | | An emergency response drill could include a practice drill or tabletop exercise. (e.g. evacuation, lockdown, shelter in place, etc.). | |
| | | Emergency response drills can be conducted in conjunction with other employers as appropriate. | |
| | | A drill type may cover multiple emergency response plans. For example, an evacuation drill might address multiple scenarios including a fire, hazardous material release, bomb threat, etc. | |
| | | Actual emergency responses cannot be used to score this question. This question is not applicable (n/a) if owner/operator. | |
| | | | /5 |

8. Emergency Response

| | Questions | te and efficient actions will take place in the event of an emergency or disa Guidelines | Auditor/CP Assessed Score |
|-------|---|--|---------------------------------|
| Notes | 3: | | |
| 8.6 | Are the emergency response plan(s) revised when | Attach supporting documentation. | |
| | drills/actual emergencies identify deficiencies? (D) | If an actual emergency response has not occurred and deficiencies have not been identified through a drill in the previous 12 months, or the employer is an Owner/Operator this question can be marked as not applicable (n/a). Provide justification. | 45 |
| Notes | s: | | /5 |
| | | TOTAL POINTS POSSIBLE: | /40 |

9. Incident Investigation

Investigations determine the cause(s) of an incident, and the corrective action(s) required to prevent a recurrence.

| | Questions | Guidelines | Auditor/CP Assessed Score |
|-------|--|---|---------------------------------|
| 9.1 | Is there a process and/or procedure that requires the reporting of workplace incidents (including near miss), occupational illness and work refusals? (D) | Attach the incident reporting process and/or procedures. Incident reporting must include both internal and external reporting (e.g. OHS, WCB, etc.). | |
| | | | /0-10 |
| Notes | ; | | |
| 9.2 | Does the investigation process/procedure include: - Identification of factors that caused or contributed to the incident - Identify and implement corrective actions (D) | Attach the investigation process and/or procedure. The investigation process and/or procedure must include: • Identification of the factors that may have caused or contributed to the incident • Identification of corrective actions. | |
| | | Requirement to implement corrective actions. | /0-10 |
| Notes | : | | |
| 1 | | , | |
| 9.3 | Do employees participate in the investigation process? (D) | Attach completed incident investigations. Incident Investigations may be conducted in conjunction with other employers as appropriate. If no investigations have been completed in the previous 12 months, documentation showing how employees would participate can be provided. Provide justification. Participation must be more than the injured worker or witness. This question can be marked as not applicable (n/a) if owner/operator. Provide justification. | |

| 9 | . Incident Investigation | |
|--|--|---------------------------------|
| Investigations determine the cause(s) of an incident, an | d the corrective action(s) required to prevent a recurrence. | |
| Questions | Guidelines | Auditor/CP Assessed Score |
| Notes: | | |
| | | |
| | | |
| | TOTAL POINTS POSSIBLE: | /25 |

10. Program Administration

System administration provides an evaluation of the overall effectiveness of the occupational health and safety management system (OHSMS).

This element may be marked not applicable (n/a) for owner/operators that are completing their first audit OR have achieved 100% on their previous audit.

| Questions | | Guidelines | | |
|--|--|---|---------------------------------------|--|
| 10.1 Is two-way communication occurring between the employer and workers? (D) | | Attach supporting documentation. | | |
| | | Two-way communication can take place through meeting minutes, e-mails, bulletins, etc. | | |
| | | This question can be marked as not applicable (n/a) if owner/operator. Provide justification. | | |
| | | | /10 | |
| Notes: | : | | , | |
| Notes | : | | , , , , , , , , , , , , , , , , , , , | |
| Notes: | Was an action plan developed to address the deficiencies | Attach the action plan from the previous year. A plan format must include: | , , , , , , , , , , , , , , , , , , , | |
| | | A plan format must include: • measurable action items, | · | |
| | Was an action plan developed to address the deficiencies | A plan format must include: | | |
| | Was an action plan developed to address the deficiencies | A plan format must include: • measurable action items, • completion dates, and | | |

10. Program Administration

System administration provides an evaluation of the overall effectiveness of the occupational health and safety management system (OHSMS).

This element may be marked not applicable (n/a) for owner/operators that are completing their first audit OR have achieved 100% on their previous audit.

| Questions | | Guidelines | |
|-----------|--------------------------------------|---|--------|
| 10.3 | Was the action plan implemented? (D) | Attach the completed action plan from the previous year's evaluation. This question can be marked as not applicable (n/a) if this is the employer's first health and safety audit or got 100% on their previous audit. Provide justification. | |
| | | | / 0-10 |

Notes:

TOTAL POINTS POSSIBLE:

25

Partnerships Small Employer Action Plan

| Audit Date: | |
|-------------|--|
|-------------|--|

| IDENTIFIED DEFICIENCY | ACTION PROPOSED | PERSON (S) RESPONSIBLE | TARGET DATE | ACTION TAKEN | DATE COMPLETED |
|-----------------------|-----------------|---------------------------|----------------|--------------|-------------------|
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Use the above template to develop an action plan from the audit results. Deficiencies identified by the assessor, external auditor and/or the Certifying Partner reviewer should be itemized in this plan and completed before your next audit.

SUMMARY SCORE SHEET

*For use only by external auditors or CP reviewers *

| Employer Name: | Audit Dates: |
|----------------|--------------|
| . , | |
| Auditor Name: | |

| | Element Number | Total Points Possible | Points N/A | Total Points | Total Points Scored | Percentage |
|-----|--|-----------------------------|---------------|-----------------|------------------------|------------|
| 1. | Management Leadership and Organizational Commitment | 45 | | | | |
| 2. | Hazard Identification and Assessment | 60 | | | | |
| 3. | Hazard Control | 45 | | | | |
| 4. | Health and Safety Representatives (HS representatives) | 35 | | | | |
| 5. | Qualifications, Orientation and Training | 40 | | | | |
| 6. | Other Parties at or in the Vicinity of the Worksite | 25 | | | | |
| 7. | Ongoing Inspections | 35 | | | | |
| 8. | Emergency Response | 40 | | | | |
| 9. | Incident Investigation | 25 | | | | |
| 10. | Program Administration | 25 | | | | |
| | Total Audit Points | 375 | | | | |