

# Safety Auditor



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA



## **Acknowledgements**

The Construction Safety Association of Manitoba (CSAM) extends its sincere appreciation to the fellow Canadian Federation of Construction Safety Associations (CFCSA) members who graciously provided resources, information, and expertise for the preparation of this program.

### **Construction Safety Association of Manitoba**

The Construction Safety Association of Manitoba is a non-profit organization run by and for the building construction industry in Manitoba, with governance provided by the Winnipeg Construction Association's Board of Directors and the CSAM Advisory Committee.

Established in 1989, CSAM has earned the reputation as a leader in the safety landscape of Manitoba, as well as within the CFCSA. This reputation continues to be fueled by the association's focus on providing exceptional customer service, quality, and value for its clients.

CSAM's prime objective through this course is to provide quality advice to construction employers and employees, to reduce both human and financial costs in the construction industry.

### **Disclaimer**

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# **Safety Auditor**

## **Introduction**

The Construction Safety Association of Manitoba (CSAM) has prepared the Safety Auditor course to assist Manitoba's building construction industry in measuring the effectiveness of their safety management systems. This course is designed to be used by company staff members and/or other individuals authorized by CSAM.

The Safety Auditor course will explain the reasons for auditing, the steps involved, and some of the basic techniques that good auditors use. Remember that auditing is a management tool. It is used to improve the effectiveness and efficiency of both operations and safety. Audits provide an accurate picture of the safety and health of the organization so management can make plans to improve or adapt to the situation. If you aren't objective and/or try to make things look better or worse than they actually are, the audit process and results won't be useful.

## **Eligible Employers**

All employers entitled to use the audit system must have an active Workers Compensation Board (WCB) of Manitoba account within the sectors serviced by CSAM; OR must be CSAM associate members in good standing. To obtain a Certificate of Recognition (COR®) or Small Employer Certificate of Recognition (SECOR®), each WCB account (firm number) held by an employer must independently achieve its own COR®/SECOR® Certification.

## **COR®/SECOR® Certification Auditing Process**

All companies must conduct a self-audit to provide an assessment of the current state of their safety management system and to identify specific areas where opportunities for improvements to the system can be made. COR®/SECOR® Certification is valid for three years providing a company maintains their eligibility, the training elements are maintained, and auditing standards are upheld.

**Year 1** – The company must submit a complete and successful company self-audit. In addition, the company must pass an internal audit by CSAM and an independent audit. The independent audit must be conducted by credited safety personnel whose credentials are approved by CSAM, but who are completely out of scope for the CSAM program. Upon successful completion of the final independent audit, a COR® certificate is issued to the company. CSAM will also notify the Workers Compensation Board of Manitoba (WCB) of your achievement of COR® Certification and your eligibility to receive the WCB Prevention Rebate (15 per cent of your assessment premium).

**Year 2 and 3** – Prior to the first day of your anniversary month of the company COR® Certification, the company must submit a successful company self-audit. A CSAM verification review will then be completed. Upon successful completion of the verification review, a Letter of Good Standing will be issued. Supporting documentation for maintenance year audits is no longer required if the audit is completed by a registered auditor.

All audit results must be approved by CSAM.

**Year 4** – The COR® Certification process starts over again. This would include a self-audit with supporting documentation, an internal review conducted by CSAM, and an audit conducted by a CSAM-appointed independent auditor.

## Pre-Requisites for Audits

Before the audit may proceed, the employer must meet the following requirements:

- Maintain at least one full-time employee with the required training:
  - **COR®**
    - Principles of Safety Management
    - Safety Auditor
    - Leadership for Safety Excellence
    - Hazard Identification and Risk Control
  - **SECOR®**
    - Principles of Safety Management
    - Safety Auditor
    - Hazard Identification and Risk Control
- Implement/establish a safety and health program that contains all 15 sections as outlined by CSAM and the COR®/SECOR® management system.

Before the independent audit may proceed, the employer must pass a self audit conducted by the company and also an internal audit conducted by CSAM

**(Each section must achieve a minimum of 50 per cent with an overall minimum score of 80 per cent.)**

### **SAFETY AUDIT DEFINITION:**

**Your Construction Safety Association of Manitoba defines an audit as:  
“VERIFYING SAFETY AND HEALTH PERFORMANCE AGAINST A GIVEN STANDARD”**

## **Steps to Achieving and Maintaining Registered Auditor Status**

The following items are required for achieving registered auditor status:

**1) Course requirements**

Individuals who apply for registered auditor status must complete the Principles of Safety Management course as well as the Safety Auditor course offered through CSAM.

The Principles of Safety Management course provides the individual with the tools and training necessary to understand what is involved in creating a COR®/SECOR® safety and health program and manual. This information is critical for an auditor to understand as they will be the one reviewing a company's safety and health management system, providing audit results, and making recommendations on how to improve the company's program. (Equivalent training through other members of the Canadian Federation of Construction Safety Associations will be given credit).

The Safety Auditor course can only be taken by an individual after Principles of Safety Management has been completed. The Safety Auditor course will provide individuals with the necessary skills to audit a company's safety and health management system using COR®/SECOR® standards outlined in the audit instrument.

**2) Audit instrument**

The completion of an audit helps to confirm that the individual has a firm understanding of the audit process as well as experience in the practical application of performing an audit. This will be identified through the use and completion of the audit instrument.

**3) Audit submission**

When submitting a completed audit instrument and required supporting documentation, it must be organized and submitted in the proper format. NOTE: A safety auditor toolkit is available to assist in proper submission and organization of required documentation. Companies also have the option to submit audits online, via the online audit tool.

**4) Corrective action plan**

A corrective action plan must be submitted outlining the company's opportunities for improvement, including remedial action to be conducted. The written plan summarizes the company's safety and health program as compared to the COR®/SECOR® audit standards. Areas which may require improvement or modification will be included in this plan complete with recommended steps on how to achieve them.

**5) Application**

Once the above items are completed and can be verified, the individual will complete the application to become a registered auditor. This application can be provided at the same time as the submission of the company's self-audit.

A CSAM registered auditor certificate with a three-year expiry date will be issued upon the successful evaluation and approval. Registered auditors must submit one self-audit every three years to maintain their status.

The following items are required for maintaining registered auditor status:

Certification audits submitted by a registered auditor require adherence to the standards as outlined by CSAM and the audit instrument. Audits submitted by a registered auditor that do not comply with the standards will result in any of the following at the discretion of the CSAM Executive Director:

- 1) The registered auditor will be given a reasonable time frame (not exceeding one week) to attain the minimum standards found lacking and resubmit.
- 2) A registered auditor will be subject to a two month suspension of the registered auditor status if more than one audit is returned for corrective action.
- 3) A registered auditor status will be revoked for a minimum period of one year if a registered auditor has previously received a two month suspension and another audit is submitted which does not meet the audit minimum standards.

**See Appendix A for registered auditor submission requirements and registration form.**

The registered auditor application can be found online at [constructionsafety.ca](http://constructionsafety.ca)

## **The Five W's Within the Audit Process**

### **What**

An audit is an evaluation method to identify successes and deficiencies. A safety audit is the examination of a company's safety and health management system to collect information in order to effectively identify opportunities for improvement to the program or system as a whole.

The CSAM safety audit, commonly referred to as a COR® audit, is an audit system that meets a national standard. COR® is recognized across Canada, and each province or territory makes specific additions to comply with their legal requirements, typically found in the Supplement section, Section 15. SECOR® audits use the same template, but a smaller evaluation system that is tailored to small employers. SECOR® is provincially recognized only.

### **Why**

An audit is used to improve the effectiveness and efficiency of your safety and health management system, including the written program and overall operations. The success of a company can generally be measured in profits and growth by measuring assets and a company bottom line. Safety, however, takes a deliberate effort to determine success.

Safety audits provide an accurate picture of the safety and health of your company, showing the effective aspects as well as areas which may need improvement. A safety audit is an examination of a company's safety and health performance in an effort to:

- Determine a company's eligibility for COR® or SECOR® Certification.
- Identify opportunities for improvement regarding the safety and health performance of a company's program.

### **When**

For a company's very first audit to apply for COR® or SECOR® Certification, it is at the company's discretion as to when an audit takes place, however there are some submission requirements and recommendations to ensure the audit is being performed at an appropriate time of the year for the company.

#### **Things to consider prior to submitting your first self audit:**

- 1) Is at least 50 per cent of the company workforce going to be working at that time of year?
- 2) Is it your "peak season" or is it your "slow season"?
- 4) Do you do seasonal work?
- 5) Will it fall on your year-end reporting period?
- 6) When is the best time of year to perform an audit for YOUR company so you can ensure appropriate time is available?

Audit guidelines state that, at minimum, a company must have at least 50 per cent of their workforce working, and have sites available for visits in order for CSAM to accept and process the audit for Certification. If the time of year in which you are submitting your audit will not conform with one or both of these requirements, the audit would not be eligible for submission to CSAM.

It is understandable that a company may want to perform an audit during their slow season but, submitting during this time may present challenges for completing the audit every year moving forward. CSAM recommends that a company submit their audit at the beginning of or during their busier season. This ensures worksites are available for observation as well as workers for interviews.

If a company chooses to perform an audit close to the end of their slow season and submit it as work is starting to pick up, this will help ensure the audit can be performed and completed on time without worry that Certification will lapse due to not being able to meet submission standards.

### **When to submit an audit once a company has become COR®/SECOR® Certified**

The month in which a company achieves COR®/SECOR® Certification will be deemed their audit “anniversary month.” In order for a company to maintain Certification, an audit is due from that company every year by the first of the month in which they were officially certified.

**For example:** If a company achieved COR® Certification on April 15, 2018, then they will be required to submit their next annual self-audit on or before April 1, 2019 and each subsequent year thereafter in order to maintain Certification.

A company’s anniversary month **CANNOT BE CHANGED**, therefore it is important to ensure that the time of year in which the first audit is submitted for a company is a consistent and appropriate time period to ensure submission standards are met and that the audit can be completed on time.

CSAM understands that work flow is not consistent and for this reason, a certified company is permitted to submit their audit up to four months in advance of their anniversary month to ensure there are sites available and workers working.

## **Where**

Audits should be conducted at all areas of operation where the company is involved with work, including:

- Jobsites
- Offices
- Shops
- Storage areas
- Vehicles (primarily for delivery companies)
- Anywhere workers are performing work for the company

You do not have to do a separate audit on every jobsite that you have going. You are conducting an audit on the safety management system of the company and how it is functioning which will include multiple site locations. A sampling of the jobsites should be enough for you to get a good idea of what is actually going on. For the purposes of majority rules and making your summary of results easier, visit an odd number of sites to get a clear majority for each requirement evaluated. The more areas involved in the audit process, the more accurate the results will be. At minimum, if the company only has three or less sites running at the time of the audit, all sites should be visited.

## Who

The people involved in the audit process are critical to ensuring that the company's safety and health program is effective, efficient, and an integral part of the company's day-to-day business.

This may include but not be limited to the following people:

- **Internally:**
  - Owners
  - Employers
  - Management
  - Supervisors
  - Workers
  - Worker safety representatives
  - Safety committee members
  - Sub-contractors
- **Externally:**
  - Construction Safety Association of Manitoba
  - Other qualified persons (i.e.: independent auditor)

The person conducting the audit must have the required training to properly perform an audit. This can be someone employed by the company to be audited or a hired auditor. In either case, they must be trained through CSAM or an affiliate association. It is strongly recommended that a company completes the audit itself annually rather than hire external personnel. A company that audits itself will have a better understanding of the process and will be more successful in developing and implementing corrective actions identified through the audit process.

## How to Perform an Audit

Auditors are given training, resources, and materials which they will apply during the audit process. The audit instrument and guidelines provide the questions pertaining to the audit. Details on what to look for; examples of what type of documentation, training, or observations would allow for points to be awarded; and interview questionnaires for different levels of the organization are all outlined in the audit instrument and guidelines.

The three techniques used during the audit are:

- 1) Documentation
- 2) Observation
- 3) Interview

These techniques will be discussed in detail later in this workbook. These three techniques will assess and verify that what is being written (documentation), is being followed (observation) and understood (interview).

## Activities Involved in the Audit Process

There are three major activities in the audit process. Each activity has several steps:

- 1. Audit preparation**
  - Inform participants
  - Locate necessary information
  - Gather tools
- 2. Performing the audit**
  - Safety and health program pre-audit review
  - Detailed audit
    - Documentation review
    - Site observation
    - Interviews
- 3. Reporting the results**
  - Summarizing results
  - Analyzing results
    - Scoring the audit
    - Executive summary report
  - Corrective action plan
  - Close out meeting

## **Audit Preparation**

Preparation for an audit is an important step in being organized and having the correct information/materials to conduct and record an audit efficiently. Preparedness will eliminate any time that otherwise would have been wasted by searching for or acquiring knowledge and information after the fact.

### **Inform Participants**

The first thing you will want to do is inform all persons who will be participating in the audit. Inform the company, organization, and/or site personnel to be audited that an audit is about to take place. This may be done by e-mail, telephone, or in-person. Make sure people understand the principles involved in the audit process so there are no surprises or misunderstandings.

Here are some examples of what effective auditors include during the initial contact with the company and the people involved:

- 1) The date or dates of the audit
- 2) The purpose of the audit
- 3) Who will be involved
- 4) The types of activities that will occur
- 5) How results will be communicated

Informing a company of this information typically happens in-person for auditors auditing the company they work for. Where you are auditing a company you do not work for, arranging a meeting over the phone or through email is acceptable.

The reason for informing participants of what to expect is so that there are no surprises for both the auditor and the company. The goal of an audit is not to “catch” anyone doing something wrong or unsafe. We want to encourage open communication and starting the audit with transparent dialogue is a great way to do that.

### **The Date(s) of the Audit**

Letting people know which day(s) you are planning to conduct office, shop, and site visits and to perform observations and interviews will ensure that the people involved in the audit process are aware of when to expect you. This helps to ensure that employees are going to be working at the locations indicated. It also prevents the auditor from disrupting time sensitive work. Giving people the opportunity to organize and prepare for the audit will help to alleviate undue stress and anxiety. The auditor should ask for the company’s site supervisor’s name(s) and contact information for each site and contact them directly to schedule site visits.

Be sure to call the supervisor or company representative in advance of when you would like to visit to make scheduling arrangements. In addition to the initial contact, it is also a good idea to call the day before, or the day of the visit, in case there has been an unforeseen change.

When arranging site visits with supervisors, use this opportunity to ask for relevant information. For example, ask if there are any training or PPE requirements before entering site, where to go once you are on site, or any other important information that may be necessary for your safety and the safety of others.

## The Purpose of the Audit

People tend to get nervous or worried when they hear the term “audit,” as it has developed a negative stigma in a variety of circumstances. In this context, the audit process is simply a tool used for the development, recognition, evaluation, and confirmation of a company’s safety and health management system. Therefore, the objectives of the Certification program and the audit process are to provide industry employers with an effective safety and health management system to reduce incidents and injuries as well as their associated human and financial costs.

This is a much more precise and effective way to present the purpose of an audit. If people involved in the audit process are made aware that the audit is used for their benefit and not simply a “pass or fail” system, it will allow them to focus on how effective their safety and health system is functioning and give them the opportunity to recognize areas which may need further attention.

## Who will be Involved

**As indicated earlier, the (internal) persons involved in the audit process should include:**

- Owners
- Employers
- Management
- Supervisors
- Workers
- Worker safety representatives
- Workplace safety committee members
- Sub-contractors

When talking to the company representative and/or site supervisor, you should get a good sense of how many people are on location and who should be included during the audit interviews. Interview questionnaires include management/supervisors, employees, safety committee/worker representatives, and sub-contractors. It is important to note that you want to get a good representation of what people actually know and understand about their safety program, as well as what areas they may be unclear of.

## The Types of Activities that will Occur

Let people know that there are three main techniques which are focused on during the audit. These techniques will be covered in great detail during step two of Performing the Audit.

### 1) Documentation

When you explain which types of documentation you as an auditor will be looking for, this gives the company time to organize and prepare them for your review. This can save time during the audit, as opposed to taking the time to look for them when the auditor arrives.

### 2) Observation

If you let the company know ahead of time as to what you will be looking at during the observation process, this will assist in preparing for a walk-through. This gives the auditor the opportunity to see how the company’s worksites and/or areas are maintained. The auditor will be looking at certain activities to verify they are in compliance with the Workplace Safety and Health (WSH) Regulation and company policy.

### **3) Interview**

Interviews can be an intimidating process for those who do not fully understand the concept. Put the workers at ease and assure them that interviews are confidential and you are simply trying to get an accurate reading of what people understand about their company safety and health program. Explain that your intent is to gather information, share it with the company, and work towards everyone having a genuine understanding of their safety and health program, including their involvement in it. You should repeat this to people you are interviewing before you interview them.

Letting those involved know in advance about these three techniques will help people prepare for the auditor and allow for an accurate representation of the work sites daily activities so information can be communicated effectively.

### **How Results will be Communicated**

In addition to informing participants of the activities involved prior to starting the audit process, you should indicate that at the end of the audit, a summary of the results and corrective action recommendations will be available for review, at which time the results can be discussed and recommendations can be offered.

It is important for upper management to know what to expect before, during, and after the audit is completed. Let them know that a meeting will be requested once the auditor has completed the audit fully. Should they have any questions before then, they can contact the auditor at any time.

The way in which results are summarized, scored, and recorded is covered in step two of Performing the Audit. A close out meeting will be held between the company and the auditor to discuss results and review opportunities for improvement moving forward.

## Locate Necessary Information

Gather as much background information as possible about the organization or areas involved that will be audited. An auditor who understands the people, processes, and projects involved in a company's work activities will have the ability to accurately identify how supportive the company's safety and health program is for the work they perform.

### Key Information to Identify:

- **The company safety manual** – the company safety manual will contain details specific to the company's procedures, policies, safety rules, PPE requirements, and work activities that will assist in recognizing what you as an auditor should be looking for during the audit. A copy of the manual will make up the basis of the documentation review when performing the audit. Have the company provide you with a copy of this manual.
- **An organizational chart** – reviewing a company's organizational chart helps the auditor to identify each individual's role and responsibilities within the company. Having a detailed organizational chart will help the auditor when reviewing the company's documentation, names, signatures, and initials to verify who is involved in which safety and health activities. Ask the company for a copy of their chart. If they don't have one, ask that they make one. An example of one can be found later on in this workbook.
- **Previous records regarding the safety and health program** – review audit/inspection reports that may be available or the previous audit corrective action plan (if applicable). Reviewing these reports helps the auditor to observe whether or not corrective actions have been completed for the items indicated as concerns. Inspection reports should also indicate areas which require attention. This allows the auditor to take note of these concerns during the audit process and identify how the safety management system is operating.
- **A description of the organization, area, or type of work performed** – it is always beneficial to give a company the opportunity to supply any additional details or information they feel would assist your understanding of their organization. This allows the company to see that they can communicate and be involved in the audit process and it builds a positive relationship between the company and the auditor. This information should be collected during the pre-audit meeting, or when the auditor is contacting supervisors for site information.
- **The number of projects that are currently underway** – it is always good practice to ask a company for ALL of their current worksites and the general activities on each one. This information may help the auditor decide which sites would be the best to visit in order to ensure an accurate assessment of the company's safety and health program relative to their activities.

**NOTE:** A description of the organization, area, or type of work; the number of projects currently underway; and other information specific to the company will be requested in the audit instrument.

During the audit process, documentation that has been generated within the past 12 months will be requested and will contribute to the evaluation of the company's current safety and health performance. This will be the norm moving forward for every subsequent audit that is conducted.

## Gather Tools

There are a number of tools that are available to you as an auditor to assist you in performing the audit. There will also be some items that may be required due to the nature of work, environment, or type of company that you will be auditing. The list below identifies tools, equipment, documents, and checklists you will want to have with you when performing the audit.

### **Gather together the tools you will need:**

- Appropriate personal protective equipment (PPE)
- Clip board, note paper, pens, or pencils
- Any existing standards and policies applicable to the work
- Copies of the current WSH Act and Regulation and other appropriate industry standards
- The audit instrument
- Observational checklist(s)
- Interview questionnaires (make sure to bring enough copies of each)
  - Management/supervisor
  - Worker safety representative/safety committee member
  - Employee
  - Sub-contractor

It is also important to note that, given the type of hazards you may be exposed to during the audit, you may need special training before entering site. This can be as simple as a site orientation provided by the person/company responsible for the site or formal inclass training, although the latter is uncommon.

The COR®/SECOR® audit instrument, observational checklist, and interview questionnaires can all be downloaded directly from [constructionsafety.ca](http://constructionsafety.ca).

The audit instrument, observational checklist, and interview questionnaires will be reviewed in detail further on in this workbook. These documents are designed to work together and alleviate the stresses and confusion when performing an audit.

## **Performing the Audit**

**The audit itself has three steps:**

- 1) Pre-Audit Review
- 2) Detailed Audit
- 3) Reporting the Results

### **Step One: Pre-Audit Review**

The pre-audit review is an initial review of the company's safety and health manual/program documentation. This part of the audit does not look at the quality of the safety program. It simply identifies if the various parts of the safety manual/program exist in a form that matches the required sections within the COR®/SECOR® audit instrument.

There are 15 sections within the COR®/SECOR® audit which verify if the company's safety and health manual contains the required material. The pre-audit review can be found in the audit instrument on the safety and health manual verification page. Whether the listed sections are available can be answered with a simple yes or no.

Some of the items required for the verification portion of the audit may exist in different forms. They may not be contained in a corporate policy manual as such. As well, more than one of the areas may be contained in a single document. Regardless of location, seek out the information and organize it as if it were all in one corporate manual or handbook.

If you can locate all 15 sections of information identified on the safety and health manual verification page, proceed to complete the detailed audit in step two. If certain sections of the basic safety program do not exist in any form, you may decide to stop the audit and encourage the development of them before proceeding.

However, if you decide to proceed with the audit even though some of the sections are missing from the safety and health program, some sections will be incomplete or may have to be scored as zero. This should be indicated in your results and recommendations so that corrective actions can be developed and put into place by the company.

### **NOTE:**

**A COMPANY CANNOT PASS AN AUDIT IF ONE OR MORE OF THE 15 SECTIONS ARE MISSING.**

Lastly, verification of the COR®/SECOR® compulsory courses must be confirmed and documented at the bottom of the safety and health manual verification page. The information provided includes the participant's name and the date at which the courses were completed.

An employer must maintain at least one full-time employee with the required training. The mandatory courses are as follows:

#### COR® Certification

- 1) Principles of Safety Management
- 2) Safety Auditor
- 3) Leadership for Safety Excellence
- 4) Hazard Identification and Risk Control

#### SECOR® Certification

- 1) Principles of Safety Management
- 2) Safety Auditor
- 3) Hazard Identification and Risk Control

#### MISSING SECTIONS

If any of the listed sections are missing from the safety and health program, both parties (organization/company and auditor) may want to consider postponing the audit at this stage until corrective action can be completed.

#### POLICY STATEMENTS

Some of the listed program sections may exist in another form within the safety and health program. Some companies may combine policies, which is an acceptable industry practice. The auditor must take this into consideration when reviewing the safety and health program.

#### MANITOBA SUPPLEMENT

This is required to achieve COR® and SECOR® Certification for Manitoba-based companies and for out-of-province companies (no base office in Manitoba) who wish to achieve COR® Equivalency.



#### SAFETY AND HEALTH PROGRAM VERIFICATION

Does the company's safety and health program contain the following?	YES	NO
1. Safety and Health Policy		
2. Hazard Assessment, Analysis, and Control		
3. Safe Work Practices		
4. Safe Job Procedures		
5. Company Safety Rules		
6. Personal Protective Equipment (PPE)		
7. Preventative Maintenance Program		
8. Training and Communication		
9. Inspections		
10. Investigations and Reporting		
11. Emergency Preparedness		
12. Statistics, Records, and Document Control		
13. Legislation		
14. Procurement and Contractor Management		
15. Manitoba Supplement		

Verification of Compulsory COR® Training	Participant and Completion Date	Verification of Compulsory SECOR® Training	Participant and Completion Date
Principles of Safety Management (PSM)		Principles of Safety Management (PSM)	
Safety Auditor		Safety Auditor	
Hazard Identification and Risk Control		Hazard Identification and Risk Control	
Leadership for Safety Excellence (LSE)			



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.



## Step Two: Detailed Audit

Performing the audit means using the audit instrument and associated checklists and forms. In this step, we will look at the following in detail:

- Audit instrument section pages
  - Layout and guidelines
- Verification techniques and how to apply them
  - Documentation
  - Observation
  - Interview

(Each section of the audit instrument represents an individual section from 1 – 15)

The detailed audit has 14 major sections and one provincial supplement section that are numbered 1 to 15. Each section reviews one major topic in a complete safety program. Section 15 - Manitoba Supplement must be completed by Manitoba-based companies and those from out of province who are requesting COR® equivalency. The provincial supplement (Section 15) assists companies in ensuring they meet their obligations as an employer working in Manitoba, including their legislative requirements as outlined in the Workplace Safety and Health Act and Regulation.

## Audit Instrument Section Pages

Turn to Section 1 of the audit instrument and follow along with the following information.

NOTE: This information holds true for every section page in the audit instrument.

### Section number and name

At the top of the table, you will see the section number and the title of the section. This corresponds with the audit manual verification page previously.

### Referencing numbers

Down the left-hand column, you will see a set of numbers. These are unique question identifiers.

These are important for many reasons but primarily for referencing documentation that will be used to verify requirements are or aren't being maintained during the actual audit. We will look at referencing documents and using these numbers later on.

### Audit question

The second column is the audit questions. These questions outline the requirement to be verified in a short, easily communicated sentence. Questions will be specific to the section they are in and related to the section by which it is asking about.

### Score weighting

Each question will be assigned a point value which is identified in this column. This will be used when assessing and scoring results later and will be a key indicator in determining the importance of each question.

### Verification techniques

Under “technique employed,” there are three columns: D, O, and I — documentation, observation, and interview. These columns identify the three verification techniques used to assess the safety and health program of the company being audited. The shaded and unshaded boxes will identify which techniques apply to which questions. If you connect the question row with the technique column, unshaded boxes will identify that the particular question requires a specific technique to be used for verification.

- As information is verified using these techniques, you will document the result in these boxes using ✓’s and ✕’s only. Information on using the verification techniques and documenting the results will be covered later on in this workbook.
- Also in these boxes, you will see “AND” and “OR” in some cases. This will identify where multiple techniques are required to be verified or are permitted to be used. During the audit we will be assessing each technique that applies individually. The application of the AND/OR questions will be relevant when scoring and will be discussed in this workbook at that time.
- When we summarize information into these boxes during the audit, only a ✓ or an ✕ can be placed in these boxes. Verifying these techniques is a yes or no response only based on the assessment of information collected through the audit. For this reason, numbers/points do not get placed in these columns.

### Points awarded

Once all techniques have been assessed and information has been gathered, this column is where the score for each question will be identified based on the analysis of the ✓’s and ✕’s under the verification techniques.

Each section will have two totals at the bottom of this column, one for COR® and one for SECOR® audits.

### Audit guidelines

On the back of the previous page from the section pages, you will see guidelines. These guidelines specifically relate to the questions found on the section pages and can be identified using the reference number for each question. The guidelines will go into detail on what the requirements are for each question; provide examples of what to look for; and where applicable, will outline how points are to be awarded for each question.

These guidelines are a crucial part in performing the audit and should be reviewed often to ensure that the audit evaluations are being performed appropriately according to the set standard.

## 1.0 Guidelines – Safety and Health Policy



- 1.1 The policy must state management's commitment to provide a safe and healthy work environment.
- 1.2 The policy must include a statement of the employer's commitment to work in a spirit of consultation and cooperation with their workers or clearly express the commitment to work jointly with their workforce in the development and implementation of their safety and health program.
- 1.3 The policy should include individual safety and health obligations and make reference to documented safety and health responsibilities of workplace parties (management, supervisors, workers, safety and health representatives, subcontractors, etc.). This information could be contained in a document separate from the company safety policy.
  - Award two (2) points for the written assignment of safety and health responsibilities.
  - Award two (2) points based on the majority of positive interview responses.
- 1.4 The policy must be signed by current senior management with a current date. *At minimum, not more than three (3) years past.*
- 1.5 During worksite observations, verify the safety and health policy has been posted. If no suitable means of posting is available, points can be awarded if the majority of interviews confirm it is made readily available to workers (in the form of a handbook, safety and health manual, or other accessible electronic format).
- 1.6 The majority of interview responses must confirm that all personnel understand the safety and health policy.



SAFETY AND HEALTH PROGRAM VERIFICATION		Score Weighting	Technique Employed			Points Awarded
1	Safety and Health Policy		D	O	I	
	<i>Senior management shall establish, implement, monitor, and maintain a documented occupational safety and health policy appropriate to the scale and nature of the organization's operations and activities, and associated risks. Does the employer have a written safety and health policy that:</i>					
1.1	Includes management's commitment to provide a safe and healthy work environment?	3				
1.2	Expresses a commitment to work in a spirit of consultation and cooperation with the workers?	3				
1.3	Addresses accountability and responsibility for safety and health for workplace parties?	4		AND		
1.4	Is signed by current senior management and appropriately dated?	2				
1.5	Is visibly posted in the workplace and/or made readily available to all workplace parties.	3		OR		
1.6	Is communicated to workplace parties?	3				
COR® total points possible/awarded		18				
SECOR® total points possible/awarded		15				

Highlighted questions are required for SECOR®. COR® requires **all** questions. The minimum standard is **50 per cent** of total possible points.



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.



## **COR® and SECOR® Auditing**

The same audit instrument is used for both COR® and SECOR® audits. At multiple points throughout the instrument, you will be asked to identify what type of audit you are performing.

If you are performing a COR® audit, all questions in every section will apply and must be assessed and a result determined. If you are performing a SECOR® audit, the same pages are used, however not all questions will apply. Down the left-hand column of each section, you will notice that some questions are highlighted yellow, and some are not. The questions that are NOT highlighted ARE NOT required for SECOR® certification and can be ignored.

### **ONLY QUESTIONS THAT ARE HIGHLIGHTED WILL BE REQUIRED FOR SECOR® AUDITS.**

Because of this, you will note that the final score in Section 1 (as well as other sections) for SECOR® is lower than COR® due to the fact that question 1.2 is not required for a SECOR® audit.

These rules will carry through the entire audit instrument and all the corresponding guides and checklists. COR® requires all questions (highlighted or not). SECOR® requires only the highlighted questions.

## **Using the Audit Instrument Section Pages and Guidelines**

The following examples explain how it works:

### **Question 1.4 asks: “Is signed by current senior management and appropriately dated?”**

The space under “O” and “I” are shaded, therefore documentation is the only method that can be used to determine compliance with this question. Through your collection and review of documentation, you will determine if there is adequate documentation that is in compliance with this question and document your findings by putting a ✓ or an × in the white box under the “D” column.

### **Question 1.5 asks: “Is visibly posted in the workplace and/or made readily available to all workplace parties.”**

This question requires either observation OR interviews to verify if the safety and health policy is physically posted or available on the site. During a tour of the work areas, you will identify compliance using an observational checklist for each site visited OR through interview questionnaires. The majority of responses for both would be identified here with a ✓ for positive, or an × for negative.

Evaluation and points are determined later. Regardless of AND/OR questions, each technique is to be evaluated separately. The combination of all the techniques and analysis of them will be done once all information has been collected and documented under the three technique columns.

### **Question 1.6 asks: “Is communicated to workplace parties?”**

This question requires an interview response for verification only. In this case, if your interviews confirm that the majority of company personnel knew the content of the policy, you would put a ✓ in the box under the “I” column. In order to determine what a correct answer should look like, you will need to be familiar with the policy and review the audit guidelines for this question to properly assess interview responses.

## **Applying the Three Techniques:**

**D – Documentation**

**O – Observation**

**I – Interview**

The order in which these techniques are listed is the most efficient way in which an auditor can perform an audit. Use the following approach to complete the detailed audit. It will help you do the audit quickly and easily.

Each technique will require the auditor to apply certain skills and evaluation criteria to properly evaluate the effectiveness of the safety and health management system. Below, we will separately identify how to use each technique; what record-keeping and submission requirements there are; and how to troubleshoot grey areas.

## Documentation Technique

### Purpose

One of the main reasons documentation is so important is because it is the only acceptable way for a company to demonstrate its **due diligence**. This is the only allowable defense to an employer if charged with an offence under the Workplace Safety and Health (WSH) Act. Due diligence means that you did everything reasonably practicable to ensure the safety and health of your workers and can confirm it through documentation.

The WSH Act is NOT the same as the criminal code, which you may or may not be familiar with. Our justice system works on the basis that you are innocent until proven guilty. The WSH Act is the exact opposite — you are presumed guilty until you can prove your innocence. In law, the term for this is called “reverse onus.”

Along with the legal side of documentation, it also serves as a written plan and record of executing that plan. We see this everywhere: a receipt from a purchase is record and agreement that you provided money in exchange for goods and services. You may own those goods or use that service, but it is the receipt that counts as (long term) proof, far after the fact. The same is true for a safety and health program: documentation serves as record of the plan and whether or not the plan was followed.

### Selecting Documentation

When selecting documentation for the audit, it is the auditor’s responsibility to locate documentation that best represents the company’s current activities regarding safety and health. The audit questions will identify what information is required and the audit guidelines related to each question will outline examples of documents and give a further explanation of how documents are to be evaluated.

An audit is a snapshot in time. It is not intended to collect all information that has been documented and evaluate it. The audit is looking for enough information to make an informed evaluation and conclusion on the current state of the safety and health system and how it’s performing.

**IMPORTANT:** Photocopies of originals should be made and provided in the audit. Original documents are a part of company record and necessary for due diligence. **DO NOT** provide originals within the audit submission. When an audit is submitted to CSAM for Certification, it becomes part of CSAM’s records and will not be returned to the company!

#### **When selecting documentation for the audit, keep the following in mind:**

- Only a handful of copies will be necessary for each requirement.
  - Providing too much documentation can cloud the assessment.
- Documents must be from the last 12 months.
  - Audits are on an annual cycle and therefore new documents from the last 12 months (i.e. June to June) must be provided every year to demonstrate continued adherence to the standards.

Although each section of the audit is based on a section or theme of information, it will be necessary to provide some of the same documents in multiple sections of the audit. For example, a new hire orientation will be most needed in Section 8 – Training and Communication, but it can also effectively demonstrate requirements in Sections 6 and 11. In these cases, making an additional photocopy of the document and supplying it in each section where it can be referenced would be required.

## Documentation types

Documentation can be used to verify two main things:

1. Intent
2. Completion (action)

**Intent:** A document that acts as a guideline on how to behave safely. Typically these documents include statements like, “we will do/provide/maintain/ensure,” that are most commonly found in policies. These are considered “documentation of intent.” They are passive in nature, and once developed they require little work to stay current or applicable. These documents are used for training and review purposes. Policies, directives, company rules, guidelines, etc. are all good examples of documents of intent.

These documents are vital in a safety and health program, as they make up the skeleton structure of the program that the safety and health management system is based on.

**Completion:** Documents that a company/individual has performed an activity or action. These documents are ones that demonstrate that the document of intent is being fulfilled. These documents are “documentation of completion.” They typically involve the work of individuals to actively do something or regularly assess and document safety and health-related information. If a policy (document of intent) says hazard assessments will be completed prior to starting work, then the completed hazard assessment with names, signatures, identified hazards, and controls, would be the “document of completion.”

When reviewing questions in the audit that require documentation as a verification technique, it is important to know what type of document the question is asking for. In most cases, it will be clear in the guidelines as to what kind of documentation is recommended. For example: if an audit question asks if workers “have been trained in \_\_\_\_\_,” a policy statement saying workers “will” be trained, is not acceptable. The question is asking to see the completed record of training via certificates, completed evaluations, etc.

## Assessing Documentation

When assessing documentation for compliance to audit questions, use an unbiased, impartial approach. You may know the people that work for the company or be familiar with the work, which may affect your judgement of the information you find. An impartial third party should be able to look at the same document and come to the same conclusion as you. This means that when you are assessing documentation, you should be evaluating it at face value and only concluding what can be identified clearly on that document.

**“Majority rules”** means that the response that outweighs the other is the response that is documented. A majority means more than 50 per cent. Where there is a “tie” it will be the responsibility of the auditor to either collect more information to identify an accurate and conclusive result or, where additional information is not available, assess the quality of the information provided and make an informed decision. The rule of majority will carry over through the verification techniques when looking at observation and interview results.

When assessing documentation, you will use the guidelines and your judgement as an auditor to determine compliance. To see how this is done, let’s practice with the following exercise.

## Documentation Exercise Part I - Assessing Documentation

In this exercise you will be assessing three different hazard assessments to determine compliance with some of the evaluation criteria set out in Section 2 of the audit instrument.

Using the table below, evaluate the completed hazard assessments (handed out) to determine if they meet the listed requirements of Section 2. Use the guidelines in your auditor toolkit to assist you in determining if the document meets the requirements. Use a ✓ or an ✗ to determine a positive or negative evaluation for each. Be prepared to discuss your evaluation.

<i>(extracted from Section 2 of the audit instrument)</i>		#1	#2	#3
<b>2.1</b>	Do formal hazard assessments include all aspects of company operations, including routine and non-routine where work is performed?			
<b>2.2</b>	During hazard assessments are both existing and potential hazards identified and reported?			
<b>2.3</b>	Are risks assessed/evaluated prior to work being performed?			
<b>2.4</b>	Are risks reassessed/re-evaluated as when people, equipment, material, environment, or processes are changed?			
<b>2.5</b>	Are design and layout of the work area, ergonomics, machinery, and processes considered in the assessments?			
<b>2.6</b>	Are appropriate personnel involved in the hazard assessment process?			
<b>2.9</b>	Are controls developed for identified hazards using the hierarchy of controls?			
<b>2.10</b>	Are individuals/roles assigned to implement the controls identified?			
<b>2.11</b>	Is there a process/timeline for indicating when the control is implemented?			

As mentioned prior, for documentation questions, you will be providing a number of copies and make a “majority rules” conclusion on the sample provided. In this case, we have a sample of three. Average your evaluation for each question and determine an overall positive or negative response.

In this case, it may be necessary to provide a few more examples to confidently conclude a majority response but be mindful not to over supply examples. It is extra work that becomes less and less beneficial the more you provide. Your majority response is what gets documented in the audit instrument with a ✓ or an ✗.

## Referencing Documentation

Once documents have been located that effectively demonstrate requirements found in the audit, it now must be appropriately referenced to clearly show where and how the document is demonstrating compliance. It is the responsibility of the auditor to demonstrate that they understand and are capable of assessing documentation accurately by referencing appropriately. This is where the question numbers, as discussed earlier, come into play.

Each question has a unique identifying number. The first number is the section for which the question is in, and the second number identifies the question from that section separated by a decimal. For example, reference number 2.8 would be from Section 2 and is the eighth question in that section.

When you have found a document that demonstrates a requirement, it is the responsibility of the auditor to write that reference number directly beside the information on that document that demonstrates the requirement.

Reference numbers are only required for documentation questions and only for information that you have verified to be present. If a documentation question cannot be verified, there is no need to place a reference number on any documents as there is nothing to reference.

## Do's and Don'ts of Referencing Documentation

**Do not line the top, bottom, or sides of a document with reference numbers.**

- Reference numbers are used to quickly identify the applicable information for others to find. They also demonstrate your ability as an auditor to accurately and fairly assess information. If you place reference numbers far away from the information used to verify a positive response, you are not demonstrating your abilities, nor are you performing an audit to the required standard.
  - This means you may not achieve your registered auditor status or it may be suspended pending repeat concerns, and it increases the chance that information will be missed or overlooked by CSAM or the independent auditor when performing their audit.

**Do not reference documentation for observation and interview questions.**

- “Documentation required” questions are the only reference numbers that should be placed on documents. Each technique has its own method of verification. Referencing observation questions on completed documents is not an acceptable means of verifying those questions.
- Taking pictures on jobsites and referencing those pictures in the audit is also not required or beneficial. Observation requirements are verified by the auditor physically being on site and seeing those requirements being met. This is documented through an observational checklist. When your audit is submitted to CSAM, CSAM will conduct its own audit and do its own observations and interviews.

**Documentation that is referenced and required for a specific section must be provided and referenced in that section.**

- Referencing other sections for requirements is not an acceptable means of referencing. For example, if a document in Section 8 can be used in Section 2, you should photo copy that document again and provide it in both sections — appropriately referenced.

**Now that we have an understanding of how to reference documentation, let's practice!**

## Safety Policy

The safety and health of the employees of **Some Random Construction Company (SRCC) Ltd.** is of vital importance. Safety is a condition of employment with our company and shall not be sacrificed for the sake of expediency.

It is our belief that all incidents can be prevented, and every effort shall be made to:

- Identify hazards
- Communicate hazard information to employees
- Control, eliminate, or reduce the risk of those hazards

As outlined in our company manual, safety is a shared responsibility by all employees and shall be an integral component of work activities — together we can create a positive safety culture and ensure a safe workplace.

All employees will be expected to fulfill their safety responsibilities and to follow our company safety manual.

### Employees' legislated rights:

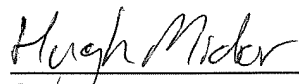
- Right to refuse – dangerous work
- Right to know – about safety and health hazards in the workplace
- Right to participate – in safety and health activities
- Right to work without being subject to reprisal

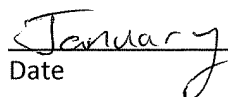
**SRCC Ltd.** recognizes the importance of active involvement in our company safety program and will ensure that this manual and our policies and procedures are reviewed and updated on a regular basis. At minimum, our company safety program will be audited on an annual basis to the COR® national standard and reviewed every three years as required under the Workplace Safety and Health (WSH) Act.

Management, safety and health representatives, and employees will abide by our company safety manual and the WSH Act and Regulation.

We recognize that the responsibilities for safety and health are shared, thus we encourage and expect complete, active participation by everyone.

Through conscientious contribution and continuous wholehearted support, we can, and will, improve our safety performance and assure a healthy, happy, and safe future for all concerned.

  
\_\_\_\_\_  
Owner

  
\_\_\_\_\_  
Date

## Documentation Exercise Part II - Referencing Documentation

For the three supporting documents used in the Documentation Exercise Part I, reference them. Remember, reference numbers should be placed beside the information that satisfies the requirement and only questions that can be verified should be referenced. Just like before, use the audit guidelines to assist in determining what parts of documents meet the requirements. We will review together.

## Documentation Technique - Review

- Only “documentation required” questions must have supporting documentation provided to verify compliance.
- Photocopies of originals only — do not provide originals in the audit, you will not get them back.
- Enough samples to verify a majority response is all that is necessary.
  - Do not over supply documents.
- Where documentation requirements have been verified, reference numbers are placed on the document directly beside the information used to verify compliance.
  - Lining the page with reference numbers is not an acceptable means of referencing.
- Majority rules when documenting results in the audit instrument.

A good practice when performing an audit is to complete all the documentation requirements in every section first, before moving on to the other techniques. This approach does a lot of great things for you as an auditor:

- Batching work is more efficient and saves time.
- Reviewing and assessing all the documentation first will allow you to gain a stronger understanding of the company program and safety behaviours before heading to site to observe and interview workers regarding this information.
- Allows you to identify information and requirements that could not be concluded or are missing and ask for this information when you get to site or meet with management.

## **Observation Technique**

Observation is the second verification technique used in the audit process and will require you to visit active jobsites and work locations where workers are performing work. As mentioned previously, the jobsite is anywhere where a worker is being compensated (paid) to be. This will include offices, shops, construction sites, vehicles, etc.

### **Purpose**

The purpose of the observation technique is to verify that, what is written in policy and stated on paper, is actually being performed on site. Safety is a conscious effort and by going to site and observing activities and behaviors, the auditor can get a good account of the current state of compliance regarding the program.

### **Checklist**

As observation is done at the site, it is cumbersome and inefficient to carry around the audit instrument with you on your tour. For this reason, an observation checklist has been developed. The observation checklist takes every observation question, from every section, and consolidates it into one document. You will notice that the reference numbers for each question and the colour coding system for COR® and SECOR® are consistent on this document as it is in the audit instrument.

As an auditor, you will use one of these checklists **per site visited** and document your findings. Once you are done, you will consolidate the results into the audit instrument just like you did for documentation using the majority rules principle discussed earlier. Your final result for each observation question will be documented under the “O” column in the instrument using a ✓ or an × during the summary portion of the audit process.

### **Visiting Sites**

Just like documentation, you are looking for a good representative sample. You are not required to go to every jobsite that the company has running at the time of the audit. Typically, you should visit at least three sites if available. If there are only three (or less) sites available, you should go to all sites. If there are more sites, a representative sample is recommended. For the purposes of majority rules and making your summary of results easier, visit an odd number of sites to get a clear majority for each requirement evaluated.

When you perform a site observation, it is recommended you be escorted by the supervisor, safety representative, or any individual who is familiar with the ins and outs of that location. This person is responsible for your safety and should be someone you can ask questions to, so they can help you through the observation checklist to ensure nothing is overlooked or missed.

**REMEMBER:** As an auditor, you are not trying to “catch” anyone doing something unsafe. You are simply there to assess the safety and health management system and identify opportunities for improvement.

## Observation Checklist



Company: \_\_\_\_\_ Worksite Location: \_\_\_\_\_  
 Date: \_\_\_\_\_ # of employees on site: \_\_\_\_\_ # of sub-contractors on site: \_\_\_\_\_

Reference #	Observation Requirement		Comments
<b>Safety and Health Policy</b>			
1.5	Is the safety and health policy posted?		
<b>Hazard Assessment, Analysis, and Control</b>			
2.1	Are site-specific hazard assessments conducted?		
2.9	Are the controls developed using a hierarchy of controls?		
2.11	Are controls implemented in a timely manner?		
<b>Safe Work Practices</b>			
3.1	Do safe work practices reflect the company's activities?		
3.3	Are written safe work practices readily available?		
3.4	Are they followed by employees?		
<b>Safe Job Procedures</b>			
4.1	Do safe job procedures reflect the company's activities — including high risk and critical tasks?		
4.3	Are written safe job procedures readily available for the work being performed?		
4.4	Are employees following safe job procedures?		
<b>Company Safety Rules</b>			
5.3	Are company rules prominently posted?		
<b>Personal Protective Equipment</b>			
6.4	Do personnel have access to specialized PPE for specific activities?		
6.5	Is the correct PPE used by personnel when required?		
6.6	Is PPE well maintained and in good condition, and does it meet regulatory requirements?		
<b>Preventative Maintenance Program</b>			
7.2	Are completed pre-operational/checklists kept with the equipment in use?		
7.3	Have the documented corrective action(s) been completed?		
7.6	Does the company follow its system to remove defective tools, equipment, and vehicles from service?		



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.



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The numbers in the left hand column correspond to the audit instrument questions found in each of the 15 sections. For example, question 1.5 in the audit instrument asks about the Safety and Health Policy - 1.5 – “Is visibly posted in the workplace and/or made readily available to all workplace parties.” If the auditor can verify through observation that the policy is posted or made available, a ✓ can be placed on this checklist. Later, all observation checklists will be consolidated in the audit instrument by using the reference numbers for each question.

## Observation Exercise

When performing your observation, you are looking at the people, environment, material, equipment (PEME), etc. that is on site. This will include looking to see if certain documents are available on site and workers have access to them. It is a good idea to review the guidelines for observation questions prior to heading to site to educate yourself on what you are looking for specifically.

### For example:

Question 1.5 of the audit asks if the safety and health policy is posted or made readily available. It is important to know what "readily available" means. If it is not posted on a bulletin board on site, are other means acceptable? A binder in the job box? In the truck? On a tablet? At another jobsite close by? Back at the office?

The guidelines will help you navigate these concerns but it is also important that you know the intent of a question. The intent of 1.5, for example, is accessibility. If the document cannot be produced at the time it is being asked for, it is not accessible. This would eliminate the office, a different jobsite, a tablet that won't turn on or can't load the file, etc.

In this exercise, we will be reviewing a few observation requirements based on a certain environments and determining whether the observation requirement is being met. You, the auditor, will need to assess the situation and determine if what you observe complies with the requirement or not. Be prepared to discuss your results.

*(Observation questions extracted from the audit instrument)*

<b>2.1 - Do formal hazard assessments include all aspects of company operations, including routine and non-routine where work is performed?</b>	<b>✓ / ✕</b>
<i>When the auditor arrived on site and requested the most recent hazard assessment, the supervisor stated that it has been sent to the office already.</i>	
<i>The supervisor provided a hazard assessment from last week. When asked why it was a week old the response was, "Nothing has changed."</i>	
<i>A hazard assessment for the day was identified and provided. The names of persons on site, the date, and location were filled in; no hazards were identified.</i>	
<i>Hazard assessment was provided, it includes hazards that workers are currently being exposed to but has no identified controls.</i>	
<i>A hazard assessment was provided from the beginning of the week (two days ago), but their policy states daily hazard assessments are required.</i>	
<b>4.4 - Are safe job procedures followed by employees?</b>	<b>✓ / ✕</b>
<i>Workers appear to be working safely, however there are no procedures on site to review in order to verify that they are being followed.</i>	
<i>Procedures are on site and available. Upon review of a procedure for cutting drywall, the auditor notices that the PPE requirements are cut resistant gloves and eye protection. The worker observed performing this task does not have either.</i>	
<i>Procedures are on site and available. Upon review of a procedure for cutting drywall, the auditor notices that the procedure is vague, does not identify PPE requirements and it is difficult to follow or understand. From what you can gather, the procedure is being followed, but the work being performed is unsafe.</i>	

<b>6.4 - Is appropriate PPE provided and/or made available to workers for specific activities when required?</b>	✓ / ✕
<i>Seeing no additional PPE on site, the auditor asks the supervisor and he says, "Dust masks, safety glasses, and gloves can all be found in the show home." He takes you to the show home three blocks away and you verify that specialized PPE is there.</i>	
<i>Every worker on site is wearing the required dust masks and safety glasses required, but there is no additional specialized PPE available.</i>	
<i>Hi-visibility vests and fall protection are available at the worksite, but no other specialized PPE can be found or is available.</i>	
<b>11.4 - Are the required number of qualified first aid personnel on site?</b>	✓ / ✕
<i>There are four workers onsite working in downtown Winnipeg. None of the four workers have first aid training.</i>	
<i>You're on a bigger project in the south end of the city. All 12 employees are working on this site at the same time. There are three workers with a one-day first aider course and have presented you their wallet cards. You have verified that they are valid, and training was taken within the previous three years.</i>	
<b>11.7 - Are fire extinguishers readily available, marked, and visible?</b>	✓ / ✕
<i>An extinguisher is on site but the needle is not in the "green" and it is missing the pin.</i>	
<i>Seeing no extinguisher on site, the auditor asks the supervisor and he says, "It's in the show home." He takes you to the show home three blocks away and you verify that a fire extinguisher is there, the needle is in the green, and would function if needed.</i>	
<i>A fire extinguisher is in the company truck on the street. It is a small 5lb extinguisher.</i>	
<b>15.9 – Is hearing protection, including instructions on proper use and limitations, made readily available to employees?</b>	✓ / ✕
<i>Other trades are on site beside the workers, running tools and equipment indoors that are making noise well above 85dBA. When asked, the supervisor confirmed that they do not have any hearing protection available.</i>	
<i>No hearing protection of any kind is found on site. There is no equipment being used or expected to be used throughout the day that would put work about 80dBA. No indication of a noisy environment is present.</i>	

As you can see, the environment and contributing factors of the workplace will affect how compliance is determined with each observation question. It is the responsibility of the auditor to collect all the information about the situation and make an informed decision regarding compliance. If you are not sure, ask. Observations are not passive. If you don't see something you need to verify, ask.

Where compliance is verified but your analysis of the evidence provided identifies some concerns, make a comment in the space provided and use this information for recommendations during the reporting phase of the audit.

**For example:**

Hearing protection may not be required for the situation you observed, but there is strong evidence that it will be needed soon. They have complied with the requirement, but you should recommend that safety is about prevention through preparedness and hearing protection should be made available as a proactive control measure. "Better to have and not need, than to need and not have!"

## Observation Technique - Review

**IMPORTANT:** Keep good notes on all the checklists and documents provided with the audit. Notes will eventually become comments regarding the successes and opportunities for improvement regarding the company's safety and health management system and will greatly assist in developing a corrective action plan which is a requirement of the audit. Sometimes you will not be sure on how to determine a positive or negative result. This is why notes are important! Make a note of the situation and make a conclusion at a later time when you can look into it further.

A lot of work goes into an audit and it will be very difficult to remember the finer details of every ✓ or ✕ you conclude throughout the audit instrument. Save yourself the headache — take good notes, especially for observation and interview.

**Also remember:**

- Use the checklist provided for site observation (one per location visited).
- It's a good idea to get a guided tour of the worksite and work being performed.
- Majority rules when summarizing results into the audit instrument.

## **Interview Technique**

### **Purpose**

The purpose of conducting interviews is to ensure that everyone involved in the program has an understanding of their role regarding safety and health at the company. What is written in documentation cannot always be observed during your tour of sites, which is why sitting down with workers and having a conversation about their role, the safety and health program, and what they should/would do in certain situations is vital when auditing the safety and health of an organization.

### **Interview Questionnaires (Checklists)**

Everyone who works for the company has the potential to be interviewed. Just like observation, there are checklists available to you to assist in performing interviews effectively. In the case of interview, it would be difficult to identify which questions get asked to which people. For this reason, there are four types of interview questionnaires:

- Management/supervisors
- Worker safety representatives/safety committee members
- Employee
- Sub-contractor

Choose the correct interview questionnaire based on the role the individual represents within the company.

Each questionnaire will follow the same template:

- Down the left-hand side you will see the same reference numbers as we did in the observation checklist and in the audit instrument.
- The second column is the specific question to be asked for that requirement.
  - You may notice the question is not asked the same way it is in the audit instrument. This is because the intent of the question in an interview needs to be presented a specific way.
  - Having a checklist of consistent questions ensures that everyone you interview is asked the same thing in the same way and helps maintain the standard of COR® and SECOR® certification across all companies.
- Next you will see "P" and "N" columns, which stand for positive or negative response.
  - You will place a ✓ under one of these columns to identify the type of response.
- Lastly, there is a space for comments.
  - Comments are extremely important regarding interviews. You will receive answers and information you may not have expected or are not sure how to evaluate until you gather more information. Making a note and coming back to the question to determine positive or negative is vital to a quality audit.

## Employee Interview Questionnaire



Reference #	Questions	P	N	Interview Comments
1.3	What are your safety and health responsibilities? How are you held accountable for them?			
1.6	In your own words, what does the safety and health policy say?			
2.1	Describe the process your company uses to conduct formal hazard assessments. What type of tasks are included in the formal hazard assessment process?			
2.2	How are completed formal hazard assessments reviewed with you?			
2.4	How are hazards reassessed as the job progresses or changes occur?			
2.6	How are you involved in the hazard assessment process?			
2.7	How have you been trained to identify and control hazards?			
2.10	Who is responsible for implementation of controls?			
3.2	Describe some of the key points of a safe work practice applicable to your work.			
3.3	How do you have access to safe work practices when on site?			
3.5	Can you give me an example of how a safe work practice has been reviewed or discussed?			
4.2	Describe the step-by-step process of a safe job procedure for a critical task that is applicable to your work.			
4.3	How do you have access to safe job procedures when on site?			
4.5	Can you give me an example of how a safe job procedure has been reviewed or discussed?			
5.2	Where can you find both company and project (work location) specific rules?			
5.3	How are company safety rules provided or made available to you?			
5.6	How are the company rules enforced?			
6.1	How do you know what PPE is required to perform a specific task?			
6.3	What type of training did you receive to understand the proper fitting, care, and use of your PPE?			
6.4	How do you have access to appropriate PPE when needed?			
7.5	What is your company's system to remove defective tools or equipment from service?			



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.



### Page 2 - Employee Interview Questionnaire



Reference #	Questions	P	N	Interview Comments
8.2	After training, how are you evaluated for your retention of information regarding the company safety and health program?			
8.5	How was your mandatory training verified or provided to you prior to starting work?			
8.8	When was your orientation provided? Have you received a re-orientation?			
8.12	How are you given the opportunity to give input and communicate safety and health concerns?			
8.13	How often does your company hold scheduled safety meetings?			
9.3	How are identified deficiencies assigned to individuals and corrected as required?			
9.4	What specific method, form, or checklist is used for pre-use inspections?			
9.7	What is your role in the formal or informal inspection process?			
9.8	How are the inspection reports posted and/or communicated to you?			
10.1	What is the process for reporting an incident? What are your responsibilities?			
10.4	Once an incident investigation has been completed, how are corrective actions implemented?			
10.5	How are corrective actions communicated to you after an incident occurs?			
10.6	What incidents do you report? Do you report near misses? Please give an example of a near miss.			
11.4	How do you know who is a qualified to administer first aid on this site?			
11.5	How do you alert everyone onsite in the event of an emergency? How do you contact appropriate personnel/agencies for emergency assistance?			
11.9	Can you give me an example(s) of an emergency plan for this site? What are your specific roles and responsibilities?			
11.12	How have site specific emergency plans been communicated to you?			
13.1	Where are copies of relevant legislation on this site? <i>For Manitoba, reference our Workplace Safety and Health Act and Regulation.</i>			
13.2	Does your supervisor regularly discuss relevant regulations and legislation when assigning work? Can you give an example?			
13.3	What are your legislated rights? Do you know how to exercise those rights?			
15.1	Who is your worker safety representative on this site?			

## **How many people should be interviewed?**

The amount of people to interview is subjective and there is no hard and fast rule. The general rule for interviews is to conduct enough interviews to acquire a clear and accurate majority response for all interview questions that is representative of the entire company.

A good rule of thumb is to interview 10 per cent of the workforce or at least five people on sites with less than 50 employees. On sites with more than 100 employees, a smaller percentage is probably acceptable. Normally you shouldn't have to do more than 20 to 25 interviews. Interviews should take approximately 10 to 15 minutes each.

## **Who should be interviewed?**

Now that you have a rough idea of how many staff members should be interviewed, you should consider who these people are going to be. A representative sample of the company's current organizational structure is what you should be striving for. For example, if 40 per cent of the company is made up of workers/labourers, then 40 per cent of the interviews you perform should be conducted with those workers. An auditor should strive to maintain the same ratios of people the company currently has.

At minimum, all types of persons that exist within the company should be interviewed. This includes owners/senior management. It is a requirement of the audit that the owner or representation of the ownership team (senior management) be interviewed as part of the certification audit.

To ensure all roles are represented in the interview process, it is recommended for you to review the organizational chart of the company you will be auditing.

## Selecting Interviewees When On Site

When you get to a worksite location, you will first do your observational tour. During your tour, pay special attention to who is there and the type of work they are performing. You may want to select certain individuals based on what you see. If a worker is working with a controlled product, WHMIS training will be especially important for that worker. Taking notes of these activities will allow you to better connect information found in the audit, observed on site, and communicated via interview.

In order to effectively document what the company knows about the safety and health program, you will want to get a good cross section of all company personnel. A good rule of thumb is to ask the supervisor to identify the most senior and the newest workers who are on site that day. Interviewing these two extremes will allow you to identify how the company is in training new workers and how they are communicating changes to existing workers who may have been with the company before the safety and health program was implemented. The remainder of the interviewees should be selected at random.

## Do's and Don'ts When Conducting an Interview

### **You select the person to be interviewed.**

- Do not allow the company to "prime" workers for you. Doing so may skew your results and is not beneficial to the company.

### **All interviews must be held in private — no group interviews.**

- The purpose of an interview is to see what individuals know and what they can communicate about the safety and health program. Once complete, all interviews are consolidated to get a majority response. Group interviews prevent you from getting individual results and may allow one worker to answer for all. Your results will not be accurate or helpful to the company in this case.

### **Take notes!**

- As has been discussed numerous times in this workbook: take notes. A lot of information is going to be presented during interviews and you will conduct them over the course of a few days or even weeks. Documenting your results is extremely important to the reporting process.
- Let the interviewee know that you will be taking notes and why. This will help put them at ease as it can be intimidating to have a stranger documenting what they say. Communication skills will be covered further on in this workbook.

### **Interviews are confidential.**

- Let the interviewee know that the interview process and individual results are confidential. No information about what they've said or how well they performed in the interview will be shared with the company, Workplace Safety and Health (WSH) Branch, or anyone else. Interview results are consolidated and the majority response (positive or negative) is what is communicated in the audit results.

### **Encourage questions at any time.**

- Although you are conducting an interview for the purposes of collecting information, questions are allowed and encouraged. Let interviewees know that they can ask questions at any time. If they don't understand the way you've asked a question, or are curious about the process, they can ask and you can answer or provide clarity where it is appropriate to do so.

## Communication Skills

Good communication skills are essential to effectively gather information. The ability to understand and to be understood is key for the auditor to put into practice. Here are a few tips for the auditor to follow during the interview process:

- 1) **Keep it simple** – use common terms and understandable language. People will feel more relaxed when they can answer and explain situations in their own words. Avoid uncommon technical terms when possible — that may confuse the person as to what the question is asking.
- 2) **Listen carefully** – many people communicate important information in a matter-of-fact manner. You may get responses you weren't expecting. It is the responsibility of the auditor to get clarity when required.
- 3) **Know your barriers** – never put people on the spot or make them feel intimidated. The goal of the audit is to evaluate the company's safety and health management system, not to interrogate individuals.

You may also have some language barriers to contend with. If there is an issue with verbal communication, identify how the employer currently communicates with the individual. It may be necessary to adopt a similar method for the purposes of interview.

- 4) **Discuss, don't dictate** – people will have a much more positive experience and will be able to answer more appropriately if they feel they are a part of a conversation, rather than being drilled with questions.

Individuals interviewed may be nervous or concerned about the process. It is your responsibility as an auditor to put them at ease and facilitate an open and honest discussion about what they know and do regarding the safety and health activities within the company.

- 5) **Practice** – as with anything, practicing your interviewing technique prior to the actual interview will help you (the auditor) and the interviewee to be more relaxed and focus on positive communication.

Part of practicing means knowing what a correct answer looks like. If you are unaware of what a correct answer is to a question, you will have a hard time documenting the results on the interview or asking important follow up questions.

- 6) **Acknowledge correct communication** – give credit where credit is due. Positive reinforcement and support for a job well done will encourage people to stay actively involved in their own safety and health, promote it to their co-workers and help to ensure a strong safety and health culture within the company.

## Interview Exercise

There is a lot going on during an interview. You will need to pose questions in a way that is understood by the interviewee, listen to their response, and assess them to determine a positive or negative response. You may need to ask follow-up questions or reword the original question to ensure that the interviewee is given an opportunity to share their knowledge. Getting comfortable with interviews starts with getting familiar with the questions, how they're asked, and understanding the intent of the question.

Below, questions from the audit will be presented and a response will be given. Evaluate each response and resolve or answer the question posed. Be prepared to discuss your answers.

### 1.5 – Where would you find a copy of the safety and health policy?

The interviewee says, *"at the office" or "back at our shop."*

- a) This is acceptable – positive response
- b) Policies must be onsite and available to workers – negative response

The interviewee says, *"online," or "on our phones."* Is this acceptable? Why or why not?

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The interviewee names a location on site that is different from where you saw the policies during your observation tour. What do you do?

- a) This is not where you found them on site during observation – negative response
- b) They're probably right – positive response
- c) Make a note, verify if it's correct before leaving site

### 1.6 – In your own words, what does the safety and health policy say?

What statements or information are you looking for to determine a positive response? Assess the following as **correct** or **incorrect** responses.

\_\_\_\_\_ "To be safe at all times, no matter what."

\_\_\_\_\_ "Management's commitment to provide and maintain a safe and healthy work environment."

\_\_\_\_\_ "The right to be safe at work and be involved with the program."

\_\_\_\_\_ "It outlines all the policies and procedures we are supposed to follow for stuff like PPE, company rules, hazard assessments, etc."

\_\_\_\_\_ "Work together to maintain a safe and healthy work environment."

**4.2 – Describe the step-by-step process of a safe job procedure for a critical task that is applicable to your work.**

What should they be mentioning, at minimum, regarding any procedure they explain?

What information are you looking for? Circle all that apply.

- a) Steps in correct order
- b) Tools required for the job
- c) PPE required for the job
- d) Pre-requisite training to perform the task (when applicable)
- e) Hazards of performing the task
- f) Restrictions of performing the task

**6.4 – How do you have access to specialized PPE when needed?**

What is the intent of this question? What information are you looking for?

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**7.4 – How are individuals that perform maintenance on equipment or tools deemed competent to do so?**

What is the intent of this question? What key information are you looking for in a response?

Circle all that apply.

- a) That someone is fixing tools
- b) That the owner or supervisor is fixing tools
- c) That they are sending all tools away to be fixed
- d) That a qualified/competent person is fixing tools

**10.1 – What is the process for reporting an incident? What are your responsibilities?**

This question is asked to a worker. What is the worker reasonably expected to know regarding incident reporting? Circle all that apply.

- a) Report all incidents to the supervisor immediately
- b) Serious incidents must be reported to the WSH Branch
- c) Lost time incidents must be reported to the Workers Compensation Board of Manitoba (WCB)

This question is asked to a supervisor. What are they reasonably expected to know? Circle all that apply.

- a) Report all incidents to the supervisor immediately
- b) Serious incidents must be reporting to the WSH Branch
- c) Lost time incidents must be reported to WCB

## **Concluding an Interview**

Just like observations, the auditor is responsible for taking the information available and analyzing it to determine compliance with the audit requirements. Two different answers can both be correct depending on the situation. Before ending an interview, always thank the participant for their time and effort. Reaffirm the confidentiality of the interview and give them one final opportunity for questions.

You may not have a fully completed questionnaire identifying a positive or negative response at the end of an interview so take good notes! Use this information to determine if the response you got is indeed correct (positive) or incorrect (negative). After an interview, it may be necessary to continue your observation before leaving the worksite to verify responses you received during interview.

## **Interview Technique - Review**

Interviews are where you will get the most and best information about how safety and health is viewed and performed within an organization. Take good notes, be open to discussions, and don't be afraid to ask for more information.

Use the questionnaires to ensure consistency from interview to interview and make sure you interview a cross section of the company. Remember that a correct answer can be different from person to person, and site to site. Make sure you review documentation and conduct observations prior to performing interviews to familiarize yourself with the company and their processes.

## Step Three: Reporting The Results

### Summarizing results

Now that the actual auditing is complete via the three verification techniques, it is time to consolidate and summarize the information you have collected into the audit instrument. This is where the referencing of documentation, checklists used, and notes taken all come into place.

We will look at interview components first, as it will be the largest amount of information you need to collect and summarize. Observations will follow a similar technique, and documentation will be a general review and verification that information has been transferred properly.

### Interview summary – using the interview response summary tool

After you have completed interviews, you may have a lot of interview questionnaires to handle. As discussed prior, evaluation techniques are evaluated as "majority rules." You will see the most diversity in information with interviews and this rule will be extremely important in the way you summarize results. To get all the interview results consolidated into the audit instrument can be difficult with the number of questionnaires you will have. To simplify this process and help ensure accurate information is concluded, an interview response summary tool has been developed.

The interview response summary tool is a document used to help determine whether there is a majority of positive or negative responses to the questions on the interview questionnaires. The auditor will add up all the positive and negative responses they have gathered from the various interviews and transfer it onto the interview response summary tool. From there, at a glance or for future reference, the auditor will have the ability to verify whether or not the majority of the people interviewed have a good understanding of their safety and health program for each question asked. During future audits, the auditor may want to look back at these documents to see if progress is being made in regards to the interview process.

Once you have logged all interview results into the tool, you can easily see where the majority of responses lie and be able to transfer the final result for each question into the audit instrument. Remember, you are looking for a majority — that means MORE than half. If the majority of responses are negative, an × will be placed under the "I" column that corresponds with that particular question (using the reference numbers as guidance). The same rule applies for a majority positive response, a ✓ will be placed in the correct box. Where a question is exactly 50 per cent positive and 50 per cent negative in responses, this is not a majority in either case. The auditor must err on the side of caution and therefore an × must be placed for that question.

**Only a majority of positive responses can result in a ✓ in the audit instrument.**

Where you have questions that are a 50/50 split and where possible to do so, the auditor should perform additional interviews to break the tie and get a conclusive result. Where this is not possible, an × must be transferred to the audit instrument for that particular question.

## Interview Response Summary Tool

In the boxes below employee, management/supervisor, worker safety representative/safety committee member, and sub-contractor, summarize the interview results using a ✓ or ✗ as identified on the interview questionnaires. In the last two columns, total the number of ✓'s as positive responses and ✗'s as negative responses. Whichever response has a higher total will be the final ✓ or ✗ that is identified in the audit instrument.

Remember, 'majority rules' for interview responses. If the totals are equal, either perform another interview to break the tie or err on the side of caution and mark it as an ✗ in the audit instrument.

Ref. #	Employee	Management/ Supervisor	Worker Safety Representative/ Safety Committee Member	Sub-Contractor	# of Positive Responses	# of Negative Responses
1.3						
1.5						
1.6						
2.1						
2.2						
2.4						
2.6						
2.7						
2.10						
3.2						
3.3						
3.5						
4.2						
4.3						
4.5						
5.2						
5.3						
5.4						
5.6						
6.1						
6.3						
6.4						
7.4						
7.5						
8.1						
8.2						
8.3						
8.5						
8.6						

Ref. #	Employee	Management/ Supervisor	Worker Safety Representative/ Safety Committee Member	Sub-Contractor	# of Positive Responses	# of Negative Responses
8.8						
8.10						
8.12						
8.13						
9.2						
9.3						
9.4						
9.7						
9.8						
10.1						
10.3						
10.4						
10.5						
10.6						
11.4						
11.5						
11.6						
11.9						
11.12						
12.7						
13.1						
13.2						
13.3						
14.2						
14.3						
14.6						
15.1						
15.2						
15.3						
15.4						
15.5						
15.9						
15.11						
15.13						
15.16						

## Observation Summary

Observation summary will work the same way as interview summary. At this stage, you will have multiple observation checklists, one for each site visited. The majority rules here, also. What you can now do is take a blank observation checklist and consolidate all the ✓'s and ×'s onto one checklist. Tally up the majority responses and transfer those results into the audit instrument under the "O" column using the reference numbers as guidance.

Remember, as suggested earlier, it is a good idea to visit an odd number of sites when possible to ensure a majority response can be identified.

## Documentation Summary

Documentation summary will be slightly different than the previous techniques. At this point, you have collected documentation, found the relevant information for questions identified in the audit, referenced those components of the document, and given yourself a ✓ in the corresponding box under the "D" column. Now you will need to double check your references and fill in any gaps.

Make sure that for every ✓ you have identified under the "D" column, that you have a referenced number placed on a document in that section and it appropriately and effectively communicates the requirement. For any blank boxes you have under the "D" column, now is the time to fill them in! If you found a document on site or the company provided you more documentation, you can now assess the new information and complete the remainder of the "D" column for all 14 sections.

## Check for Accuracy

If you followed the procedure, you have now been through the audit one time and should have all the boxes under "D", "O", and "I" filled in with either a ✓ or an ×.

For observation and interview, verify your findings are accurate and where you have missing information, review your checklists, or, where necessary, conduct further observations or interviews to conclude a result.

After you have completed the accuracy check, you may be able to answer yes in a few more places. The answers to the remaining questions will then be no. Now you can go back over the audit instrument section pages and put an × in the remaining blank boxes to indicate the verification of a negative response.

## Analyzing Results

Now that all the data necessary for the audit has been collected, it is time to determine a score. As noted earlier, each question has a weighted score. This will identify the maximum points that can be awarded for each question of the audit.

For each question you have identified a positive or negative response via ✓'s and ×'s and can now evaluate the positive and negative results of each technique to determine a score. There are some rules to follow when scoring an audit to ensure an accurate and truthful result.

## **Scoring the Audit – Awarding Points**

The final column in each section is for recording the points awarded for the questions. Now that we have verified all components of the audit, there are ✓'s or ✕'s in every box, we can determine a score for each section. Points will be determined by a set of rules. These rules are as follows:

**For questions worth three points or less and using a single technique:**

✕ = zero                  ✓ = full points

**For questions worth three points or less — using multiple techniques with "AND":**

✓ AND ✕ = zero points

✕ AND ✕ = zero points

✓ AND ✓ = full points

**For questions worth three points or less — using multiple techniques with "OR":**

✓ OR ✕ = full points

✕ OR ✕ = zero points

✓ OR ✓ = full points (not double)

**For questions worth four points or or more — using a single technique as well as "AND/OR" questions:**

- Consult the guidelines to determining point distribution
- Where the guidelines do not identify a split of points follow the same rules as above

Pay special attention to questions worth four points or more. Use the guidelines to identify how points can be awarded in these cases. Once you have identified points awarded for each question in a section, you can add up the section and give a total at the bottom of the page. Use the correct total box for COR® or SECOR® audits respectively.

This is the main reason it is critical to only place ✓'s or ✕'s in the D, O, and I columns. If you attempt to score the audit before you have all the information, you will run into problems, forget to collect information or calculate scores incorrectly. This can drastically affect the results of the audit. Always remember, ✓'s or ✕'s under D, O, and I and final score in the far right column.

## Awarding Points Exercise

Below is an extraction of the audit instrument, Section 11 - Emergency Preparedness. This section is completed and ready to be scored. Interpret the ✓'s and ✕'s under D, O, and I to determine a score for each question. We will review as a group.

SAFETY AND HEALTH PROGRAM VERIFICATION		Score Weighting	Technique Employed			Points Awarded
11	Emergency Preparedness		D	O	I	
	<i>The organization shall establish, implement, monitor, and maintain a documented policy statement, procedure(s), and/or guideline(s) for emergency preparedness and response.</i>					
11.1	Are the emergency preparedness plans appropriate to work activities and legislative requirements?	6	✓ ✕	AND ✓		
11.2	Is emergency equipment readily available and well marked?	2		✓		
11.3	Is emergency equipment regularly inspected and maintained?	2	✓	OR ✓		
11.4	Are the required number of qualified first aid personnel on site?	2		✓	OR ✓	
11.5	Is an appropriate emergency communication system available?	2		✓	AND ✕	
11.6	Is there a means to transport an injured employee to a medical facility?	2		✓	AND ✕	
11.7	Are fire extinguishers readily available, marked, and visible?	2		✕		
11.8	Have employees received training in emergency procedures, roles, and responsibilities?	2	✓			
11.9	Do employees know their roles and responsibilities?	4			✓	
11.10	Has the emergency response plan(s) been tested for deficiencies and corrective action taken?	2	✓			
11.11	Has the emergency procedures and response plans been reviewed, and revised as appropriate, at least annually?	2	✓			
11.12	Is relevant information regarding the emergency response plans communicated to the appropriate parties?	2			✓	
COR® total points possible/awarded		30				
SECOR® total points possible/awarded		20				

Highlighted questions are required for SECOR®. COR® requires **all** questions. The minimum standard is **50 per cent** of total possible points.



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.



Once you have calculated a score for each section, it is time to summarize your result onto the executive summary sheet.

## **Executive Summary Sheet**

Once you have calculated the scores for all 15 sections, you are now ready to transfer the results to the executive summary sheet. This sheet is the report card for the audit. It communicates "pass/fail" and scores in each section. The executive summary sheet does not communicate what was missing nor does it make recommendations for improvement. This will be communicated through the audit corrective action plan.

There are two different summary sheets, one for COR® and one for SECOR® respectively. Ensure you are using the correct summary sheet for the correct type of audit. Fill in all the appropriate spaces in the executive summary sheet and transfer the final scores from all 15 sections into the chart provided.

Once all scores are entered, determine if the minimum standard of 50 per cent in each section has been met and identify this with a ✓ under "yes" or "no" respectively. If the auditor has any general comments about any of the sections, it can be placed beside each section in the comments column. Generally, this column is used to identify the main issue/concern with that section. If a company primarily had an issue with Documentation in Section 2, that comment can be placed here. Further details and information regarding the performance of each section will be identified through a written report or the audit corrective action plan later.

Add up the scores in all 15 sections and get a final score. Transfer that total to the bottom of the page and calculate a percentage for the audit. As long as 50 per cent or better was achieved in each section and 80 per cent or better was achieved overall, you can identify that minimum standards have been achieved and set a goal for next year's audit. A realistic goal is approximately five per cent improvement from one year to the next. This can change depending on the type of deficiencies that were noted through the audit process and the time and effort it will take to implement improvements.

You can now sign the summary sheet as the auditor. The remainder of the signatures will be collected at the close out meeting.

# COR® AUDIT EXECUTIVE SUMMARY SHEET



Company: \_\_\_\_\_ Audit completion date: \_\_\_\_\_

Name of auditor: \_\_\_\_\_ Previous score: \_\_\_\_\_ %

Section #	Section Name	Possible Score	Actual Score	Minimum Standard	Minimum Standard Achieved		Auditor Comments
					YES	NO	
1	Safety and Health Policy	18		9			
2	Hazard Assessment, Analysis, and Control	45		23			
3	Safe Work Practices	12		6			
4	Safe Job Procedures	21		11			
5	Company Safety Rules	15		8			
6	Personal Protective Equipment (PPE)	22		11			
7	Preventative Maintenance Program	17		9			
8	Training and Communication	46		23			
9	Inspections	30		15			
10	Investigations and Reporting	30		15			
11	Emergency Preparedness	30		15			
12	Statistics, Records, and Document Control	22		11			
13	Legislation	10		5			
14	Procurement and Contractor Management	22		11			
15	Manitoba Supplement	60		30			
	<b>TOTAL</b>	<b>400</b>		<b>320</b>			
SC	<b>Safety Culture Assessment</b>	<b>4.00</b>					

The minimum standard is **80 per cent overall and 50 per cent each section.**

Reviewed: \_\_\_\_\_

Senior Management/Company Officer Signature

$$\frac{\text{(Actual score)}}{\text{(Possible score)}} \times 100 = \text{ } \%$$

400

Reviewed: \_\_\_\_\_

Worker Safety Rep./Safety Committee Co-Chair Signature

Standard achieved: YES ☐ NO ☐ Goal for next audit: \_\_\_\_\_

Auditor Signature

# SECOR® AUDIT EXECUTIVE SUMMARY SHEET



Company: \_\_\_\_\_ Audit completion date: \_\_\_\_\_

Name of auditor: \_\_\_\_\_ Previous score: \_\_\_\_\_ %

Section #	Section Name	Possible Score	Actual Score	Minimum Standard	Minimum Standard Achieved YES NO	Auditor Comments
1	Safety and Health Policy	15		8		
2	Hazard Assessment, Analysis, and Control	41		21		
3	Safe Work Practices	10		5		
4	Safe Job Procedures	17		9		
5	Company Safety Rules	15		8		
6	Personal Protective Equipment (PPE)	16		8		
7	Preventative Maintenance Program	9		5		
8	Training and Communication	28		14		
9	Inspections	19		10		
10	Investigations and Reporting	20		10		
11	Emergency Preparedness	20		10		
12	Statistics, Records, and Document Control	14		7		
13	Legislation	10		5		
14	Procurement and Contractor Management	8		4		
15	Manitoba Supplement	58		29		
	<b>TOTAL</b>	<b>300</b>		<b>240</b>		
<b>SC</b>	<b>Safety Culture Assessment</b>	<b>4.00</b>				

The minimum standard is **80 per cent overall and 50 per cent each section.**

Reviewed: \_\_\_\_\_

Senior Management/Company Officer Signature

$$\frac{\text{(Actual score)}}{\text{(Possible score)}} \times 100 = \text{ } \%$$

300

Reviewed: \_\_\_\_\_

Worker Safety Rep./Safety Committee Co-Chair Signature

Standard achieved: YES ☐ NO ☐ Goal for next audit: \_\_\_\_\_

Auditor Signature

## **Audit Instrument Pages**

Now that you have visited worksite locations you can go back to the audit information sheet and complete the information for sites visited and persons interviewed. Double check that all pages of the audit instrument have been completed correctly up until this point:

- Cover sheet
- Audit information sheet
- Safety and health manual verification
- Section Pages 1 through 15
  - D, O, and I columns
  - Points awarded and total points

## **Auditor Executive Summary Sheet**

The auditor executive summary sheet summarizes the main activities performed by the auditor when completing the audit. It will identify the number of sites visited and people interviewed specific only to the type of questionnaires used to interview them. This information is important when reviewing the audit results and comparing results from year to year. This document also serves as proof that the auditor visited and interviewed the appropriate number of sites and people.

Lastly, there is some space provided for additional notes and comments from the auditor on how the audit went, what they saw, specific comments regarding compliance, and/or any additional information regarding concerns that may not have been captured in the scoring sheets for each section.

A written report concluding the audit is optional and not a mandated component of the audit process and may be left blank, however the number of worksites visited and persons interviewed must be filled in and signed off by the auditor. The audit corrective action plan is a mandated component of the audit and is typically preferred over a written report as it more directly and clearly communicates the opportunities for improvement and recommendations on how to achieve them.



## AUDITOR EXECUTIVE SUMMARY REPORT

The auditor executive summary will not be acceptable without the following information:

- Number of worksites visited: \_\_\_\_\_
- Number of management/supervisor interviews: \_\_\_\_\_
- Number of employee interviews: \_\_\_\_\_
- Number of worker safety representative/safety committee member interviews: \_\_\_\_\_
- Number of sub-contractors interviewed (where applicable): \_\_\_\_\_

Other notes/comments: \_\_\_\_\_

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Auditor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Audit Corrective Action Plan**

An audit corrective action plan is the most important component of an audit. Regardless of whether the company passes or fails an audit, there will always be opportunities for improvement. This is the place where the auditor can make those recommendations. An action plan must cover the following:

- Identify deficient requirements of the audit, including audit reference numbers.
- Make recommendations for improvement for each deficiency.
- Assign responsibility for each action.
- Set target dates for completion.

An action plan is a condensed version of the written report and is typically favoured for that reason. An action plan can be submitted in any form or format but must contain the information stated above. You will also note that the corrective action plan must be signed off by the auditor, worker safety representative/safety committee member, and senior management just like the executive summary sheet. At the time of the close out meeting, the action plan will be reviewed and signatures can be collected.

**IMPORTANT:** The corrective action plan that is developed by the auditor and presented to the company is to be considered as suggestions for improvement based on the audit findings. The company is encouraged to either adopt or adapt the plan as they see fit. It is ultimately the company's responsibility to manage and improve the program in a way that best fits their organization.

### **Making Recommendations**

When making a recommendation for improvement, it is important to provide enough detail and information to the company so that they can effectively identify the area(s) of concern and adopt/implement the recommendations made. A good recommendation is procedural by nature and will identify the steps, in chronological order, on how to effectively and efficiently implement the changes.

#### **For example:**

A company was not awarded points for interview question 6.1 — Are activities requiring PPE documented and is specific criteria used to select appropriate PPE for those activities?

The recommendation should lay out a plan for educating workers in all the methods and criteria that are used for selecting PPE. This can be done through updating orientations and developing topic specific toolbox talks, and can be reinforced through hazard identification and control methods. The responsibility for updating orientations, writing new toolbox talks, and delivering toolbox talks should be clearly assigned to individuals and timelines for implementation be identified. This will be a good foundation for communication when there are questions regarding the plan or when the company is following up on the corrective action plan to monitor progress.

The corrective action plan is not just for deficient components of the audit. The corrective action plan is a prime opportunity for the auditor to communicate any concerns they noted throughout the audit process or, where questions resulted in a majority positive result, but only by a small margin. As a company grows and changes, these areas will become more and more important to continued success of the program.

**AUDIT CORRECTIVE ACTION PLAN**

Date reviewed: \_\_\_\_\_



Audit Reference #	Recommendation	Assigned To	Target Completion Date	Date Completed

Reviewed: \_\_\_\_\_

Senior Management/Company Officer Signature

Auditor Signature

Worker Safety Rep./Safety Committee Co-Chair Signature

## **Close-out Meeting**

Immediately after the audit is completed, you should hold an audit close-out meeting. For larger organizations, an opening meeting is also held, and the close-out meeting usually has the same people in attendance.

At this time, the audit is reviewed in its entirety (section by section) from documentation review, sites visited, and number of interviews conducted. Credit should be given where they have performed well and recommendations for improvement should be identified for areas that need to be addressed. This can be done by reviewing the corrective action plan that you developed as part of the audit. It is important to note that the company is expected to either accept and adopt your plan, or make their own based on your recommendations and what works for their organization.

It is common for companies to question your results and ask for examples and information so they have a better understanding of how they can perform better. This is where your notes from documentation, observation, and interview become indispensable.

Once the meeting has concluded, allow for questions and have the company's senior representative and worker representative identify a goal for the next audit, sign the audit summary sheet, and sign your corrective action plan. These signatures identify that the company has been presented with the results, you have communicated to them the reasons behind your findings, they have been involved in the audit process, and they have accepted the results as part of record.

The agenda for this close-out meeting should be:

- Presentation of the written report or action plan.
- An overview of the audit and/or executive summary sheet.
- An identification of any immediate concerns that need to be addressed.
- Appropriate recommendations.
- A discussion of any other concerning issues.

# Appendices

## Appendix A



# REGISTERED AUDITOR

### Introduction

In accordance with Construction Safety Association of Manitoba (CSAM) audit protocol, each company's self-audit must be completed by a current or new CSAM registered auditor applicant.

CSAM's Principles of Safety Management training enables each company to tailor their safety program to suit their operations. The intent for CSAM registered auditor status is to assist in ensuring all audits received by CSAM are accompanied by the required supporting documentation and information.

### Prerequisite

Individuals who apply for registered auditor status must complete CSAM's Principles of Safety Management and Safety Auditor courses. (Equivalent training through other provincial jurisdictions may be given consideration for credit.)

### Items Required for Submission

- Completion of the registered auditor application
- Verification of attendance in Principles of Safety Management and Safety Auditor
- Submission of a completed audit instrument and required supporting documentation
- Submission of a corrective action plan including: corrective action, assignment of responsibility, and implementation dates

A CSAM registered auditor certificate with a three-year expiry date will be issued upon successful evaluation and approval.

Registered auditors must complete a self-audit on an annual basis in order to maintain their status. Failure to maintain registered auditor status will require reapplication to CSAM and submission of required documentation.



**\*Supporting documentation submitted to CSAM will be retained on file and will not be returned to the company.**



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

# REGISTERED AUDITOR APPLICATION

*Please print clearly*

Name: \_\_\_\_\_

Date of application: \_\_\_\_\_

Company: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City/town: \_\_\_\_\_ Postal code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**This information is required to process your application. Please complete all sections before submitting:**

1. I have completed:  
☐ Principles of Safety Management  
☐ Simplified Safety  
Date completed: \_\_\_\_\_
2. I have completed Safety Auditor. ☐ Date completed: \_\_\_\_\_
3. I have completed and attached a self-audit. ☐
4. I have completed and attached a written corrective action plan that includes: corrective action, assignment of responsibilities, and implementation dates. ☐
5. I have attached all supporting documentation required to complete my self-audit. ☐

---

**Please submit your completed application and documentation requirements to:**

**Head Office:**  
1447 Waverley Street  
Winnipeg, MB  
R3T 0P7  
P: 204-775-3171  
F: 204-779-3505

**Westman Office:**  
950 - 10th Street  
Brandon, MB  
R7A 6B5  
P: 204-728-3456  
F: 204-571-0678

- 
- |   |  |
|---|--|
| <input type="checkbox"/> Registered auditor checklist completed | <input type="checkbox"/> Printout of training requirements           |
| <input type="checkbox"/> Photocopy executive summary            | <input type="checkbox"/> Photocopy corrective action plan            |
| <input type="checkbox"/> Registered auditor certificate issued  | <input type="checkbox"/> Registered auditor status updated in CALVIN |

## **Appendix B**

### **Audit Definitions and Interpretations**

The following definitions are meant to assist auditors in interpreting the terminology defined in the audit instrument and to clarify the intent of CSAM's COR® guidelines.

Auditors are reminded that the purpose of an audit is to analyze, interpret, and report on the system that is currently in place to manage the safety and health of a particular company.

Generally, this will focus on the implementation of an individual company's overall safety and health program. However, in circumstances where a company conducts their operations as a project manager, residential home builder, or prime contractor, the focus will shift to the implementation of the safety and health management system on the job site — which would include all contractors that they would be responsible for.

### **Personnel Definitions**

**Employee** – a full-time or part-time person who is directly employed by the company (receiving a salaried or hourly wage). This does not include persons working for a company on a fee-for service (such as a sub-contractor or consultant).

**Employer** – includes every person who, by himself or his representative, employs or engages one or more workers.

**Independent auditor** – an impartial, independent auditor who performs an audit on a company that has requested or is renewing COR®/SECOR® Certification. ALL external auditors are appointed and arranged by CSAM.

**Internal auditor** – a representative of CSAM who has been appointed to conduct an audit on a company that has requested COR®/SECOR® Certification.

**Management** – a company representative who has the ability to: make decisions, implement changes, direct activities of others, and enforce the safety program. A manager can include: a project manager, supervisor, lead hand, or others designated by the company.

**Owner** – the owner of land or premises to be used as a workplace.

**Owner/operator** – refers to a self-employed person performing their own work operations.

**Prime contractor** – the person or company designated to be in charge of the entire work site. A prime contractor has the responsibility to develop, implement, and monitor a system to manage the safety and health performance of everyone at the work site.

**Registered auditor** - individuals who have completed the CSAM training courses Principles of Safety Management and Safety Auditor and have submitted a qualifying audit that meets the standards of COR®/SECOR® and CSAM.

**Senior management** – the owner of a company or his/her authorized representative who has signing authority (for policies, procedures, purchases, etc.)

**(Sub)-contractor** – non-direct employees of a company, rather those performing duties on a contract basis. Sub-contractors may be interviewed during the performance of an audit in residential construction or project management companies if there are few or no direct company employees on site. This definition includes self-employed persons.

**Supervisor** – an individual who has charge over a worksite and/or authority over other workers.

**Supplier** – an individual, company, or organization who provides; sells; leases; installs tools; equipment; materials; machines or devices; or biological or chemical substances to be used in a workplace.

**Visitor** – any person who is not directly employed at a worksite but who may enter the site (whether invited or uninvited) to deliver materials or conduct a formal or visual assessment.

**Worker** – an individual who does not have authority to direct or manage the activities of others. Any person who is employed by an employer to perform a service whether for gain or reward, or hope of gain or reward.

**Worker safety representative** – an employee elected by fellow workers or designated by the employer to assist as a liaison between management and workers with respect to safety and health issues.

## Other Definitions

**Act** – the Manitoba Workplace Safety and Health Act, Chapter W210.

**Audit corrective action plan** – a document located in the front of the audit instrument that aids the auditor in identifying weaknesses, setting goals, and assigning personnel to correct deficiencies for your next audit.

**Audiometric testing** – testing a person's ability to hear sounds at various frequencies.

**Audit** – Verifying safety and health performance against a given standard.

**Closeout meeting** – a meeting that involves the auditor and members from the company audited (usually upper management).

**Current** – documentation that requires a completion date of no longer than one year prior to the current date.

**Critical task** – a task that has a high probability of severe injury, loss, or adverse effect if not performed properly. A critical task must have a written step-by-step safe work procedure in which employees must be trained.

**Directive** – written instruction or guidelines that indicate how to perform an action, reach a goal, or conduct company operations.

**Documentation** – supplying paperwork (completed hazard assessment forms, orientations, etc.) to prove your company due diligence as required by law.

**Due diligence** – means taking all reasonable precautions, under the particular circumstances, to prevent injuries and/or incidents in the workplace along with the ability to prove this confirmation by means of documentation.

**Independent audit** – a CSAM-arranged third-party or independent audit performed on a company as the third and final step toward the achievement or renewal of COR® Certification.

**Executive summary sheet** – a comprehensive evaluation including: points awarded; verification of minimum standards met; and positive and negative comments for each of the 15 sections.

**Hazard** – any circumstance or condition which poses the risk of an accident or injury.

**Hazard assessment** – a thorough examination of an operation to identify the actual and potential hazards prior to work commencing and whenever the work or work environment changes.

**Incident** – any unplanned and unwanted event which resulted in or could have resulted in damage or injury.

**Incident investigation** – determination and analysis of the facts of the incident to establish the causes and the corrective measures required.

**Internal audit** – an audit performed by a representative from CSAM as the second step toward the achievement or renewal of COR® Certification.

**Interview** – a formal meeting in which people are asked predetermined questions by the auditor to test knowledge on the company's safety and health program.

**Job specific training** – includes both formal and informal training conducted by a qualified person that is required by employees in order to perform specific work tasks (i.e.: confined space entry, aerial lift operation) delivered either in-house or by an outside agency.

**Manufacturers recommendations** – written information supplied by the manufacturer providing details on recommended procedures for use, care, or maintenance of tools, equipment, or vehicles.

**Musculoskeletal injury (MSI)** – an injury or disorder of the muscles, tendons, ligaments, joints, nerves, blood vessels, or related soft tissue.

**Near miss** – an unplanned event that did not result in loss, damage, injury, or illness, but had the potential to do so.

**Observation** – the act or faculty of observing a worksite.

**Personnel** – represents the entire makeup of a company's workforce.

**Policy** – a written, signed statement that communicates management's intent, objectives, requirements, responsibilities, and standards.

**Qualified person** – a person who the employer deems to be competent based on prior experience, knowledge, or training.

**Registered auditor** – individuals who have completed the CSAM training courses (Principals of Safety Management and Safety Auditor) and have submitted a completed audit that meets COR®/SECOR® standards.

**Regulation** – the Manitoba Workplace Safety and Health Regulation 217/2006.

**Reverse onus** – a clause within a statute that shifts the burden of proof on to the individual specified to disprove an element of information.

**Safe job procedure** – a step-by-step set of instructions outlining how to conduct a task or operate tools/equipment safely from beginning to end.

**Safe work practice** – generalized guidelines (dos and don'ts) of how to perform a task or an operation safely (i.e. tools, equipment, material handling).

**Safety** – is a state of mind by which a person is constantly aware of the possibility of an incident occurring at any time.

**Safety management** – a systematic, organized process to reducing the human and financial costs of workplace incidents.

**Sound monitoring** – a measurement of sound levels in a work environment.

**Toolbox talk/tailgate meeting** – a safety meeting required to be held and documented weekly for 15 minutes or biweekly for 30 minutes, as stated in Section 44(3) page 50 of the the Workplace Safety and Health Act.

## **Acronyms**

**ANSI** – American National Standards Institute

**COR®** – Certificate of Recognition

**CFCSA** – Canadian Federation of Construction Safety Associations

**CSA** – Canadian Standards Association

**GSC** – Gold Seal Certified

**JHA** – Job Hazard Analysis

**NCSO®** – National Construction Safety Officer

**NHSA™** – National Health and Safety Administrator

**PPE** – Personal Protective Equipment

**SDS** – Safety Data Sheet

**SECOR®** – Small Employer Certificate of Recognition

**WCB** – Workers Compensation Board

**WHMIS** – Workplace Hazardous Materials Information System

**WSH** – Workplace Safety and Health

# Training Materials



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA



# **Table of Contents**

## **1. Company Safety and Health Program**

- Safety Policy
- Assignment of Responsibility and Accountability for Safety
- Identification of Hazards
- Safety Rules
- Personal Protective Equipment Policy
- Maintenance Policy
- Training and Communication Policy
- Inspection Policy
- Incident Investigation Policy
- Emergency Preparedness Policy
- Safety Statistics and Records Policy
- Occupational Safety and Health Requirements for Contracted Work
- Hearing Conservation Program
- Working Alone or in Insolation Policy
- WHMIS Guidelines
- Operator/Training and Verification Policy
- Musculoskeletal Injury Prevention Policy
- Harassment Prevention Policy
- Violence Prevention Policy

## **2. Hazard Assessments**

- Hazard Assessment Checklists
- 2nd Choice Plumbing H.I.T. Lists
- Barker Roofing H.I.T. Lists

## **3. Inspections**

- Harness Inspections
- Telehandler Pre-Use Inspections
- Site Inspections
- Shop Inspections

## **4. Incident Investigation**

- Near Misses
- Medical Aid Incident

## **5. Maintenance Records**

- Equipment Inventory
- Company Vehicle Service Records

## **6. Meeting Minutes**

- Toolbox Talk Forms

## **7. Training Records/Personnel Files**

- Training Certificates
- Mobile Elevated Work Platform Evaluations
- Contractor Compliance Declaration Forms
- Disciplinary Action Notices
- Orientations
- Competency Tests

## **8. Safe Work Practices**

- Table of Contents
- Written Practices

## **9. Safe Job Procedures**

- Table of Contents
- Written Procedures
- Lockout/Tagout
- Working Alone Procedures
- CSA Selection, Fit, Care, Use Information

## **10. Statistics and Records**

- Leading and Lagging Indicators
- First Aid and Treatment Record
- Audit Corrective Action Plan

## **11. Emergency Response Plan and Testing**

- Site Emergency Plans
- Fall Protection Rescue Plans
- Fire Extinguisher Report

## **12. Interview and Observation**

- Observation Checklists
- Employee
- Management/Supervisor
- Worker Safety Rep/Committee Member
- Sub-contractor

**Organizational Chart for SRCC LTD.**

Position	Name	Main Responsibilities	Further Responsibilities
Owner and Founder	Hugh Midor	Employer	None
Part Own/ Foreman	Anita Plumber	Employer	Supervisor
Lead Hand	Douglas Furr	Supervisor	Worker/ Laborer
Lead Hand	Gene Pool	Supervisor	Worker/ Laborer
Lead Hand	Jack Pott	Supervisor	Worker/ Laborer
Lead Hand	Taj Mahal	Supervisor	Worker/ Laborer
Employee	Marcus Absent	Worker/ Laborer	Worker Safety Rep.
Employee	Pete Moss	Worker/ Laborer	Worker Safety Rep.
Employee	Althea Thoone	Worker/ Laborer	Worker Safety Rep.
Employee	Colin Toksho	Worker/ Laborer	Worker Safety Rep.
Employee	Robin Banks	Worker/ Laborer	None
Employee	Willie Maykit	Worker/ Laborer	None
Employee	Ryan Koch	Worker/ Laborer	None
Employee	Justin Case	Worker/ Laborer	None
Employee	Brita Waters	Worker/ Laborer	None



## Section 1

### **Safety Policy**

The safety and health of the employees of **Some Random Construction Company (SRCC) Ltd.** is of vital importance. Safety is a condition of employment with our company and shall not be sacrificed for the sake of expediency.

It is our belief that all incidents can be prevented, and every effort shall be made to:

- Identify hazards
- Communicate hazard information to employees
- Control, eliminate, or reduce the risk of those hazards

As outlined in our company manual, safety is a shared responsibility by all employees and shall be an integral component of work activities — together we can create a positive safety culture and ensure a safe workplace.

All employees will be expected to fulfill their safety responsibilities and to follow our company safety manual.

#### **Employees' legislated rights:**


- Right to refuse – dangerous work
- Right to know – about safety and health hazards in the workplace
- Right to participate – in safety and health activities
- Right to work without being subject to reprisal

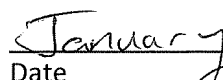
**SRCC Ltd.** recognizes the importance of active involvement in our company safety program and will ensure that this manual and our policies and procedures are reviewed and updated on a regular basis. At minimum, our company safety program will be audited on an annual basis to the COR® national standard and reviewed every three years as required under the Workplace Safety and Health (WSH) Act.

Management, safety and health representatives, and employees will abide by our company safety manual and the WSH Act and Regulation.

We recognize that the responsibilities for safety and health are shared, thus we encourage and expect complete, active participation by everyone.

Through conscientious contribution and continuous wholehearted support, we can, and will, improve our safety performance and assure a healthy, happy, and safe future for all concerned.

  
\_\_\_\_\_  
Owner

  
\_\_\_\_\_  
Date

## Assignment of Responsibilities and Accountability for Safety

### Owner

<ul style="list-style-type: none"> <li>• Provide a safe workplace</li> <li>• Provide leadership by personal example</li> <li>• Establish and maintain a safety program, ensuring a comprehensive review every three years</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure compliance with WSH Legislation</li> <li>• Ensure proper training of employees</li> <li>• Ensure proper PPE is available</li> <li>• Ensure incidents are investigated</li> <li>• Ensure injuries are reported to WSH and WCB as required</li> </ul>
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### Managers

<ul style="list-style-type: none"> <li>• Provide leadership by personal example</li> <li>• Ensure compliance with WSH Legislation</li> <li>• Identify hazards</li> <li>• Tell others about the hazards               <ul style="list-style-type: none"> <li>○ employees</li> <li>○ clients</li> <li>○ others affected</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Control or eliminate hazards</li> <li>• Provide training as appropriate</li> <li>• Ensure PPE is worn as required</li> <li>• Enforce PPE is worn as required</li> </ul>
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### WSH committee/worker safety representative

<ul style="list-style-type: none"> <li>• Provide leadership by personal example</li> <li>• Assist in employee safety issues</li> <li>• Assist in identification of hazards               <ul style="list-style-type: none"> <li>○ inspections/hazard assessments</li> <li>○ investigations</li> </ul> </li> <li>• Assist in the control or elimination of hazards</li> </ul>	<ul style="list-style-type: none"> <li>• Suggest and advise of PPE requirements and/or purchase</li> <li>• Coordinate toolbox safety talks for employees</li> <li>• Participate with others exercising a duty under the WSH Act</li> </ul>
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### Employees

<ul style="list-style-type: none"> <li>• Report hazards or unsafe conditions</li> <li>• Correct hazards or unsafe conditions</li> <li>• Report all injuries and incidents</li> <li>• Comply with company safety program</li> <li>• Wear required PPE</li> </ul>	<ul style="list-style-type: none"> <li>• Follow instructions and training received</li> <li>• Use tools and equipment as intended</li> <li>• Participate in toolbox talks</li> <li>• Make safety suggestions</li> <li>• Set a good example</li> <li>• Participate in inspections</li> </ul>
---	---

### Contractors

<ul style="list-style-type: none"> <li>• Complete a contractor compliance declaration</li> <li>• Advise the prime/owner of any other contractors entering the worksite</li> <li>• Complete a safety orientation and hazard assessment prior to start up</li> </ul>	<ul style="list-style-type: none"> <li>• Comply with the WSH Act and Regulation</li> <li>• Wear required protective equipment</li> <li>• Ensure workers are adequately trained</li> <li>• Follow all safe work practices and job procedures</li> </ul>
--	--

## Identification of Hazards

The identification of hazards is a legal responsibility and a very important component of accident prevention. As such, we will do all that is reasonably practicable to ensure hazards are identified, prioritized, communicated to appropriate people, and controlled to reduce their risk.

For the purpose of identifying hazards, at minimum, **SRCC Ltd.** will conduct:

- Hazard assessments
- Inspections
- Incident investigations

Upon identification of a hazard, the following hazard priority ranking shall be used to help determine the necessary control measures:

### Severity

1. **Immediate danger** (death, disaster)
2. **Serious** (major injury or damage)
3. **Minor** (non-serious injury or damage)
4. **Negligible** (first aid or less)
5. **Not applicable**

### Probability

- A. **Probable** (immediately or soon)
- B. **Reasonably probable** (eventually)
- C. **Remote** (could at some point)
- D. **Extremely remote** (not likely)

Management, safety, and health committee members and employees will abide by our Identification of hazards directive and the Workplace Safety and Health (WSH) Act and Regulation.

Hugh Midor  
Owner

January  
Date



## Safety Rules

The following safety rules have been developed to reduce the risk of an incident occurring. All employees will be expected to know and follow our safety rules, while working on behalf of our company.

### General safety rules

- Walkways and work areas must be kept free of obstructions at all times.
- Appropriate footwear will be worn in the workplace.
- PPE provided as a control for a particular hazard, will be worn as specified.
- No fighting, horseplay, practical jokes, or other interfering with other workers.
- No alcohol or illegal drugs (including be in possession of or under the influence of).
- Perform all work in accordance with safe work practices/procedures and management direction.
- All incidents will be immediately reported to management.
- Unsafe acts, unsafe conditions, and near misses will be reported to management promptly.
- Equipment and tools will be used in the manner they are intended to be used.
- Every employee will keep their work area neat, clean, and orderly.
- Smoking is not permitted inside **SRCC Ltd.** building or while attending client worksite locations. This includes the use of e-cigarettes.

### Disciplinary action

**SRCC Ltd.** reserves the right to administer whatever discipline is necessary to ensure safety rules and regulations are complied with.

Management has the authority to suspend an employee who willfully and knowingly disobeys our company rules.

1. First infraction - verbal warning
2. Second infraction - written warning
3. Third infraction - sent home for that day
4. Fourth infraction - indefinite suspension and/or termination

All infractions will be documented, and a copy retained on file.

Hash Midor  
Owner

January  
Date



## **Construction Project Site: 321 Fake Street**

### **Site Access Rules:**

- DO NOT start work without an orientation.
- Always report to the site office to sign in and out of site, including drivers, visitors, and workers.
- Always obey Safety Signs and rules.
- NO SMOKING except in designated Areas.

### **Personal Protective Equipment Rules:**

- CSA Approved Hard Hat and Steel Toe Boots must be always worn.
- High Visibility Safety Apparel must be always worn.
- Additional Specialized PPE must be worn for job specific tasks based on Risk Assessment.

### **Equipment Rules:**

- Never removed guard rails without authorization from the Prime Contractor.
- Workers must provided wallet training certificate to site office BEFORE operating any Power Mobile Equipment.

### **Behavior Rules:**

- OBEY Safety rules, signs, and instructions.
- Never enter unsupported Trenches.
- Never operate a piece of Power Mobile Equipment if you have not presented the site office with your wallet training certificate.
- Keep work areas tidy, dispose of waste in designated areas.
- Harassment, Violence, Bullying, and/ or Horseplay will not be tolerated.

### **Reporting Rules:**

- REPORT all incidents and near misses to your direct Supervisor.
- Supervisors will report all incidents and near misses directly to the Site Office.
- REPORT unsafe acts and/ or conditions on site.
- Always ask if you think something is Dumb, Dangerous, Difficult, or Different.



## Personal Protective Equipment Policy

All employees will use the appropriate personal protective equipment when and where it is required. All employees will be expected to know and wear the required personal protective equipment (PPE). Generally, this will be prescribed by:

- Workplace Safety and Health (WSH) Act and Regulations
- Safety Data Sheets (WHMIS – SDS sheets)
- Our company safety rules
- To control a specified hazard

At all times when on a construction project, or when the nature of work requires, employees will wear the following basic PPE:

- CSA-approved hard hats
- CSA-approved safety footwear (green triangle, Grade 1 protective toe and ankle protection – no safety shoes)
- Long pants and sleeved shirts

The following specialized PPE will be required to be worn for the specific job or to control potential hazards. As such, any person entering a construction site should have the following specialized PPE readily available to wear.

- Safety eyewear
- Hearing protection
- High visibility vests
- Gloves

All PPE will be kept in good condition and maintained according to the manufacturer's specifications. PPE used must conform to CSA and/or ANSI standards.

Hugh Mider  
Owner

January  
Date



## Maintenance Policy

All tools, equipment, machinery, and vehicles are to be kept in a condition that will maximize the safety of all personnel and maintained as per manufacturers specification.

All employees will use tools and equipment in the way they are intended and will receive training and instruction in their safe operation. Employees will participate and apply the training received.

- **DO NOT attempt to use any tool or equipment that you are not competent with or cannot use safely**
- **ASK management**

Employees must report all observed defects to their supervisor and the defective item must be taken out of service immediately by attaching a lock and tag that identifies the defect. All necessary repairs are to be conducted by a qualified person.

To accomplish our maintenance program goals, an inventory of all major tools, equipment, specialized protective equipment, machinery, and vehicles will be kept and updated. The results of any repairs or pre-job inspections will be documented.

To ensure our maintenance program is being implemented we will complete the following:

1. Adherence to manufacturers' specifications, standards, and regulations.
2. The employees' responsibility for inspecting all tools and equipment prior to using them.
3. Frequency of inspections include:
  - Pre-use inspections of vehicles.
  - Pre-use inspections of **SRCC Ltd.** aerial lift.
    - Bi-annual inspection of aerial lift.

**SRCC Ltd.**'s management will be responsible for the application of the maintenance program in his/her area of responsibility.

Hugh Midor  
Owner

January  
Date



## Training and Communication Policy

All personnel have a legal duty to share required information that:

- May affect the safety, health, or welfare of others.
- Is necessary to identify and control existing and potential hazards.

All personnel will continuously be on the lookout for hazards and if practicable, control them immediately. Personnel are to immediately inform management, and those affected, of any situation in which they deem to be hazardous.

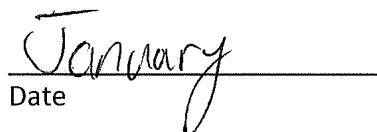
Serious hazards and their controls will be discussed with all personnel as soon as reasonably practicable. The hazards identified through hazard assessments, inspections and investigations will also be posted on the safety bulletin board.

Information, Instruction, and Training will be provided based on Legislative requirements, manufacturers recommendations, Task-Specific Safe Job procedures, and High Risk Task Safe Job Procedures.

Notwithstanding the above, the following items will serve as our minimum guidelines to establishing an effective means of hazard communication:

- Management availability at all times
- Workplace safety and health committee
- Orientations
- Toolbox talks
- Job specific instruction and training
- WHMIS
- Posted and/or made readily available:
  - Safety manual
  - Applicable legislation
  - Emergency procedures
  - Emergency telephone numbers
  - SDS sheets
  - Safe work practices/safe job procedures

  
Owner

  
Date



## Inspection Policy

As part of our hazard identification program, inspections of the building and work activities shall be conducted.

At a minimum, a formal inspection by supervisors, with the assistance of the workplace safety committee representative, shall be conducted on a monthly basis, using the form provided in our company safety manual. The shop and construction project sites are to be inspected monthly.

All personnel will continuously be on the lookout for hazards and if practicable, control them immediately. Personnel are to inform management if the hazard cannot be controlled immediately as well as inform others that may be affected.

All corrective actions shall be written and kept on file, with completed inspections posted so as others can read them. If an identified hazard cannot be controlled within a reasonable time period, management shall inform the president for appropriate action.

Management, safety and health committee representatives, and employees will abide by our company safety manual and the Workplace Safety and Health Act and Regulation.

The inspection frequency sheet and schedule are sent out to all employees at the beginning of the year and can be found in **SRCC Ltd.'s** staff room.

Hugh Midor  
Owner

January  
Date



## Incident Investigation Policy

Incident investigations are an integral component of our company safety program and shall be conducted to determine the cause of an incident in order to implement corrective action to prevent future occurrences.

All incidents are to be reported immediately to management, with an initial investigation report completed by **SRCC Ltd.'s** representative and if necessary, with assistance from a Workplace Safety and Health (WSH) committee member within 24 hours. Depending on the severity of the incident, a detailed investigation by management and a WSH committee representative will be completed within three working days. The completed investigation will be forwarded to **SRCC Ltd.** owner for review and recommendation, immediately upon completion.

Reported immediately to management, the initial investigation report must be completed within 24 hours:

- Personal injury requiring first aid
- Incidents resulting in less than \$500 property damage
- Occurrences that could have resulted in an incident (near miss)
- Incidents that have the potential for occupational illness or environmental damage

Reported immediately to management, detailed investigations must be completed within three days:

- Personal injury requiring medical aid from a health care professional
- Incidents resulting in more than \$500 property damage
- Incidents that result in a fire, explosion, or flood

**By Regulation, all "serious" injuries involving: death, injury from electrical contact, unconsciousness, fractures, amputations, third degree burns, loss of sight, cut or laceration requiring medical attention, asphyxiation or poisoning, collapse of structure, explosion, fire, flood, uncontrolled spill or failure of an atmosphere-supplying respirator must be immediately reported to the WSH Branch (see procedures for reporting).**

All incidents and the corrective action shall be discussed with the workforce at monthly toolbox meetings and WSH committee meetings.

Management, WSH committee representatives, and employees will abide by our incident investigation policy and the WSH Act and Regulation.

Hugh Midor  
Owner

January  
Date



## Emergency Preparedness Policy

**SRCC Ltd.** will ensure that plans are in place to deal with emergency situations in the building and for specific types of hazards identified. At minimum, **SRCC Ltd.** will ensure the ability to provide:

- First aid to an injured worker
- Transportation to a medical facility
- Means of contacting outside agencies for assistance
- Means of conducting an initial attack on fire

Management is responsible for the development of emergency procedures for any unusual hazards or tasks that employees may encounter. All emergency preparedness information will be made readily available and employees will be given an orientation to ensure they are aware of:

- Location of emergency equipment
  - First aid supplies
  - Fire extinguishers
  - Rescue equipment
  - AED
- Location of communication device and contact numbers for contacting outside assistance
- Location of SDS sheets
- Escape plan and muster point
- Emergency phone numbers

### First aid guidelines

**SRCC Ltd.** is responsible to ensure the prompt and efficient administration of first aid to an injured employee. We will provide supplies, equipment, and personnel as appropriate to employees and clients while in the building.

At minimum, we will provide and maintain:

- First aid kit, first aid manual and first aid logbook
- First aid personnel in the building at all times as required by Workplace Safety and Health (WSH) Regulation 5.5(1) Table 1. WSH committee members will hold a valid first aider/CPR/AED certificate with a representative located in the administration, safety, and plan room areas
- Transportation to a medical facility
  - If at a distant or isolated workplace, the transportation must be capable of accommodating a stretcher
- Communication device to contact outside emergency services



## Safety Statistics and Records Policy

Maintenance of accurate safety records is an essential component of our safety program. Accurately documented records provide a resource to determine areas for further preventative action and will assist our company in demonstrating our "due diligence", should the need arise.

Management will ensure all safety-related information is documented and filed with a review of safety statistics on an annual basis.

Employees will be given the opportunity to examine **SRCC Ltd.'s** statistical data pertaining to safety and are encouraged to provide their input toward the enhancement of the safety program.

All forms or reports should be readily available, neat, and readable, filled out and signed/dated by the appropriate worker, supervisor, safety rep, or management. Statistics and records will be reviewed on a bi-annual basis by the workplace safety and health (WSH) committee.

At minimum, the WSH committee worker co-chair shall ensure the following reports are kept on file:

- Safety orientations and training records
- Minutes of toolbox and WSH committee meetings
- Incident investigation reports
- First aid treatment reports
- Inspection reports
- Annual and monthly statistical summaries
- Safety rule and PPE violation records
- Maintenance records
- Hazard assessments

Hugh Midar  
Owner

January  
Date



## Occupational Safety and Health Requirements for Contracted Work

### Purpose

**The Company** places a high priority on safety and health and requires all contracted parties to place the same level of priority on safety and health during the execution of **The Company's** work.

The purpose of this policy is to ensure that all construction and maintenance work undertaken by contracted parties of **The Company** will be undertaken in a safe manner in consideration of all hazards present, or associated with the work performed, in complete compliance with the WSH Act and Regulation.

### Contractual Clauses

The following clauses will be deemed to be included in the contract between **The Company** and the successful contractor:

- Contractor is COR® Certified or holds a current safety program registration issued by the Construction Safety Association of Manitoba.
- Contractor is aware of and acknowledges its legal duties and responsibilities as an employer under sections 4 and 7.4 (if applicable) under the WSH Act and shall ensure that the services provided are carried out in accordance with the Act and all applicable Regulation.
- Contractor shall ensure that its employees, agents, and subcontractors are properly qualified, trained, and competent to perform the services and procure appropriate products.
- Contractor shall ensure adequate supervision and worker safety representation as outlined in the WSH Act.
- Contractor shall conduct a pre-job hazard assessment and submit a copy of the results to **The Company** prior to start-up.
- Contractor shall allow **The Company** the right to inspect and audit site conditions and all pertinent safety performance records for the purpose of measuring adherence to **The Company** safety and health objectives and compliance with the contractual obligations herein (\*however, it is clearly understood that this will not be deemed to be relating to execution or coordination of contractor activities. For greater certainty, the contractor is the sole person responsible for the execution and coordination of work.)
- Contractor will procure hazardous products and ensure Safety Data Sheets are made available on site.
- Contractor acknowledges that failure to comply with **The Company's** safety and health requirements shall be cause for either immediate termination or suspension of the work until the deficiency, in **The Company's** sole opinion is rectified, at no cost to **The Company**. In either case without prejudice to **The Company's** rights to remedies or damages for such failure.
- Contractor is responsible to obtain Workers Compensation Board of Manitoba (WCB) coverage and remain in good standing with the WCB for the duration of the project.



## Hearing Conservation Program

**Regulation summary:** Part 12 of the Workplace Safety and Health Regulation 217/2006, Hearing Conservation and Noise Control, requires employers to assess the workplace for noise exposure. If the eight-hour average noise exposure level is above 85 dBA, the employer must institute a hearing conservation program. When workers are exposed to noise levels above 80 dBA, the employer must provide training to all workers on the hazards of the level of noise they are experiencing and provide hearing protection for workers who request it.

When a noise exposure assessment indicates a worker is exposed to noise in the workplace that exceeds 85 dBA, the employer must inform the worker and implement sound control measures to reduce the noise to 85 dBA or less.

If the employer is unable to reduce the noise to below 85 dBA, the employer must implement all requirements under Part 12 of the Workplace Safety and Health Regulation 217/2006:

- **All** employees will be trained in hearing conservation.
- Annual sound monitoring will be conducted on all facets of work performed or when equipment or tasks change.
- Where average noise levels are in excess of 80 dBA hearing protection will be made available, in excess of 85 dBA hearing protection **must** be worn.
- Annual audiometric testing will be done on **all** employees.
- Training will be provided on the fit, care, and use of hearing protection.

**Note:** For new employees, a baseline test must be conducted within the first six months of employment.

Hugh Mider  
Owner

January  
Date



## Working Alone or In Isolation Policy

The safety of all employees of **SRCC Ltd.** is of utmost priority. In the interest of ensuring, so far as reasonably practicable, the safety, health, and welfare of our employees, NO PERSON shall be permitted to work alone or in isolation without the express written permission of management.

Prior to any employee being allowed to work alone or in isolation, a written and signed procedure will be developed. The procedure shall include at minimum:

- The provision of means of securing assistance (communication device) in the event of injury or other misfortune
- Reporting of the site location, contact and expected time away

### Written working alone procedure

The working alone procedure shall be written and signed by the person working alone and the designated contact person. Details of the procedure to follow in working alone situations shall include:

- Details of beginning and end of working alone situation
- Specific time or intervals for employee contact
- Details of who shall establish contact
- Procedure to follow if contact cannot be established
- Procedure regarding emergency rescue
- Method for recording of employee contacts

Hugh Midor  
Owner

January  
Date



## WHMIS Guidelines

The Workplace Hazardous Materials Information System (WHMIS) is a Canada-wide system to inform workers of hazardous materials (referred to as controlled products) and ensure they know how to work safely with them.

WHMIS revolves around three main concepts:

1. **Labels**
2. **SDS**
3. **Worker education**

At minimum, we will ensure that all WHMIS controlled products received, stored, or used on premises, will be properly identified, and supplied with appropriate labels and SDS sheets.

All employees will receive training in WHMIS prior to using any controlled product to ensure that:

- All controlled products are identified:
  - WHMIS supplier label must be attached or,
  - WHMIS Workplace label must be attached
- All controlled products have a current SDS
  - Readily available to employees (and others affected)
  - Referred to prior to using the controlled product
- All employees are trained to identify, handle, store, and work safely with the controlled products in use

All training will be documented, and a copy retained on file. **SRCC Ltd.** will ensure that all training provided to workers regarding WHMIS will, at minimum meet the requirements of Part 35.3(1), (2), and (3) so far as is reasonably practicable.

The review of the WHMIS training program will be conducted, at minimum, annually or sooner as required due to changes to products used in the workplace or changes in regulation. The review will comply with Part 35.4 of the WSH Regulation and involve the committee.

Hugh Mider  
Owner

January  
Date



## Operator/Training and Verification Policy

It is the policy of **SRCC Ltd.** to ensure that, only employees who hold a current and valid driver's license will be authorized to operate company vehicles. All employees must provide an annual driver abstract and sign the driver declaration in the employee personal file. This abstract will only be viewed by the employee and management. As well, a record of competency or appropriate certification training for the safe operation of **SRCC Ltd.**'s equipment and machinery must be provided, prior to any use and/or operation as applicable.

Employee's responsibilities include the following:

- Maintain a current and valid Manitoba driver's license
- Notify management if driver's license is not valid or has been revoked for any reason
- Ensure that all safety devices, including seat belts, are used by all vehicle occupants
- Operate vehicles in accordance with all applicable traffic laws
- Report unsafe vehicle conditions or concerns *promptly* to supervisor
- Report all accidents, license suspensions, and traffic violations to supervisor
- The use of alcohol or illegal drugs is always strictly prohibited

**SRCC Ltd.** responsibilities include:

- Vehicle maintenance and servicing as per manufacturers recommendations
- Costs and maintenance of vehicle insurance, insurance deductible, gasoline, exterior cleaning, emergency road kit, first aid kit, and fire extinguisher

Hugh Midor  
Owner

January  
Date



## Musculoskeletal Injury Prevention Policy

Part 8 of the Manitoba Workplace Safety and Health Regulation 217/2006 requires employers to conduct a risk assessment when they are aware or have been advised or become aware that a work activity creates a risk of musculoskeletal injury (MSI). The potential for the occurrence of an MSI is increased when workers are exposed to awkward or sustained posture, forceful exertions, repetitive motions, vibrations, or compression.

**SRCC Ltd.** will conduct pre-job hazard assessments to assist in identifying potential risks due to MSI. Upon determination that a risk to employees' safety or health exists, **SRCC Ltd.** will conduct a job hazard analysis to identify task specific demands and assist in controlling the risk factors.

"Control measures" when applied to MSIs, refer to deliberate changes to a job to reduce the employees' risk of suffering MSI. Control measures may include, but not be limited to engineering controls, administrative controls, the incorporation of rest schedules, the purchase of personal protective equipment and the development of written, step-by-step job procedures for conducting the task.

Education and training with respect to the recognition and control of MSI will be provided to all employees by a qualified company representative. All employees are encouraged to participate in the MSI prevention program and must report any related symptoms they may experience.

Hugh Mider  
Owner

January  
Date



## Harassment Prevention Policy

All employees are entitled to a work environment free of harassment. **SRCC Ltd.** will take all reasonable measures to ensure that no employee is exposed to harassment during their employment by enforcing a "zero tolerance" policy. Violators of the policy will be subject to disciplinary action in accordance with company developed procedures, or at the discretion of senior management.

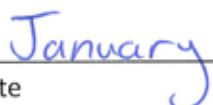
Workplace safety and health legislation defines "harassment" as, "any objectionable conduct that creates a risk to the health of a worker; or severe conduct that adversely affects a worker's psychological or physical well-being."

**SRCC Ltd.** defines this as any comment or display by a person that is directed at a worker in a workplace or is made on the basis of race, creed, religion, colour, sex, sexual orientation, gender determined characteristics, political belief, political association, political activity, marital status, family status, source of income, disability, size or weight, age, nationality, ancestry, or place of origin that may affect a workers psychological or physical well-being.

All employees must report harassment complaints to their immediate supervisor upon occurrence. The supervisor in conjunction with senior management and the safety committee representative will investigate each complaint while maintaining confidentiality. The details of the complaint investigation will be documented, interviews may be conducted, and the complainant and the alleged harasser will be informed of the results of the investigation. Details of the investigation may only be disclosed if necessary, to proceed with the investigation of the complaint, take corrective action, or are required by law. Employees have the right to file a complaint with the Manitoba Human Rights Commission. **SRCC Ltd.'s** harassment policy is not intended to discourage or prevent the complainant from exercising any other legal rights pursuant to any other law.

**SRCC Ltd.** will endeavor to work in a spirit of consultation and cooperation with all employees to achieve a respectful work environment for all employees.

  
Owner

  
Date



## Violence Prevention Policy

All employees are entitled to work in an environment free of violence. **SRCC Ltd.** will take all reasonable measures to ensure that no employee is exposed to the risk of violence during their employment by enforcing a "zero tolerance" policy. Violators of the policy will be subject to disciplinary action in accordance with company-developed procedures, or at the discretion of senior management. WSH legislation defines "violence" as, "the attempt or actual exercise of physical force against a person; and any threatening statement or behavior that gives a person reasonable cause to believe that physical force will be used against the person."

**SRCC Ltd.** will identify and assess the risk of violence in the workplace in consultation with the WSH committee and ensure compliance with the violence prevention policy. Workers will be made aware of the policy through their orientations and a copy will be posted prominently in the workplace. When an employee observes an act or behavior that is perceived to be threatening in nature which poses a potential risk to their own or others safety and health, the following procedures must be followed.

### Employees:

- Move to a safe location and report the incident to your supervisor immediately.
- Provide complete details of the incident.
- Do not try to resolve the incident yourself or interfere with violent individuals.

### Supervisors/senior management:

- Investigate all reported complaints of violence within 24 hours by completing a company investigation report form.
- Attempt to diffuse the situation by discussion with affected parties.
- Interview, if necessary, alleged violators of **SRCC Ltd.** policy.
- If a safe resolution is not possible, contact outside assistance such as: WSH Branch or the local police department.
- Inform the alleged violator and complainant of the results of the investigation.

Hugh Midor  
Owner

January  
Date





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT**

☐ **INSPECTION**

☐ **TOOLBOX TALK**

Company Name: SRCC Ltd.  
Supervisor: Jack

Location: 1300 Valley Road  
Safety Rep: Colin

**PRE-START CHECKLIST**

COMPLETED BY: Jan 14 Jack

DATE: Jan. 14

- ☒ Construction Site Signage
- ☒ Contact Numbers
- ☒ WHMIS/SDS
- ☒ Fire Extinguisher
- ☒ Washroom Facility

- ☒ Sub-Contractor Orientation
- ☒ Workplace Safety Act & Regulation
- ☒ Communication Device
- ☒ First Aid Supply/Eyewash
- ☒ Excavation Permit/Utility Clearance

- ☒ Public Protection
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.

**HAZARD/INSPECTION CHECKLIST**

COMPLETED BY: Jack

DATE: \_\_\_\_\_

- ☒ Fix Emergency Response
- ☒ Fix First Aid Kit
- ☒ Fix Ladder Walkways
- ☒ Fix Lockout/Tagout
- ☒ Fix Electrical Panel
- OK Fix Other: \_\_\_\_\_

- ☒ Fix PPE
- ☒ Fix Fire Extinguisher
- ☒ Fix Signage
- ☒ Fix WHMIS/SDS
- ☒ Fix Access/Egress
- OK Fix Other: \_\_\_\_\_

- ☒ Fix Tools & Equipment
- ☒ Fix Housekeeping
- ☒ Fix Guardrail
- ☒ Fix Utilities (Marked)
- ☒ Fix Heights/Fall Protection
- OK Fix Other: \_\_\_\_\_

Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.

1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable

A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
Electrical Hazards.	1B	Follow SJP - Be aware	Jack/Colin	Jan 14
High Voltage - LO/TO	1B	Follow SJP - Proper LO	Jack/Colin	Jan 14
Other Trades	3B	Discuss Hazards	Jack	Jan 14

**TOOLBOX TALK**

TOPICS DISCUSSED

WORKER'S COMMENTS

CORRECTIVE ACTION TAKEN

**ATTENDANCE**

Jack Pott

Colin





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT**

☐ **INSPECTION**

☐ **TOOLBOX TALK**

Company Name: SRCC Ltd.

Location: 146 Main St.

Supervisor: Taj.

Safety Rep: Marcus

**PRE-START CHECKLIST**

- ☒ Construction Site Signage
- ☒ Contact Numbers
- ☒ WHMIS/SDS
- ☒ Fire Extinguisher
- ☒ Washroom Facility

COMPLETED BY: Taj

- ☒ Sub-Contractor Orientation
- ☒ Workplace Safety Act & Regulation
- ☒ Communication Device
- ☒ First Aid Supply/Eyewash
- ☒ Excavation Permit/Utility Clearance

DATE:

☒ Public Protection

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.

**HAZARD/INSPECTION CHECKLIST**

- ☒ OK Fix Emergency Response
- ☒ OK Fix First Aid Kit
- ☒ OK Fix Ladder Walkways
- ☒ OK Fix Lockout/Tagout
- ☒ OK Fix Electrical Panel
- ☒ OK Fix Other: \_\_\_\_\_

COMPLETED BY: Marcus

- ☒ OK Fix PPE
- ☒ OK Fix Fire Extinguisher
- ☒ OK Fix Signage
- ☒ OK Fix WHMIS/SDS
- ☒ OK Fix Access/Egress
- ☒ OK Fix Other: \_\_\_\_\_

DATE: April 7

- ☒ OK Fix Tools & Equipment
- ☒ OK Fix Housekeeping
- ☒ OK Fix Guardrail
- ☒ OK Fix Utilities (Marked)
- ☒ OK Fix Heights/Fall Protection
- ☒ OK Fix Other: \_\_\_\_\_

Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.

1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable

A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
Asbestos Tile	2B	Follow abatement SOP	Taj.	April 7
Heavy Lifting	3C	Proper lifting techniques	Taj / Marcus	April 7
Tripping Hazards	3C	Clean up as we go	All workers	April 7

**TOOLBOX TALK**

TOPICS DISCUSSED

WORKER'S COMMENTS

CORRECTIVE ACTION TAKEN

**ATTENDANCE**

Taj.  
Marcus.

Brita.  
Ryan.





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT** ☐ **INSPECTION** ☐ **TOOLBOX TALK**

Company Name: SRCC Ltd.  
Supervisor: Anita

Location: 73 Beasley St.  
Safety Rep: Marcus

## PRE-START CHECKLIST

- ☒ Construction Site Signage
- ☒ Contact Numbers
- ☒ WHMIS/SDS
- ☒ Fire Extinguisher
- ☒ Washroom Facility

COMPLETED BY: Marcus

DATE: Sept. 5, 6, 7

- ☒ Sub-Contractor Orientation
- ☒ Workplace Safety Act & Regulation
- ☒ Communication Device
- ☒ First Aid Supply/Eyewash
- ☒ Excavation Permit/Utility Clearance

- ☒ Public Protection

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.

## HAZARD/INSPECTION CHECKLIST

COMPLETED BY: Marcus

DATE: \_\_\_\_\_

- ☒ OK Fix Emergency Response
- ☒ OK Fix First Aid Kit
- ☒ OK Fix Ladder Walkways
- ☒ OK Fix Lockout/Tagout
- ☒ OK Fix Electrical Panel
- ☒ OK Fix Other: \_\_\_\_\_

- ☒ OK Fix PPE
- ☒ OK Fix Fire Extinguisher
- ☒ OK Fix Signage
- ☒ OK Fix WHMIS/SDS
- ☒ OK Fix Access/Egress
- ☒ OK Fix Other: \_\_\_\_\_

- ☒ OK Fix Tools & Equipment
- ☒ OK Fix Housekeeping
- ☒ OK Fix Guardrail
- ☒ OK Fix Utilities (Marked)
- ☒ OK Fix Heights/Fall Protection
- ☒ OK Fix Other: \_\_\_\_\_

Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.

1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable

A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
Demolition	2C	Wear all PPE - follow SSP	Anita	Sept 5.
Hauling Material	2C	Safe handling	All	Sept 5-6
Overhead work	3B	PPE / Designated Work Areas	All	Sept 7
Other Trades	3B	Discuss Hazards.	Anita	Sept 7

## TOOLBOX TALK

TOPICS DISCUSSED

WORKER'S COMMENTS

CORRECTIVE ACTION TAKEN

## ATTENDANCE

Anita

Marcus





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT**

☐ **INSPECTION**

☐ **TOOLBOX TALK**

Company Name: SRCC Ltd.  
Supervisor: Anita

Location: 73 Beasley St.  
Safety Rep: Marcus

**PRE-START CHECKLIST**

COMPLETED BY: Marcus

DATE: Sept. 1

- ☒ Construction Site Signage
- ☒ Contact Numbers
- ☒ WHMIS/SDS
- ☒ Fire Extinguisher
- ☒ Washroom Facility

- ☒ Sub-Contractor Orientation
- ☒ Workplace Safety Act & Regulation
- ☒ Communication Device
- ☒ First Aid Supply/Eyewash
- ☒ Excavation Permit/Utility Clearance

- ☒ Public Protection

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.

**HAZARD/INSPECTION CHECKLIST**

COMPLETED BY: Marcus

DATE: \_\_\_\_\_

- ☒ OK Fix Emergency Response
- ☒ OK Fix First Aid Kit
- ☒ OK Fix Ladder Walkways
- ☒ OK Fix Lockout/Tagout
- ☒ OK Fix Electrical Panel
- ☒ OK Fix Other: \_\_\_\_\_

- ☒ OK Fix PPE
- ☒ OK Fix Fire Extinguisher
- ☒ OK Fix Signage
- ☒ OK Fix WHMIS/SDS
- ☒ OK Fix Access/Egress
- ☒ OK Fix Other: \_\_\_\_\_

- ☒ OK Fix Tools & Equipment
- ☒ OK Fix Housekeeping
- ☒ OK Fix Guardrail
- ☒ OK Fix Utilities (Marked)
- ☒ OK Fix Heights/Fall Protection
- ☒ OK Fix Other: \_\_\_\_\_

Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.

1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable

A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
Demolition	2C	wear all PPE / Be aware	Anita	Sept. 1
Hauling Materials / Heaving	2C	Safe lifting techniques	Anita	Sept. 1
Moving Equip.	3C	Wear High-Vis @ all times	All	Sept. 1
Jack Hammer / Noise	2B	Hearing Pro. / Glasses	Marcus	Sept. 1

**TOOLBOX TALK**

TOPICS DISCUSSED

WORKER'S COMMENTS

CORRECTIVE ACTION TAKEN

**ATTENDANCE**

Anita Plumber Marcus Absent.





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT**

☐ **INSPECTION**

☐ **TOOLBOX TALK**

Company Name: SRCC Ltd

Location: 61 Anywhere St.

Supervisor: Jack Pott

Safety Rep: Pete Moss

**PRE-START CHECKLIST**

COMPLETED BY: Pete

DATE: July 31

- ☒ Construction Site Signage
- ☒ Contact Numbers
- ☒ WHMIS/SDS
- ☒ Fire Extinguisher
- ☒ Washroom Facility

- ☒ Sub-Contractor Orientation
- ☒ Workplace Safety Act & Regulation
- ☒ Communication Device
- ☒ First Aid Supply/Eyewash
- ☐ Excavation Permit/Utility Clearance

☒ Public Protection

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.

**HAZARD/INSPECTION CHECKLIST**

COMPLETED BY: Pete

DATE: \_\_\_\_\_

- ☒ OK ☐ Fix Emergency Response
- ☒ OK ☐ Fix First Aid Kit
- ☒ OK ☐ Fix Ladder Walkways
- ☒ OK ☐ Fix Lockout/Tagout
- ☒ OK ☐ Fix Electrical Panel
- ☒ OK ☐ Fix Other: \_\_\_\_\_

- ☒ OK ☐ Fix PPE
- ☒ OK ☐ Fix Fire Extinguisher
- ☒ OK ☐ Fix Signage
- ☒ OK ☐ Fix WHMIS/SDS
- ☒ OK ☐ Fix Access/Egress
- ☒ OK ☐ Fix Other: \_\_\_\_\_

☒ OK ☐ Fix Tools & Equipment

☒ OK ☐ Fix Housekeeping

☒ OK ☐ Fix Guardrail

☒ OK ☐ Fix Utilities (Marked)

☒ OK ☐ Fix Heights/Fall Protection

☒ OK ☐ Fix Other: \_\_\_\_\_

Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.

1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable

A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
Messy Area - Trips	3C	Clean up as we go	PM	July 31
Using Flammables	2C	Follow/Review SDS	PM/JP	July 31
No LOTO Kit on site	3C	Get from shop	JP	July 31
Other Trades	2C	Discuss w them	JP	July 31

**TOOLBOX TALK**

TOPICS DISCUSSED

WORKER'S COMMENTS

CORRECTIVE ACTION TAKEN

**ATTENDANCE**

Jack Pott

Pete Moss





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT**

☐ **INSPECTION**

☐ **TOOLBOX TALK**

Company Name: SRCC Ltd.

Location: 61 Anywhere St.

Supervisor: Jack Pott

Safety Rep: Pete Moss

## PRE-START CHECKLIST

COMPLETED BY: Pete

DATE: July 30

- ☒ Construction Site Signage
- ☒ Contact Numbers
- ☒ WHMIS/SDS
- ☒ Fire Extinguisher
- ☒ Washroom Facility

- ☒ Sub-Contractor Orientation
- ☒ Workplace Safety Act & Regulation
- ☒ Communication Device
- ☒ First Aid Supply/Eyewash
- ☐ Excavation Permit/Utility Clearance

- ☒ Public Protection
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.

## HAZARD/INSPECTION CHECKLIST

COMPLETED BY: Pete

DATE: \_\_\_\_\_

- OK ☒ Fix Emergency Response
- OK ☒ Fix First Aid Kit
- OK ☒ Fix Ladder Walkways
- OK ☒ Fix Lockout/Tagout
- OK ☐ Fix Electrical Panel
- OK ☐ Fix Other: \_\_\_\_\_

- OK ☒ Fix PPE
- OK ☒ Fix Fire Extinguisher
- OK ☒ Fix Signage
- OK ☒ Fix WHMIS/SDS
- OK ☒ Fix Access/Egress
- OK ☐ Fix Other: \_\_\_\_\_

- OK ☒ Fix Tools & Equipment
- OK ☒ Fix Housekeeping
- OK ☒ Fix Guardrail
- OK ☒ Fix Utilities (Marked)
- OK ☒ Fix Heights/Fall Protection
- OK ☐ Fix Other: \_\_\_\_\_

Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.

1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable

A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
Working @ heights	1A	Wear Harness / Tie off	JP	July 30
Use of Grinder	2B	Follow SJP / wear PPE	JP / PM	July 30
Noise	3B	Wear Plugs	JP / PM	July 30

## TOOLBOX TALK

TOPICS DISCUSSED

WORKER'S COMMENTS

CORRECTIVE ACTION TAKEN

## ATTENDANCE

JP  
Pete Moss





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT**      ☐ **INSPECTION**      ☐ **TOOLBOX TALK**

Company Name: SRCC Ltd.  
Supervisor: Jack

Location: 459 Fairview Bay  
Safety Rep: Pete

## PRE-START CHECKLIST

COMPLETED BY: Pete

DATE: Feb. 18

- ☒ Construction Site Signage
- ☒ Contact Numbers
- ☒ WHMIS/SDS
- ☒ Fire Extinguisher
- ☒ Washroom Facility

- ☒ Sub-Contractor Orientation
- ☒ Workplace Safety Act & Regulation
- ☒ Communication Device
- ☒ First Aid Supply/Eyewash
- ☒ Excavation Permit/Utility Clearance

- ☒ Public Protection
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

*NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.*

## HAZARD/INSPECTION CHECKLIST

COMPLETED BY: Pete

DATE: \_\_\_\_\_

- ☒ Fix Emergency Response
- ☒ Fix First Aid Kit
- ☒ Fix Ladder Walkways
- ☒ Fix Lockout/Tagout
- ☒ Fix Electrical Panel
- ☒ Fix Other: Telehandler

- ☒ Fix PPE
- ☒ Fix Fire Extinguisher
- ☒ Fix Signage
- ☒ Fix WHMIS/SDS
- ☒ Fix Access/Egress
- ☒ Fix Other: \_\_\_\_\_

- ☒ Fix Tools & Equipment
- ☒ Fix Housekeeping
- ☒ Fix Guardrail
- ☒ Fix Utilities (Marked)
- ☒ Fix Heights/Fall Protection
- ☒ Fix Other: \_\_\_\_\_

Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.

1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable

A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
Telehandler / Heights	2B	Pre-Use / Harness / SJP	Jack	Feb 18
Heavy Lifting	2C	2 Person Carry	Jack / Pete	Feb 18
Pinch Points	3B	Follow SJP / Don't Rush	Jack / Pete	Feb 18
Moving Equipment	2C	Wear Required PPE	All Employees	Feb 18

## TOOLBOX TALK

TOPICS DISCUSSED

WORKER'S COMMENTS

CORRECTIVE ACTION TAKEN

## ATTENDANCE

Jack Pott  
Pete Moss

Sheta

Jay





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT** ☐ **INSPECTION** ☐ **TOOLBOX TALK**

Company Name: SRCC Ltd.

Location: 89 Carter Lane

Supervisor: Taj

Safety Rep: Colin

## PRE-START CHECKLIST

COMPLETED BY: Colin

DATE: May 11<sup>th</sup>

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Construction Site Signage | <input checked="" type="checkbox"/> Sub-Contractor Orientation          | <input checked="" type="checkbox"/> Public Protection |
| <input checked="" type="checkbox"/> Contact Numbers           | <input checked="" type="checkbox"/> Workplace Safety Act & Regulation   | <input type="checkbox"/> Other: _____                 |
| <input checked="" type="checkbox"/> WHMIS/SDS                 | <input checked="" type="checkbox"/> Communication Device                | <input type="checkbox"/> Other: _____                 |
| <input checked="" type="checkbox"/> Fire Extinguisher         | <input checked="" type="checkbox"/> First Aid Supply/Eyewash            | <input type="checkbox"/> Other: _____                 |
| <input checked="" type="checkbox"/> Washroom Facility         | <input checked="" type="checkbox"/> Excavation Permit/Utility Clearance | <input type="checkbox"/> Other: _____                 |

NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.

## HAZARD/INSPECTION CHECKLIST

COMPLETED BY: Colin

DATE: \_\_\_\_\_

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> OK Fix Emergency Response | <input checked="" type="checkbox"/> OK Fix PPE               | <input checked="" type="checkbox"/> OK Fix Tools & Equipment       |
| <input checked="" type="checkbox"/> OK Fix First Aid Kit      | <input checked="" type="checkbox"/> OK Fix Fire Extinguisher | <input checked="" type="checkbox"/> OK Fix Housekeeping            |
| <input checked="" type="checkbox"/> OK Fix Ladder Walkways    | <input checked="" type="checkbox"/> OK Fix Signage           | <input checked="" type="checkbox"/> OK Fix Guardrail               |
| <input checked="" type="checkbox"/> OK Fix Lockout/Tagout     | <input checked="" type="checkbox"/> OK Fix WHMIS/SDS         | <input checked="" type="checkbox"/> OK Fix Utilities (Marked)      |
| <input checked="" type="checkbox"/> OK Fix Electrical Panel   | <input checked="" type="checkbox"/> OK Fix Access/Egress     | <input checked="" type="checkbox"/> OK Fix Heights/Fall Protection |
| <input checked="" type="checkbox"/> OK Fix Other: _____       | <input checked="" type="checkbox"/> OK Fix Other: _____      | <input checked="" type="checkbox"/> OK Fix Other: _____            |

Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.

1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable

A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
Cutting Stucco	2A	Air Filter Mask, Eye Pro	Colin	May 11
Circular Saw	2C	Follow SSP / wear PPE	Colin	May 11
Ladders	3C	Follow SSP / Anchor Bottom	Taj	May 11
Scaffold / Heights	1B	Follow SSP / Harness	Taj/Colin	May 11

**TOOLBOX TALK** TOPICS DISCUSSED WORKER'S COMMENTS CORRECTIVE ACTION TAKEN


ATTENDANCE

Colin

Taj





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT**

☐ **INSPECTION**

☐ **TOOLBOX TALK**

Company Name: SRCC Ltd.

Location: 19 42nd Street

Supervisor: Jack

Safety Rep: Pete

## PRE-START CHECKLIST

COMPLETED BY: Pete

DATE: Aug 22nd

- ☒ Construction Site Signage
- ☒ Contact Numbers
- ☒ WHMIS/SDS
- ☒ Fire Extinguisher
- ☒ Washroom Facility

- ☒ Sub-Contractor Orientation
- ☒ Workplace Safety Act & Regulation
- ☒ Communication Device
- ☒ First Aid Supply/Eyewash
- ☒ Excavation Permit/Utility Clearance

- ☒ Public Protection
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.

## HAZARD/INSPECTION CHECKLIST

COMPLETED BY: Pete

DATE: \_\_\_\_\_

- ☒ Fix Emergency Response
- ☒ Fix First Aid Kit
- ☒ Fix Ladder Walkways
- ☒ Fix Lockout/Tagout
- ☒ Fix Electrical Panel
- ☒ Fix Other: \_\_\_\_\_

- ☒ Fix PPE
- ☒ Fix Fire Extinguisher
- ☒ Fix Signage
- ☒ Fix WHMIS/SDS
- ☒ Fix Access/Egress
- ☒ Fix Other: \_\_\_\_\_

- ☒ Fix Tools & Equipment
- ☒ Fix Housekeeping
- ☒ Fix Guardrail
- ☒ Fix Utilities (Marked)
- ☒ Fix Heights/Fall Protection
- ☒ Fix Other: \_\_\_\_\_

Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.

1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable

A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
<u>Air Nailer</u>	<u>2C</u>	<u>Proper hand placement/SOP</u>	<u>Pete</u>	<u>Aug 22</u>
<u>Noise</u>	<u>3C</u>	<u>Wear Plugs</u>	<u>All Workers</u>	<u>Aug 22</u>
<u>Moving Equipment</u>	<u>2C</u>	<u>Wear High-Vis</u>	<u>All Workers</u>	<u>Aug 22</u>
<u>Ladder Use</u>	<u>3C</u>	<u>Proper set up / anchored</u>	<u>Jack</u>	<u>Aug 22</u>

## TOOLBOX TALK

TOPICS DISCUSSED

WORKER'S COMMENTS

CORRECTIVE ACTION TAKEN

## ATTENDANCE

Pete Moss  
Jack Pott

Br. Ha

Robin





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT**      ☐ **INSPECTION**      ☐ **TOOLBOX TALK**

Company Name: SRCC Ltd.

Location: 146 Main St.

Supervisor: Taj.

Safety Rep: Marcus

## PRE-START CHECKLIST

- ☒ Construction Site Signage
- ☒ Contact Numbers
- ☒ WHMIS/SDS
- ☒ Fire Extinguisher
- ☒ Washroom Facility

COMPLETED BY: Taj

- ☒ Sub-Contractor Orientation
- ☒ Workplace Safety Act & Regulation
- ☒ Communication Device
- ☒ First Aid Supply/Eyewash
- ☒ Excavation Permit/Utility Clearance

DATE:

- ☒ Public Protection
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

*NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.*

## HAZARD/INSPECTION CHECKLIST

- ☒ OK Fix Emergency Response
- ☒ OK Fix First Aid Kit
- ☒ OK Fix Ladder Walkways
- ☒ OK Fix Lockout/Tagout
- ☒ OK Fix Electrical Panel
- ☒ OK Fix Other: \_\_\_\_\_

COMPLETED BY: Marcus

- ☒ OK Fix PPE
- ☒ OK Fix Fire Extinguisher
- ☒ OK Fix Signage
- ☒ OK Fix WHMIS/SDS
- ☒ OK Fix Access/Egress
- ☒ OK Fix Other: \_\_\_\_\_

DATE: April 7

- ☒ OK Fix Tools & Equipment
- ☒ OK Fix Housekeeping
- ☒ OK Fix Guardrail
- ☒ OK Fix Utilities (Marked)
- ☒ OK Fix Heights/Fall Protection
- ☒ OK Fix Other: \_\_\_\_\_

*Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.*

*1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable*

*A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote*

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
Asbestos Tile	2B	Follow abatement SOP	Taj.	April 7
Heavy Lifting	3C	Proper lifting techniques	Taj / Marcus	April 7
Tripping Hazards	3C	Clean up as we go	All workers	April 7

## TOOLBOX TALK

TOPICS DISCUSSED

WORKER'S COMMENTS

CORRECTIVE ACTION TAKEN

## ATTENDANCE

Taj.  
Marcus.

Barta.  
Ryan.





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT**

☐ **INSPECTION**

☐ **TOOLBOX TALK**

Company Name: 2nd Choice P+H  
Supervisor: Tom Hanks

Location: 89 Carter Lane  
Safety Rep: Suzy Lee

## PRE-START CHECKLIST

COMPLETED BY: pt Suzy

DATE: May 12

- ☒ Construction Site Signage
- ☒ Contact Numbers
- ☒ WHMIS/SDS
- ☒ Fire Extinguisher
- ☒ Washroom Facility

- ☒ Sub-Contractor Orientation
- ☒ Workplace Safety Act & Regulation
- ☒ Communication Device
- ☒ First Aid Supply/Eyewash
- ☒ Excavation Permit/Utility Clearance

- ☒ Public Protection
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.

## HAZARD/INSPECTION CHECKLIST

COMPLETED BY: Suzy

DATE: \_\_\_\_\_

- ☒ Fix Emergency Response
- ☒ Fix First Aid Kit
- ☒ Fix Ladder Walkways
- ☒ Fix Lockout/Tagout
- ☒ Fix Electrical Panel
- OK Fix Other: \_\_\_\_\_

- ☒ Fix PPE
- ☒ Fix Fire Extinguisher
- ☒ Fix Signage
- ☒ Fix WHMIS/SDS
- ☒ Fix Access/Egress
- OK Fix Other: \_\_\_\_\_

- ☒ Fix Tools & Equipment
- ☒ Fix Housekeeping
- ☒ Fix Guardrail
- ☒ Fix Utilities (Marked)
- ☒ Fix Heights/Fall Protection
- OK Fix Other: \_\_\_\_\_

Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.

1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable

A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
Cutting holes in Floor	3C	2 hands on drill / SSP	Tom	May 12
Contact Cement	3B	wear PPE / open windows	Tom/Suzy	May 12

## TOOLBOX TALK

TOPICS DISCUSSED

WORKER'S COMMENTS

CORRECTIVE ACTION TAKEN

## ATTENDANCE

Tom Hanks

Suzy Lee





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT**

☐ **INSPECTION**

☐ **TOOLBOX TALK**

Company Name: 2nd Choice P+H  
Supervisor: Tom Hanks

Location: 1300 Valley Road.  
Safety Rep: Suzy Lee

**PRE-START CHECKLIST**

- ☒ Construction Site Signage
- ☒ Contact Numbers
- ☒ WHMIS/SDS
- ☒ Fire Extinguisher
- ☒ Washroom Facility

COMPLETED BY: Suzy

DATE: Jan 15

- ☐ Sub-Contractor Orientation
- ☒ Workplace Safety Act & Regulation
- ☒ Communication Device
- ☒ First Aid Supply/Eyewash
- ☒ Excavation Permit/Utility Clearance

☒ Public Protection

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

☐ Other: \_\_\_\_\_

NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.

**HAZARD/INSPECTION CHECKLIST**

COMPLETED BY: Suzy

DATE: \_\_\_\_\_

- ☒ OK Fix Emergency Response
- ☒ OK Fix First Aid Kit
- ☒ OK Fix Ladder Walkways
- ☒ OK Fix Lockout/Tagout
- ☒ OK Fix Electrical Panel
- ☒ OK Fix Other: \_\_\_\_\_

- ☒ OK Fix PPE
- ☒ OK Fix Fire Extinguisher
- ☒ OK Fix Signage
- ☒ OK Fix WHMIS/SDS
- ☒ OK Fix Access/Egress
- ☒ OK Fix Other: \_\_\_\_\_

- ☒ OK Fix Tools & Equipment
- ☒ OK Fix Housekeeping
- ☒ OK Fix Guardrail
- ☒ OK Fix Utilities (Marked)
- ☒ OK Fix Heights/Fall Protection
- ☒ OK Fix Other: \_\_\_\_\_

Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.

1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable

A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
Cutting Pipe	2B	Follow Procedure	Tom	Jan 15
Controlled Products	3C	Review SDS	Tom/Suzy	Jan 15
Sewage	2B	Wear PPE / Proper Clothing	Tom/Suzy	Jan 15

**TOOLBOX TALK**

TOPICS DISCUSSED

WORKER'S COMMENTS

CORRECTIVE ACTION TAKEN

**ATTENDANCE**

Tom Hanks

Suzy Lee





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT**

☐ **INSPECTION**

☐ **TOOLBOX TALK**

Company Name: Barker Roofing  
Supervisor: Bob Barker

Location: 61 Anywhere St.  
Safety Rep: Tim Allen

**PRE-START CHECKLIST**

COMPLETED BY: Tim

DATE: July 31

- ☒ Construction Site Signage
- ☒ Contact Numbers
- ☒ WHMIS/SDS
- ☒ Fire Extinguisher
- ☒ Washroom Facility

- ☒ Sub-Contractor Orientation
- ☒ Workplace Safety Act & Regulation
- ☒ Communication Device
- ☒ First Aid Supply/Eyewash
- ☒ Excavation Permit/Utility Clearance

- ☒ Public Protection
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.

**HAZARD/INSPECTION CHECKLIST**

COMPLETED BY: Tim

DATE:

- ☒ OK Fix Emergency Response
- ☒ OK Fix First Aid Kit
- ☒ OK Fix Ladder Walkways
- ☒ OK Fix Lockout/Tagout
- ☒ OK Fix Electrical Panel
- OK Fix Other: \_\_\_\_\_

- ☒ OK Fix PPE
- ☒ OK Fix Fire Extinguisher
- ☒ OK Fix Signage
- ☒ OK Fix WHMIS/SDS
- ☒ OK Fix Access/Egress
- OK Fix Other: \_\_\_\_\_

- ☒ OK Fix Tools & Equipment
- ☒ OK Fix Housekeeping
- ☒ OK Fix Guardrail
- ☒ OK Fix Utilities (Marked)
- ☒ OK Fix Heights/Fall Protection
- OK Fix Other: \_\_\_\_\_

Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.

1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable

A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
Working @ heights	2A	Wear harness / pre-use	Bob/Tim	July 31
Repairing Patches	3B	Follow SJP	Bob/Tim	July 31
Controlled Products	3C	Review SDS	Bob/Tim	July 31

**TOOLBOX TALK**

TOPICS DISCUSSED

WORKER'S COMMENTS

CORRECTIVE ACTION TAKEN

**ATTENDANCE**

Bob Barker Tim Allen





# SAFETY H.I.T. LIST

☒ **HAZARD ASSESSMENT**      ☐ **INSPECTION**      ☐ **TOOLBOX TALK**

Company Name: Barker Roofing  
Supervisor: Bob Barker

Location: 73 Beasley St.  
Safety Rep: Tim Allen

## PRE-START CHECKLIST

- ☒ Construction Site Signage
- ☒ Contact Numbers
- ☒ WHMIS/SDS
- ☒ Fire Extinguisher
- ☒ Washroom Facility

COMPLETED BY: Tim

DATE: Sept 8

- ☒ Sub-Contractor Orientation
- ☒ Workplace Safety Act & Regulation
- ☒ Communication Device
- ☒ First Aid Supply/Eyewash
- ☒ Excavation Permit/Utility Clearance

- ☒ Public Protection
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

*NOTE: If any items are missing, contact the Owner/Prime Contractor prior to startup.*

## HAZARD/INSPECTION CHECKLIST

- ☒ Fix Emergency Response
- ☒ Fix First Aid Kit
- ☒ Fix Ladder Walkways
- ☒ Fix Lockout/Tagout
- ☒ Fix Electrical Panel
- OK Fix Other: \_\_\_\_\_

COMPLETED BY: Tim

DATE: \_\_\_\_\_

- ☒ Fix PPE
- ☒ Fix Fire Extinguisher
- ☒ Fix Signage
- ☒ Fix WHMIS/SDS
- ☒ Fix Access/Egress
- OK Fix Other: \_\_\_\_\_

- ☒ Fix Tools & Equipment
- ☒ Fix Housekeeping
- ☒ Fix Guardrail
- ☒ Fix Utilities (Marked)
- ☒ Fix Heights/Fall Protection
- OK Fix Other: \_\_\_\_\_

Below, identify the hazards, rank the hazards, and identify the plans to eliminate or control the hazards.

1 - Immediate/Severe Danger, 2 - Serious Injury, 3 - Minor, 4 - Negligible, 5 - Not applicable

A - Highly Probable, B - Reasonably Probable, C - Remote, D - Extremely Remote

IDENTIFIED HAZARDS	RANK	CONTROL(S)	ACTION BY	DATE COMPLETED
Working @ heights	2A	Wear harness / pre-use	Bob/Tim	Sept 8
Removing Shingles	2B	Follow SLP / Barricade off area(s)	Bob	Sept 8

**TOOLBOX TALK**      **TOPICS DISCUSSED**      **WORKER'S COMMENTS**      **CORRECTIVE ACTION TAKEN**

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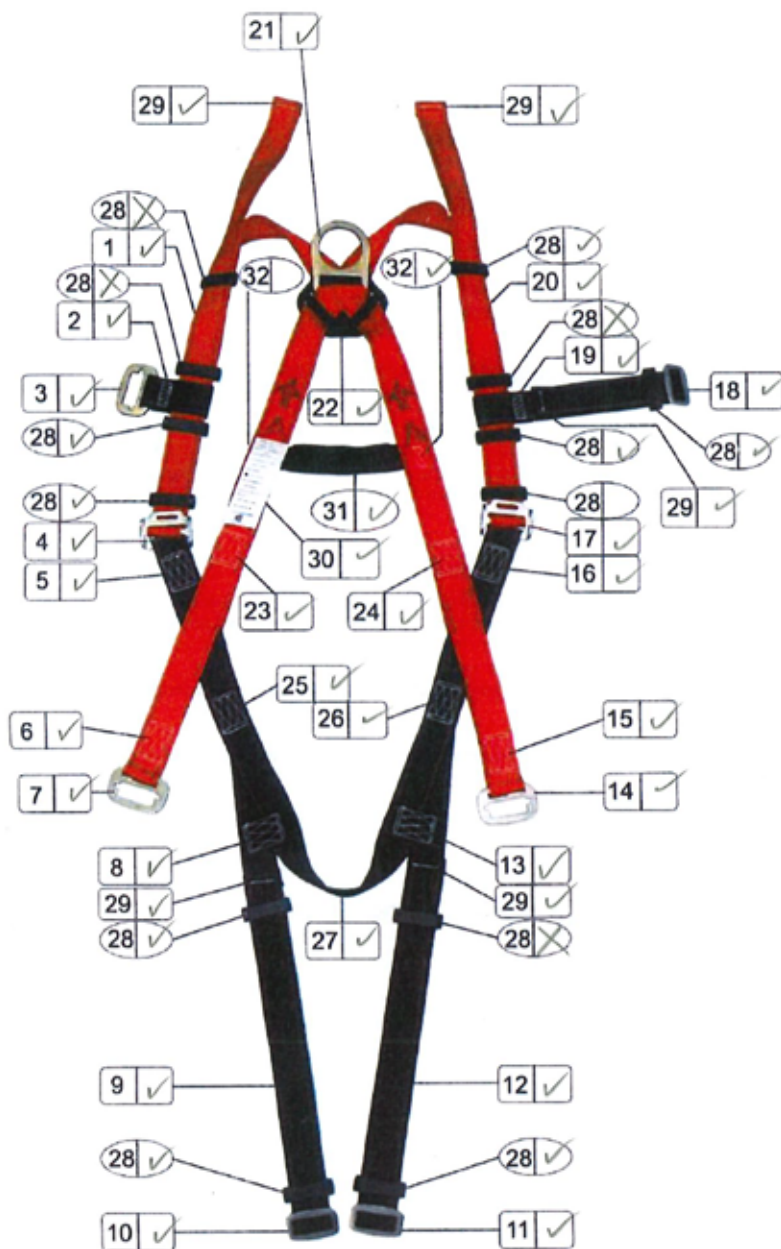


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**ATTENDANCE**

Bob Barker      Tim Allen





ITEM NUMBER	NAME/DESCRIPTION	PRIORITY
1	Shoulder strap	1
2	Stitching	1
3	Buckle	1
4	Adjustable roller buckle	1
5	Stitching	1
6	Stitching	1
7	Buckle	1
8	Stitching	1
9	Leg strap	1
10	Buckle	1
11	Buckle	1
12	Leg strap	1
13	Stitching	1
14	Buckle	1
15	Stitching	1
16	Stitching	1
17	Adjustable roller buckle	1
18	Buckle	1
19	Stitching	1
20	Shoulder strap	1
21	Dorsal D-ring	1
22	D-ring back pad	1
23	Stitching	1
24	Stitching	1
25	Stitching	1
26	Stitching	1
27	Sub-pelvic strap	1
28	Belt keeper (multiples)	2
29	Stitching – end pattern	1
30	CSA Product Labels	1
31	Back strap	2
32	Stitching – back strap	2

Item # (see table 1) 5 ✓ 28 X  
Priority 1 Item  
Priority 2 Item  
✓ = Acceptable  
X = Not Acceptable

INSPECTOR IDENTIFICATION	
NAME: <i>Robin Banks</i>	LOCATION: <i>123 Fake St.</i>
SIGNATURE:	DATE: <i>January 20</i>

Final Rating

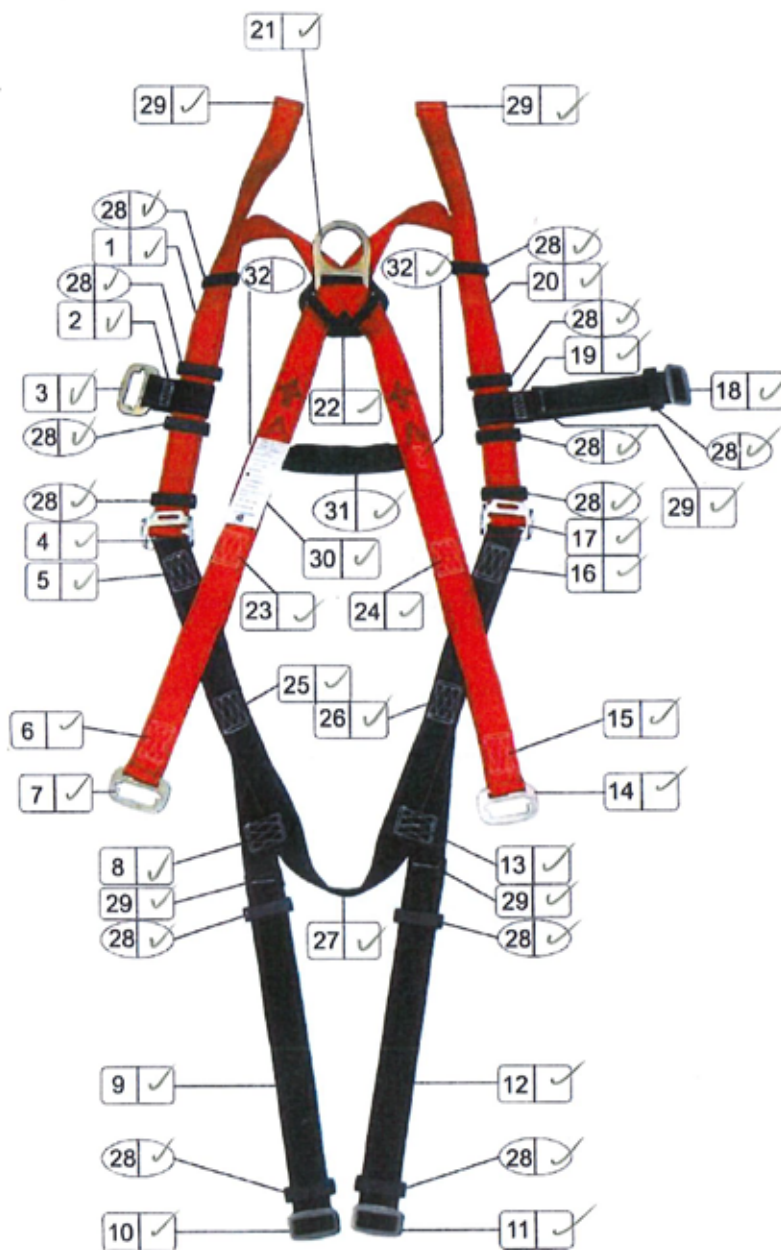
Fail

### Summary

	# of 'x's	Maximum Allowed	Pass (P) or Fail (F)
P1	<i>0</i>	0	<i>P</i>
P2	<i>4</i>	3	<i>F</i>
Results: Pass only if		<div style="display: inline-block; border: 1px solid black; padding: 5px;">P</div> <span style="font-size: 24px; margin: 0 10px;">+</span> <div style="display: inline-block; border: 1px solid black; padding: 5px;">P</div>	

Inspection Instructions	Inspection To Be Completed Before Each Use
<ol style="list-style-type: none"> <li>1. Spread the harness out on a flat surface</li> <li>2. Visually inspect each component and assess its condition</li> <li>3. Mark empty boxes on the diagram with a check mark or an X</li> <li>4. Commence with the Priority 1 Items (Rectangular Boxes) and count the total number or X's. Enter this total in the summary</li> <li>5. Count the total number of X's for the Priority 2 items (oval boxes) and enter this total in the summary</li> <li>6. In the summary box determine pass (P) or fail (F) for each of the two priorities</li> <li>7. Determine the overall evaluation of the harness and mark either pass (P) or fail (F) in the large box</li> <li>8. Fill in the inspection identification information</li> </ol>	<p><b>WEBBING</b>  <u>Visual Inspection:</u> Check all webbing for any signs of cuts excessive graying, piercing, pulled or broken stitching, abrasion, excessive wear, altered or missing strands, burns, and heat or chemical exposure/damage of the webbing.</p> <p><u>Pass/Fail Criteria:</u> If any of the above defects are observed on the webbing which would compromise the integrity of the harness, remove the harness from service.</p> <p><u>Check Strap:</u> Visually check the fastening mechanism</p> <p><u>Pass/Fail Criteria:</u> If the fastening mechanism is found to be defective, remove the harness from service. If the harness uses any fastening device that is not a metal buckle, remove the harness from service.</p> <p><b>HARDWARE</b>  Determine the design of all buckles. If a harness has any buckles tat are three bar slides and not two-piece metal buckles, remove the harness from service.</p> <p><u>Appearance:</u> Visually check all hardware for cracks, burns, deformation, dents, nicks, corrosion or any other significant defects.</p> <p><u>Pass/Fail Criteria:</u> Remove from service if any cracks are apparent. Minor defects are acceptable if the functioning of the hardware is not impaired.</p>

PART		TYPE OF DAMAGE	ALLOWABLE DEVIATION	
			Priority 1 Items	Priority 2 Items
METALLIC	D-Rings	Wear/Abrasion	0.8mm	1.5mm
		Missing	0%	0%
		Buckles	Deformed/Fractured	0%
		Snap hooks	Corrosion (coverage)	10%
	Grommets	Missing	0%	0%
		Deformed	10%	20%
		Rivets	Fractured	0%
		Corrosion (coverage)	10%	25%
PLASTIC	D-Ring back pad Belt keepers Shoulder Pads	Wear/Abrasion	10%	25%
		Missing	0%	0%
		Deformed	10%	25%
		Fractured	0%	0%
STITCHING	All	Broken	5%	10%
		Wear/Abrasion	5%	10%
		Missing	5%	10%
WEBBING	Shoulder straps Chest straps Leg straps Waist belt	Cuts/Penetrations	5%	15%
		Wear/Abrasions	15%	20%
		Missing	0%	0%
		Heat Damage	0%	5%
		Chemical Damage	0%	5%



ITEM NUMBER	NAME/DESCRIPTION	PRIORITY
1	Shoulder strap	1
2	Stitching	1
3	Buckle	1
4	Adjustable roller buckle	1
5	Stitching	1
6	Stitching	1
7	Buckle	1
8	Stitching	1
9	Leg strap	1
10	Buckle	1
11	Buckle	1
12	Leg strap	1
13	Stitching	1
14	Buckle	1
15	Stitching	1
16	Stitching	1
17	Adjustable roller buckle	1
18	Buckle	1
19	Stitching	1
20	Shoulder strap	1
21	Dorsal D-ring	1
22	D-ring back pad	1
23	Stitching	1
24	Stitching	1
25	Stitching	1
26	Stitching	1
27	Sub-pelvic strap	1
28	Belt keeper (multiples)	2
29	Stitching – end pattern	1
30	CSA Product Labels	1
31	Back strap	2
32	Stitching – back strap	2

5 ✓ Priority 1 Item  
 28 X Priority 2 Item  
 Item # (see table 1)  
 ✓ = Acceptable  
 X = Not Acceptable

INSPECTOR IDENTIFICATION	
NAME: Justin Case	LOCATION: 321 Fake St.
SIGNATURE:	DATE: March 3

Final Rating

Pass

### Summary

	# of 'x's	Maximum Allowed	Pass (P) or Fail (F)
P1	0	0	P
P2	3	3	P
Results:	P + P		
Pass only if			

Inspection Instructions	Inspection To Be Completed Before Each Use
<ol style="list-style-type: none"> <li>1. Spread the harness out on a flat surface</li> <li>2. Visually inspect each component and assess its condition</li> <li>3. Mark empty boxes on the diagram with a check mark or an X</li> <li>4. Commence with the Priority 1 Items (Rectangular Boxes) and count the total number or X's. Enter this total in the summary</li> <li>5. Count the total number of X's for the Priority 2 Items (oval boxes) and enter this total in the summary</li> <li>6. In the summary box determine pass (P) or fail (F) for each of the two priorities</li> <li>7. Determine the overall evaluation of the harness and mark either pass (P) or fail (F) in the large box</li> <li>8. Fill in the inspection identification information</li> </ol>	<p><b>WEBBING</b>  <u>Visual Inspection:</u> Check all webbing for any signs of cuts excessive graying, piercing, pulled or broken stitching, abrasion, excessive wear, altered or missing strands, burns, and heat or chemical exposure/damage of the webbing.</p> <p><u>Pass/Fail Criteria:</u> If any of the above defects are observed on the webbing which would compromise the integrity of the harness, remove the harness from service.</p> <p><u>Check Strap:</u> Visually check the fastening mechanism</p> <p><u>Pass/Fail Criteria:</u> If the fastening mechanism is found to be defective, remove the harness from service. If the harness uses any fastening device that is not a metal buckle, remove the harness from service.</p> <p><b>HARDWARE</b>  Determine the design of all buckles. If a harness has any buckles that are three bar slides and not two-piece metal buckles, remove the harness from service.</p> <p><u>Appearance:</u> Visually check all hardware for cracks, burns, deformation, dents, nicks, corrosion or any other significant defects.</p> <p><u>Pass/Fail Criteria:</u> Remove from service if any cracks are apparent. Minor defects are acceptable if the functioning of the hardware is not impaired.</p>

PART		TYPE OF DAMAGE	ALLOWABLE DEVIATION	
			Priority 1 Items	Priority 2 Items
METALLIC	D-Rings O-Rings Buckles Snap hooks	Wear/Abrasion	0.8mm	1.5mm
		Missing	0%	0%
		Deformed/Fractured	0%	0%
		Corrosion (coverage)	10%	10%
	Grommets Rivets	Missing	0%	0%
		Deformed	10%	20%
		Fractured	0%	0%
		Corrosion (coverage)	10%	25%
PLASTIC	D-Ring back pad Belt keepers Shoulder Pads	Wear/Abrasion	10%	25%
		Missing	0%	0%
		Deformed	10%	25%
		Fractured	0%	0%
STITCHING	All	Broken	5%	10%
		Wear/Abrasion	5%	10%
		Missing	5%	10%
WEBBING	Shoulder straps Chest straps Leg straps Waist belt	Cuts/Penetrations	5%	15%
		Wear/Abrasions	15%	20%
		Missing	0%	0%
		Heat Damage	0%	5%
		Chemical Damage	0%	5%

# INSPECTION CHECKLIST

» TELEHANDLER/RT FORKLIFT PRE-USE



Willie Maykit  
OPERATOR'S NAME

S Rec. Ltd.  
COMPANY NAME

321 Fakest  
LOCATION

Genie 3A1  
MAKE AND MODEL

1000  
HOUR METER READING

1234567AD  
EQUIPMENT ID

Current  
DATE

## WALK AROUND INSPECTION

✓ ✗ N/A

1	Fire extinguisher	✓		
2	Under carriage/Axles	✓		
3	Wheels and Tires	✓		
4	Outriggers	✓		
5	Counterweight/Bolted down and secured	✓		
6	Cab/Door	✓		
7	ROPS (roll over protective structure)	✓		
8	Boom section/Mast	✓		
9	Boom angle indicator and boom extension	✓		
10	Forks/Lifting attachment/bar	✓		
11	Attachment(s) (bucket, forks, breaker, etc.)	✓		
12	Auxiliary hoses/quick connects	✓		
13	Hood (hood latches)/Cover Panel	✓		
14	Strobe Lights & Mirrors		✗	
15	Engine compartment	✓		
16	Fuel type	✓		
17	Battery/batteries	✓		
18	Hydraulics	✓		
19	Enter/Exit Steps and hand rails	✓		
20	Capacity data plate	✓		
21	Load charts	✓		
22	Inspection certificate and hour meter	✓		
23	Operator manual storage compartment	✓		
24	Seat belt	✓		
25	Other			✓

## POWERED FUNCTION CHECKS

✓ ✗ N/A

1	Unit starts and runs properly	✓		
2	Braking system	✓		
3	Throttle control	✓		
4	Steering	✓		
5	Outriggers	✓		
6	Frame leveler and indicator	✓		
7	Boom/fork controls	✓		
8	Function control decals	✓		
9	Instruments/Gauges	✓		
10	Auxiliary controls	✓		
11	Horn/Audible warning device	✓		
12	Warning lights/back up alarm	✓		
13	Other options and controls			✓

## WORKPLACE INSPECTION

✓ ✗ N/A

1	Drop offs or holes	✓		
2	Bumps and floor/ground obstructions	✓		
3	Debris	✓		
4	Overhead obstructions	✓		
5	Energized power lines	✓		
6	Hazardous locations	✓		
7	Ground surface and support conditions	✓		
8	Pedestrian/vehicle traffic	✓		
9	Wind and weather conditions	✓		
10	Other			✓

## GENERAL

✓ ✗ N/A

1	Cleanliness	✓		
2	Manuals in weather resistant storage compartment	✓		
3	Decals/warning/placards clearly visible	✓		
4	Other			✓

## COMMENTS

Strobe light not working.  
Reported to Direct Supervisor  
Jack Pitt. Tagged out of  
Service

Willie Maykit  
OPERATOR'S SIGNATURE



ON-SITE EQUIPMENT  
TRAINING SERVICES

WWW.ONSITETRAINERS.CA

# RATIONALE

## » TELEHANDLER/RT FORKLIFT PRE-USE



### WALK AROUND

- 1 Check sight glass. If needle is in the red the extinguisher needs to be replaced. Green indicates full charge
- 2 Check for damage, leaks, or any missing parts and/ components/ Are there rust stains on axle housings. If axle bolted to frame ensure they are tightened and none missing
- 3 Lug nuts tight/no rust from behind the lug nut. Indicates a loose lug nut/Wheel type (solid, foam filled, air filled)/Tires size matches and tread running in same direction
- 4 Check hydraulic lines, cylinders, any signs of damage
- 5 Telehandlers usually provide their own CW. If equipped with added CW ensure approved by manufacturer and secured
- 6 Cab- Are cab hold downs bolted in. Is upper cab guard in place and in good condition. Door opens and closes correctly
- 7 ROPS/ Check to make sure no damage (3/4" deformation requires structural inspection. Remove from of service)
- 8 Check for visible damage of any kind
- 9 Ensure angle indicator moves freely and extension indicator is visible. These 2 functions are required when reading load charts
- 10 Ensure forks are approx. same size as front and back. Ensure forks slide along bar easily. Check weight capacity of forks
- 11 Ensure mechanical locks are fully engaged and no cracks or rust coming from around welds. Not bent or worn
- 12 Ensure quick connects are fully engaged and locked . If not fully locked hoses can swing out under pressure
- 13 Ensure panels are properly secured
- 14 Ensure strobe lights are higher than cab/Check if mirror is loose, ensure clarity
- 15 Check your fluid levels and for any leaks of any kind. Excessive build up of dirt and grime are good indicators of a leak
- 16 Check see through fuel tank bladder or sight glass for amount of fuel. Fuel cap usually indicates fuel type/Also secure propane tank and ensure proper connection
- 17 condition (clean/dry/secure)/ Terminals properly connected
- 18 Hydraulics- check for leaks, frayed lines, level & tempreature of hyd. fluid/Cylinder/Rods (check for rust or chips on chrome rods)
- 19 Ensure area is clear of any material that could cause a slip.
- 20 Must be accurate and legible/Stamped metal plate.
- 21 Ensure correct load chart for attachment type being used
- 22 Check frequent inspection certificate. Shows maintenance information and service schedule.

- 23 Ensure Operator manual for the specific make and model is stored at all times
- 24 Ensure seatbelt is present and secure. Engage, disengage, Re-engage
- 25 Other as per options not listed.

### POWERED FUNCTION CHECKS

- 1 Ensure proper engine start
- 2 Check E-Brake and Braking system functions by engaging brake and activating drive controls.
- 3 Ensure smooth shifting (Nuetral/Fwd/Reverse/Clutch Function if equipped)
- 4 Front/Crab/Circle- ensure wheels are straight before driving the unit. Back wheels first, then front wheels
- 5 If equipped ensure Outriggers lower and engage properly and function smoothly (ensure no drifting while engaged)
- 6 Ensure frame adjusts from side to side when control is activated and Frame level indicator shows change of position
- 7 Boom section elevates, extends, retracts and lowers properly, do not drift (could indicate loss of pressure). Fork's auto level system is working properly.
- 8 Ensure all function controls have corresponding decals detailing what the function does and how it operates
- 9 Fuel Charge Level/Battery power level/Emergency brake indicator/All other indicators
- 10 If equipment activate AUX control for attachment and ensure proper function and power
- 11 Ensure 107 decibels or higher and UL approved
- 12 Turn on all lights to ensure they are functioning/Lights- due to varying weather and visibility conditions ensure that your lights are always visible
- 13 Control checks ( how are the controls set up and do they all function properly). This can be re-arranged in many units

### GENERAL

- 1 Keep the cab of your unit clean to ensure nothing can get caught in any controls or systems
- 2 Ensure manual is always close by in order to reference if needed
- 3 Warning decals must always be visible to the operator to ensure safe operating
- 4 Any items that are relevant to safe operation



# INSPECTION CHECKLIST

» TELEHANDLER/RT FORKLIFT PRE-USE



Althea Thorne

OPERATOR'S NAME

123 Fake St.

LOCATION

2ep 4

HOUR METER READING

JLG

MAKE AND MODEL

1234

EQUIPMENT ID

SRCC Ltd.

COMPANY NAME

Current

DATE

## WALK AROUND INSPECTION

✓ ✗ N/A

1	Fire extinguisher	✓		
2	Under carriage/Axles	✓		
3	Wheels and Tires	✓		
4	Outriggers	✓		
5	Counterweight/Bolted down and secured	✓		
6	Cab/Door	✓		
7	ROPS (roll over protective structure)	✓		
8	Boom section/Mast	✓		
9	Boom angle indicator and boom extension	✓		
10	Forks/Lifting attachment/bar	✓		
11	Attachment(s) [bucket, forks, breaker, etc.]	✓		
12	Auxiliary hoses/quick connects	✓		
13	Hood (hood latches)/Cover Panel	✓		
14	Strobe Lights & Mirrors	✓		
15	Engine compartment	✓		
16	Fuel type	✓		
17	Battery/batteries	✓		
18	Hydraulics	✓		
19	Enter/Exit Steps and hand rails	✓		
20	Capacity data plate	✓		
21	Load charts	✓		
22	Inspection certificate and hour meter	✓		
23	Operator manual storage compartment	✓		
24	Seat belt	✓		
25	Other	✓		

## GENERAL

✓ ✗ N/A

1	Cleanliness	✓		
2	Manuals in weather resistant storage compartment	✓		
3	Decals/warning/placards clearly visible	✓		
4	Other			✓

## POWERED FUNCTION CHECKS

✓ ✗ N/A

1	Unit starts and runs properly	✓		
2	Braking system	✓		
3	Throttle control	✓		
4	Steering	✓		
5	Outriggers	✓		
6	Frame leveler and indicator	✓		
7	Boom/fork controls	✓		
8	Function control decals	✓		
9	Instruments/Gauges	✓		
10	Auxiliary controls	✓		
11	Horn/Audible warning device	✓		
12	Warning lights/back up alarm	✓		
13	Other options and controls			✓

## WORKPLACE INSPECTION

✓ ✗ N/A

1	Drop offs or holes	✓		
2	Bumps and floor/ground obstructions	✓		
3	Debris	✓		
4	Overhead obstructions	✓		
5	Energized power lines	✓		
6	Hazardous locations	✓		
7	Ground surface and support conditions	✓		
8	Pedestrian/vehicle traffic	✓		
9	Wind and weather conditions	✓		
10	Other			✓

## COMMENTS

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Althea Thorne

OPERATOR'S SIGNATURE



**ON-SITE EQUIPMENT  
TRAINING SERVICES**

WWW.ONSITETRAINERS.CA

# RATIONALE

## » TELEHANDLER/RT FORKLIFT PRE-USE



### WALK AROUND

- 1 Check sight glass. If needle is in the red the extinguisher needs to be replaced. Green indicates full charge
- 2 Check for damage, leaks, or any missing parts and/ components/ Are there rust stains on axle housings. If axle bolted to frame ensure they are tightened and none missing
- 3 Lug nuts tight/no rust from behind the lug nut. Indicates a loose lug nut/Wheel type (solid, foam filled, air filled)/Tires size matches and tread running in same direction
- 4 Check hydraulic lines, cylinders, any signs of damage
- 5 Telehandlers usually provide their own CW. If equipped with added CW ensure approved by manufacturer and secured
- 6 Cab- Are cab hold downs bolted in. Is upper cab guard in place and in good condition. Door opens and closes correctly
- 7 ROPS/ Check to make sure no damage (3/4" deformation requires structural inspection. Remove from of service)
- 8 Check for visible damage of any kind
- 9 Ensure angle indicator moves freely and extension indicator is visible. These 2 functions are required when reading load charts
- 10 Ensure forks are approx. same size as front and back. Ensure forks slide along bar easily. Check weight capacity of forks
- 11 Ensure mechanical locks are fully engaged and no cracks or rust coming from around welds. Not bent or worn
- 12 Ensure quick connects are fully engaged and locked . If not fully locked hoses can swing out under pressure
- 13 Ensure panels are properly secured
- 14 Ensure strobe lights are higher than cab/Check if mirror is loose, ensure clarity
- 15 Check your fluid levels and for any leaks of any kind. Excessive build up of dirt and grime are good indicators of a leak
- 16 Check see through fuel tank bladder or sight glass for amount of fuel. Fuel cap usually indicates fuel type/Also secure propane tank and ensure proper connection
- 17 condition (clean/dry/secure)/ Terminals properly connected
- 18 Hydraulics- check for leaks, frayed lines, level & tempreature of hyd. fluid/Cylinder/Rods (check for rust or chips on chrome rods)
- 19 Ensure area is clear of any material that could cause a slip.
- 20 Must be accurate and legible/Stamped metal plate.
- 21 Ensure correct load chart for attachment type being used
- 22 Check frequent inspection certificate. Shows maintenance information and service schedule.

- 23 Ensure Operator manual for the specific make and model is stored at all times
- 24 Ensure seatbelt is present and secure. Engage, disengage, Re-engage
- 25 Other as per options not listed.

### POWERED FUNCTION CHECKS

- 1 Ensure proper engine start
- 2 Check E-Brake and Braking system functions by engaging brake and activating drive controls.
- 3 Ensure smooth shifting (Nuetral/Fwd/Reverse/Clutch Function if equipped)
- 4 Front/Crab/Circle- ensure wheels are straight before driving the unit. Back wheels first, then front wheels
- 5 If equipped ensure Outriggers lower and engage properly and function smoothly (ensure no drifting while engaged)
- 6 Ensure frame adjusts from side to side when control is activated and Frame level indicator shows change of position
- 7 Boom section elevates, extends, retracts and lowers properly, do not drift (could indicate loss of pressure). Fork's auto level system is working properly.
- 8 Ensure all function controls have corresponding decals detailing what the function does and how it operates
- 9 Fuel Charge Level/Battery power level/Emergency brake indicator/All other indicators
- 10 If equipment activate AUX control for attachment and ensure proper function and power
- 11 Ensure 107 decibels or higher and UL approved
- 12 Turn on all lights to ensure they are functioning/Lights- due to varying weather and visibility conditions ensure that your lights are always visible
- 13 Control checks ( how are the controls set up and do they all function properly). This can be re-arranged in many units

### GENERAL

- 1 Keep the cab of your unit clean to ensure nothing can get caught in any controls or systems
- 2 Ensure manual is always close by in order to reference if needed
- 3 Warning decals must always be visible to the operator to ensure safe operating
- 4 Any items that are relevant to safe operation



# INSPECTION CHECKLIST

» TELEHANDLER/RT FORKLIFT PRE-USE



**Gene Pool**  
 OPERATOR'S NAME  
**321 Fake St.**  
 LOCATION  
**248**  
 HOUR METER READING  
**JLG**  
 MAKE AND MODEL  
**1234**  
 EQUIPMENT ID  
**SRCC Ltd.**  
 COMPANY NAME  
**Current**  
 DATE

## WALK AROUND INSPECTION

✓ ✗ N/A

1	Fire extinguisher	✓		
2	Under carriage/Axles	✓		
3	Wheels and Tires	✓		
4	Outriggers	✓		
5	Counterweight/Bolted down and secured	✓		
6	Cab/Door	✓		
7	ROPS (roll over protective structure)	✓		
8	Boom section/Mast	✓		
9	Boom angle indicator and boom extension	✓		
10	Forks/Lifting attachment/bar	✓		
11	Attachment(s) [bucket, forks, breaker, etc.]	✓		
12	Auxiliary hoses/quick connects	✓		
13	Hood [hood latches]/Cover Panel	✓		
14	Strobe Lights & Mirrors	✓		
15	Engine compartment	✓		
16	Fuel type	✓		
17	Battery/batteries	✓		
18	Hydraulics	✓		
19	Enter/Exit Steps and hand rails	✓		
20	Capacity data plate	✓		
21	Load charts	✓		
22	Inspection certificate and hour meter	✓		
23	Operator manual storage compartment	✓		
24	Seat belt	✓		
25	Other			✓

## POWERED FUNCTION CHECKS

✓ ✗ N/A

1	Unit starts and runs properly	✓		
2	Braking system	✓		
3	Throttle control	✓		
4	Steering	✓		
5	Outriggers	✓		
6	Frame leveler and indicator	✓		
7	Boom/fork controls	✓		
8	Function control decals	✓		
9	Instruments/Gauges	✓		
10	Auxiliary controls	✓		
11	Horn/Audible warning device	✓		
12	Warning lights/back up alarm	✓		
13	Other options and controls			✓

## WORKPLACE INSPECTION

✓ ✗ N/A

1	Drop offs or holes	✓		
2	Bumps and floor/ground obstructions	✓		
3	Debris	✓		
4	Overhead obstructions	✓		
5	Energized power lines	✓		
6	Hazardous locations	✓		
7	Ground surface and support conditions	✓		
8	Pedestrian/vehicle traffic	✓		
9	Wind and weather conditions	✓		
10	Other			✓

## GENERAL

✓ ✗ N/A

1	Cleanliness	✓		
2	Manuals in weather resistant storage compartment	✓		
3	Decals/warning/placards clearly visible	✓		
4	Other			✓

## COMMENTS

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Gene Pool**

OPERATOR'S SIGNATURE



**ON-SITE EQUIPMENT  
TRAINING SERVICES**

WWW.ONSITETRAINERS.CA

# RATIONALE

## » TELEHANDLER/RT FORKLIFT PRE-USE



### WALK AROUND

- 1 Check sight glass. If needle is in the red the extinguisher needs to be replaced. Green indicates full charge
- 2 Check for damage, leaks, or any missing parts and/ components/ Are there rust stains on axle housings. If axle bolted to frame ensure they are tightened and none missing
- 3 Lug nuts tight/no rust from behind the lug nut. Indicates a loose lug nut/Wheel type (solid, foam filled, air filled)/Tires size matches and tread running in same direction
- 4 Check hydraulic lines, cylinders, any signs of damage
- 5 Telehandlers usually provide their own CW. If equipped with added CW ensure approved by manufacturer and secured
- 6 Cab- Are cab hold downs bolted in. Is upper cab guard in place and in good condition. Door opens and closes correctly
- 7 ROPS/ Check to make sure no damage (3/4" deformation requires structural inspection. Remove from of service)
- 8 Check for visible damage of any kind
- 9 Ensure angle indicator moves freely and extension indicator is visible. These 2 functions are required when reading load charts
- 10 Ensure forks are approx. same size as front and back. Ensure forks slide along bar easily. Check weight capacity of forks
- 11 Ensure mechanical locks are fully engaged and no cracks or rust coming from around welds. Not bent or worn
- 12 Ensure quick connects are fully engaged and locked . If not fully locked hoses can swing out under pressure
- 13 Ensure panels are properly secured
- 14 Ensure strobe lights are higher than cab/Check if mirror is loose, ensure clarity
- 15 Check your fluid levels and for any leaks of any kind. Excessive build up of dirt and grime are good indicators of a leak
- 16 Check see through fuel tank bladder or sight glass for amount of fuel. Fuel cap usually indicates fuel type/Also secure propane tank and ensure proper connection
- 17 condition (clean/dry/secure)/ Terminals properly connected
- 18 Hydraulics- check for leaks, frayed lines, level & tempreature of hyd. fluid/Cylinder/Rods (check for rust or chips on chrome rods)
- 19 Ensure area is clear of any material that could cause a slip.
- 20 Must be accurate and legible/Stamped metal plate.
- 21 Ensure correct load chart for attachment type being used
- 22 Check frequent inspection certificate. Shows maintenance information and service schedule.

- 23 Ensure Operator manual for the specific make and model is stored at all times
- 24 Ensure seatbelt is present and secure. Engage, disengage, Re-engage
- 25 Other as per options not listed.

### POWERED FUNCTION CHECKS

- 1 Ensure proper engine start
- 2 Check E-Brake and Braking system functions by engaging brake and activating drive controls.
- 3 Ensure smooth shifting (Nuetral/Fwd/Reverse/Clutch Function if equipped)
- 4 Front/Crab/Circle- ensure wheels are straight before driving the unit. Back wheels first, then front wheels
- 5 If equipped ensure Outriggers lower and engage properly and function smoothly (ensure no drifting while engaged)
- 6 Ensure frame adjusts from side to side when control is activated and Frame level indicator shows change of position
- 7 Boom section elevates, extends, retracts and lowers properly, do not drift (could indicate loss of pressure). Fork's auto level system is working properly.
- 8 Ensure all function controls have corresponding decals detailing what the function does and how it operates
- 9 Fuel Charge Level/Battery power level/Emergency brake indicator/All other indicators
- 10 If equipment activate AUX control for attachment and ensure proper function and power
- 11 Ensure 107 decibels or higher and UL approved
- 12 Turn on all lights to ensure they are functioning/Lights- due to varying weather and visibility conditions ensure that your lights are always visible
- 13 Control checks ( how are the controls set up and do they all function properly). This can be re-arranged in many units

### GENERAL

- 1 Keep the cab of your unit clean to ensure nothing can get caught in any controls or systems
- 2 Ensure manual is always close by in order to reference if needed
- 3 Warning decals must always be visible to the operator to ensure safe operating
- 4 Any items that are relevant to safe operation



# INSPECTION CHECKLIST

» TELEHANDLER/RT FORKLIFT PRE-USE



**Jack Pott**  
 OPERATOR'S NAME  
**204 Fake St.**  
 LOCATION  
**204**  
 HOUR METER READING  
**Genie 204**  
 MAKE AND MODEL  
**123456**  
 EQUIPMENT ID  
**Current**  
 DATE

## WALK AROUND INSPECTION

✓ ✗ N/A

1	Fire extinguisher	✓		
2	Under carriage/Axles	✓		
3	Wheels and Tires	✓		
4	Outriggers	✓		
5	Counterweight/Bolted down and secured	✓		
6	Cab/Door	✓		
7	ROPS (roll over protective structure)	✓		
8	Boom section/Mast	✓		
9	Boom angle indicator and boom extension	✓		
10	Forks/Lifting attachment/bar	✓		
11	Attachment(s) [bucket, forks, breaker, etc.]	✓		
12	Auxiliary hoses/quick connects	✓		
13	Hood [hood latches]/Cover Panel	✓		
14	Strobe Lights & Mirrors	✓		
15	Engine compartment	✓		
16	Fuel type	✓		
17	Battery/batteries	✓		
18	Hydraulics	✓		
19	Enter/Exit Steps and hand rails	✓		
20	Capacity data plate	✓		
21	Load charts	✓		
22	Inspection certificate and hour meter	✓		
23	Operator manual storage compartment	✓		
24	Seat belt	✓		
25	Other			✓

## GENERAL

✓ ✗ N/A

1	Cleanliness	✓		
2	Manuals in weather resistant storage compartment	✓		
3	Decals/warning/placards clearly visible	✓		
4	Other			✓

## POWERED FUNCTION CHECKS

✓ ✗ N/A

1	Unit starts and runs properly	✓		
2	Braking system	✓		
3	Throttle control	✓		
4	Steering	✓		
5	Outriggers	✓		
6	Frame leveler and indicator	✓		
7	Boom/fork controls	✓		
8	Function control decals	✓		
9	Instruments/Gauges	✓		
10	Auxiliary controls	✓		
11	Horn/Audible warning device	✓		
12	Warning lights/back up alarm	✓		
13	Other options and controls			✓

## WORKPLACE INSPECTION

✓ ✗ N/A

1	Drop offs or holes	✓		
2	Bumps and floor/ground obstructions	✓		
3	Debris	✓		
4	Overhead obstructions	✓		
5	Energized power lines	✓		
6	Hazardous locations	✓		
7	Ground surface and support conditions	✓		
8	Pedestrian/vehicle traffic	✓		
9	Wind and weather conditions	✓		
10	Other			✓

## COMMENTS

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Jack Pott**  
 OPERATOR'S SIGNATURE



**ON-SITE EQUIPMENT  
 TRAINING SERVICES**

WWW.ONSITETRAINERS.CA

# RATIONALE

## » TELEHANDLER/RT FORKLIFT PRE-USE



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# SRCC Ltd.

## Inspection Checklist

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<b>Worker Safety Rep:</b> Marcus Absent																																																																									
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Hazard identified should be ranked and controlled in priority. Inspection reports should be posted and communicated to employees as soon as practicable, at minimum – during next toolbox talk



# SRCC Ltd.

## Inspection Checklist

<b>Location:</b> 321 Fake St	<b>Date:</b> Feb 11				
<b>Supervisor:</b> Taj Mahal					
<b>Worker Safety Rep:</b> Colin Toksho					
<b>Items to Review:</b> <input checked="" type="checkbox"/> OK <input checked="" type="checkbox"/> Need action (list the specific hazard and mark in the chart below)					
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1	Fire Extinguisher	2D	Call Supplier	CT	Feb 11
2	Past Insp. Date				
3					
4	No Re-use	2D	Call Office	CT	Feb 11
5	Forms on Telehandler				
6					
7	Uneven Ground	3D	Bobcat used	CT	Feb 11
8			to level		
9					
10					
11					

Hazard identified should be ranked and controlled in priority. Inspection reports should be posted and communicated to employees as soon as practicable, at minimum – during next toolbox talk



# SRCC Ltd.

## Inspection Checklist

<b>Location:</b> 821 Gilbert Road (Shop)	<b>Date:</b> January 18 <sup>th</sup>				
<b>Supervisor:</b> Hugh					
<b>Worker Safety Rep:</b> Colin					
<b>Items to Review:</b> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 22%;"> <input checked="" type="checkbox"/> OK         </div> <div style="width: 78%;"> <input checked="" type="checkbox"/> Need action (list the specific hazard and mark in the chart below)         </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 22%;"> <b>People</b>  <input checked="" type="checkbox"/> Unsafe acts  <input checked="" type="checkbox"/> Unsafe work procedure  <input checked="" type="checkbox"/> Improper tool use  <input checked="" type="checkbox"/> Improper equipment use  <input checked="" type="checkbox"/> Not using PPE  <input checked="" type="checkbox"/> Not following safety rules  <input checked="" type="checkbox"/> Operator authorization         </div> <div style="width: 22%;"> <b>Equipment</b>  <input checked="" type="checkbox"/> Ladders  <input checked="" type="checkbox"/> Scaffolds  <input checked="" type="checkbox"/> Power tools  <input checked="" type="checkbox"/> Adequate supply of PPE  <input checked="" type="checkbox"/> Fire extinguisher  <input checked="" type="checkbox"/> First aid supplies  <input checked="" type="checkbox"/> Electrical         </div> <div style="width: 22%;"> <b>Materials</b>  <input checked="" type="checkbox"/> Housekeeping  <input checked="" type="checkbox"/> Controlled products  <input checked="" type="checkbox"/> SDS sheets  <input checked="" type="checkbox"/> Storage/stacking  <input checked="" type="checkbox"/> Rough edges  <input checked="" type="checkbox"/> Heavy material  <input checked="" type="checkbox"/> Safety bulletin board         </div> <div style="width: 22%;"> <b>Environment</b>  <input checked="" type="checkbox"/> Noise  <input checked="" type="checkbox"/> Ventilation  <input checked="" type="checkbox"/> Lighting  <input checked="" type="checkbox"/> Temperature  <input checked="" type="checkbox"/> Ice/snow  <input checked="" type="checkbox"/> Slip/trip hazards  <input checked="" type="checkbox"/> Sanitation         </div> </div>					
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1	Snow-emergency exit	3C	Shovel Path	Colin	Jan. 18
2	Icy sidewalk	2C	Salt	Colin	Jan. 18
3	Cluttered Area- trips	3C	Tidy up	Colin	Jan. 18
4					
5					
6					
7					
8					
9					
10					
11					

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# SRCC Ltd.

## Inspection Checklist

<b>Location:</b> 821 Gilbert Road (shop)	<b>Date:</b> February 21 <sup>st</sup>				
<b>Supervisor:</b> Anita <span style="float: right;"><b>Worker Safety Rep:</b> Pete</span>					
<b>Items to Review:</b> <input checked="" type="checkbox"/> OK <input checked="" type="checkbox"/> Need action (list the specific hazard and mark in the chart below)					
<b>People</b> <input checked="" type="checkbox"/> Unsafe acts <input checked="" type="checkbox"/> Unsafe work procedure <input checked="" type="checkbox"/> Improper tool use <input checked="" type="checkbox"/> Improper equipment use <input checked="" type="checkbox"/> Not using PPE <input checked="" type="checkbox"/> Not following safety rules <input checked="" type="checkbox"/> Operator authorization	<b>Equipment</b> <input checked="" type="checkbox"/> Ladders <input checked="" type="checkbox"/> Scaffolds <input checked="" type="checkbox"/> Power tools <input checked="" type="checkbox"/> Adequate supply of PPE <input checked="" type="checkbox"/> Fire extinguisher <input checked="" type="checkbox"/> First aid supplies <input checked="" type="checkbox"/> Electrical	<b>Materials</b> <input checked="" type="checkbox"/> Housekeeping <input checked="" type="checkbox"/> Controlled products <input checked="" type="checkbox"/> SDS sheets <input checked="" type="checkbox"/> Storage/stacking <input checked="" type="checkbox"/> Rough edges <input checked="" type="checkbox"/> Heavy material <input checked="" type="checkbox"/> Safety bulletin board	<b>Environment</b> <input checked="" type="checkbox"/> Noise <input checked="" type="checkbox"/> Ventilation <input checked="" type="checkbox"/> Lighting <input checked="" type="checkbox"/> Temperature <input checked="" type="checkbox"/> Ice/snow <input checked="" type="checkbox"/> Slip/trip hazards <input checked="" type="checkbox"/> Sanitation		
<table style="width: 100%;"> <tr> <th style="text-align: left;">SEVERITY</th> <th style="text-align: left;">PROBABILITY</th> </tr> <tr> <td> <b>1 Immediate danger</b> (death, disaster)  <b>2 Serious</b> (major injury or damage)  <b>3 Minor</b> (non-serious injury or damage)  <b>4 Negligible</b> (first aid or less)  <b>5 Not applicable</b> </td> <td> <b>A Probable</b> (immediately or soon)  <b>B Reasonably probable</b> (eventually)  <b>C Remote</b> (could at some point)  <b>D Extremely remote</b> (not likely)         </td> </tr> </table>		SEVERITY	PROBABILITY	<b>1 Immediate danger</b> (death, disaster) <b>2 Serious</b> (major injury or damage) <b>3 Minor</b> (non-serious injury or damage) <b>4 Negligible</b> (first aid or less) <b>5 Not applicable</b>	<b>A Probable</b> (immediately or soon) <b>B Reasonably probable</b> (eventually) <b>C Remote</b> (could at some point) <b>D Extremely remote</b> (not likely)
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<b>Item #</b>	<b>Identified hazard</b>	<b>Hazard ranking</b>	<b>Control</b>	<b>Action by</b>	<b>Completed</b>
1	Air Nailer	2B	Follow Practice	Anita	Feb 21
2			and procedure	Pete	
3	Chop Saw	2B	" "	Anita/Pete	Feb. 21
4	Glue (subfloor adhesive)	4C	Review SDS	Anita/Pete	Feb. 21
5	Noise	3B	wear all required PPE	All employees	Feb. 21
6					
7					
8					
9					
10					
11					

*Hazard identified should be ranked and controlled in priority. Inspection reports should be posted and communicated to employees as soon as practicable, at minimum – during next toolbox talk*



# SRCC Ltd.

## Inspection Checklist

<b>Location:</b> 821 Gilbert Road (shop)	<b>Date:</b> March 12 <sup>th</sup>				
<b>Supervisor:</b> Hugh					
<b>Worker Safety Rep:</b> Pete					
<b>Items to Review:</b> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="text-align: center;"> <input checked="" type="checkbox"/> OK         </div> <div style="text-align: center;"> <input checked="" type="checkbox"/> Need action (list the specific hazard and mark in the chart below)         </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 22%;"> <b>People</b>  <input checked="" type="checkbox"/> Unsafe acts  <input checked="" type="checkbox"/> Unsafe work procedure  <input checked="" type="checkbox"/> Improper tool use  <input checked="" type="checkbox"/> Improper equipment use  <input checked="" type="checkbox"/> Not using PPE  <input checked="" type="checkbox"/> Not following safety rules  <input checked="" type="checkbox"/> Operator authorization         </div> <div style="width: 22%;"> <b>Equipment</b>  <input checked="" type="checkbox"/> Ladders  <input checked="" type="checkbox"/> Scaffolds  <input checked="" type="checkbox"/> Power tools  <input checked="" type="checkbox"/> Adequate supply of PPE  <input checked="" type="checkbox"/> Fire extinguisher  <input checked="" type="checkbox"/> First aid supplies  <input checked="" type="checkbox"/> Electrical         </div> <div style="width: 22%;"> <b>Materials</b>  <input checked="" type="checkbox"/> Housekeeping  <input checked="" type="checkbox"/> Controlled products  <input checked="" type="checkbox"/> SDS sheets  <input checked="" type="checkbox"/> Storage/stacking  <input checked="" type="checkbox"/> Rough edges  <input checked="" type="checkbox"/> Heavy material  <input checked="" type="checkbox"/> Safety bulletin board         </div> <div style="width: 22%;"> <b>Environment</b>  <input checked="" type="checkbox"/> Noise  <input checked="" type="checkbox"/> Ventilation  <input checked="" type="checkbox"/> Lighting  <input checked="" type="checkbox"/> Temperature  <input checked="" type="checkbox"/> Ice/snow  <input checked="" type="checkbox"/> Slip/trip hazards  <input checked="" type="checkbox"/> Sanitation         </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <b>SEVERITY</b>             1 <b>Immediate danger</b> (death, disaster)            2 <b>Serious</b> (major injury or damage)            3 <b>Minor</b> (non-serious injury or damage)            4 <b>Negligible</b> (first aid or less)            5 <b>Not applicable</b> </div> <div style="width: 45%;"> <b>PROBABILITY</b>             A <b>Probable</b> (immediately or soon)            B <b>Reasonably probable</b> (eventually)            C <b>Remote</b> (could at some point)            D <b>Extremely remote</b> (not likely)         </div> </div>					
<b>Item #</b>	<b>Identified hazard</b>	<b>Hazard ranking</b>	<b>Control</b>	<b>Action by</b>	<b>Completed</b>
1	Circular Saw	2C	Follow procedure	Pete	Mar. 12
2	Dust	3C	Use sweepings compound	Pete	Mar. 12
3	Angle Grinder	2B	Wear PPE / Follow STP	Hugh/Pete	Mar. 12
4	Noise	3B	Wear all required PPE	All employees	Mar. 12
5					
6					
7					
8					
9					
10					
11					

Hazard identified should be ranked and controlled in priority. Inspection reports should be posted and communicated to employees as soon as practicable, at minimum – during next toolbox talk



# SRCC Ltd.

## Inspection Checklist

<b>Location:</b> 821 Gilbert Road (Shop)	<b>Date:</b> April 18 <sup>th</sup>				
<b>Supervisor:</b> Jack					
<b>Worker Safety Rep:</b> Colin					
<b>Items to Review:</b> <input checked="" type="checkbox"/> OK <input checked="" type="checkbox"/> Need action (list the specific hazard and mark in the chart below)					
<b>People</b> <input checked="" type="checkbox"/> Unsafe acts <input checked="" type="checkbox"/> Unsafe work procedure <input checked="" type="checkbox"/> Improper tool use <input checked="" type="checkbox"/> Improper equipment use <input checked="" type="checkbox"/> Not using PPE <input checked="" type="checkbox"/> Not following safety rules <input checked="" type="checkbox"/> Operator authorization	<b>Equipment</b> <input checked="" type="checkbox"/> Ladders <input checked="" type="checkbox"/> Scaffolds <input checked="" type="checkbox"/> Power tools <input checked="" type="checkbox"/> Adequate supply of PPE <input checked="" type="checkbox"/> Fire extinguisher <input checked="" type="checkbox"/> First aid supplies <input checked="" type="checkbox"/> Electrical	<b>Materials</b> <input checked="" type="checkbox"/> Housekeeping <input checked="" type="checkbox"/> Controlled products <input checked="" type="checkbox"/> SDS sheets <input checked="" type="checkbox"/> Storage/stacking <input checked="" type="checkbox"/> Rough edges <input checked="" type="checkbox"/> Heavy material <input checked="" type="checkbox"/> Safety bulletin board	<b>Environment</b> <input checked="" type="checkbox"/> Noise <input checked="" type="checkbox"/> Ventilation <input checked="" type="checkbox"/> Lighting <input checked="" type="checkbox"/> Temperature <input checked="" type="checkbox"/> Ice/snow <input checked="" type="checkbox"/> Slip/trip hazards <input checked="" type="checkbox"/> Sanitation		
<table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <b>SEVERITY</b>             1 <b>Immediate danger</b> (death, disaster)            2 <b>Serious</b> (major injury or damage)            3 <b>Minor</b> (non-serious injury or damage)            4 <b>Negligible</b> (first aid or less)            5 <b>Not applicable</b> </td> <td style="width: 50%; vertical-align: top;"> <b>PROBABILITY</b>             A <b>Probable</b> (immediately or soon)            B <b>Reasonably probable</b> (eventually)            C <b>Remote</b> (could at some point)            D <b>Extremely remote</b> (not likely)         </td> </tr> </table>		<b>SEVERITY</b>  1 <b>Immediate danger</b> (death, disaster) 2 <b>Serious</b> (major injury or damage) 3 <b>Minor</b> (non-serious injury or damage) 4 <b>Negligible</b> (first aid or less) 5 <b>Not applicable</b>	<b>PROBABILITY</b>  A <b>Probable</b> (immediately or soon) B <b>Reasonably probable</b> (eventually) C <b>Remote</b> (could at some point) D <b>Extremely remote</b> (not likely)		
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<b>Item #</b>	<b>Identified hazard</b>	<b>Hazard ranking</b>	<b>Control</b>	<b>Action by</b>	<b>Completed</b>
1	Fire Extinguisher	2D	call supplier	Jack	April 18
2	Past Annual Date				
3	Moving equipment	2C	wear high vis	Jack/Colin	April 18
4	Uneven grounds	3B	watch footing	Jack/Colin	April 18
5	Noise	3B	wear all required PPE	All employees	April 18
6					
7					
8					
9					
10					
11					

Hazard identified should be ranked and controlled in priority. Inspection reports should be posted and communicated to employees as soon as practicable, at minimum – during next toolbox talk





# CSAM

CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

## Construction Industry Incident/Near Miss Report

The Workers Compensation Act requires notice of  
injury to employee(s) within five business days

Have completed reports to the safety department within 24 hours

Date of incident/near miss: 04/04/

Time / / a.m./p.m.

Date reported: 04/04/

Time / / a.m./p.m.

1) Did the incident result in personal injury or hospitalization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No To Whom?	2) Did the incident involve property or equipment damage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No To What?
3) Location: 123 Fake Street	4) Equipment damage: N/A
5) Part of body injured: N/A	6) Immediate supervisor: Douglas Furr
7) Nature of injury: No injury was recorded but there was a potential serious injury.	
8) What happened to cause the injury and/or damage? (Show drawings or photographs — use reverse for additional details): Briten Waters forgot to follow the working alone procedure and did not let their direct Supervisor know.	
9) Recommended action to prevent similar incident/near miss from occurring: Hold toolbox talk on the importance of establishing contact with Supervisor whenever working alone.	
10) Corrective action taken at worksite: Hold toolbox Talk	
11) What defective or unsafe condition(s) of tools, equipment, machinery, work area contributed to the incident/near miss: Not using the working alone procedure	
12) Was first aid rendered? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No By whom: _____ If outside emergency assistance was required, provide details: _____	
13) Doctor's name: N/A	14) Medical facility: N/A
15) Severity of injury: <input type="checkbox"/> Minor <input type="checkbox"/> First aid only <input type="checkbox"/> Medical aid <input type="checkbox"/> Lost time <input type="checkbox"/> Fatality N/A	
16) Probability of reoccurrence: <input type="checkbox"/> Frequent <input type="checkbox"/> Occasional <input checked="" type="checkbox"/> Rare	

# Diagram of Scene

Indicate north with arrow

N/A

Witnessed by: Justin Case  
Witnessed by: \_\_\_\_\_

Employed by: SRCC Ltd.  
Employed by: \_\_\_\_\_

Reported by: (print) Brian Waters  
Signature: \_\_\_\_\_

Received by: (print) Douglas Furr  
Signature: \_\_\_\_\_

Investigator's signature: Douglas Furr  
Supervisor or Superintendent

Marcus Absent  
WSH Committee or Representative

\_\_\_\_\_  
Date Completed

## Senior Management Review

Further action, recommendations, or comments:

\_\_\_\_\_

\_\_\_\_\_

Approved by: Hugh Midor  
Manager

04/04  
Date

☒ No further action required  
☐ Further consideration  
☐ Further action required



# CSAM

CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

## Construction Industry Incident/Near Miss Report

The Workers Compensation Act requires notice of  
injury to employee(s) within five business days

Have completed reports to the safety department within 24 hours

Date of incident/near miss: 05/05/

Time     /    /     a.m./p.m.

Date reported: 05/05/

Time     /    /     a.m./p.m.

1) Did the incident result in personal injury or hospitalization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No To Whom?	2) Did the incident involve property or equipment damage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No To What?
3) Location: <u>321 Fake st.</u>	4) Equipment damage: <u>N/A</u>
5) Part of body injured: <u>N/A</u>	6) Immediate supervisor: <u>Taj Mahal</u>
7) Nature of injury: <u>N/A</u>	
8) What happened to cause the injury and/or damage? (Show drawings or photographs — use reverse for additional details): <u>Jack Pott never locked the site and there is a potential for the public to enter and cause damage / Injury.</u>	
9) Recommended action to prevent similar incident/near miss from occurring: <u>Evening walk around and ensure gate is locked.</u>	
10) Corrective action taken at worksite: <u>Lock gate when leaving site.</u>	
11) What defective or unsafe condition(s) of tools, equipment, machinery, work area contributed to the incident/near miss: <u>Lock</u>	
12) Was first aid rendered? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No By whom: <u>    </u> If outside emergency assistance was required, provide details: <u>    </u>	
13) Doctor's name: <u>N/A</u>	14) Medical facility: <u>N/A</u>
15) Severity of injury: <input type="checkbox"/> Minor <input type="checkbox"/> First aid only <input type="checkbox"/> Medical aid <input type="checkbox"/> Lost time <input type="checkbox"/> Fatality	
16) Probability of reoccurrence: <input type="checkbox"/> Frequent <input type="checkbox"/> Occasional <input checked="" type="checkbox"/> Rare	

Diagram of Scene

Indicate north with arrow

N/A

Witnessed by: Colin Toksha  
Witnessed by: \_\_\_\_\_

Employed by: SRCC Ltd.  
Employed by: \_\_\_\_\_

Reported by: (print) Jack Poth  
Signature: \_\_\_\_\_

Received by: (print) Anita Plumber  
Signature: \_\_\_\_\_

Investigator's signature:  
Jack Poth  
Supervisor or Superintendent

Colin Toksha  
WSH Committee or  
Representative

\_\_\_\_\_  
Date Completed

Senior Management Review

Further action, recommendations, or comments:

Approved by: Hugh Midor  
Manager

05/05  
Date

- ☒ No further action required  
☐ Further consideration  
☐ Further action required



# CSAM

**CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA**

## Construction Industry Incident/Near Miss Report

*The Workers Compensation Act requires notice of injury to employee(s) within five business days*

Have completed reports to the safety department within 24 hours

Date of incident/near miss: 06/06/

Time     /    /     a.m./p.m.

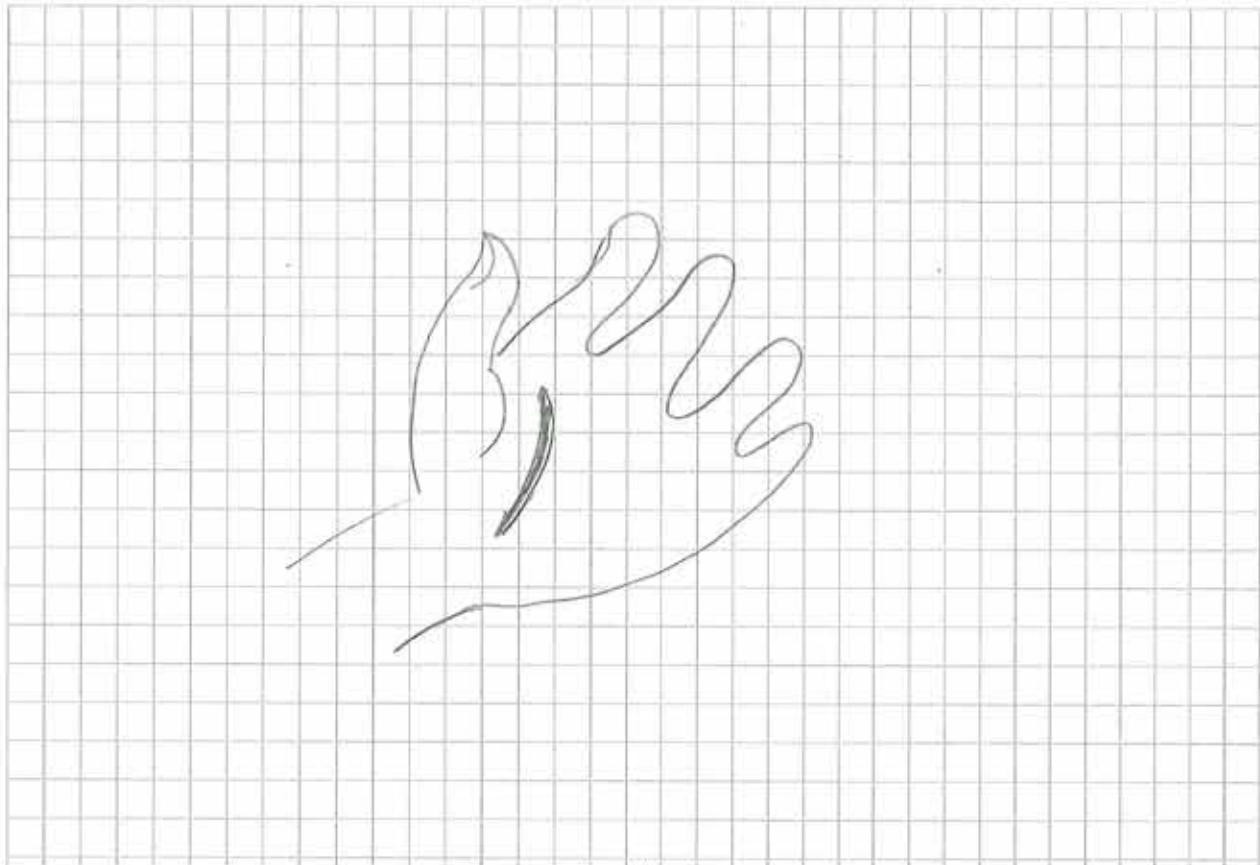
Date reported: 06/06/

Time     /    /     a.m./p.m.

1) Did the incident result in <u>personal injury</u> or hospitalization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No To Whom?	2) Did the incident involve property or equipment damage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No To What?
3) Location: <u>123 Fake St.</u>	4) Equipment damage: <u>N/A</u>
5) Part of body injured: <u>Left Hand</u>	6) Immediate supervisor: <u>Taj Mahal</u>
7) Nature of injury: <u>Cut palm of left hand with OLEA knife.</u>	
8) What happened to cause the injury and/or damage? (Show drawings or photographs — use reverse for additional details): <u>Justin was opening boxes when the knife slipped</u>	
9) Recommended action to prevent similar incident/near miss from occurring: <u>Always cut away from yourself and wear cut resistant gloves.</u>	
10) Corrective action taken at worksite: <u>Cut Resistant Gloves</u>	
11) What defective or unsafe condition(s) of tools, equipment, machinery, work area contributed to the incident/near miss: <u>OLEA Knife.</u>	
12) Was first aid rendered? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No By whom: <u>Pete Moss</u> If outside emergency assistance was required, provide details: <u>    </u>	
13) Doctor's name: <u>Johnny Rotten</u>	14) Medical facility: <u>Victoria</u>
15) Severity of injury: <input type="checkbox"/> Minor <input type="checkbox"/> First aid only <input checked="" type="checkbox"/> Medical aid <input type="checkbox"/> Lost time <input type="checkbox"/> Fatality	
16) Probability of reoccurrence: <input type="checkbox"/> Frequent <input type="checkbox"/> Occasional <input checked="" type="checkbox"/> Rare	

# Diagram of Scene

Indicate north with arrow



Witnessed by: Ryan Koch  
Witnessed by: \_\_\_\_\_

Employed by: SRCC Ltd.  
Employed by: \_\_\_\_\_

Reported by: (print) Justin Case  
Signature: \_\_\_\_\_

Received by: (print) Gene Pool  
Signature: \_\_\_\_\_

Investigator's signature:  
Gene Pool  
Supervisor or Superintendent

Althea Thorne  
WSH Committee or  
Representative

\_\_\_\_\_  
Date Completed

## Senior Management Review

Further action, recommendations, or comments:

Research and purchase cut resistant gloves

Approved by: Hugh Midler  
Manager

06/06  
Date

- ☐ No further action required  
☐ Further consideration  
☒ Further action required

## Equipment Inventory

Equipment	Inspector	Frequency
<b>Company Vehicles</b>		
Ford F-150 # 1	Designated Supervisor	Monthly
Ford F-150 #2	Designated Supervisor	Monthly
Ford F-150 #3	Designated Supervisor	Monthly
HINO Van # 1	Designated Supervisor	Monthly
HINO Van # 2	Designated Supervisor	Monthly
<b>Power Mobile Equipment</b>		
JLG 1234 Telehandler	Competent Worker	Pre-Use
Genie 3A1 1234567AD	Competent Worker	Pre-Use
Genie 204 123456	Competent Worker	Pre-Use
<b>Saws and Drills</b>		
Chop Saw # 1	Competent Worker	Pre-Use
Chop Saw # 2	Competent Worker	Pre-Use
Chop Saw # 3	Competent Worker	Pre-Use
Skill Saw # 1	Competent Worker	Pre-Use
Skill Saw # 2	Competent Worker	Pre-Use
Skill Saw #2	Competent Worker	Pre-Use
Cordless Drill # 1	Competent Worker	Pre-Use
Cordless Drill # 2	Competent Worker	Pre-Use
<b>Ladders</b>		
Extension Ladder # 1	Competent Worker	Pre-Use
Extension Ladder # 2	Competent Worker	Pre-Use
Extension Ladder # 3	Competent Worker	Pre-Use
Step Ladder # 1	Competent Worker	Pre-Use
Step Ladder # 2	Competent Worker	Pre-Use
Step Ladder # 3	Competent Worker	Pre-Use
<b>Generators</b>		
Generator # 1	Competent Worker	Pre-Use
Generator # 2	Competent Worker	Pre-Use
Generator # 3	Competent Worker	Pre-Use
<b>Scaffolding</b>		
Baker Scaffold # 1	Competent Worker	Pre-Use
Baker Scaffold # 2	Competent Worker	Pre-Use
Baker Scaffold # 3	Competent Worker	Pre-Use



SRCC Ltd.  
821 Gilbert Road

966866

\*INVOICE\*



Murray Auto Group Winnipeg Ltd. As the General Partner of and on behalf of, Murray Chevrolet Limited Partnership

1700 WAVERLEY STREET  
WINNIPEG, MANITOBA R3T 5V7  
Tel.: (204) 261-8200 Fax: (204) 261-4684  
www.murraychevrolet.ca

Hugh Midor  
Home: 204 789 4561  
Cell: 204 165 4987

PAGE 1

SERVICE ADVISOR: 60 PETER BUTERNOWSKY

SERVICE ADVISOR: 60 PETER BUTERNOWSKI							
COLOUR	YEAR	MAKE/MODEL	VIN	LICENSE	ODOMETER IN/OUT	TAG	
GAZ/SUMMIT	14	CHEVROLET 1500		SRCC-1	60996/60996	T6894	
IN SVC DATE	PROD DATE	WAHR EXP	PROMISED	PO NO	CURT PAI AMOUNT	PAYMENT	INV DATE
			WAIT 30NOV		0.00	CASH	30NOV

FO OPENED	READY	OPTIONS:
07:32 30NOV	08:31 30NOV	SOLD-STK:D38600 DLR:84271 ENG:LEA - I4 2.4L, TRN:A 1)60MTH / 100,000 KM \$0 DED - TOT PLUS - GMPP 2)1LG26,

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

A REPAIR TIRE \$24.95 [LABOUR \$22.95 MATERIAL \$2.00]: CUSTOMER REPORTS

RIGHT REAR TIRE HAS A NAIL IN IT

G17R REPAIR TIRE \$24.95 [LABOUR \$22.95 MATERIAL \$2.00]: CUSTOMER REPORTS RIGHT REAR TIRE HAS A NAIL IN IT

26 CTG

22.95 22.95

MISC MATERIAL

CTG

2.00 2.00

60996 SPRAYED AND CHECKED RIGHT REAR TIRE FOUND SCREW IN TIRE  
FIXED WITH PATCH PLUG BALANCED AND INSTALLED

B NO SERVICE TO RECOMMEND: VEHICLE IS UP TO DATE ON SERVICE

NSTR NO SERVICE TO RECOMMEND: VEHICLE IS UP TO DATE ON SERVICE

DATE ON SERVICE

99 Canada

Platinum member

0.00 0.00

C NO LOCKING WHEEL NUTS

NLN NO LOCKING WHEEL NUTS

99 CT

0.00 0.00

D RENNIE V WROTE REPAIR ORDER FOR YOU

RV RENNIE V WROTE REPAIR ORDER FOR YOU

99 CT

0.00 0.00

E CUSTOMER HAS PAGER #1 - PAGE WHEN DONE PLEASE

P1 CUSTOMER HAS PAGER #1 - PAGE WHEN DONE PLEASE

99 CT

0.00 0.00

\*\* We recommend that wheel nut torque be rechecked after 150 kilometers of driving if your wheels were removed on your vehicles today. Stop in to have this done at no charge during our regular business hours \*\*

All parts purchased from the dealership and associated labor have a minimum 90 day or 5,000 km. warranty, whichever comes first.

We and our service providers and affiliates will use the information provided by you to (i) perform services as may be directly requested by you, (ii) provide more information regarding the products and services of us, our affiliates and business partners, (iii) generate statistical and aggregated data that does not identify you personally, and (iv) disclose your information to our service providers and affiliates for the purpose of providing service to you and to provide you more information regarding their products and services. By providing your information to us, you consent to these uses. You may use in writing if in the future you do not consent to any of these uses of information you provide.

#### WARRANTY

INDEBTEDNESS IS HEREBY ACKNOWLEDGED BEING THE TOTAL AMOUNT OR BALANCE OWING FOR REPAIRS, PARTS, AND ACCESSORIES DESCRIBED IN THIS INVOICE.

X

CUSTOMER SIGNATURE

GST # R 139385694

Copyright 2014 COX Global, LLC SERVICE INVOICE TYPE 2 - SIZC - IMAGING

You have rights and protections under The Consumer Protection Act when it comes to motor vehicle work and repairs. A written estimate for repairs that cost more than \$100 must have been given to you unless you declined to receive a written estimate, and you specifically authorized the maximum amount that you would pay for the work or repairs, and the cost charged for the work or repairs did not exceed your authorized maximum amount. You cannot be charged a fee for an estimate unless you were told about the fee and agreed to pay it. You cannot be charged for work or repairs you did not authorize. You cannot be charged more than the total of the estimate plus 10% of that estimate up to a maximum of \$100. If you have concerns about the work performed or repairs done by the repairer or about your rights under The Consumer Protection Act and your responsibilities as a consumer, you should contact the Consumer Protection Office at 204-945-3800 or toll-free at 1-800-782-0087. No one may ask you to or make you waive or limit your rights under the Motor Vehicle Work and Repairs Part of The Consumer Protection Act.

DESCRIPTION	TOTALS
LABOUR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
SHOP SUPPLIES	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAXES	
PLEASE PAY THIS AMOUNT	

CUSTOMER COPY

SRCC ltd.  
821 Gilbert Road

966866

\*INVOICE\*



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SERVICE ADVISOR: 60 PETER BUTERNOWSKY

COLOUR	YEAR	MAKE/MODEL	VIN	LICENSE	ODOMETER IN/OUT	TAG	
GAZ/SUMMIT	14	CHEVROLET 1500		SRCC-1	60996/60996	T6894	
IN SVC DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO	EST. PAY. AMOUNT	PAYMENT	INV. DATE
			WAIT 30NOV		0.00	CASH	30NOV
R.O. OPENED		READY	OPTIONS: SOLD-STK:D38600 DLR:84271				
07:32 30NOV		08:31 30NOV	ENG:LEA - I4 2.4L, TRN:A 1)60MTH / 100,000 KM \$0				
DED - TOT PLUS - GMPP 2)1LG26,							
LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL

NEED TIRES OR BRAKES?  
Ask us about



Certified Service

CANADA'S BEST  
MANAGED  
COMPANIES  
Platinum member



PAID  
NOV 29

Certified Service

GST NUMBER R139385694 (#: R139385694)

1.25  
2.00

All parts purchased from the dealership and associated labor have a minimum 90 day or 5,000 km. warranty, whichever comes first.

We and our service providers and affiliates will use the information provided by you to (i) perform services as may be directly requested by you, (ii) provide more information regarding the products and services of us, our affiliates and business partners, (iii) generate statistical and aggregated data that does not identify you personally, and (iv) disclose your information to our service providers and affiliates for the purpose of providing services to you and to provide you more information regarding their products and services. By providing your information to us, you consent to these uses. You may opt out of this use of your information by providing us with your contact information in writing if in the future you do not consent to any of these uses of your information you provide.

#### WARRANTY

INDEBTEDNESS IS HEREBY ACKNOWLEDGED BEING THE TOTAL AMOUNT OR BALANCE OWING FOR REPAIRS, PARTS, AND ACCESSORIES DESCRIBED IN THIS INVOICE.

X

CUSTOMER SIGNATURE

GST # R 139385694

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You have rights and protections under The Consumer Protection Act when it comes to motor vehicle work and repairs. A written estimate for repairs that cost more than \$100 must have been given to you unless you declined to receive a written estimate, and you specifically authorized the maximum amount that you would pay for the work or repairs, and the cost charged for the work or repairs did not exceed your authorized maximum amount. You cannot be charged a fee for an estimate unless you were told about the fee and agreed to pay it. You cannot be charged for work or repairs you did not authorize. You cannot be charged more than the total of the estimate plus 10% of that estimate up to a maximum of \$100. If you have concerns about the work performed or repairs done by the repairer or about your rights under The Consumer Protection Act and your responsibilities as a consumer, you should contact the Consumer Protection Office at 204-946-3800 or toll-free at 1-800-782-0087. No one may ask you to or make you waive or limit your rights under the Motor Vehicle Work and Repairs Part of The Consumer Protection Act.

DESCRIPTION	TOTALS
LABOUR AMOUNT	22.95
PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
SHOP SUPPLIES	2.00
TOTAL CHARGES	24.95
LESS INSURANCE	0.00
SALES TAXES	3.25
PLEASE PAY THIS AMOUNT	28.20

CUSTOMER COPY

SRCC ltd.  
721 Gilbert Road

961449

\*INVOICE\*



Murray Auto Group Winnipeg Ltd. As the General Partner of and on behalf of, Murray Chevrolet Limited Partnership

1700 WAVERLEY STREET  
WINNIPEG, MANITOBA R3T 5V7  
Tel.: (204) 261-6200 Fax: (204) 261-4684  
www.murraychevrolet.ca

Hugh Midor  
Home: 204 789 4561  
Cell: 204 165 4987

PAGE 1

SERVICE ADVISOR: 494 AMANDA RITCHOT

COLOUR	YEAR	MAKE/MODEL	VIN	LICENSE	ODOMETER IN/OUT	TAG
GAZ/SUMMIT	14	CHEVROLET 1500		SRCC-1	56056/56056	TW2
IN SVC DATE	PROD DATE	WARR EXP	PROMISED	PO NO	CUST PAY (AMOUNT)	PAYMENT
			WAIT 18OCT		0.00	CASH
						18OCT

R/O OPENED	READY	OPTIONS:
07:07 18OCT	07:35 18OCT	SOLD-STK:D38600 DLR:84271 ENG:LEA - I4 2.4L, TRN:A 1)60MTH / 100,000 KM \$0 DED - TOT PLUS - GMPP 2)1LG26

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

A GDEX [EXSL] AC DELCO DEXOS GENERATION 2 FULL SYNTHETIC UP TO 6L \$62.95  
G1DEX GDEX [EXSL] AC DELCO DEXOS GENERATION 2 FULL  
SYNTHETIC UP TO 6L \$62.95

494 COIL 21.70 21.70  
5 19353386 5W30BULKDEXOS 6.65 6.65 33.25  
5w30 Dex

LUBE OIL FILTER

56056 PERFORMED COIL RESET OIL LIFE MONITOR USED 4.7  
LITRES OF 5W30. PF457 OIL FILTER 0.80 0.80

3 FREE ALIGNMENT CHECK (PLEASE NOTE PASS OR FAIL) [VALUE OF \$29.95]  
FAC FREE ALIGNMENT CHECK (PLEASE NOTE PASS OR  
FAIL) [VALUE OF \$29.95] 0.00 0.00

56056 PASSED

C NO OPEN RECALLS

NOR NO OPEN RECALLS

99 CT 0.00 0.00

D MULTIPOINT VEHICLE INSPECTION RECOMMENDED FOR NEXT VISIT [INCLUDES  
TIRE ROTATION A BRAKE INSPECTION OTHER SERVICES MAY ALSO BE  
DO BY MILEAGE CALL US FOR WHAT IS REQUIRED

RMP MULTIPOINT VEHICLE INSPECTION RECOMMENDED FOR

NEXT VISIT [INCLUDES TIRE ROTATION A BRAKE

INSPECTION OTHER SERVICES MAY ALSO BE DO

BY MILEAGE CALL US FOR WHAT IS REQUIRED

99 CT 0.00 0.00

E\*\* REPLACE 2 WIPER BLADES NO CHARGE LABOUR- ADVANTAGE \$19.95  
CONVENTIONAL \$34.95 EACH BEAM BLADE \$59.95 EACH - PLEASE  
DETERMINE WHAT YOU HAVE SOLD

053B REPLACE 2 WIPER BLADES NO CHARGE LABOUR-

All parts purchased from the dealership and associated labor have a minimum  
90 day or 5,000 km. warranty, whichever comes first.

We and our service providers and affiliates will use the information provided  
by you to (i) perform services as may be directly requested by you, (ii)  
provide more information regarding the products and services of us, our  
affiliates and business partners, (iii) generate statistical and aggregated data  
that does not identify you personally, and (iv) disclose your information to  
our service providers and affiliates for the purpose of providing service to you  
and to provide you more information regarding their products and services.  
By providing your information to us, you consent to these uses. You may  
use in writing if in the future you do not consent to any of these uses of  
information you provide.

#### WARRANTY

INDEBTEDNESS IS HEREBY ACKNOWLEDGED BEING THE TOTAL AMOUNT  
OR BALANCE OWING FOR REPAIRS, PARTS, AND ACCESSORIES  
DESCRIBED IN THIS INVOICE.

X

You have rights and protections under The Consumer  
Protection Act when it comes to motor vehicle work and  
repairs. A written estimate for repairs that cost more than  
\$100 must have been given to you unless you declined to  
receive a written estimate, and you specifically authorized  
the maximum amount that you would pay for the work or  
repairs, and the cost charged for the work or repairs did not  
exceed your authorized maximum amount. You cannot be  
charged a fee for an estimate unless you were told about  
the fee and agreed to pay it. You cannot be charged for  
work or repairs you did not authorize. You cannot be  
charged more than the total of the estimate plus 10% of  
that estimate up to a maximum of \$100. If you have  
concerns about the work performed or repairs done by the  
repairer or about your rights under The Consumer Protection  
Act and your responsibilities as a consumer, you should  
contact the Consumer Protection Office at 204-945-3800  
or toll-free at 1-800-782-0057. No one may ask you to or  
make you waive or limit your rights under the Motor Vehicle  
Work and Repairs Part of The Consumer Protection Act.

DESCRIPTION	TOTALS
LABOUR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
SHOP SUPPLIES	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAXES	
PLEASE PAY THIS AMOUNT	

CUSTOMER SIGNATURE

GST # R 139385694

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CUSTOMER COPY

SRCC ltd.  
21 Gilbert Road

961449

\*INVOICE\*



Murray Auto Group Winnipeg Ltd. As the General Partner of and on behalf of, Murray Chevrolet Limited Partnership  
1700 WAVERLEY STREET  
WINNIPEG, MANITOBA R3T 5V7  
Tel.: (204) 261-6200 Fax: (204) 261-4684  
www.murraychevrolet.ca

Hugh Midor  
Home: 204 789 4561  
Cell: 204 165 4987

PAGE 2

SERVICE ADVISOR: 494 AMANDA RITCHOT

COLOUR	YEAR	MAKE/MODEL	VIN	LICENSE	ODOMETER IN/OUT	TAG	
GAZ/SUMMIT	14	CHEVROLET 1500		SRCC-1	56056/56056	TW2	
IN SVC DATE	PROD DATE	WARR EXP	PROMISED	PO NO	CUST PAY (LABOUR RATE)	PAYMENT	INV DATE
			WAIT 18OCT		0.00	CASH	18OCT
R/O OPENED		READY		OPTIONS: SOLD-STK:D38600 DLR:84271			
07:07 18OCT		07:35 18OCT		ENG:LEA - I4 2.4L, TRN:A 1)60MTH / 100,000 KM \$0			
				DED - TOT PLUS - GMPP 2)1LG26,			
LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL

ADVANTAGE \$19.95 CONVENTIONAL \$34.95 EACH  
BEAM BLADE \$59.95 EACH - PLEASE DETERMINE  
WHAT YOU HAVE SOLD

494 CTG		0.00	0.00
1 19252692 BLADE	18.88	16.05	16.05
1 19252698 BLADE	18.88	16.05	16.05

56056 REPLACED BOTH FRONT WIPER BLADES.. TECH 494

F\*\* REPLACE ONE WIPER BLADE NO CHARGE LABOUR - ADVANTAGE \$19.95  
CONVENTIONAL \$34.95 EACH BEAM BLADE \$59.95 EACH - REAR BLADE  
053 REPLACE ONE WIPER BLADE NO CHARGE LABOUR  
ADVANTAGE \$19.95 CONVENTIONAL \$34.95 EACH  
BEAM BLADE \$59.95 EACH -- PLEASE MAKE SURE  
WE DETERMINE WHICH ONES SOLD

494 CTG		0.00	0.00
1 20999459 BLADE	26.89	22.86	22.86

56056 REPLACED REAR WIPER BLADE.. TECH 494

NEED TIRES OR BRAKES?

Ask us about



Certified Service

\*\* We recommend that wheel nut torque be rechecked after 150 kilometers of driving if your wheels were removed on your vehicles today. Stop in to have this done at no charge during our regular business hours \*\*

rtified Service PAID

OCT 18

5.54  
8.86

All parts purchased from the dealership and associated labor have a minimum 90 day or 5,000 km. warranty, whichever comes first.  
We and our service providers and affiliates will use the information provided by you to (i) perform services as may be directly requested by you, (ii) provide more information regarding the products and services of us, our affiliates and business partners, (iii) generate statistical and aggregated data that does not identify you personally, and (iv) disclose your information to our service providers and affiliates for the purpose of providing service to you and to provide you more information regarding their products and services.  
By providing your information to us, you consent to these uses. You may opt out of us in writing if in the future you do not consent to any of these uses of information you provide.

WARRANTY

INDEBTEDNESS IS HEREBY ACKNOWLEDGED BEING THE TOTAL AMOUNT OR BALANCE OWING FOR REPAIRS, PARTS, AND ACCESSORIES DESCRIBED IN THIS INVOICE.

X

CUSTOMER SIGNATURE

GST # R 139385694

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You have rights and protections under The Consumer Protection Act when it comes to motor vehicle work and repairs. A written estimate for repairs that cost more than \$100 must have been given to you unless you declined to receive a written estimate, and you specifically authorized the maximum amount that you would pay for the work or repairs, and the cost charged for the work or repairs did not exceed your authorized maximum amount. You cannot be charged a fee for an estimate unless you were told about the fee and agreed to pay it. You cannot be charged for work or repairs you did not authorize. You cannot be charged more than the total of the estimate plus 10% of that estimate up to a maximum of \$100. If you have concerns about the work performed or repairs done by the repairer or about your rights under The Consumer Protection Act and your responsibilities as a consumer, you should contact the Consumer Protection Office at 204-945-3800 or toll-free at 1-800-782-0067. No one may ask you to or make you waive or limit your rights under the Motor Vehicle Work and Repairs Part of The Consumer Protection Act.

DESCRIPTION	TOTALS
LABOUR AMOUNT	21.70
PARTS AMOUNT	88.21
GAS, OIL, LUBE	0.80
SUBLET AMOUNT	0.00
SHOP SUPPLIES	0.00
TOTAL CHARGES	110.71
LESS INSURANCE	0.00
SALES TAXES	14.40
PLEASE PAY THIS AMOUNT	125.11

CUSTOMER COPY

Date: Jan 31	Location: 123 Fake St
Facilitator: Jack Pott	Site Supervisor: Jack Pott
Safety Rep: Althea Thorne	Start Time: Finish:

Topics/Outcomes: Safe Work Practice Electric Safety General

Content: Documents attached? No / (Yes) Electric Safety General SWP

① Ensure that all electrical circuits and equipment are installed in accordance with the requirements of the MIB electric Code

② Lock equipment that is to be worked on or serviced

③ Do not bypass the switch and operate equipment during maintenance

Comments/Suggestions:

Do not use metal ladders or scaffolding near any exposed energized electrical circuits

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

What does GFCI stand for? Grand Fault Circuit Interruptor  
What is a GFCI used for? Protects us from electric shocks from faults in electrical devices.

Attendees: (print and initial)

Jack Pott JP	
Althea Thorne AT	
Justin Case JC	
Willie Maykit WM	



Date: Feb 15	Location: 321 Fake Street
Facilitator: Douglas Furr	Site Supervisor: Douglas Furr
Safety Rep: Marcus Absent	Start Time: Finish:

Topics/Outcomes: Review of Incident

Content: Documents attached? (No) Yes: \_\_\_\_\_

- Anita Plumber cut her finger while cutting paper

Comments/Suggestions: - be sure to report all incidents, even minor

- fill out first aid report + incident report form

- minor incident could lead to more serious ones

Review/Evaluation: (Discussion) Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

- reviewed all forms/documents

- proper way of filling out documents

Attendees: (print and initial)

Hugh Midor	
Anita Plumber	
Douglas Furr	
Marcus Absent	
Robin Banks	
Brita Waters	



Date: Feb 28	Location: 321 Fake St.
Facilitator: Marcus Absent	Site Supervisor: Douglas Furr
Safety Rep: Marcus Absent	Start Time: Finish:

Topics/Outcomes: Safe Work Practice Hand and Portable Power Tools

Content: Documents attached? No / (Yes) Hand + Portable Power Tools SWP

① Choose the most appropriate tool for the task

② Inspect the tool and ensure it is in good operating condition

③ Ensure any and all guards are in place

Comments/Suggestions:

Ensure the tools are labelled with required standards (CSA)

- Do not use the tool for any other purpose than what it's designed for.

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

What are examples of guards on power tools?

- grinder wheel guard
- pressure tip on posthole
- guard on chop saw
- guard on skill saw

Attendees: (print and initial)

Douglas Furr DF	
Marcus Absent MA	
Brita Waters BW	



Date: March 28	Location: 123 fake st.
Facilitator: Jack Pott	Site Supervisor: Jack Pott
Safety Rep: Althea Thoohe	Start Time: Finish:

Topics/Outcomes: Safe Job Procedure Fall Protection

Content: Documents attached? No / (Yes) STP Fall Protection  
what fall protection will be used on site

How to inspect harnesses, lanyards, lifelines, and anchor points.

How to use fall protection

Comments/Suggestions: \_\_\_\_\_

Complete a hazard assessment prior to doing any work at height

- Ensure that the equipment is functioning as intended

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

Inspection of fall arrest harness, lanyard, lifeline, and anchor point

Attendees: (print and initial)

Jack Pott JP	
Althea Thoohe AT	
Justin Case JC	
Willie Maykit WM.	



Date: April 28	Location: 204 Fake St.
Facilitator: Marcus Absent	Site Supervisor: Douglas Furr
Safety Rep: Marcus Absent	Start Time: Finish:

Topics/Outcomes: Safe Job Procedure Fuelling Equipment and Vehicles

Content: Documents attached? No / (Yes) SJP Fuelling Equipment + Vehicles  
What hazards are present when refuelling vehicles

what personal ~~prate~~ protective equipment is required  
when refuelling vehicles and equipment.

Comments/Suggestions: \_\_\_\_\_

Who will be permitted to perform this task?

- Ensure that nobody is smoking when fuelling vehicles  
and/or equipment.

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

What hazards are present?

What PPE is required and why?

Attendees: (print and initial)

Douglas Furr DF	
Marcus Absent MA	
Brita Waters BW	



Date: Sept 28	Location: 123 Fake Street
Facilitator: Douglas Furr	Site Supervisor: Douglas Furr
Safety Rep:	Start Time: Finish:

Topics/Outcomes: CSA Standard Z195-02 Protective Footwear

Content: Documents attached? No / (Yes) CSA Standard Z195-02

- Definitions within the standard
- Design requirements
- performance requirements of footwear
- footwear categories
- markings on protective footwear

Comments/Suggestions: \_\_\_\_\_

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

How can you tell if footwear is CSA approved?

What is the purpose of the alpha numeric code?

To identify protection class

Attendees: (print and initial)

Douglas Furr	DF	
Marcus Absent	MA	
Robin Banks	RB	
Anita Plumber	AP	



Date: November 12	Location: 321 Fake Street
Facilitator: Gene Pool	Site Supervisor: Gene Pool
Safety Rep: Pete Moss	Start Time: Finish:

Topics/Outcomes: CSA Standard Z94.1-Ø5 Industrial Protective Headwear

Content: Documents attached? No / ☒ Yes: CSA standard Z94.1-Ø5

Definitions

Headwear Classification

Headwear Selection

Fitting and inspecting headwear

Comments/Suggestions:

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other:

Inspection of the fit and maintenance of protective ~~headwear~~ headwear

Attendees: (print and initial)

Gene Pool GP	
Peter Moss PM	
Willie Maykit WM	
Ryan Koch RK	
Hugh Midor HM	



Date: Aug 12	Location: 321 Fake St.
Facilitator: Douglas Furr	Site Supervisor: Douglas Furr
Safety Rep: Marcus Absent	Start Time: Finish:

Topics/Outcomes: Review of Near Miss Incident

Content: Documents attached? ☒ No / Yes: \_\_\_\_\_

- Time and date of the near miss incident
- what is a near miss
- what is our Working Alone Procedure

Comments/Suggestions: Ensure that whenever you are working alone you establish a timeline to check in with someone in the company

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

Attendees: (print and initial)

Hugh Milder	HM	
Anita Plumber	AP	
Douglas Furr	DF	
Marcus Absent	MA	
Robin Banks	RB	
Brita Waters	BW	



Date: Sept 12	Location: 321 Fake Street
Facilitator: Jack Pott	Site Supervisor: Jack Pott
Safety Rep: Althea Thorne	Start Time: Finish:

Topics/Outcomes: Review of Violence Policy

Content: Documents attached? No / Yes: \_\_\_\_\_

Reviewed the definition of violence  
Reviewed the procedure for reporting a violent incident  
Reviewed the purpose of investigating a violent incident

Comments/Suggestions: \_\_\_\_\_

Ensure we have a process for investigating a violent incident while trying to maintain confidentiality

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

Attendees: (print and initial)

Anita Plumber	AP	
Jack Pott	JP	
Althea Thorne	AT	
Justin Case	JC	



Date: Oct 12	Location: 204 FAKE STREET
Facilitator: Gene Pool	Site Supervisor: Gene Pool
Safety Rep: Pete Moss	Start Time: Finish:

Topics/Outcomes: Review of Harassment Policy

Content: Documents attached? ☒ No / Yes: \_\_\_\_\_

Reviewed the definition of Harassment

Reviewed the procedure for reporting a harassment incident

Review the purpose of investigating a harassment incident

Comments/Suggestions: \_\_\_\_\_

Ensure we have a process for investigating a harassment incident while trying to maintain confidentiality

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

Attendees: (print and initial)

Hugh Midor	HM	
Gene Pool	GP	
Pete Moss	PM	
Willie Maykrt	WM	
Ryan Koch	RK	



Date: <u>Nov 12</u>	Location: <u>244 Fake St.</u>
Facilitator: <u>Hugh Midor</u>	Site Supervisor: <u>Douglas Furr</u>
Safety Rep: <u>Pete Moss</u>	Start Time: _____ Finish: _____

Topics/Outcomes: Mock Emergency: Amputation on site

Content: Documents attached? ☒ No / Yes: \_\_\_\_\_

Mock Emergency Scenario: Worker cut off finger while using a table saw. Immediately contacted emergency services to have an ambulance sent to site. We immediately sent another employee to meet the ambulance on arrival to bring them directly to the injured employee. First aid was administered quickly and we were able to have the employee sent to hospital within a half hour

Comments/Suggestions: \_\_\_\_\_

- Assess the scene to ensure it is safe to enter
- Ensure nothing is disturbed for the investigation to take place

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

Mock Emergency

Attendees: (print and initial)

<u>Hugh Midor</u>	<u>HM</u>	
<u>Anita Plumber</u>	<u>AP</u>	
<u>Douglas Furr</u>	<u>DF</u>	
<u>Pete Moss</u>	<u>PM</u>	
<u>Ryan Koch</u>	<u>RK</u>	
<u>Brita Waters</u>	<u>BW</u>	



Date: <u>Oct 12</u>	Location: <u>Shop</u>
Facilitator: <u>Hugh Midor</u>	Site Supervisor: <u>Gene Pool</u>
Safety Rep: <u>Pete Moss</u>	Start Time: _____ Finish: _____

Topics/Outcomes: Fire Drill

Content: Documents attached? ☒ No / Yes: \_\_\_\_\_

A fire drill was practiced on site, we sounded the <sup>fire</sup> alarm at 9:10 am and we were able to do a head count with everyone present at the muster point on the shoulder of the road at 9:15 am.

Comments/Suggestions: \_\_\_\_\_

- Everyone was able to hear the fire alarm throughout the entire site
- Everyone was able to locate the muster point with no issue

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

Demonstrated the evacuation of the entire site

Attendees: (print and initial)

Hugh Midor	HM	
Gene Pool	GP	
Pete Moss	PM	
Brita Waters	BW	



Date: Current	Location: Shop
Facilitator: Hugh Midor	Site Supervisor: Hugh Midor
Safety Rep: Marcus Absent	Start Time: Now Finish: Then

Topics/Outcomes: Review of COR<sup>®</sup> Audit Corrective Actions

Content: Documents attached? No / Yes: Corrective Action Plan

Review corrective action plan for the current  
years COR<sup>®</sup> Audit.

I identified areas to improve as well as areas to  
continue to follow our Safety Management system.

Comments/Suggestions: \_\_\_\_\_

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

Attendees: (print and initial)

Hugh Midor HM	Pete Moss PM
Anita Plumber AP	Althea Thorne AT
Douglas Furr DF	Colm Toksho CT
Gene Paul GP	Robin Banks RB
Jack Pott JP	Willie Maykit WM
Taj Mahal TM	Ryan Koch RK
Marcus Absent MA	Justin Case JC



Date: Aug 12	Location: 321 Fake St.
Facilitator: Douglas Furr	Site Supervisor: Douglas Furr
Safety Rep: Marcus Absent	Start Time: Finish:

Topics/Outcomes: Review of Near Miss Incident

Content: Documents attached? ☒ No / Yes: \_\_\_\_\_

- Time and date of the near miss incident
- what is a near miss
- what is our Working Alone Procedure

Comments/Suggestions: Ensure that whenever you are working alone you establish a timeline to check in with someone in the company

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

Attendees: (print and initial)

Hugh Milder	HM	
Anita Plumber	AP	
Douglas Furr	DF	
Marcus Absent	MA	
Robin Banks	RB	
Brita Waters	BW	



Date: Sept 12	Location: 321 Fake Street
Facilitator: Jack Pott	Site Supervisor: Jack Pott
Safety Rep: Althea Thorne	Start Time: Finish:

Topics/Outcomes: Review of Violence Policy

Content: Documents attached? No / Yes: \_\_\_\_\_

Reviewed the definition of violence  
Reviewed the procedure for reporting a violent incident  
Reviewed the purpose of investigating a violent incident

Comments/Suggestions: \_\_\_\_\_

Ensure we have a process for investigating a  
violent incident while trying to maintain  
confidentiality

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

Attendees: (print and initial)

Anita Plumber	AP	
Jack Pott	JP	
Althea Thorne	AT	
Justin Case	JC	



Date: Oct 12	Location: 204 FAKE STREET
Facilitator: Gene Pool	Site Supervisor: Gene Pool
Safety Rep: Pete Moss	Start Time: Finish:

Topics/Outcomes: Review of Harassment Policy

Content: Documents attached? ☒ No / Yes: \_\_\_\_\_

Reviewed the definition of Harassment

Reviewed the procedure for reporting a harassment incident

Review the purpose of investigating a harassment incident

Comments/Suggestions: \_\_\_\_\_

Ensure we have a process for investigating a harassment incident while trying to maintain confidentiality

Review/Evaluation: Discussion / Demonstration / Oral quiz / Written quiz / Other: \_\_\_\_\_

Attendees: (print and initial)

Hugh Midor	HM	
Gene Pool	GP	
Pete Moss	PM	
Willie Maykit	WM	
Ryan Koch	RK	



# Certificate

OF TRAINING

This Certificate of Training is presented to:

Ryan Koch

*For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:*

Hazard Identification and Risk Control



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

2022/08/31

Completion Date



# Certificate

OF TRAINING

This Certificate of Training is presented to:

Althea Thoone

*For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:*

Hazard Identification and Risk Control



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

2022/08/31

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

Taj Mahal

*For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:*

## Fire Extinguisher Training



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

2022/08/31

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

Pete Moss

*For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:*

## Fire Extinguisher Training



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

2022/08/31

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

*Taj Mahal*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Fall Protection & Rescue (8 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*November 30*

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

*Jack Pott*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Fall Protection & Rescue (8 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

November 30

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

*Jack Pott*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Leadership for Safety Excellence (16 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*March 25*

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

*Pete Moss*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Leadership for Safety Excellence (16 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*March 25*

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

*Anita Plumber*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Leadership for Safety Excellence (16 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*March 25*

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

*Anita Plumber*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Principles of Safety Management (8 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*February 15*

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

*Pete Moss*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Principles for Safety Management (8 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*December 5*

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

*Hugh Midor*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Principles of Safety Management (8 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*February 15*

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

*Douglas Furr*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*WHMIS 2015-Train the Trainer (8 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*November 1*

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

*Pete Moss*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Safety Auditor Training (8 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*October 21*

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

*Anita Plumber*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Safety Auditor Training (16 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*July 11*

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

*Taj Mahal*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Legislation 101 (4 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*June 10*

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

*Pete Moss*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Safety Administration (4 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*May 21*

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

*Marcus Absent*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Legislation 101 (4 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*June 10*

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

*Pete Moss*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Legislation 101 (4 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**

CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*June 10*

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

**Willie Maykit**

*For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:*

**SiteReadyMB**



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

01/02

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

**Ryan Koch**

*For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:*

**SiteReadyMB**



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

01/01

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

**Justin Case**

*For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:*

**SiteReadyMB**



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

20/01

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

**Brita Waters**

*For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:*

**SiteReadyMB**



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

01/03

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

**Colin Toksho**

*For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:*

**SiteReadyMB**



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

04/03

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

**Robin Banks**

*For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:*

**SiteReadyMB**



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

15/04

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

*Gene Pool*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Safety Skills for Supervisors (8 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*February 4*

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

*Douglas Furr*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Leadership for Safety Excellence (16 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**

CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*March 25*

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

*Marcus Absent*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Safety Rep Awareness (4 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

July 5

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

*Pete Moss*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*Safety Rep Awareness (4 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*July 5*

Completion Date



# Certificate

## OF TRAINING

This Certificate of Training is presented to:

*Pete Moss*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*WHMIS 2015-Train the Trainer (8 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*November 1*

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

*Brita Waters*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*WHMIS Train the Trainer (8 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*July 12*

Completion Date



# Certificate OF TRAINING

This Certificate of Training is presented to:

*Justin Case*

For successfully completing the Construction Safety Association of Manitoba's requirements,  
demonstrating an understanding of course materials through written and/or performance test,  
and passing an evaluation for:

*WHMIS Train the Trainer (8 HOURS)*



Construction Safety Association of Manitoba  
Executive Director



**CSAM**  
CONSTRUCTION SAFETY  
ASSOCIATION OF MANITOBA

*March 25*

Completion Date



## Mobile Elevated Work Platform Evaluation Form

Operator: <u>Althea Thorne</u>	Company: <u>SRCC Ltd.</u>
Theory training completed on: <u>Jan 22</u> Company: <u>SRCC Ltd</u>	
Make and model of unit: <u>JLG 123</u>	Evaluation date: <u>Jan 23</u>
Evaluator: <u>Jack Pott</u>	Signature: <u>Jack Pott</u>
Comments: <span style="float: right;"> <input checked="" type="checkbox"/> Pass         <input type="checkbox"/> Fail       </span>	

Pre-Operation Inspection	OK	NO	N/A	Comments
Inspect work area	✓			
Perform pre-use inspection	✓			
Report problems or damage	✓			
Understands lockout/tagout procedure	✓			
Weight capacity verified	✓			
Personal protective equipment	✓			
Uses three points of contact	✓			
Properly attaches fall restraint lanyard	✓			
Manufacturer's manual available	✓			

Controls and Indicators	OK	NO	N/A	Comments
Explains ground level controls	✓			
Explains platform controls	✓			
Explains emergency shut off	✓			

Start-up Procedure	OK	NO	N/A	Comments
Visually check area is clear of personnel	✓			
Emergency shut off position	✓			
Fuel selection (gasoline/LPG Models)	✓			
Start engine	✓			

Function Testing	OK	NO	N/A	Comments
Performs ground control tests	✓			
Performs platform control tests	✓			

Information presented is intended for general use and may not apply to every circumstance. It is not a definitive guide to government regulations and does not relieve persons using this publication from their responsibilities under applicable legislation. The Construction Safety Association of Manitoba does not guarantee the accuracy of, nor assume liability for, the information presented here.

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Basic Operating Procedures	OK	NO	N/A	Comments
Operators position	✓			
Entry gate	✓			
Visual attention	✓			
Speed of operation	✓			
Forward/reverse operations	✓			
Understands steering patterns	✓			
Lighting	✓			

Safety Awareness	OK	NO	N/A	Comments
Communication	✓			
Work area is secured	✓			
Understands warning decals	✓			
Awareness when raising and lowering boom	✓			
Operator stays in platform	✓			
Uses horn	✓			
Emergency shutdown procedure	✓			

Shutdown Procedure	OK	NO	N/A	Comments
Parks in safe level area	✓			
Platform/boom is lowered	✓			
Turntable correctly positioned (boom lift only)	✓			
Idle engine (diesel models)	✓			
Shutdown procedure	✓			

Fire Extinguisher Operation	OK	NO	N/A	Comments
Checks extinguisher for readiness	✓			

Information presented is intended for general use and may not apply to every circumstance. It is not a definitive guide to government regulations and does not relieve persons using this publication from their responsibilities under applicable legislation. The Construction Safety Association of Manitoba does not guarantee the accuracy of, nor assume liability for, the information presented here.

constructionsafety.ca | Winnipeg: 204-775-3171 | Brandon: 204-728-3456



## Mobile Elevated Work Platform Evaluation Form

Operator: <u>Gene Pool</u>	Company: <u>SRCC Ltd.</u>
Theory training completed on: <u>Feb 22</u> Company: <u>SRCC Ltd.</u>	
Make and model of unit: <u>JLG 321</u> Evaluation date: <u>Feb 23</u>	
Evaluator: <u>Jack Roth</u>	Signature: <u>Jack Roth</u>
Comments: <span style="float: right;"> <input checked="" type="checkbox"/> Pass         <input type="checkbox"/> Fail       </span>	

Pre-Operation Inspection	OK	NO	N/A	Comments
Inspect work area	✓			
Perform pre-use inspection	✓			
Report problems or damage	✓			
Understands lockout/tagout procedure	✓			
Weight capacity verified	✓			
Personal protective equipment	✓			
Uses three points of contact	✓			
Properly attaches fall restraint lanyard	✓			
Manufacturer's manual available	✓			

Controls and Indicators	OK	NO	N/A	Comments
Explains ground level controls	✓			
Explains platform controls	✓			
Explains emergency shut off	✓			

Start-up Procedure	OK	NO	N/A	Comments
Visually check area is clear of personnel	✓			
Emergency shut off position	✓			
Fuel selection (gasoline/LPG Models)	✓			
Start engine	✓			

Function Testing	OK	NO	N/A	Comments
Performs ground control tests	✓			
Performs platform control tests	✓			

Information presented is intended for general use and may not apply to every circumstance. It is not a definitive guide to government regulations and does not relieve persons using this publication from their responsibilities under applicable legislation. The Construction Safety Association of Manitoba does not guarantee the accuracy of, nor assume liability for, the information presented here.

constructionsafety.ca | Winnipeg: 204-775-3171 | Brandon: 204-728-3456



Basic Operating Procedures	OK	NO	N/A	Comments
Operators position	✓			
Entry gate	✓			
Visual attention	✓			
Speed of operation	✓			
Forward/reverse operations	✓			
Understands steering patterns	✓			
Lighting	✓			

Safety Awareness	OK	NO	N/A	Comments
Communication	✓			
Work area is secured	✓			
Understands warning decals	✓			
Awareness when raising and lowering boom	✓			
Operator stays in platform	✓			
Uses horn	✓			
Emergency shutdown procedure	✓			

Shutdown Procedure	OK	NO	N/A	Comments
Parks in safe level area	✓			
Platform/boom is lowered	✓			
Turntable correctly positioned (boom lift only)	✓			
Idle engine (diesel models)	✓			
Shutdown procedure	✓			

Fire Extinguisher Operation	OK	NO	N/A	Comments
Checks extinguisher for readiness	✓			

Information presented is intended for general use and may not apply to every circumstance. It is not a definitive guide to government regulations and does not relieve persons using this publication from their responsibilities under applicable legislation. The Construction Safety Association of Manitoba does not guarantee the accuracy of, nor assume liability for, the information presented here.

constructionsafety.ca | Winnipeg: 204-775-3171 | Brandon: 204-728-3456



## Contractor Compliance Declaration

With respect to the objects and purposes of ensuring, so far as reasonably practicable, that all construction and maintenance work undertaken by contracted parties of **SRCC Ltd.** will be undertaken in a safe manner, the following declaration must be signed and submitted.

Submitted to: SRCC Ltd.  
SRCC Ltd. rep: Gene Pool  
Company name: Barker Roofing Inc.  
Address: 742 Evergreen Terrace

### CSAM Safety Program Information

COR® Certification #: 12345 COR Safety Program Registration #: N/A

### Declaration

As required by all employers in the province of Manitoba, I have obtained current copies of the Workplace Safety and Health (WSH) Act and Regulation.

As required by all contractors of SRCC Ltd. we will procure all hazardous products with the intent of managing the health and safety of all workers working with those products. This will include but is not limited to ensuring that all hazardous products as well as building materials where risks have been identified are accompanied by appropriate Safety Data Sheets (SDS) and safe work procedures.

As required by all employers in the province of Manitoba, I will ensure workers are supervised by a competent supervisor, familiar with the WSH Act and Regulation.

As required by all persons in the province of Manitoba, I will share required information with the owner, prime contractor, and those affected, necessary to identify and control existing and potential hazards.

**I will conduct a pre-job hazard assessment and submit a copy to SRCC Ltd. prior to start-up.**

To the best of my knowledge, I and my company employees meet the minimum safety training requirements as outlined in Manitoba's WSH legislation.

My company has obtained coverage through the Workers Compensation Board of Manitoba (WCB) and will remain in good standing with the WCB for the duration of the project.

Print name: Robert Barker Signature: B Barker  
Print title: Owner Date: June 1  
Site contact: Tim Allen Phone #: 204 725 2222



## Contractor Compliance Declaration

With respect to the objects and purposes of ensuring, so far as reasonably practicable, that all construction and maintenance work undertaken by contracted parties of **SRCC Ltd.** will be undertaken in a safe manner, the following declaration must be signed and submitted.

Submitted to: SRCC Ltd.  
SRCC Ltd. rep: Douglas Furr  
Company name: 2nd Choice Plumbing + Heating  
Address: 425 Grove Street

### CSAM Safety Program Information

COR® Certification #: 54321 COR

Safety Program Registration #: N/A

### Declaration

As required by all employers in the province of Manitoba, I have obtained current copies of the Workplace Safety and Health (WSH) Act and Regulation.

As required by all contractors of SRCC Ltd. we will procure all hazardous products with the intent of managing the health and safety of all workers working with those products. This will include but is not limited to ensuring that all hazardous products as well as building materials where risks have been identified are accompanied by appropriate Safety Data Sheets (SDS) and safe work procedures.

As required by all employers in the province of Manitoba, I will ensure workers are supervised by a competent supervisor, familiar with the WSH Act and Regulation.

As required by all persons in the province of Manitoba, I will share required information with the owner, prime contractor, and those affected, necessary to identify and control existing and potential hazards.

**I will conduct a pre-job hazard assessment and submit a copy to SRCC Ltd. prior to start-up.**

To the best of my knowledge, I and my company employees meet the minimum safety training requirements as outlined in Manitoba's WSH legislation.

My company has obtained coverage through the Workers Compensation Board of Manitoba (WCB) and will remain in good standing with the WCB for the duration of the project.

Print name:	<u>Joe T. Plumber</u>	Signature:	<u>JT Plumber</u>
Print title:	<u>Owner</u>	Date:	<u>April 16</u>
Site contact:	<u>Tom Hanks</u>	Phone #:	<u>204 444 1718</u>



## Contractor Compliance Declaration

With respect to the objects and purposes of ensuring, so far as reasonably practicable, that all construction and maintenance work undertaken by contracted parties of **SRCC Ltd.** will be undertaken in a safe manner, the following declaration must be signed and submitted.

Submitted to: SRCC Ltd.  
SRCC Ltd. rep: Gene Pool  
Company name: Barker Roofing  
Address: 742 Evergreen Terrace

### CSAM Safety Program Information

COR® Certification #: 12345 COR

Safety Program Registration #: N/A

### Declaration

As required by all employers in the province of Manitoba, I have obtained current copies of the Workplace Safety and Health (WSH) Act and Regulation.

As required by all contractors of SRCC Ltd. we will procure all hazardous products with the intent of managing the health and safety of all workers working with those products. This will include but is not limited to ensuring that all hazardous products as well as building materials where risks have been identified are accompanied by appropriate Safety Data Sheets (SDS) and safe work procedures.

As required by all employers in the province of Manitoba, I will ensure workers are supervised by a competent supervisor, familiar with the WSH Act and Regulation.

As required by all persons in the province of Manitoba, I will share required information with the owner, prime contractor, and those affected, necessary to identify and control existing and potential hazards.

**I will conduct a pre-job hazard assessment and submit a copy to SRCC Ltd. prior to start-up.**

To the best of my knowledge, I and my company employees meet the minimum safety training requirements as outlined in Manitoba's WSH legislation.

My company has obtained coverage through the Workers Compensation Board of Manitoba (WCB) and will remain in good standing with the WCB for the duration of the project.

Print name: Robert Barker Signature: R. Barker  
Print title: Owner Date: May 1  
Site contact: Tim Allen Phone #: 204 725 2222



## Contractor Compliance Declaration

With respect to the objects and purposes of ensuring, so far as reasonably practicable, that all construction and maintenance work undertaken by contracted parties of **SRCC Ltd.** will be undertaken in a safe manner, the following declaration must be signed and submitted.

Submitted to: SRCC Ltd.  
SRCC Ltd. rep: Douglas Farr  
Company name: 2nd Choice Plumbing + Heating  
Address: 425 Grove Street

### CSAM Safety Program Information

COR® Certification #: 54321 COR

Safety Program Registration #: N/A

### Declaration

As required by all employers in the province of Manitoba, I have obtained current copies of the Workplace Safety and Health (WSH) Act and Regulation.

As required by all contractors of SRCC Ltd. we will procure all hazardous products with the intent of managing the health and safety of all workers working with those products. This will include but is not limited to ensuring that all hazardous products as well as building materials where risks have been identified are accompanied by appropriate Safety Data Sheets (SDS) and safe work procedures.

As required by all employers in the province of Manitoba, I will ensure workers are supervised by a competent supervisor, familiar with the WSH Act and Regulation.

As required by all persons in the province of Manitoba, I will share required information with the owner, prime contractor, and those affected, necessary to identify and control existing and potential hazards.

**I will conduct a pre-job hazard assessment and submit a copy to SRCC Ltd. prior to start-up.**

To the best of my knowledge, I and my company employees meet the minimum safety training requirements as outlined in Manitoba's WSH legislation.

My company has obtained coverage through the Workers Compensation Board of Manitoba (WCB) and will remain in good standing with the WCB for the duration of the project.

Print name:	<u>Joe T. Plumber</u>	Signature:	<u>JTPlumber</u>
Print title:	<u>Owner</u>	Date:	<u>Sept 1</u>
Site contact:	<u>Tom Hanks</u>	Phone #:	<u>204 444 1718</u>



## Disciplinary Action Notice – SRCC Ltd.

Employee name: Marcus Absent

Company name: SRCC Ltd.

Worksite: 123 Fake Street Date: January 21

### Disciplinary Action Type:

- ☒ First offence - verbal warning
- ☐ Second offence - written warning
- ☐ Third offence – suspension. length: \_\_\_\_\_
- ☐ Fourth offence - termination

### Infraction Type:

- |  |  |
|--|--|
| <input type="radio"/> Disobey safety rules                     | <input checked="" type="radio"/> Personal protective equipment |
| <input checked="" type="radio"/> Unsafe use of tools/equipment | <input type="radio"/> Unsafe practice/procedure                |
| <input type="radio"/> Insubordination                          | <input type="radio"/> Tardiness/absent                         |
| <input type="radio"/> Disobey company policy(s)                | <input type="radio"/> Other (explain below)                    |

### Comments, notes, and/or corrective action required:

Marcus Absent was seen operating a grinder without  
wearing the appropriate eye protection

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employee signature: Marcus Absent

Supervisor signature: Douglas Furr

Employer signature: Hugh Midor



## Disciplinary Action Notice – SRCC Ltd.

Employee name: Marcus Absent

Company name: SRCC Ltd.

Worksite: 204 Winnipeg Date: April 8

### Disciplinary Action Type:

- ☐ First offence - verbal warning
- ☒ Second offence - written warning
- ☐ Third offence – suspension. length: \_\_\_\_\_
- ☐ Fourth offence - termination

### Infraction Type:

- |  |   |
|--|---|
| <input type="radio"/> Disobey safety rules                     | <input type="radio"/> Personal protective equipment |
| <input checked="" type="radio"/> Unsafe use of tools/equipment | <input type="radio"/> Unsafe practice/procedure     |
| <input type="radio"/> Insubordination                          | <input type="radio"/> Tardiness/absent              |
| <input type="radio"/> Disobey company policy(s)                | <input type="radio"/> Other (explain below)         |

### Comments, notes, and/or corrective action required:

Marcus Absent was seen lifting and moving  
material and equipment that requires two persons  
to lift. This goes against our musculoskeletal  
Policy and puts himself and others at risk.

Employee signature: Marcus Absent

Supervisor signature: Douglas Furr

Employer signature: Hugh Midor



## Disciplinary Action Notice – SRCC Ltd.

Employee name: Althea Thoone

Company name: SRCC Ltd.

Worksite: 321 Fake Street Date: February 17

### Disciplinary Action Type:

- ☒ First offence - verbal warning
- ☐ Second offence - written warning
- ☐ Third offence – suspension. length: \_\_\_\_\_
- ☐ Fourth offence - termination

### Infraction Type:

- |   |   |
|---|---|
| <input type="radio"/> Disobey safety rules          | <input type="radio"/> Personal protective equipment |
| <input type="radio"/> Unsafe use of tools/equipment | <input type="radio"/> Unsafe practice/procedure     |
| <input type="radio"/> Insubordination               | <input checked="" type="radio"/> Tardiness/absent   |
| <input type="radio"/> Disobey company policy(s)     | <input type="radio"/> Other (explain below)         |

### Comments, notes, and/or corrective action required:

Althea Thoone was late to the weekly toolbox talk meeting  
and had no excuse for being late and did not  
attempt to inform the supervisor that they would be late.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employee signature: Althea Thoone

Supervisor signature: Gene Pool

Employer signature: Anita Plumber



## Employee Orientation

Workers Name: Willie Maykit

Date: Feb 01

### Introduction

- ☒ Company history
- ☒ Company policies
- ☒ SiteReadyMB

### Responsibility for Safety

- ☒ Worker
- ☒ Supervisor
- ☒ Manager

### Emergency Procedures

- ☒ Emergency phone
- ☒ Emergency phone numbers
- ☒ Fire
- ☒ Ambulance
- ☒ First aid kit (Location: Shop)
- ☒ AED (Location: Shop)
- ☒ Security/police
- ☒ Evacuation plan/muster point

### General Rules / Prohibited Activities

- ☒ Alcohol, drugs
- ☒ Horseplay, fighting
- ☒ Vehicle operation
- ☒ Theft

### Personal Protective Equipment

- ☒ Hard hats
- ☒ Safety footwear
- ☒ Safety glasses
- ☒ Fall protection
- ☒ Respirators
- ☒ Hearing protection

### Reporting Procedures

- ☒ Reporting an incident/near miss
- ☒ Investigation forms
- ☒ First aid kit logs

### Contact Persons

Direct Supervisor: Douglas Furr

Worker Rep. / Committee Contact: Marcus Absent

First Aid Personnel: Douglas Furr

### Workers' Rights

- ☒ Right to know
- ☒ Right to participate
- ☒ Right to work without being subject to reprisal
- ☒ Right to refuse

### Workplace Hazards (Hazard Assessments)

- ☒ When required
- ☒ Who is involved
- ☒ How to report a hazard
- ☒ Controlling hazards

### Meetings

- ☒ Safety committee
- ☒ Toolbox talks

### Legislation

- ☒ Workplace Safety and Health Act and Regulation

### Safe Job Procedures

- ☒ Fall protection
- ☒ Fuelling Vehicles

### Safe Work Practices

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

### WHMIS

- ☒ Review
- ☒ Safety Data Sheets  
(Location: Shop)

### Tools/Equipment

- ☒ Handling
- ☒ Storage
- ☒ Lockout/tagout system

Worker Signature: Willie

Trainer / Management Signature: Douglas



## Employee Orientation

Workers Name: Willie Maykit

Date: Feb 01

### Introduction

- ☒ Company history
- ☒ Company policies
- ☒ SiteReadyMB

### Responsibility for Safety

- ☒ Worker
- ☒ Supervisor
- ☒ Manager

### Emergency Procedures

- ☒ Emergency phone
- ☒ Emergency phone numbers
- ☒ Fire
- ☒ Ambulance
- ☒ First aid kit (Location: Shop)
- ☒ AED (Location: Shop)
- ☒ Security/police
- ☒ Evacuation plan/muster point

### General Rules / Prohibited Activities

- ☒ Alcohol, drugs
- ☒ Horseplay, fighting
- ☒ Vehicle operation
- ☒ Theft

### Personal Protective Equipment

- ☒ Hard hats
- ☒ Safety footwear
- ☒ Safety glasses
- ☒ Fall protection
- ☒ Respirators
- ☒ Hearing protection

### Reporting Procedures

- ☒ Reporting an incident/near miss
- ☒ Investigation forms
- ☒ First aid kit logs

### Contact Persons

Direct Supervisor: Douglas Furr

Worker Rep. / Committee Contact: Marcus Absent

First Aid Personnel: Douglas Furr

### Workers' Rights

- ☒ Right to know
- ☒ Right to participate
- ☒ Right to work without being subject to reprisal
- ☒ Right to refuse

### Workplace Hazards (Hazard Assessments)

- ☒ When required
- ☒ Who is involved
- ☒ How to report a hazard
- ☒ Controlling hazards

### Meetings

- ☒ Safety committee
- ☒ Toolbox talks

### Legislation

- ☒ Workplace Safety and Health Act and Regulation

### Safe Job Procedures

- ☒ Fall protection
- ☒ Fuelling Vehicles

### Safe Work Practices

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

### WHMIS

- ☒ Review
- ☒ Safety Data Sheets  
(Location: Shop)

### Tools/Equipment

- ☒ Handling
- ☒ Storage
- ☒ Lockout/tagout system

Worker Signature: Willie

Trainer / Management Signature: Douglas



## Employee Orientation

Workers Name: Ryan Koch

Date: Jan 01

### Introduction

- ☒ Company history
- ☒ Company policies
- ☒ SiteReadyMB

### Responsibility for Safety

- ☒ Worker
- ☒ Supervisor
- ☒ Manager

### Emergency Procedures

- ☒ Emergency phone
- ☒ Emergency phone numbers
- ☒ Fire
- ☒ Ambulance
- ☒ First aid kit (Location: Shop)
- ☒ AED (Location: Shop)
- ☒ Security/police
- ☒ Evacuation plan/muster point

### General Rules / Prohibited Activities

- ☒ Alcohol, drugs
- ☒ Horseplay, fighting
- ☒ Vehicle operation
- ☒ Theft

### Personal Protective Equipment

- ☒ Hard hats
- ☒ Safety footwear
- ☒ Safety glasses
- ☒ Fall protection
- ☒ Respirators
- ☒ Hearing protection

### Reporting Procedures

- ☒ Reporting an incident/near miss
- ☒ Investigation forms
- ☒ First aid kit logs

### Contact Persons

Direct Supervisor: Gene Pool

Worker Rep. / Committee Contact: Pete Moss

First Aid Personnel: Gene Pool

### Workers' Rights

- ☒ Right to know
- ☒ Right to participate
- ☒ Right to work without being subject to reprisal
- ☒ Right to refuse

### Workplace Hazards (Hazard Assessments)

- ☒ When required
- ☒ Who is involved
- ☒ How to report a hazard
- ☒ Controlling hazards

### Meetings

- ☒ Safety committee
- ☒ Toolbox talks

### Legislation

- ☒ Workplace Safety and Health Act and Regulation

### Safe Job Procedures

- ☐ Fall pro
- ☐ Fuelling vehicles

### Safe Work Practices

- ☒ Electric Safety
- ☒ Hand + portable power tools

### WHMIS

- ☒ Review
- ☒ Safety Data Sheets  
(Location: Shop)

### Tools/Equipment

- ☒ Handling
- ☒ Storage
- ☒ Lockout/tagout system

Worker Signature: Ryan Koch

Trainer / Management Signature: Gene



## Employee Orientation

Workers Name: Ryan Koch

Date: Jan 01

### Introduction

- ☒ Company history
- ☒ Company policies
- ☒ SiteReadyMB

### Responsibility for Safety

- ☒ Worker
- ☒ Supervisor
- ☒ Manager

### Emergency Procedures

- ☒ Emergency phone
- ☒ Emergency phone numbers
- ☒ Fire
- ☒ Ambulance
- ☒ First aid kit (Location: Shop)
- ☒ AED (Location: Shop)
- ☒ Security/police
- ☒ Evacuation plan/muster point

### General Rules / Prohibited Activities

- ☒ Alcohol, drugs
- ☒ Horseplay, fighting
- ☒ Vehicle operation
- ☒ Theft

### Personal Protective Equipment

- ☒ Hard hats
- ☒ Safety footwear
- ☒ Safety glasses
- ☒ Fall protection
- ☒ Respirators
- ☒ Hearing protection

### Reporting Procedures

- ☒ Reporting an incident/near miss
- ☒ Investigation forms
- ☒ First aid kit logs

### Contact Persons

Direct Supervisor: Gene Pool

Worker Rep. / Committee Contact: Pete Moss

First Aid Personnel: Gene Pool

### Workers' Rights

- ☒ Right to know
- ☒ Right to participate
- ☒ Right to work without being subject to reprisal
- ☒ Right to refuse

### Workplace Hazards (Hazard Assessments)

- ☒ When required
- ☒ Who is involved
- ☒ How to report a hazard
- ☒ Controlling hazards

### Meetings

- ☒ Safety committee
- ☒ Toolbox talks

### Legislation

- ☒ Workplace Safety and Health Act and Regulation

### Safe Job Procedures

- ☐ Fall pro
- ☐ Fuelling vehicles

### Safe Work Practices

- ☒ Electric Safety
- ☒ Hand + portable power tools

### WHMIS

- ☒ Review
- ☒ Safety Data Sheets  
(Location: Shop)

### Tools/Equipment

- ☒ Handling
- ☒ Storage
- ☒ Lockout/tagout system

Worker Signature: Ryan Koch

Trainer / Management Signature: Gene



## Employee Orientation

Workers Name: Justin Case

Date: Jan 27

### Introduction

- ☒ Company history
- ☒ Company policies
- ☒ SiteReadyMB

### Responsibility for Safety

- ☒ Worker
- ☒ Supervisor
- ☒ Manager

### Emergency Procedures

- ☒ Emergency phone
- ☒ Emergency phone numbers
- ☒ Fire
- ☒ Ambulance
- ☒ First aid kit (Location: shop)
- ☒ AED (Location: shop)
- ☒ Security/police
- ☒ Evacuation plan/muster point

### General Rules / Prohibited Activities

- ☒ Alcohol, drugs
- ☒ Horseplay, fighting
- ☒ Vehicle operation
- ☒ Theft

### Personal Protective Equipment

- ☒ Hard hats
- ☒ Safety footwear
- ☒ Safety glasses
- ☒ Fall protection
- ☒ Respirators
- ☒ Hearing protection

### Reporting Procedures

- ☒ Reporting an incident/near miss
- ☒ Investigation forms
- ☒ First aid kit logs

### Contact Persons

Direct Supervisor: Jack Pott

Worker Rep. / Committee Contact: Pete Moss

First Aid Personnel: Jack Pott

### Workers' Rights

- ☒ Right to know
- ☒ Right to participate
- ☒ Right to work without being subject to reprisal
- ☒ Right to refuse

### Workplace Hazards (Hazard Assessments)

- ☒ When required
- ☒ Who is involved
- ☒ How to report a hazard
- ☒ Controlling hazards

### Meetings

- ☒ Safety committee
- ☒ Toolbox talks

### Legislation

- ☒ Workplace Safety and Health Act and Regulation

### Safe Job Procedures

- ☒ Fuelling vehicles
- ☐ \_\_\_\_\_

### Safe Work Practices

- ☒ Portable hand tools
- ☐ \_\_\_\_\_

### WHMIS

- ☒ Review
- ☒ Safety Data Sheets  
(Location: shop)

### Tools/Equipment

- ☒ Handling
- ☒ Storage
- ☒ Lockout/tagout system

Worker Signature: Justin Case

Trainer / Management Signature: Jack



## Employee Orientation

Workers Name: Justin Case

Date: Jan 20

### Introduction

- ☒ Company history
- ☒ Company policies
- ☒ SiteReadyMB

### Responsibility for Safety

- ☒ Worker
- ☒ Supervisor
- ☒ Manager

### Emergency Procedures

- ☒ Emergency phone
- ☒ Emergency phone numbers
- ☒ Fire
- ☒ Ambulance
- ☒ First aid kit (Location: shop)
- ☒ AED (Location: shop)
- ☒ Security/police
- ☒ Evacuation plan/muster point

### General Rules / Prohibited Activities

- ☒ Alcohol, drugs
- ☒ Horseplay, fighting
- ☒ Vehicle operation
- ☒ Theft

### Personal Protective Equipment

- ☒ Hard hats
- ☒ Safety footwear
- ☒ Safety glasses
- ☒ Fall protection
- ☒ Respirators
- ☒ Hearing protection

### Reporting Procedures

- ☒ Reporting an incident/near miss
- ☒ Investigation forms
- ☒ First aid kit logs

### Contact Persons

Direct Supervisor: Jack Pott

Worker Rep. / Committee Contact: Pete Moss

First Aid Personnel: Jack Pott

### Workers' Rights

- ☒ Right to know
- ☒ Right to participate
- ☒ Right to work without being subject to reprisal
- ☒ Right to refuse

### Workplace Hazards (Hazard Assessments)

- ☒ When required
- ☒ Who is involved
- ☒ How to report a hazard
- ☒ Controlling hazards

### Meetings

- ☒ Safety committee
- ☒ Toolbox talks

### Legislation

- ☒ Workplace Safety and Health Act and Regulation

### Safe Job Procedures

- ☒ Fuelling vehicles
- ☐ \_\_\_\_\_

### Safe Work Practices

- ☒ Portable hand tools
- ☐ \_\_\_\_\_

### WHMIS

- ☒ Review
- ☒ Safety Data Sheets  
(Location: shop)

### Tools/Equipment

- ☒ Handling
- ☒ Storage
- ☒ Lockout/tagout system

Worker Signature: Justin Case

Trainer / Management Signature: Jack



## Employee Orientation

Workers Name: Brita Waters

Date: Mar 01

### Introduction

- ☒ Company history
- ☒ Company policies
- ☒ SiteReadyMB

### Responsibility for Safety

- ☒ Worker
- ☒ Supervisor
- ☒ Manager

### Emergency Procedures

- ☒ Emergency phone
- ☒ Emergency phone numbers
- ☒ Fire
- ☒ Ambulance
- ☒ First aid kit (Location: Truck)
- ☒ AED (Location: Truck)
- ☒ Security/police
- ☒ Evacuation plan/muster point

### General Rules / Prohibited Activities

- ☒ Alcohol, drugs
- ☒ Horseplay, fighting
- ☒ Vehicle operation
- ☒ Theft

### Personal Protective Equipment

- ☒ Hard hats
- ☒ Safety footwear
- ☒ Safety glasses
- ☒ Fall protection
- ☒ Respirators
- ☒ Hearing protection

### Reporting Procedures

- ☒ Reporting an incident/near miss
- ☒ Investigation forms
- ☒ First aid kit logs

### Contact Persons

Direct Supervisor: Taj Mahal  
Worker Rep. / Committee Contact: Althea Thoone  
First Aid Personnel: Taj Mahal

### Workers' Rights

- ☒ Right to know
- ☒ Right to participate
- ☒ Right to work without being subject to reprisal
- ☒ Right to refuse

### Workplace Hazards (Hazard Assessments)

- ☒ When required
- ☒ Who is involved
- ☒ How to report a hazard
- ☒ Controlling hazards

### Meetings

- ☒ Safety committee
- ☒ Toolbox talks

### Legislation

- ☒ Workplace Safety and Health Act and Regulation

### Safe Job Procedures

- ☒ Fall pro
- ☐ \_\_\_\_\_

### Safe Work Practices

- ☒ Hand + portable power tools
- ☐ \_\_\_\_\_

### WHMIS

- ☒ Review
- ☒ Safety Data Sheets  
(Location: Truck)

### Tools/Equipment

- ☒ Handling
- ☒ Storage
- ☒ Lockout/tagout system

Worker Signature: Brita Waters

Trainer / Management Signature: Taj



## Employee Orientation

Workers Name: Brita Waters

Date: Mar 01

### Introduction

- ☒ Company history
- ☒ Company policies
- ☒ SiteReadyMB

### Responsibility for Safety

- ☒ Worker
- ☒ Supervisor
- ☒ Manager

### Emergency Procedures

- ☒ Emergency phone
- ☒ Emergency phone numbers
- ☒ Fire
- ☒ Ambulance
- ☒ First aid kit (Location: Truck)
- ☒ AED (Location: Truck)
- ☒ Security/police
- ☒ Evacuation plan/muster point

### General Rules / Prohibited Activities

- ☒ Alcohol, drugs
- ☒ Horseplay, fighting
- ☒ Vehicle operation
- ☒ Theft

### Personal Protective Equipment

- ☒ Hard hats
- ☒ Safety footwear
- ☒ Safety glasses
- ☒ Fall protection
- ☒ Respirators
- ☒ Hearing protection

### Reporting Procedures

- ☒ Reporting an incident/near miss
- ☒ Investigation forms
- ☒ First aid kit logs

### Contact Persons

Direct Supervisor: Taj Mahal

Worker Rep. / Committee Contact: Althea Thooone

First Aid Personnel: Taj Mahal

### Workers' Rights

- ☒ Right to know
- ☒ Right to participate
- ☒ Right to work without being subject to reprisal
- ☒ Right to refuse

### Workplace Hazards (Hazard Assessments)

- ☒ When required
- ☒ Who is involved
- ☒ How to report a hazard
- ☒ Controlling hazards

### Meetings

- ☒ Safety committee
- ☒ Toolbox talks

### Legislation

- ☒ Workplace Safety and Health Act and Regulation

### Safe Job Procedures

- ☒ Fall pro
- ☐ \_\_\_\_\_

### Safe Work Practices

- ☒ Hand + portable power tools
- ☐ \_\_\_\_\_

### WHMIS

- ☒ Review
- ☒ Safety Data Sheets  
(Location: Truck)

### Tools/Equipment

- ☒ Handling
- ☒ Storage
- ☒ Lockout/tagout system

Worker Signature: Brita Waters

Trainer / Management Signature: Taj



## Employee Orientation

Workers Name: Colin Toksho

Date: March 04

### Introduction

- ☒ Company history
- ☒ Company policies
- ☒ SiteReadyMB

### Responsibility for Safety

- ☒ Worker
- ☒ Supervisor
- ☒ Manager

### Emergency Procedures

- ☒ Emergency phone
- ☒ Emergency phone numbers
- ☒ Fire
- ☒ Ambulance
- ☒ First aid kit (Location: Truck)
- ☒ AED (Location: Truck)
- ☒ Security/police
- ☒ Evacuation plan/muster point

### General Rules / Prohibited Activities

- ☒ Alcohol, drugs
- ☒ Horseplay, fighting
- ☒ Vehicle operation
- ☒ Theft

### Personal Protective Equipment

- ☒ Hard hats
- ☒ Safety footwear
- ☒ Safety glasses
- ☒ Fall protection
- ☒ Respirators
- ☒ Hearing protection

### Reporting Procedures

- ☒ Reporting an incident/near miss
- ☒ Investigation forms
- ☒ First aid kit logs

### Contact Persons

Direct Supervisor: Gene Pool

Worker Rep. / Committee Contact: Marcus Absent

First Aid Personnel: Gene Pool

### Workers' Rights

- ☒ Right to know
- ☒ Right to participate
- ☒ Right to work without being subject to reprisal
- ☒ Right to refuse

### Workplace Hazards (Hazard Assessments)

- ☒ When required
- ☒ Who is involved
- ☒ How to report a hazard
- ☒ Controlling hazards

### Meetings

- ☒ Safety committee
- ☒ Toolbox talks

### Legislation

- ☐ Workplace Safety and Health Act and Regulation

### Safe Job Procedures

- ☒ Fall pro
- ☐ \_\_\_\_\_

### Safe Work Practices

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

### WHMIS

- ☒ Review
- ☒ Safety Data Sheets  
(Location: Truck)

### Tools/Equipment

- ☒ Handling
- ☒ Storage
- ☒ Lockout/tagout system

Worker Signature: Colin Toksho

Trainer / Management Signature: Gene



## Employee Orientation

Workers Name: Colin Toksho

Date: March 04

### Introduction

- ☒ Company history
- ☒ Company policies
- ☒ SiteReadyMB

### Responsibility for Safety

- ☒ Worker
- ☒ Supervisor
- ☒ Manager

### Emergency Procedures

- ☒ Emergency phone
- ☒ Emergency phone numbers
- ☒ Fire
- ☒ Ambulance
- ☒ First aid kit (Location: Truck)
- ☒ AED (Location: Truck)
- ☒ Security/police
- ☒ Evacuation plan/muster point

### General Rules / Prohibited Activities

- ☒ Alcohol, drugs
- ☒ Horseplay, fighting
- ☒ Vehicle operation
- ☒ Theft

### Personal Protective Equipment

- ☒ Hard hats
- ☒ Safety footwear
- ☒ Safety glasses
- ☒ Fall protection
- ☒ Respirators
- ☒ Hearing protection

### Reporting Procedures

- ☒ Reporting an incident/near miss
- ☒ Investigation forms
- ☒ First aid kit logs

### Contact Persons

Direct Supervisor: Gene Pool

Worker Rep. / Committee Contact: Marcus Absent

First Aid Personnel: Gene Pool

### Workers' Rights

- ☒ Right to know
- ☒ Right to participate
- ☒ Right to work without being subject to reprisal
- ☒ Right to refuse

### Workplace Hazards (Hazard Assessments)

- ☒ When required
- ☒ Who is involved
- ☒ How to report a hazard
- ☒ Controlling hazards

### Meetings

- ☒ Safety committee
- ☒ Toolbox talks

### Legislation

- ☐ Workplace Safety and Health Act and Regulation

### Safe Job Procedures

- ☒ Fall pro
- ☐ \_\_\_\_\_

### Safe Work Practices

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

### WHMIS

- ☒ Review
- ☒ Safety Data Sheets
- (Location: Truck)

### Tools/Equipment

- ☒ Handling
- ☒ Storage
- ☒ Lockout/tagout system

Worker Signature: Colin Toksho

Trainer / Management Signature: Gene



## Employee Orientation

Workers Name: Robin Banks

Date: April 15

### Introduction

- ☒ Company history
- ☒ Company policies
- ☒ SiteReadyMB

### Responsibility for Safety

- ☒ Worker
- ☒ Supervisor
- ☒ Manager

### Emergency Procedures

- ☒ Emergency phone
- ☒ Emergency phone numbers
- ☒ Fire
- ☒ Ambulance
- ☒ First aid kit (Location: Truck)
- ☒ AED (Location: Truck)
- ☒ Security/police
- ☒ Evacuation plan/muster point

### General Rules / Prohibited Activities

- ☒ Alcohol, drugs
- ☒ Horseplay, fighting
- ☒ Vehicle operation
- ☒ Theft

### Personal Protective Equipment

- ☒ Hard hats
- ☒ Safety footwear
- ☒ Safety glasses
- ☒ Fall protection
- ☒ Respirators
- ☒ Hearing protection

### Reporting Procedures

- ☒ Reporting an incident/near miss
- ☒ Investigation forms
- ☒ First aid kit logs

### Contact Persons

Direct Supervisor: Douglas Furr

Worker Rep. / Committee Contact: Marcus Absent

First Aid Personnel: Douglas Furr

### Workers' Rights

- ☒ Right to know
- ☒ Right to participate
- ☒ Right to work without being subject to reprisal
- ☒ Right to refuse

### Workplace Hazards (Hazard Assessments)

- ☒ When required
- ☒ Who is involved
- ☒ How to report a hazard
- ☒ Controlling hazards

### Meetings

- ☒ Safety committee
- ☒ Toolbox talks

### Legislation

- ☒ Workplace Safety and Health Act and Regulation

### Safe Job Procedures

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

### Safe Work Practices

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

### WHMIS

- ☒ Review
- ☒ Safety Data Sheets  
(Location: Truck)

### Tools/Equipment

- ☒ Handling
- ☒ Storage
- ☒ Lockout/tagout system

Worker Signature: Robin Banks

Trainer / Management Signature: Douglas Furr



## Employee Orientation

Workers Name: Robin Banks

Date: April 15

### Introduction

- ☒ Company history
- ☒ Company policies
- ☒ SiteReadyMB

### Responsibility for Safety

- ☒ Worker
- ☒ Supervisor
- ☒ Manager

### Emergency Procedures

- ☒ Emergency phone
- ☒ Emergency phone numbers
- ☒ Fire
- ☒ Ambulance
- ☒ First aid kit (Location: Truck)
- ☒ AED (Location: Truck)
- ☒ Security/police
- ☒ Evacuation plan/muster point

### General Rules / Prohibited Activities

- ☒ Alcohol, drugs
- ☒ Horseplay, fighting
- ☒ Vehicle operation
- ☒ Theft

### Personal Protective Equipment

- ☒ Hard hats
- ☒ Safety footwear
- ☒ Safety glasses
- ☒ Fall protection
- ☒ Respirators
- ☒ Hearing protection

### Reporting Procedures

- ☒ Reporting an incident/near miss
- ☒ Investigation forms
- ☒ First aid kit logs

### Contact Persons

Direct Supervisor: Douglas Furr

Worker Rep. / Committee Contact: Marcus Absent

First Aid Personnel: Douglas Furr

### Workers' Rights

- ☒ Right to know
- ☒ Right to participate
- ☒ Right to work without being subject to reprisal
- ☒ Right to refuse

### Workplace Hazards (Hazard Assessments)

- ☒ When required
- ☒ Who is involved
- ☒ How to report a hazard
- ☒ Controlling hazards

### Meetings

- ☒ Safety committee
- ☒ Toolbox talks

### Legislation

- ☒ Workplace Safety and Health Act and Regulation

### Safe Job Procedures

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

### Safe Work Practices

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

### WHMIS

- ☒ Review
- ☒ Safety Data Sheets  
(Location: Truck)

### Tools/Equipment

- ☒ Handling
- ☒ Storage
- ☒ Lockout/tagout system

Worker Signature: Robin Banks

Trainer / Management Signature: Douglas Furr



NAME: Brita Waters

DATE: January

SCORE: 22 / 22

1. Name the two pieces of Legislation that govern all workplace in Manitoba. (2)

Act

Regs

2. In your own words, what is the general purpose of the WSH Act? (2) Reference: Act 2(1)(a)(b)

To provide a healthy and safe workplace

3. Fill in the spaces for 'reasonably practicable' (3)

Time + Money > Level of Risk = The control measure is not reasonably practicable  
+ Effort

4. If an employer receives a written recommendation from the workplace health and safety committee or worker safety representative, the employer must respond in writing within: (1)

- a. Two weeks                      c. Within 24 hours of receiving it  
(b.) 30 days                      d. 10 days

5. The Employer has a 'duty re training' to provide information, instruction, and training to a worker to ensure, so far as is reasonably practicable, the safety, and health of the worker before the worker: (4)

Before work starts

If scope changes

Location changes

Reference: 4(4)

6. How often must a competent person inspect a self-elevated work platform? (3)

Before each use

Before first use

Reference: 28.44

(Turn Over)

7. Reference the legal duties of a supervisor. **(3)**

4.1

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8. When is a Workplace Safety and Health Representative required? **(4) Reference:**

41(1)

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NAME: Pete Moss

DATE: January

SCORE: 22 / 22

1. Name the two pieces of Legislation that govern all workplace in Manitoba. (2)

WSH Act

WSH Reg

2. In your own words, what is the general purpose of the WSH Act? (2) Reference: \_\_\_\_\_

To do everything reasonably practicable to provide a healthy and safe work environment.

3. Fill in the spaces for 'reasonably practicable' (3)

Time + Money + Effort > Level of Risk = The control measure is not reasonably practicable

4. If an employer receives a written recommendation from the workplace health and safety committee or worker safety representative, the employer must respond in writing within: (1)

- a. Two weeks                      c. Within 24 hours of receiving it  
b. 30 days                          d. 10 days

5. The Employer has a 'duty re training' to provide information, instruction, and training to a worker to ensure, so far as is reasonably practicable, the safety, and health of the worker before the worker: (4)

Start work  
Location change

Scope changes  
Reference: 4(4)

6. How often must a competent person inspect a self-elevated work platform? (3)

First used

each use

Reference: 28.44

(Turn Over)

7. Reference the legal duties of a supervisor. **(3)**

4.1  
\_\_\_\_\_  
\_\_\_\_\_

8. When is a Workplace Safety and Health Representative required? **(4)** Reference: 41(1)

\_\_\_\_\_

## **Table of Contents – Safe Work Practices**

Cordless (Battery) Drill

Electric (Plug in) Drill

Circular Saw

Portable Step Ladder

Lean To/Extension Ladder

Air Nailer

Air Stapler

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Palm Nailer

Pam Gun (Quick Drive Screw Gun)

Ramset Gun (Powder Actuated Gun)

Reciprocating Saw

Demolition Work

Electric Safety (General)

Hand and Portable Power Tools (General)

*SRCC Ltd.*



## SAFE Work Practice

### Electric Safety (General)

CSAM # 8



An electrical hazard can be defined as a dangerous condition where a worker could make electrical contact with energized equipment or an electrical conductor. The nature of construction work results in many situations where electrical contact could occur if precautions are not taken.

**Hazards:** -electrocution, electric shock, thermal injury and arc flash, explosions/fire (hazardous atmospheres)

#### **Do**

- Lockout electrical equipment that is to be worked on or serviced.
- Inspect electrical equipment for any damage prior to each use.
- Inspect electrical cords for defects: check the power cord for cracking, fraying, and other signs of wear or faults in the cord insulation.
- Know where breakers and boxes are located in case of an emergency.
- Inspect the plug end for cracks and for missing, loose, or faulty prongs.
- Pull the plug, not the cord when unplugging equipment.

#### **Do Not**

- Work on potentially energized equipment without proper lockout procedures in place.
- Use equipment, outlets or cords that are damaged or have exposed wiring.
- Bypass the switch and operate equipment by connecting and disconnecting the power cord.
- Block access to circuit breakers or fuse boxes.
- Use electrical equipment in wet conditions or damp locations, unless the tool is connected to a GFCI.
- Use a metal ladder or scaffold near any exposed energized electrical circuits or equipment.

#### **General Safe Work Practices**

1. Ensure that all electrical circuits and equipment are installed in accordance with the requirements of the Manitoba Electrical Code.
2. Ensure that electrical panels and switches controlling a service supply, feeder, or branch circuit are protected from physical or mechanical damage.
3. Install *Ground Fault Circuit Interrupters (GFCIs)* where the risk of electric shock is greater in areas that are wet or damp.
4. Ensure you develop and follow proper lockout procedures when working on energized equipment.
5. Ensure you develop and implement safe work procedures for working near overhead electrical lines.
6. Ensure equipment is properly grounded using a three-prong plug or is double-insulated and labeled accordingly (CSA).
7. Turn off equipment before connecting it to a power supply and disconnect the power supply before making adjustments or changing accessories.
8. Inspect equipment for signs of damage before each use, especially electrical cords and switches. Tag defective equipment clearly with an "Out of Service" tag.
9. Use only approved extension cords that have the proper wire size (gauge) for the length of cord and power requirements of the equipment that you are using.
10. Ensure that a cable or wire used for temporary electrical distribution is adequately guarded or securely suspended overhead to provide adequate clearance.
11. Keep power cords away from heat, water, oil, sharp edges and moving parts.

Regulatory Reference:

**Manitoba Regulation 217/2006 PART 38 -Electrical Safety General**  
**PART 25 - Work In The Vicinity Of Overhead Electrical Lines**

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## SAFE Work Practice

### Hand and Portable Power Tools (General)

CSAM # 3



Hand and power tools are used extensively in construction work and can be the cause of personal bodily injury, if not used as designed and in a safe manner. Tools must be appropriate for the task, properly maintained, and equipped with all necessary guards and safety devices.

**Hazards:** -contact injury from rotating parts, eye and face injury from flying particles, burns from contact, abrasions and cuts, electrocution, amputation, pinch points, repetitive strain injury

#### Do

- Choose a tool that is appropriate for the task.
- Wear all appropriate Personal Protective Equipment.
- Ensure the tool is labelled as meeting required standards. (i.e. CSA approved)
- Inspect the tool before use to ensure it is in safe working condition.
- Ensure all tool guards are in place.
- Use tools designed to allow wrist to stay straight.  
Avoid using hand tools with your wrist bent.

#### Do Not

- Use a tool for any other purpose than what is was designed to do.
- Use a worn or damaged tool.
- Use a tool without all guards in place.
- Use a tool without wearing proper PPE.
- Apply excessive force or pressure on tools.
- Do not carry a sharp tool in your pocket.
- Do not cut towards yourself when using cutting tools.

### General Safe Work Practices

1. Choose the most appropriate tool for the task.
2. Inspect the tool and ensure it is in good operating condition and is equipped with all guards. Replace or repair defective tools.
3. Ensure you are familiar with the safe operating procedures and any limitations on the use of the tool.
4. Ensure you are wearing all appropriate PPE for the task, such as safety eyewear, footwear, hearing protection, respirator, etc.
5. Ensure no one in the surrounding area will be put a risk when you are using the tool.
6. If a portable power tool, make sure it is connected to a safe source of energy (i.e. GFCI for electrical power)
7. Use tools designed to allow wrist to stay straight. Avoid using hand tools with your wrist bent.
8. Keep cutting tools sharp and cover sharp edges with suitable covering to protect the tool and to prevent injuries from unintended contact.
9. Replace cracked, splintered, or broken handles on files, hammers, screwdrivers, or sledges.
10. Replace worn jaws on wrenches, pipe tools and pliers.
11. Redress burred or mushroomed heads of striking tools.
12. Keep the work environment clean and tidy to avoid clutter which may cause accidents.
13. Use a heavy belt or apron and hang tools at your sides, not behind your back.

Regulatory Reference:

**Manitoba Regulation 217/2006 Part 16 - Machines, Tools and Robots**

Additional Standards: CSA Standard Z432-04, Safeguarding of Machinery.

Guideline: Guideline for Safeguarding Machinery and Equipment

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## **Table of Contents – Safe Job Procedures**

Fire Extinguisher

**\*\***Confined Space Entry

**\*\***Working at Heights

**\*\***Lockout/Tagout

**\*\***Fuelling Vehicles and Equipment

Manual Lifting

Cutting Lumbar – Circular Saw

Cutting Sheeting – Circular Saw

Sheeting Outside Walls

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Demolition of Interior Walls

Installing Stairs

Air Nailer - Nailing Studs to Plates

Cutting Stucco

Jack Hammering

Ramset Gun for Nailing Wood to Concrete/Steel

Window Installation

**\*\* = Critical Task**

*SRCC Ltd.*



## Safe Job Procedure - Fall Protection

<b>Worksite:</b> Various Locations	<b>Written by:</b> SUPERVISOR	<b>Approved by:</b> COMPANY NAME	<b>Date created:</b> DATE	<b>Date of last revision:</b>
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<b>Hazards present:</b>	<b>Personal protective equipment</b>	<b>Training required and guidance documents</b>
Equipment failure Improper adjustment Nerve damage Pinch points Slips or trips Overhead hazards	Harness, lanyard Safety boots Gloves Safety glasses Gloves if required Anchor point	Safety orientation In-house training Safety Services Manitoba Fall Arrest Training CSAM Fall Arrest Awareness Manitoba WSH Regulation, W210 First Aid Part 5 Personal Protective Equipment Part 6 Fall Arrest Part 14 Manitoba
<b>Safe Job Procedure</b>		

Employers must ensure that workers who may use a fall protection system are adequately trained in its use and given adequate oral and written instructions by a competent person.

Supervisors must also provide proper and adequate instructions to workers regarding safety related equipment and materials as well as specific procedures to be followed.

### Fall protective equipment

1. Inspect your equipment daily.
2. Replace defective equipment. If there is any doubt about the safety of the equipment, do not use it and refer questionable defects to your supervisor.
3. Replace any equipment, including ropes, involved in a fall. Refer any questionable defects to your supervisor.
4. Every piece of fall arrest equipment should be inspected and certified at least yearly by a competent person.
5. It is advisable to use shock absorbers if the arresting forces of the lanyard alone can cause injury.
6. Is designed in accordance with CSA standard Z259.16-04, Design of Active Fall Protection Systems and CSA Standard Z259.13-04 Flexible Horizontal Lifeline Systems.

### Inspection of safety belts, harnesses, or lanyards

1. Inspect the entire surface of webbing for damage. Beginning at one end, bend the webbing in an inverted "U." Holding the body side of the belt toward you, grasp the belt with your hands six to eight inches apart.
2. Watch for frayed edges, broken fibres, pulled stitches, cuts or chemical damage. Broken webbing strands generally appear as tufts on the webbing surface.
3. Replace according to manufacturers' guidelines.

**Buckle inspection**

1. Inspect for loose, distorted, or broken grommets. Do not cut or punch additional holes in waist strap or strength members.
2. Check belt without grommets for torn or elongated holes that could cause the buckle tongue to slip.
3. Inspect the buckle for distortion and sharp edges. The outer and center bars must be straight.
4. Carefully check corners and attachment points of the center bar. They should overlap the buckle frame and move freely back and forth in their sockets. The roller should turn freely on the frame.
5. Check that rivets are tight and cannot be moved. The body side of the rivet base and outside rivet burr should be flat against the material. Make sure the rivets are not bent.
6. Inspect for pitted or cracked rivets that show signs of chemical corrosion.

**Rope inspection**

1. Rotate the rope lanyard and inspect from end to end for fuzzy, worn, broken or cut fibres. Weakened areas have noticeable changes in the original rope diameter.
2. Replace when the rope diameter is not uniform throughout, following a short break-in period.
3. The older a rope is and the more use it gets, the more important testing and inspection become.

**Inspection of forged steel snaps, "D" rings**

1. Inspect hardware for cracks or other defects. Replace the belt if the "D" ring is not at a 90° angle and does not move vertically independent of the body pad or "D" saddle.
2. Inspect tool loops and belt sewing for broken or stretched loops.
3. Check bag rings and knife snaps to see that they are secure and working properly. Check tool loop rivets. Check for thread separation or rotting, both inside and outside the body pad belt.
4. Inspect snaps for hook and eye distortions, cracks, corrosion, or pitted surfaces. The keeper (latch) should be seated into the snap nose without binding and should not be distorted or obstructed. The keeper spring should exert sufficient force to close the keeper firmly.

**Safety strap inspection**

1. Inspect for cut fibres or damaged stitches inch by inch by flexing the strap in an inverted "U." Note cuts, frayed areas or corrosion damage.
2. Check friction buckle for slippage and sharp buckle edges.
3. Replace when tongue buckle holes are excessively worn or elongated.

## Safe Job Procedure - Fuelling Equipment and Vehicles

<b>Worksite:</b> Various Locations	<b>Written by:</b> SUPERVISOR	<b>Approved by:</b> COMPANY NAME	<b>Date created:</b> DATE	<b>Date of last revision:</b>
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Hazards present	Personal protective equipment	Training required and guidance documents
Ignition hazards Fumes Static charges	Safety boots Coveralls Gloves	Safety orientation In-house training
		Manitoba WSH Regulation, W210 First Aid Part 5 Fire and Explosive Hazards Part 19
<b>Safe Job Procedure</b>		

1. Pull or drive the equipment up to the pump to be fuelled.
2. Extinguish all smoking material. Do not operate cell phones.
3. Shut the vehicle off.
4. Check to ensure that there is no oncoming traffic, and then exit the vehicle.
5. Remove the filler cap from the fuel tanks.
6. Before fuelling make sure you are using the right type of fuel.
7. Place the filler hose into the tank.
8. Turn on the fuel pump.
9. Fill the tank or fuel to the desired level.
10. Do not overfill the tank.
11. When fuelling has terminated switch off the pump.
12. Remove the filler hose from the tank and replace on pump holder.
13. Put filler cap back on the vehicle or piece of equipment refuelled.



## Lockout/Tagout Procedure

<b>Worksite:</b> Various	<b>Written By:</b> Hugh Midor	<b>Approved By:</b> SRCC Ltd.	<b>Date Created:</b> October 24 <sup>th</sup>	<b>Last Revision:</b>
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**Definitions:** Tagout tag – Orange tag used to signify the tool/equipment should not be used.

<b>Hazards Present</b>	<b>Personal Protective Equipment (PPE) Tools or Equipment Required</b>	<b>Additional Training and Guidance Documents</b>
Pinch points, electrical shock	Lockout Tags	Lockout/Tagout Training W210/MR217/2006 Part 16

1. Identify the item to be tagged out with an orange tag.
2. Indicate on the orange tag why the tool/equipment is being removed from service.  
(tags are located in the safety tote in all company vehicles)
3. If the tool/equipment is electric, unplug if safe to do so. If unsafe to unplug, contact management to de-energize the electrical plug.
4. If the unit is hydraulic based (water, oil), de-energize the tool or equipment at the source of power. (ie; main water tap if spigot is broken)
5. Once the unit has been de-energized, test to ensure the unit no longer operates.  
(follow safe operating procedure for the specific tool/equipment)
6. Give the tear off portion of the lockout tag to your immediate supervisor so the appropriate maintenance can be arranged.
7. Once the maintenance has been completed the tag is to be removed so the tool/equipment can be placed back into service.
8. **AT NO TIME SHOULD A TAG BE REMOVED IF THE TOOL/EQUIPMENT HAS NOT BEEN REPAIRED.**



## Lockout/Tagout Procedure

<b>Worksite:</b> Various	<b>Written By:</b> Hugh Midor	<b>Approved By:</b> SRCC Ltd.	<b>Date Created:</b> October 24 <sup>th</sup>	<b>Last Revision:</b>
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8. **AT NO TIME SHOULD A TAG BE REMOVED IF THE TOOL/EQUIPMENT HAS NOT BEEN REPAIRED.**



## Safe Job Procedures Extension/Lean To Ladder Set Up & Use

<b>Worksite:</b> Various Locations	<b>Written By:</b> Colin Toksho	<b>Approved By:</b> SRCC – Jack Pott	<b>Date Created:</b> December 8 <sup>th</sup>	<b>Date of Last Revision:</b>
<b>Hazards Present:</b>	<b>Personal Protective Equipment</b>	<b>Training Required and Guidance Documents</b>		
Damaged components Unstable Surfaces Falls Incorrect type of ladder	If on a construction site: Safety Footwear Safety Hard Hat Safety Glasses	Safety Orientation In House Training Review Safe Work Practice for Extension Ladders		
		Manitoba WSH Regulation, W210 First Aid Part 5 Personal Protective Equipment Part 6		
<b>Safe Job Procedure</b>				

1. All ladders to be inspected prior to use.
2. Single or extension ladders to be secured top and bottom when used for regular access.
3. Bottom of single or extension ladders to be on firm and level base. Avoid off-balance positions.
4. Position single or extension ladder so that horizontal distance from foot of ladder to base of the wall on which it rests is between  $1/4$  the length of the ladder and side rails are resting on a bearing surface of sufficient strength to support applied load. Top end of ladder should extend at least 3 feet past bearing surface.
5. Any single or extension ladder over 20 feet, not secured at the top or under circumstances where it can move shall be held in place by another worker while it is being used.
6. The top two steps of a single or extension ladder shall not be used to work from.
7. When an extension ladder is fully extended, the overlap of the two sections should be maintained as follows:
  - Up to 36 feet 3.3 ft. overlap
  - Between 36 ft. and 50 feet 4.2 ft. overlap
  - 50 ft. and over 5 ft. overlap



## General Housekeeping Procedure

<b>Worksite:</b>	<b>Written By:</b>	<b>Approved By:</b>	<b>Date Created:</b>	<b>Date Revised:</b>
Various	Jack Pott	Hugh Midor	Current	

Hazards Present	Personal Protective Equipment (PPE), Tools or Equipment Required	Additional Training and Guidance Documents
<ul style="list-style-type: none"> <li>• Chemical Exposure</li> <li>• Slips and Trips</li> <li>• Muscle Strains</li> <li>• Pinch Points</li> <li>• Sharps</li> </ul>	<ul style="list-style-type: none"> <li>• Work Boots</li> <li>• Eye Protection</li> <li>• Hard Hat</li> <li>• Hand Protection</li> </ul>	<ul style="list-style-type: none"> <li>• W210/MR217/2006 Part 4.5</li> </ul>

Common signs and symptoms of a musculoskeletal injury (MSI) can include pain, burning, swelling, stiffness, numbness/tingling, and/or loss of movement or strength in a body part. Report these to your supervisor.

### Safe Job Procedure

1. Work areas should be cleaned before, after, and during a task
2. Visually inspect area and take note of any nails or debris that could injure you
3. Make sure all cords and hoses are properly wound and out of walking path
4. Pick up all hand tools when finished using them
5. Clean any spills immediately (refer to MSDS sheets for PPE)
6. Dispose of any unused oil, cleaning supply, or any other chemical properly
7. Ask for help for lifting any object that is too heavy for one person
8. Ensure all floors, walkways and ramps are in a state of good repair and kept free of slipping or tripping hazards

**The employer will ensure all necessary personnel are trained in, and obey this procedure.**



## WORKING ALONE PROCEDURE

Date of Procedure: April 01 Location: 483 Fake Ave

Buddy Contact Name: Douglas Farr Employees Name/ #: Gene Pool

Work/Task(s) being performed:

Estimating a job.

### Time Frame and Communications

Start: 0800 Estimated Time Alone: 3 hours End: 1100

*\*Phone contact with employee shall be at minimum every 2 hours or at every Location / Site Change*

Time 1000 Time 1100 Time \_\_\_\_\_ Time \_\_\_\_\_

Employee Rep DF Employee Rep DF Employee Rep \_\_\_\_\_ Employee Rep \_\_\_\_\_

*\*Phone contact to be initiated by employee; details of contact documented by employer representative*

### Emergency Procedure

Both the Employee and Buddy Contact shall keep a copy of this procedure and ensure they are accessible at their stated phone number.

If contact with the employee is not established at the agreed upon time, the buddy contact shall continuously try to phone the employee for **Ten Minutes**.

If no contact after the ten minutes, the buddy contact shall immediately attend the location of the employee working alone or in isolation to determine the worker's well being and to take appropriate control measures.

### Implementation of the Procedure

Both the employee and employer representative verify that each understand this procedure. Failure of either party to fulfill their responsibilities as stated shall be deemed in serious breach of company policy and violations will be dealt with accordingly.

Employee: Gene Pool

Employer Rep: Douglas Farr



## WORKING ALONE PROCEDURE

Date of Procedure: November 02 Location: 123 Fake St.

Buddy Contact Name: Taj Mahal Employees Name/ #: Pete Moss

Work/Task(s) being performed:

Picking up additional material

### Time Frame and Communications

Start: 0900 Estimated Time Alone: 2 hours End: 1100

*\*Phone contact with employee shall be at minimum every 2 hours or at every Location / Site Change*

Time 1100 Time \_\_\_\_\_ Time \_\_\_\_\_ Time \_\_\_\_\_

Employee Rep TM Employee Rep \_\_\_\_\_ Employee Rep \_\_\_\_\_ Employee Rep \_\_\_\_\_

*\*Phone contact to be initiated by employee; details of contact documented by employer representative*

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Employee: Pete Moss

Employer Rep: Taj Mahal



# STANDARDS INFORMATION

## S H E E T

### CSA Standard Z195-02 Protective Footwear

#### Scope and Application:

This standard addresses two grades of toe impact protection; sole plate performance; metatarsal protection; electric-shock protection; sole flexation; conductivity; and chain saw protection for protective footwear. It also applies to static dissipative footwear with and without toe impact resistance. Electrical flash, flame protection, fire fighter, spiked climbers footwear and riot boots are not covered in this standard.

#### Definitions:

- **Conductive footwear** - a boot or shoe with a sole made from a conductive compound chemically bound to the bottom components, for permanent control to electrically ground the foot.
- **Electric shock resistant sole** – a sole and heel design and method of attachment to the footwear that at the point of manufacturing had electrical insulating properties.

#### Design Requirements include:

- protective toe caps to be incorporated into footwear during construction,
- protective soles to cover the maximum area of sole including the heel,
- metatarsal protectors to cover complete dorsum of foot and be an integral part of footwear,
- heel is to be higher than ball of foot,
- electric shock resistant footwear to have a sole and heel not penetrated by conductive material,
- chain saw protective footwear to have a steel toe cap no less than 1.6 mm in thickness, and
- static-dissipative footwear and conductive footwear shall meet test specific requirements.

**Performance requirements** are outlined for protective toe cap to withstand fracture at specified energy/velocity of a strike and protective sole to withstand a force of 1200 N, and 1.5 million flexes. In addition, toe cap, sole and metatarsal protection shall be corrosion resistant. Electric shock resistant footwear shall withstand a test potential of 18kV 60 Hz for 1 minute, with no discharge to the ground, and current leakage shall not exceed 1 mA according to test methods. Static-dissipative footwear shall be in the range of 1 million and 100 ohms in 5 seconds and conductive footwear in the range of 0 to 500,000 ohms in 5 seconds. Chainsaw footwear shall prevent a chainsaw from cutting all the way through the boot and through toe cap.

**Testing** details for manufacturers include that testing be carried out on new specimens selected at random, conditioned for temperature and humidity, for toe cap resistance the striker have mass of 22.7 kg falling in a guide tube on guide rails, impact energy be determined in joules (j) by  $E=1/2mv^2$ , where m is the mass of the striker, v the velocity in meters/second. Test requirements are defined for sample preparation and test procedures and the plasticine cylinder measured to establish results. The protective sole is subjected to a sole pin penetration test; each pin is limited to 200 tests. Test equipment and procedures are also outlined for sole flexing, electric shock resistant footwear, static dissipative footwear, conductive footwear and chain saw footwear.

#### Footwear Categories relate to 6 applications:

- Grade 1 having sole and toe protection with an impact resistance of 125 joules
- Grade 2 having sole and toe protection with an impact resistance of 90 joules
- Electric shock resistant footwear
- Static-dissipative footwear
- Conductive footwear
- Chainsaw protective footwear.

(cont'd)

**Markings** shall be permanently and conspicuously placed on at least one shoe or boot of the pair. The information shall include manufacturer's name, trade mark or trade name, certification agency's identification number and the month and year of manufacturing. The certifying agency is to be identified on the label itself.

A labeling system is established in the standard to easily identify the classes of footwear. The labels are shown and described in a chart for each class of footwear:

- green triangle for Grade 1
- yellow triangle for grade 2
- white rectangle and ohm symbol for shock resistant
- red rectangle for static-dissipative
- white rectangle with a tree symbol for chainsaw protective

In addition, a five-place alpha-numeric code shall be permanently in place inside the footwear to identify the protection class by number and letter:

- 1 or 2 (for grade 1 or 2)
- P or 0 (puncture resistant)
- M or 0 (metatarsal resistant)
- E, S or C (shock resistant, static-dissipative or conductive)
- X or 0 (chain saw) (for example 1 P M E X)

**Slip resistance** is addressed in appendix A. Design factors outlined for consideration when selecting slip-resistant soles include shape of sole, tread, shape of heel, softness and hardness of the sole. Work environment considerations include type of flooring, floor finish, dry wet surfaces, temperature of air and floor.

Charts and diagrams are included for tests requirements and procedures and for marking labels and foot parts.

**This bulletin contains a summary of excerpts taken from the Standard, for general information purposes only. This bulletin is not reflective of the complete requirements that the Standard prescribes.**

Note: *Manitoba Regulation M.R. 217/2006 Section 1.4 inconsistency:*

If there is an inconsistency between this regulation and a requirement contained in a publication, code or standard referenced in this regulation, the provisions in this regulation prevail.

# STANDARDS INFORMATION

## S H E E T

### CSA Standard Z94.1-05 Industrial Protective Headwear - Performance, Selection Care and Use

#### Scope and Application:

This standard applies to protective headwear selection, care and use for industrial, construction, mining, utility and forestry sectors. It defines areas of the head to be protected, performance requirements for dielectric strength, impact attenuation, penetration resistance, stability, flammability and ignition. It does not apply to comfort, service life, appearance, bump caps, firefighter helmets, rescue helmets, crash helmets, sports helmets recreation helmets or riot control helmets.

#### Definitions:

- **Dielectric strength** - the ability of a material or a configuration of material to resist the passage of electric current.
- **Suspension**- part of headwear product that holds headwear in place during normal use.

#### Headwear Classification:

- Type 1 for impact and penetration to the crown only
- Type 2 for impact and penetration to the crown and laterally.

Each of the two types (1 and 2) has three separate classes, E, G and C. The three separate classes identify electrical ratings:

- Class E has 20,000 V electric current rating
- Class G has a 2,200 V electric current rating
- Class C has NO electrical current rating for each of the two types.

**Headwear Selection** is based on a hazard assessment conducted for the work situation and suitability with other equipment (e.g. hearing protection devices). The hazard assessment is based on observations, discussions with users, procedural reviews, and accident record reviews related to the equipment and procedure. The assessment shall be carried out by a qualified person and reviewed periodically. Where a hazard assessment is not carried out, a Type 2 Class E shall be selected because it has the highest level of dielectric (20,000V), crown (55 j) and lateral (30 j) protection.

- Type 1- crown only headwear - where it can be shown that there is no hazard related to lateral impact, reversible headwear should be selected if procedure requires wearing the headwear backwards (i.e. welding). Where high visibility headwear is required refer to CAN/CSA -Z96 for color and retro-reflective tape requirements.
- Type 2 - crown and lateral headwear - is for potential crown and lateral impact, where moving objects are present (medium to large manufacturing operations), construction and demolition sites, when the hazard assessment cannot determine the type.

**Fitting** chart matches head circumference to hat size. The air gap between the top of the head and the crown of the headwear is a shock absorption system for protection against impact. The suspension and nape strap shall be adjusted so headwear is *not worn* with peak pointing upward, with a baseball cap underneath or with nape strap at the front, in the case of reversed headwear. Diagram shows how headwear is to be worn. Accessories include non-metallic stickers 1/2 inch above the brim, bandanas, hair nets, welder's caps, and winter liners. Baseball caps interfere with the suspension system.

**Inspect** headwear *daily* for cracks, dents, cuts, gouges, signs of wear, exposure to heat or sun noted by appearance or color or finish (dullness, matte, chalk, and craze pattern). Headwear struck by an object should be replaced even with no noted signs of damage. Use of hair products, hair oils and perspiration, insecticides can affect suspension components. Inspect suspension system straps and clips for fraying, tears and cracks. If a Type 2 helmet has a damaged foam lining, replace the whole helmet.

(Over)

(cont'd)

**Maintenance of headwear** involves cleaning with mild soap (no solvent, abrasive or petroleum based products) and air dried without applying heat. Items should not be stored in between suspension and shell; components shall not be replaced with another manufacturer's component; components shall not be painted; no holes shall be made in the shell; nor shall it be decorated or stored in the rear window deck of a car where it is exposed to sunlight.

**Design, Constructions and Requirements** are outlined for materials to be resistant to exposure to environmental agents (perspiration, toiletries, cleaning agents, solar ultraviolet rays, extreme temperatures and rain), flame, ignition and to be known not to cause skin irritation. Components shall be designed so they cannot be assembled incorrectly or if assembled incorrectly they do not adversely affect its functions. Sampling, head form, environment, test line, sample conditioning (temperature, water immersion, solvent treatment, and aging) requirements are defined. The dielectric strength and impact attenuation testing requirements for sample preparation, apparatus set up, test methods, test voltages. The sample is dropped in guided free form, assembled on the head form.

**Markings** on the product include manufacturer's identity, model designation, "type", class, reverse orientation performance if applicable, year, month of manufacture, size range or size, explicit warning statement related to replacement after impact, no painting, no solvent, decals only if they are known *not to* affect adversely material characteristics and that modifications may reduce protective properties.

**User Information** shall include application, expected useful life, storage life, cleaning instructions, cautionary note on inappropriate modifications, limitations, capabilities, and adjustment instructions.

**This bulletin contains a summary of excerpts taken from the Standard, for general information purposes only. This bulletin is not reflective of the complete requirements that the Standard prescribes.**

**Note:** *Manitoba Regulation M.R. 217/2006 Section 1.4 inconsistency:*

If there is an inconsistency between this regulation and a requirement contained in a publication, code or standard referenced in this regulation, the provisions in this regulation prevail.

**Some Random Construction Company Limited.**

<b>Current Safety Summary</b>	<b>JAN</b>	<b>FEB</b>	<b>MAR</b>	<b>APR</b>	<b>MAY</b>	<b>JUN</b>	<b>JUL</b>	<b>AUG</b>	<b>SEP</b>	<b>OCT</b>	<b>NOV</b>	<b>DEC</b>	<b>TOT</b>
<b>Leading Indicators</b>													
Employees Hired	1	0	0	0	1	0	0	0	1	0	0	0	3
Orientations Complete	1	0	0	0	1	0	0	0	1	0	0	0	3
<b>Meetings / Training</b>													
Toolbox Talks Scheduled	4	4	4	4	4	4	4	4	4	4	4	4	48
Toolbox Talks Completed	4	4	4	4	4	4	4	4	4	4	4	4	48
<b>Hazard Assessments / Inspections</b>													
Hazard Assessments Completed	20	20	20	20	20	20	20	20	20	20	20	20	240
Inspections Scheduled	2	2	2	2	2	2	2	2	2	2	2	2	24
Inspections Completed	2	2	2	2	2	2	2	2	2	2	2	2	24
<b>Lagging Indicators</b>													
<b>Incidents</b>													
Number of Incidents	0	0	0	0	0	0	0	0	0	0	0	0	0
Damage Only	0	0	0	0	0	0	0	0	0	0	0	0	0
Injury Only	1	1	1	0	0	0	0	0	0	0	0	0	3
Injury and Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
Near Miss	0	0	0	1	1	1	0	0	0	0	0	0	3
Investigations Completed	1	1	1	1	1	1	0	0	0	0	0	0	6
<b>Nature of Incidents</b>													
Head Injuries	0	0	0	0	0	0	0	0	0	0	0	0	0
Eye Injuries	0	0	0	0	0	0	0	0	0	0	0	0	0
Neck Injuries	0	0	0	0	0	0	0	0	0	0	0	0	0
Shoulder Injuries	0	0	0	0	0	0	0	0	0	0	0	0	0
Back Injuries	0	0	0	0	0	0	0	0	0	0	0	0	0
Rib Injuries	0	0	0	0	0	0	0	0	0	0	0	0	0
Arm Injuries	0	0	0	0	0	0	0	0	0	0	0	0	0
Elbow Injuries	0	0	0	0	0	0	0	0	0	0	0	0	0
Wrist Injuries	0	0	0	0	0	0	0	0	0	0	0	0	0
Hand Injuries	0	0	0	0	0	1	0	0	0	0	0	0	1
Leg Injuries	0	0	0	0	0	0	0	0	0	0	0	0	0
Knee Injuries	0	0	0	0	0	0	0	0	0	0	0	0	0
Ankle Injuries	0	0	0	0	0	0	0	0	0	0	0	0	0
Fatalities	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Cause of Incidents</b>													
Terrain	0	0	0	1	1	1	0	0	0	0	0	0	3
Chemicals	0	0	0	0	0	0	0	0	0	0	0	0	0
Struck by Object	1	1	1	0	0	0	0	0	0	0	0	0	3
Fall From Heights	0	0	0	0	0	0	0	0	0	0	0	0	0
Slips and Trips	0	0	0	0	0	0	0	0	0	0	0	0	0
Electrical	0	0	0	0	0	0	0	0	0	0	0	0	0
Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
Hand tool	0	0	0	0	0	1	0	0	0	0	0	0	1
Power tool	0	0	0	0	0	0	0	0	0	0	0	0	0
Over Exertion	0	0	0	0	0	0	0	0	0	0	0	0	0
Heat Source	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0	0	0	0	0



## First Aid and Treatment Record

Date	Location	Time of incident	Time/date reported	Name	Description of incident	Nature of injury	Treatment(s)	FAA initials
Jan	123 Fake St.	1 pm	1 pm	Marcus	scraped finger		Bandaid	MA
Feb	321 Fake St	10am	10am	Pete	cut knuckle		Bandaid	PM
Mar	204 Fake St	9am	9am	Willie	cut forearm		Bandaid	WM



# AUDIT CORRECTIVE ACTION PLAN

Date reviewed: January



Audit Reference #	Recommendation	Assigned To	Target Completion Date	Date Completed
2.1(I)	Hold Toolbox Talk providing adequate information regarding Hazard Identification and Risk Control	Supervisors	Next Quarter	
3.4(O)	Review applicable practices to ensure relevancy and hold training with staff.	Committee	2nd Quarter	
4.4(O)	Review applicable procedures to ensure relevancy and hold training with staff.	Committee	3rd Quarter	
5.2(I)	Make site rules a more prominent part of site orientation.	Hugh	3rd Quarter	
5.3(I)	Ensure orientations are used to effectively communicate necessary rules.	Supervisors	2nd Quarter	
6.1(I)	Ensure staff are provided and directed to use the appropriate PPE.	Hugh	Next Quarter	
8.2(I)	Establish a job observation evaluation system to confirm understanding of training.	Anita	2nd Quarter	
8.3(I)	Provide training to Supervisors and Safety Reps on legislated requirements.	Committee	3rd Quarter	
9.4(I)	Ensure all staff are aware of pre-use checklists and produce at appropriate frequency.	Anita	3rd Quarter	
10.4(I)	Hold Toolbox after Incident investigations.	Supervisors	2nd Quarter	
11.4(I)	Train appropriate amount of first aiders for projects.	Hugh	Next Quarter	
14.6(I)	Hold Toolbox talk about procuring products.	Supervisors	Next Quarter	
15.4(I)	Train Safety Reps + Committee Members.	Anita	2nd Quarter	
15.8(D)	Audio metric testing for staff and rent desimeter from CSAM.	Anita	3rd Quarter	

Reviewed: Hugh Mador

Marcus Absent

Senior Management/Company Officer Signature

Auditor Signature

Worker Safety Rep./Safety Committee Co-Chair Signature



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.





# AUDIT CORRECTIVE ACTION PLAN

Date reviewed: January



Audit Reference #	Recommendation	Assigned To	Target Completion Date	Date Completed
2.1(I)	Held Toolbox Talk providing adequate information regarding Hazard Identification and Risk Control	Supervisors	Next Quarter	
3.4(O)	Review applicable practices to ensure relevancy and hold training with staff.	Committee	2nd Quarter	
4.4(O)	Review applicable procedures to ensure relevancy and hold training with staff.	Committee	3rd Quarter	
5.2(I)	Make site rules a more prominent part of site orientation.	Hugh	3rd Quarter	
5.3(I)	Ensure orientations are used to effectively communicate necessary rules.	Supervisors	2nd Quarter	
6.1(I)	Ensure staff are provided and directed to use the appropriate PPE.	Hugh	Next Quarter	
8.2(I)	Establish a job observation evaluation system to confirm understanding of training.	Anita	2nd Quarter	
8.3(I)	Provide training to Supervisors and Safety Reps on legislated requirements.	Committee	3rd Quarter	
9.4(I)	Ensure all staff are aware of pre-use checklists and produce at appropriate frequency.	Anita	3rd Quarter	
10.4(I)	Held Toolbox after Incident investigations.	Supervisors	2nd Quarter	
11.4(I)	Train appropriate amount of first aiders for projects.	Hugh	Next Quarter	
14.6(I)	Held Toolbox talk about procuring products.	Supervisors	Next Quarter	
15.4(I)	Train Safety Reps + Committee Members.	Anita	2nd Quarter	
15.6(D)	Audio metric testing for staff and rent desimeter from CSAM.	Anita	3rd Quarter	

Reviewed: Hugh Mador

Marcus Absent

Senior Management/Company Officer Signature

Auditor Signature

Worker Safety Rep./Safety Committee Co-Chair Signature



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.





321 Fake Street

**SRCC LTD.**

**Emergency Information**

Date: Feb 2

Muster point: Northside of jobsite, across the Road

First aid kit: Entrance

Eye wash: Entrance

Fire extinguisher: Entrance and each Floor

Ambulance: 911

Police: 911

Fire department: 911

Workplace Safety and Health Division: 204 945 3446

First aid attendants: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Nearest hospital is located at/in Health Sciences Centre

And their phone number is 204 787 3661 (Emergency)

Nearest clinic is located at/in Memorial Medical Clinic

And their phone number is 204 775 7756

Sign off:

Douglas Furr \_\_\_\_\_

Pete Moss \_\_\_\_\_

Willie Mayfit \_\_\_\_\_

Hugh Midor \_\_\_\_\_



123 Fake street

**SRCC LTD.**

**Emergency Information**

Date: Mar 2

Muster point: North side of Jobsite, across the street

First aid kit: Entrance of Jobsite

Eye wash: Entrance of jobsite

Fire extinguisher: Entrance of jobsite

Ambulance: 911

Police: 911

Fire department: 911

Workplace Safety and Health Division: 204 945 3446

First aid attendants: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Nearest hospital is located at/in Victoria Hospital

And their phone number is 204 269 3570

Nearest clinic is located at/in Monteris Medical

And their phone number is 204 272 2220

Sign off:

Jack Pott \_\_\_\_\_

Justin Case \_\_\_\_\_

Althea Thoone \_\_\_\_\_

Anita Plumber \_\_\_\_\_



## Fall Protection Rescue Plan

*This plan should be completed for all work at 3m or more in addition to the hazard assessment and safe work procedure*

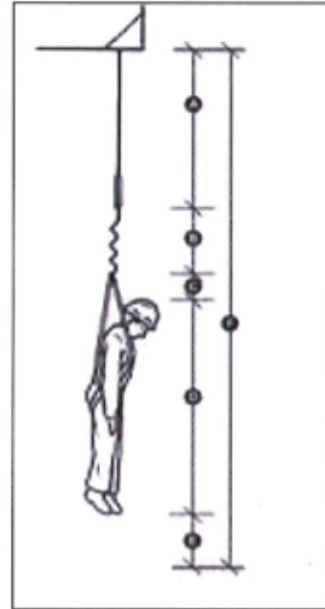
Job number	ABC 123	Date	
Address	244 Fake St.	Tasks	Flashing
Completed by	Jack Pott	Signature	

Site/Task Specific Information	
Nature of work: <i>Installing Flashing around perimeter of building (14ft)</i>	
Duration of work: <i>2 Days (16 Hours)</i>	
Tools and equipment used: <i>Impact Drill; Tin Snips</i>	
Safe work procedures required: <i>Portable Hand &amp; Power Tools; Fall Protection; Ladders</i>	
Weather: <i>Clear; Sunny; 24°C - 25°C</i>	
Site supervisor: <i>Jack Pott</i>	
Site safety representative: <i>Marcus Absent</i>	
Fall Protection Systems to be Used	
<input type="checkbox"/> Travel restraint <input type="checkbox"/> Nets	<input type="checkbox"/> Guardrails <input type="checkbox"/> Work positioning <input checked="" type="checkbox"/> Personal harness
Fall Protection / Arrest Components Used	
<input checked="" type="checkbox"/> Body harness <input type="checkbox"/> Vertical life line	<input checked="" type="checkbox"/> Lanyard <input checked="" type="checkbox"/> Horizontal life line <input checked="" type="checkbox"/> Rope grab <input checked="" type="checkbox"/> Connectors <input type="checkbox"/> Self-retracting lanyard <input checked="" type="checkbox"/> Anchor points

Anchor Point Locations and Descriptions
<i>Permanent Anchor Points installed on structure.</i>

### Calculation of Fixed Anchor – Vertical & Horizontal Swing Clearance

		Length (metres)	
		Worker 1	Worker 2
A	Length of lanyard	1	1
B	Shock absorber elongated	2	2
C	Harness stretch (from top of head)	1	1
D	Height of worker	1.9	1.9
E	Safety factor (0.6m / 3')	0.6	0.6
F	<b>OVERALL MINIMUM CLEARANCE</b>	<b>6.5</b>	<b>6.5</b>



Other workers (if applicable):

Worker 3: \_\_\_\_\_ (box F)

Worker 4: \_\_\_\_\_ (box F)

Worker 5: \_\_\_\_\_ (box F)

Worker 6: \_\_\_\_\_ (box F)

Worker 7: \_\_\_\_\_ (box F)

Worker 8: \_\_\_\_\_ (box F)

### Rescue Plan

Describe the procedure to follow if a worker needs to be rescued. If PPE is to be used (fall arrest) discuss suspension trauma with the workers. What methods will be used on site?

Self rescue ☒



- \*Access to window
- \*Access to ladder
- \*Can pull back onto the roof alone

Assisted rescue ☒



- \*Crew will assist
- \*Hoist worker back to roof
- \*Aerial lift required

Emergency rescue ☒



- \*Call 911
- \*Clear the area for emergency personnel to arrive

List life-saving equipment on site:

Rescue Rope Ladder ; 3 to 1 Pulley System ;  
Call 911

Pre-Use Checklist		
	<b>PASS</b>	<b>FAIL</b>
Webbing	✓	
D-Ring	✓	
Lanyard	✓	
Connectors	✓	
Hooks	✓	
Stitching	✓	
Lifeline	✓	
Carabiners	✓	
Lifeline	✓	
Travel restraint	✓	
Rope Grab	✓	
<p><i>*If anything "fails" it must be immediately removed from service. Please notify the site supervisor immediately – DO NOT USE</i></p>		
<div style="display: flex; justify-content: space-between;"> <div> <p>Safety rep signature: <u>Marcus Absent</u></p> <p>Supervisor signature: <u>Jack Pott</u></p> <p>Date: _____ Time: _____</p> <p><i>*By signing this checklist, you acknowledge that all equipment inspected meets the manufacturer and company guidelines to be used safely.</i></p> </div> </div>		

Crew Signatures	
<p><i>By signing off on this form, you acknowledge understanding of the rescue plan and all equipment that will or may be used is in good condition. You have received appropriate training in fall protection and will follow the company safe work procedure while working the tasks.</i></p>	
Supervisor <u>Jack Pott</u>	Safety rep <u>Marcus Absent</u>
Crew <u>Justin Case</u>	Crew <u>Brita Waters</u>
Crew	Crew
Crew	Crew
Crew	Crew
Crew	Crew
Crew	Crew



### Fire Extinguisher Quarterly Inspection Report

Location	Inspected by	Condition	Date
123 Fake Street	Jack Pott	Good	January 2
321 Fake Street	Gene Pool	Good	January 1
204 Fake Avenue	Marcus Absent	Good	January 10
2020 Corona Drive	Althea Thoone	Good	January 12

Location	Inspected by	Condition	Date
123 Fake Street	Jack Pott	Good	February 2
321 Fake Street	Gene Pool	Good	February 1
204 Fake Avenue	Marcus Absent	Good	February 10
2020 Corona Drive	Althea Thoone	Good	February 12

Location	Inspected by	Condition	Date
123 Fake Street	Jack Pott	Good	March 2
321 Fake Street	Gene Pool	Good	March 1
204 Fake Avenue	Marcus Absent	Good	March 10
2020 Corona Drive	Althea Thoone	Good	March 12

ACTIONS REQUIRED
No actions required.
Report completed by: Jack Pott



# Observation Checklist

Site 1

Company: SRCC Ltd. Worksite Location: 123 Fake St  
 Date: Current # of employees on site: 0 # of sub-contractors on site: 0



Reference #	Observation Requirement		Comments
<b>Safety and Health Policy</b>			
1.5	Is the safety and health policy posted?	✓	
<b>Hazard Assessment, Analysis, and Control</b>			
2.1	Are site-specific hazard assessments conducted?	✓	
2.9	Are the controls developed using a hierarchy of controls?	✓	
2.11	Are controls implemented in a timely manner?	✓	
<b>Safe Work Practices</b>			
3.1	Do safe work practices reflect the company's activities?	✓	
3.3	Are written safe work practices readily available?	✓	
3.4	Are they followed by employees?	X	
<b>Safe Job Procedures</b>			
4.1	Do safe job procedures reflect the company's activities — including high risk and critical tasks?	✓	
4.3	Are written safe job procedures readily available for the work being performed?	✓	
4.4	Are employees following safe job procedures?	X	
<b>Company Safety Rules</b>			
5.3	Are company rules prominently posted?	✓	
<b>Personal Protective Equipment</b>			
6.4	Do personnel have access to specialized PPE for specific activities?	✓	
6.5	Is the correct PPE used by personnel when required?	✓	
6.6	Is PPE well maintained and in good condition, and does it meet regulatory requirements?	✓	
<b>Preventative Maintenance Program</b>			
7.2	Are completed pre-operational/checklists kept with the equipment in use?	✓	
7.3	Have the documented corrective action(s) been completed?	✓	
7.6	Does the company follow its system to remove defective tools, equipment, and vehicles from service?	✓	



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.



Reference #	Observation Requirement		Comments
<b>Inspections</b>			
9.8	Are inspection reports posted?	✓	
<b>Emergency Preparedness</b>			
11.1	Are the site emergency plans posted and appropriate to the work activities?	✓	
11.2	Is emergency equipment readily available, marked, and visible?	✓	
11.3	Is the emergency equipment in use regularly inspected and maintained?	✓	
11.4	Are the required number of qualified first aid personnel on site?	✓	
11.5	Is there an appropriate communication system available?	✓	
11.6	Is there a means to transport an injured person to a medical facility?	✓	
11.7	Are fire extinguishers readily available?	✓	
<b>Statistics, Records, and Documentation</b>			
12.1	Are current versions of applicable documents available at the point of use?	✓	
<b>Legislation</b>			
13.1	Are copies of relevant legislation posted or readily available?	✓	
<b>Procurement and Contractor Management</b>			
14.4	Is safety information shared between the prime/general contractor and contractors?	✓	
<b>Manitoba Supplement</b>			
15.1	Is the name of the safety representative for the company posted?	✓	
15.5	Are safety meeting minutes posted?	✓	
15.6	Is there bulletin board in a prominent place, which is readily accessible to workers?	✓	
15.7	Is there a site sign that displays required information?	X	
15.9	Is appropriate hearing protection made readily available?	✓	
15.14	Are controlled products properly labelled?	✓	
15.15	Are SDSs current and readily available?	✓	
15.19	Is the harassment policy prominently posted?	✓	
15.21	Is the violence policy prominently posted?	✓	
15.23	Are housekeeping techniques appropriate?	✓	

*Additional observations/comments:*

# Observation Checklist

Site 2



Company: Spec Ltd. Worksite Location: 321 Fake St  
 Date: Current # of employees on site: 1 # of sub-contractors on site: 1

Reference #	Observation Requirement		Comments
<b>Safety and Health Policy</b>			
1.5	Is the safety and health policy posted?	✓	
<b>Hazard Assessment, Analysis, and Control</b>			
2.1	Are site-specific hazard assessments conducted?	✓	
2.9	Are the controls developed using a hierarchy of controls?	✓	
2.11	Are controls implemented in a timely manner?	✓	
<b>Safe Work Practices</b>			
3.1	Do safe work practices reflect the company's activities?	✓	
3.3	Are written safe work practices readily available?	✓	
3.4	Are they followed by employees?	X	
<b>Safe Job Procedures</b>			
4.1	Do safe job procedures reflect the company's activities — including high risk and critical tasks?	✓	
4.3	Are written safe job procedures readily available for the work being performed?	✓	
4.4	Are employees following safe job procedures?	X	
<b>Company Safety Rules</b>			
5.3	Are company rules prominently posted?	✓	
<b>Personal Protective Equipment</b>			
6.4	Do personnel have access to specialized PPE for specific activities?	✓	
6.5	Is the correct PPE used by personnel when required?	✓	
6.6	Is PPE well maintained and in good condition, and does it meet regulatory requirements?	✓	
<b>Preventative Maintenance Program</b>			
7.2	Are completed pre-operational/checklists kept with the equipment in use?	✓	
7.3	Have the documented corrective action(s) been completed?	✓	
7.6	Does the company follow its system to remove defective tools, equipment, and vehicles from service?	✓	



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.



Reference #	Observation Requirement		Comments
<b>Inspections</b>			
9.8	Are inspection reports posted?	✓	
<b>Emergency Preparedness</b>			
11.1	Are the site emergency plans posted and appropriate to the work activities?	✓	
11.2	Is emergency equipment readily available, marked, and visible?	✓	
11.3	Is the emergency equipment in use regularly inspected and maintained?	✓	
11.4	Are the required number of qualified first aid personnel on site?	✓	
11.5	Is there an appropriate communication system available?	✓	
11.6	Is there a means to transport an injured person to a medical facility?	✓	
11.7	Are fire extinguishers readily available?	✓	
<b>Statistics, Records, and Documentation</b>			
12.1	Are current versions of applicable documents available at the point of use?	✓	
<b>Legislation</b>			
13.1	Are copies of relevant legislation posted or readily available?	✓	
<b>Procurement and Contractor Management</b>			
14.4	Is safety information shared between the prime/general contractor and contractors?	✓	
<b>Manitoba Supplement</b>			
15.1	Is the name of the safety representative for the company posted?	✓	
15.5	Are safety meeting minutes posted?	✓	
15.6	Is there bulletin board in a prominent place, which is readily accessible to workers?	✓	
15.7	Is there a site sign that displays required information?	✗	
15.9	Is appropriate hearing protection made readily available?	✓	
15.14	Are controlled products properly labelled?	✓	
15.15	Are SDSs current and readily available?	✓	
15.19	Is the harassment policy prominently posted?	✓	
15.21	Is the violence policy prominently posted?	✓	
15.23	Are housekeeping techniques appropriate?	✓	

*Additional observations/comments:*

# Observation Checklist

Site 3



Company: SRC Ltd. Worksite Location: 204 Fake St  
 Date: Current # of employees on site: 0 # of sub-contractors on site: 0

Reference #	Observation Requirement		Comments
<b>Safety and Health Policy</b>			
1.5	Is the safety and health policy posted?	✓	
<b>Hazard Assessment, Analysis, and Control</b>			
2.1	Are site-specific hazard assessments conducted?	✓	
2.9	Are the controls developed using a hierarchy of controls?	✓	
2.11	Are controls implemented in a timely manner?	✓	
<b>Safe Work Practices</b>			
3.1	Do safe work practices reflect the company's activities?	✓	
3.3	Are written safe work practices readily available?	✓	
3.4	Are they followed by employees?	✗	
<b>Safe Job Procedures</b>			
4.1	Do safe job procedures reflect the company's activities — including high risk and critical tasks?	✓	
4.3	Are written safe job procedures readily available for the work being performed?	✓	
4.4	Are employees following safe job procedures?	✗	
<b>Company Safety Rules</b>			
5.3	Are company rules prominently posted?	✓	
<b>Personal Protective Equipment</b>			
6.4	Do personnel have access to specialized PPE for specific activities?	✓	
6.5	Is the correct PPE used by personnel when required?	✓	
6.6	Is PPE well maintained and in good condition, and does it meet regulatory requirements?	✓	
<b>Preventative Maintenance Program</b>			
7.2	Are completed pre-operational/checklists kept with the equipment in use?	✗	
7.3	Have the documented corrective action(s) been completed?	✓	
7.6	Does the company follow its system to remove defective tools, equipment, and vehicles from service?	✓	



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.



Reference #	Observation Requirement	Comments
Inspections		
9.8	Are inspection reports posted?	✓
Emergency Preparedness		
11.1	Are the site emergency plans posted and appropriate to the work activities?	✓
11.2	Is emergency equipment readily available, marked, and visible?	✓
11.3	Is the emergency equipment in use regularly inspected and maintained?	✓
11.4	Are the required number of qualified first aid personnel on site?	✓
11.5	Is there an appropriate communication system available?	✓
11.6	Is there a means to transport an injured person to a medical facility?	✓
11.7	Are fire extinguishers readily available?	✗
Statistics, Records, and Documentation		
12.1	Are current versions of applicable documents available at the point of use?	✓
Legislation		
13.1	Are copies of relevant legislation posted or readily available?	✓
Procurement and Contractor Management		
14.4	Is safety information shared between the prime/general contractor and contractors?	✓
Manitoba Supplement		
15.1	Is the name of the safety representative for the company posted?	✓
15.5	Are safety meeting minutes posted?	✓
15.6	Is there bulletin board in a prominent place, which is readily accessible to workers?	✓
15.7	Is there a site sign that displays required information?	✗
15.9	Is appropriate hearing protection made readily available?	✓
15.14	Are controlled products properly labelled?	✓
15.15	Are SDSs current and readily available?	✗
15.19	Is the harassment policy prominently posted?	✓
15.21	Is the violence policy prominently posted?	✓
15.23	Are housekeeping techniques appropriate?	✓

*Additional observations/comments:*

# Employee Interview Questionnaire

Employee 1



Reference #	Questions	P	N	Interview Comments
1.3	What are your safety and health responsibilities? How are you held accountable for them?	✓		
1.6	In your own words, what does the safety and health policy say?	✓		
2.1	Describe the process your company uses to conduct formal hazard assessments. What type of tasks are included in the formal hazard assessment process?	✓		
2.2	How are completed formal hazard assessments reviewed with you?	✓		
2.4	How are hazards reassessed as the job progresses or changes occur?		✓	
2.6	How are you involved in the hazard assessment process?	✓		
2.7	How have you been trained to identify and control hazards?	✓		
2.10	Who is responsible for implementation of controls?		✓	
3.2	Describe some of the key points of a safe work practice applicable to your work.	✓		
3.3	How do you have access to safe work practices when on site?	✓		
3.5	Can you give me an example of how a safe work practice has been reviewed or discussed?	✓		
4.2	Describe the step-by-step process of a safe job procedure for a critical task that is applicable to your work.	✓		
4.3	How do you have access to safe job procedures when on site?	✓		
4.5	Can you give me an example of how a safe job procedure has been reviewed or discussed?	✓		
5.2	Where can you find both company and project (work location) specific rules?	✓		
5.3	How are company safety rules provided or made available to you?		✓	
5.6	How are the company rules enforced?	✓		
6.1	How do you know what PPE is required to perform a specific task?		✓	
6.3	What type of training did you receive to understand the proper fitting, care, and use of your PPE?	✓		
6.4	How do you have access to appropriate PPE when needed?	✓		
7.5	What is your company's system to remove defective tools or equipment from service?	✓		



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.



## Page 2 - Employee Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
8.2	After training, how are you evaluated for your retention of information regarding the company safety and health program?	✓		
8.5	How was your mandatory training verified or provided to you prior to starting work?	✓		
8.8	When was your orientation provided? Have you received a re-orientation?		✓	
8.12	How are you given the opportunity to give input and communicate safety and health concerns?	✓		
8.13	How often does your company hold scheduled safety meetings?	✓		
9.3	How are identified deficiencies assigned to individuals and corrected as required?	✓		
9.4	What specific method, form, or checklist is used for pre-use inspections?	✓		
9.7	What is your role in the formal or informal inspection process?	✓		
9.8	How are the inspection reports posted and/or communicated to you?	✓		
10.1	What is the process for reporting an incident? What are your responsibilities?	✓		
10.4	Once an incident investigation has been completed, how are corrective actions implemented?		✓	
10.5	How are corrective actions communicated to you after an incident occurs?	✓		
10.6	What incidents do you report? Do you report near misses? Please give an example of a near miss.	✓		
11.4	How do you know who is a qualified to administer first aid on this site?		✓	
11.5	How do you alert everyone onsite in the event of an emergency? How do you contact appropriate personnel/agencies for emergency assistance?	✓		
11.9	Can you give me an example(s) of an emergency plan for this site? What are your specific roles and responsibilities?	✓		
11.12	How have site specific emergency plans been communicated to you?	✓		
13.1	Where are copies of relevant legislation on this site? NOTE for AHJs – insert the name of required legislation.	✓		
13.2	Does your supervisor regularly discuss relevant regulations and legislation when assigning work? Can you give an example?		✓	
13.3	What are your legislated rights? Do you know how to exercise those rights?		✓	
15.1	Who is your worker safety representative on this site?		✓	

### Page 3 - Employee Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
15.2	Who is involved in hazard identification, communication, and control on your worksite(s)?	✓		
15.5	How are you made aware of safety meeting minutes for this site? Where can you find a copy of the minutes?	✓		
15.9	Have you received hearing protection training?		✓	
15.11	What is the procedure for working alone? Is it followed?	✓		
15.13	Give an example of a controlled product used on this site and the procedures required for safe use.	✓		

Highlighted boxes are required for SECOR®. COR® requires all questions.



# Employee Interview Questionnaire

Employee 2



Reference #	Questions	P	N	Interview Comments
1.3	What are your safety and health responsibilities? How are you held accountable for them?	✓		
1.6	In your own words, what does the safety and health policy say?		✓	
2.1	Describe the process your company uses to conduct formal hazard assessments. What type of tasks are included in the formal hazard assessment process?	✓		
2.2	How are completed formal hazard assessments reviewed with you?	✓		
2.4	How are hazards reassessed as the job progresses or changes occur?	✓		
2.6	How are you involved in the hazard assessment process?	✓		
2.7	How have you been trained to identify and control hazards?		✓	
2.10	Who is responsible for implementation of controls?		✓	
3.2	Describe some of the key points of a safe work practice applicable to your work.	✓		
3.3	How do you have access to safe work practices when on site?	✓		
3.5	Can you give me an example of how a safe work practice has been reviewed or discussed?	✓		
4.2	Describe the step-by-step process of a safe job procedure for a critical task that is applicable to your work.	✓		
4.3	How do you have access to safe job procedures when on site?		✓	
4.5	Can you give me an example of how a safe job procedure has been reviewed or discussed?	✓		
5.2	Where can you find both company and project (work location) specific rules?		✓	
5.3	How are company safety rules provided or made available to you?		✓	
5.6	How are the company rules enforced?	✓		
6.1	How do you know what PPE is required to perform a specific task?		✓	
6.3	What type of training did you receive to understand the proper fitting, care, and use of your PPE?		✓	
6.4	How do you have access to appropriate PPE when needed?	✓		
7.5	What is your company's system to remove defective tools or equipment from service?	✓		



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.



Page 2 - Employee Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
8.2	After training, how are you evaluated for your retention of information regarding the company safety and health program?		✓	
8.5	How was your mandatory training verified or provided to you prior to starting work?	✓		
8.8	When was your orientation provided? Have you received a re-orientation?	✓		
8.12	How are you given the opportunity to give input and communicate safety and health concerns?	✓		
8.13	How often does your company hold scheduled safety meetings?	✓		
9.3	How are identified deficiencies assigned to individuals and corrected as required?	✓		
9.4	What specific method, form, or checklist is used for pre-use inspections?	✓		
9.7	What is your role in the formal or informal inspection process?		✓	
9.8	How are the inspection reports posted and/or communicated to you?		✓	
10.1	What is the process for reporting an incident? What are your responsibilities?		✓	
10.4	Once an incident investigation has been completed, how are corrective actions implemented?		✓	
10.5	How are corrective actions communicated to you after an incident occurs?	✓		
10.6	What incidents do you report? Do you report near misses? Please give an example of a near miss.	✓		
11.4	How do you know who is a qualified to administer first aid on this site?		✓	
11.5	How do you alert everyone onsite in the event of an emergency? How do you contact appropriate personnel/agencies for emergency assistance?	✓		
11.9	Can you give me an example(s) of an emergency plan for this site? What are your specific roles and responsibilities?	✓		
11.12	How have site specific emergency plans been communicated to you?	✓		
13.1	Where are copies of relevant legislation on this site? NOTE for AHJs – insert the name of required legislation.	✓		
13.2	Does your supervisor regularly discuss relevant regulations and legislation when assigning work? Can you give an example?		✓	
13.3	What are your legislated rights? Do you know how to exercise those rights?		✓	
15.1	Who is your worker safety representative on this site?	✓		

### Page 3 - Employee Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
15.2	Who is involved in hazard identification, communication, and control on your worksite(s)?	✓		
15.5	How are you made aware of safety meeting minutes for this site? Where can you find a copy of the minutes?		✓	
15.9	Have you received hearing protection training?		✓	
15.11	What is the procedure for working alone? Is it followed?	✓		
15.13	Give an example of a controlled product used on this site and the procedures required for safe use.	✓		

Highlighted boxes are required for SECOR®. COR® requires all questions.



# Employee Interview Questionnaire

Employee 3



Reference #	Questions	P	N	Interview Comments
1.3	What are your safety and health responsibilities? How are you held accountable for them?	✓		
1.6	In your own words, what does the safety and health policy say?	✓		
2.1	Describe the process your company uses to conduct formal hazard assessments. What type of tasks are included in the formal hazard assessment process?		✓	
2.2	How are completed formal hazard assessments reviewed with you?	✓		
2.4	How are hazards reassessed as the job progresses or changes occur?		✓	
2.6	How are you involved in the hazard assessment process?	✓		
2.7	How have you been trained to identify and control hazards?	✓		
2.10	Who is responsible for implementation of controls?	✓		
3.2	Describe some of the key points of a safe work practice applicable to your work.	✓		
3.3	How do you have access to safe work practices when on site?	✓		
3.5	Can you give me an example of how a safe work practice has been reviewed or discussed?	✓		
4.2	Describe the step-by-step process of a safe job procedure for a critical task that is applicable to your work.	✓		
4.3	How do you have access to safe job procedures when on site?	✓		
4.5	Can you give me an example of how a safe job procedure has been reviewed or discussed?		✓	
5.2	Where can you find both company and project (work location) specific rules?	✓		
5.3	How are company safety rules provided or made available to you?	✓		
5.6	How are the company rules enforced?		✓	
6.1	How do you know what PPE is required to perform a specific task?		✓	
6.3	What type of training did you receive to understand the proper fitting, care, and use of your PPE?	✓		
6.4	How do you have access to appropriate PPE when needed?		✓	
7.5	What is your company's system to remove defective tools or equipment from service?	✓		



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.

## Page 2 - Employee Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
8.2	After training, how are you evaluated for your retention of information regarding the company safety and health program?		✓	
8.5	How was your mandatory training verified or provided to you prior to starting work?	✓		
8.8	When was your orientation provided? Have you received a re-orientation?	✓		
8.12	How are you given the opportunity to give input and communicate safety and health concerns?	✓		
8.13	How often does your company hold scheduled safety meetings?	✓		
9.3	How are identified deficiencies assigned to individuals and corrected as required?	✓		
9.4	What specific method, form, or checklist is used for pre-use inspections?	✓		
9.7	What is your role in the formal or informal inspection process?	✓		
9.8	How are the inspection reports posted and/or communicated to you?	✓		
10.1	What is the process for reporting an incident? What are your responsibilities?		✓	
10.4	Once an incident investigation has been completed, how are corrective actions implemented?		✓	
10.5	How are corrective actions communicated to you after an incident occurs?	✓		
10.6	What incidents do you report? Do you report near misses? Please give an example of a near miss.		✓	
11.4	How do you know who is a qualified to administer first aid on this site?		✓	
11.5	How do you alert everyone onsite in the event of an emergency? How do you contact appropriate personnel/agencies for emergency assistance?	✓		
11.9	Can you give me an example(s) of an emergency plan for this site? What are your specific roles and responsibilities?	✓		
11.12	How have site specific emergency plans been communicated to you?	✓		
13.1	Where are copies of relevant legislation on this site? NOTE for AHJs – insert the name of required legislation.	✓		
13.2	Does your supervisor regularly discuss relevant regulations and legislation when assigning work? Can you give an example?	✓		
13.3	What are your legislated rights? Do you know how to exercise those rights?	✓		
15.1	Who is your worker safety representative on this site?	✓		

### Page 3 - Employee Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
15.2	Who is involved in hazard identification, communication, and control on your worksite(s)?	✓		
15.5	How are you made aware of safety meeting minutes for this site? Where can you find a copy of the minutes?	✓		
15.9	Have you received hearing protection training?	✓		
15.11	What is the procedure for working alone? Is it followed?	✓		
15.13	Give an example of a controlled product used on this site and the procedures required for safe use.	✓		

Highlighted boxes are required for SECOR®. COR® requires all questions.



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.





# Employee Interview Questionnaire

Employee 4



Reference #	Questions	P	N	Interview Comments
1.3	What are your safety and health responsibilities? How are you held accountable for them?		✓	
1.6	In your own words, what does the safety and health policy say?	✓		
2.1	Describe the process your company uses to conduct formal hazard assessments. What type of tasks are included in the formal hazard assessment process?		✓	
2.2	How are completed formal hazard assessments reviewed with you?	✓		
2.4	How are hazards reassessed as the job progresses or changes occur?	✓		
2.6	How are you involved in the hazard assessment process?	✓		
2.7	How have you been trained to identify and control hazards?		✓	
2.10	Who is responsible for implementation of controls?	✓		
3.2	Describe some of the key points of a safe work practice applicable to your work.	✓		
3.3	How do you have access to safe work practices when on site?	✓		
3.5	Can you give me an example of how a safe work practice has been reviewed or discussed?		✓	
4.2	Describe the step-by-step process of a safe job procedure for a critical task that is applicable to your work.	✓		
4.3	How do you have access to safe job procedures when on site?	✓		
4.5	Can you give me an example of how a safe job procedure has been reviewed or discussed?		✓	
5.2	Where can you find both company and project (work location) specific rules?		✓	
5.3	How are company safety rules provided or made available to you?	✓		
5.6	How are the company rules enforced?	✓		
6.1	How do you know what PPE is required to perform a specific task?		✓	
6.3	What type of training did you receive to understand the proper fitting, care, and use of your PPE?	✓		
6.4	How do you have access to appropriate PPE when needed?	✓		
7.5	What is your company's system to remove defective tools or equipment from service?	✓		



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.

## Page 2 - Employee Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
8.2	After training, how are you evaluated for your retention of information regarding the company safety and health program?		✓	
8.5	How was your mandatory training verified or provided to you prior to starting work?		✓	
8.8	When was your orientation provided? Have you received a re-orientation?	✓		
8.12	How are you given the opportunity to give input and communicate safety and health concerns?	✓		
8.13	How often does your company hold scheduled safety meetings?	✓		
9.3	How are identified deficiencies assigned to individuals and corrected as required?		✓	
9.4	What specific method, form, or checklist is used for pre-use inspections?		✓	
9.7	What is your role in the formal or informal inspection process?	✓		
9.8	How are the inspection reports posted and/or communicated to you?	✓		
10.1	What is the process for reporting an incident? What are your responsibilities?	✓		
10.4	Once an incident investigation has been completed, how are corrective actions implemented?		✓	
10.5	How are corrective actions communicated to you after an incident occurs?		✓	
10.6	What incidents do you report? Do you report near misses? Please give an example of a near miss.	✓		
11.4	How do you know who is a qualified to administer first aid on this site?	✓		
11.5	How do you alert everyone onsite in the event of an emergency? How do you contact appropriate personnel/agencies for emergency assistance?	✓		
11.9	Can you give me an example(s) of an emergency plan for this site? What are your specific roles and responsibilities?	✓		
11.12	How have site specific emergency plans been communicated to you?	✓		
13.1	Where are copies of relevant legislation on this site? NOTE for AHJs – insert the name of required legislation.	✓		
13.2	Does your supervisor regularly discuss relevant regulations and legislation when assigning work? Can you give an example?	✓		
13.3	What are your legislated rights? Do you know how to exercise those rights?	✓		
15.1	Who is your worker safety representative on this site?	✓		

### Page 3 - Employee Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
15.2	Who is involved in hazard identification, communication, and control on your worksite(s)?		✓	
15.5	How are you made aware of safety meeting minutes for this site? Where can you find a copy of the minutes?	✓		
15.9	Have you received hearing protection training?	✓		
15.11	What is the procedure for working alone? Is it followed?		✓	
15.13	Give an example of a controlled product used on this site and the procedures required for safe use.		✓	

Highlighted boxes are required for SECOR®. COR® requires all questions.



# Management/Supervisor Interview Questionnaire

Management 1



Reference #	Questions	P	N	Interview Comments
1.3	What are your safety and health responsibilities? How are you held accountable for them?	✓		
1.6	In your own words, what does the safety and health policy say?		✓	
2.1	Describe the process your company uses to conduct formal hazard assessments. What type of tasks are included in the formal hazard assessment process?		✓	
2.4	How are hazards reassessed as the job progresses or changes occur?	✓		
2.6	How are you involved in the hazard assessment process?	✓		
2.7	How do you verify employees are competent to participate in hazard assessments?	✓		
2.10	Who is responsible for implementation of controls?	✓		
3.3	How do your employees have access to safe work practices when on site(s)?	✓		
3.5	What is your formal process to develop or review safe work practices?	✓		
4.3	How do your employees have access to safe job procedures when on site(s)?	✓		
4.5	What is your formal process to develop or review safe job procedures?	✓		
5.3	How are company safety rules provided to your employees?		✓	
5.6	Explain the disciplinary process that is used when employees are not following company rules.	✓		
6.1	What criteria is used to select appropriate PPE for company specific tasks?	✓		
6.3	What type of training is provided to your employees to help them understand the proper fitting, care, and use of PPE?	✓		
6.4	How do your employees have access to appropriate PPE when needed?	✓		
7.4	How are the individuals that perform maintenance on equipment or tools deemed competent to do so?	✓		
7.5	What is your company's system to remove defective tools or equipment from service?	✓		
8.1	What is your company's method for the selection of safety and health training of employees?	✓		



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.



## Page 2 - Manager/Supervisor Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
8.2	What is your company's method for evaluating and monitoring the knowledge, competency, and effectiveness regarding the safety and health training provided to employees?	✓		
8.3	What training have you received in your legislated requirements?		✓	
8.5	How do you verify mandatory training requirements for employees are completed prior to starting work?	✓		
8.6	How do you verify the training provided is conducted by a qualified/competent person?	✓		
8.8	What types of orientation are provided and when?		✓	
8.10	When did you last attend a safety and health meeting? How often do you actively participate in them?	✓		
8.13	How does your company ensure safety and health meetings are scheduled to meet legislation, company, or project requirements?	✓		
9.2	What specific method, form or checklist is used for workplace inspections?	✓		
9.3	How are identified deficiencies assigned to individuals and corrected as required?	✓		
9.4	What specific method, form, or checklist is used for pre-use inspections?		✓	
9.7	What is your role in the formal or informal inspection process?	✓		
9.8	How are the inspection reports posted and/or communicated to you?	✓		
10.1	What is the process for reporting an incident? What are your responsibilities?	✓		
10.3	What training have you received to conduct investigations? Did that training include both legislative and company-specific reporting and investigation procedures?		✓	
10.4	Once an incident investigation has been completed, how are corrective actions implemented and followed up for effectiveness?		✓	
10.6	Following an incident, are the investigation reports completed as per company policy/procedure that includes incidents, near misses, and investigation reports? Can you give an example?	✓		
11.4	How do you communicate who is a qualified first aid personnel on this site? How do you verify the number of qualified first aid personnel meets legislative requirements?	✓		
11.5	How do you alert everyone onsite in the event of an emergency? How do you contact appropriate personnel/agencies for emergency assistance?		✓	
11.6	If someone gets injured, how would they be transported to a medical facility?	✓		

### Page 3 - Manager/Supervisor Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
11.12	How do you communicate site-specific emergency response plans to your employees?	✓		
12.7	Can you give me an example of corrective actions or improvements that have been made to your safety and health program from your most recent audit/statistics review?	✓		
13.1	Where are copies of relevant legislation on this site? <i>NOTE for AHJs – insert the name of required legislation.</i>	✓		
13.2	Do you regularly refer to relevant legislation and regulations during job planning to ensure compliance? Can you give an example?	✓		
13.3	What are your legislated rights? Do you know how to exercise those rights?	✓		
14.2	How does the evaluation, selection, and monitoring of contractors take into consideration their ability and competency to identify, communicate, and control hazards that may impact all workers on site?		✓	
14.3	How do you ensure your criteria for selection/evaluation and monitoring contractors is being followed?	✓		
14.6	How do you ensure your criteria for selection and evaluation of procured products is being followed?		✓	
15.13	Give an example of a controlled product used on this site and the procedures required for safe use.	✓		
15.16	What is the procedure for checking operator training and certification?	✓		

**Highlighted boxes are required for SECOR®. COR® requires all questions.**



# Management/Supervisor Interview Questionnaire

Management 2



Reference #	Questions	P	N	Interview Comments
1.3	What are your safety and health responsibilities? How are you held accountable for them?		✓	
1.6	In your own words, what does the safety and health policy say?	✓		
2.1	Describe the process your company uses to conduct formal hazard assessments. What type of tasks are included in the formal hazard assessment process?	✓		
2.4	How are hazards reassessed as the job progresses or changes occur?		✓	
2.6	How are you involved in the hazard assessment process?	✓		
2.7	How do you verify employees are competent to participate in hazard assessments?	✓		
2.10	Who is responsible for implementation of controls?		✓	
3.3	How do your employees have access to safe work practices when on site(s)?	✓		
3.5	What is your formal process to develop or review safe work practices?	✓		
4.3	How do your employees have access to safe job procedures when on site(s)?		✓	
4.5	What is your formal process to develop or review safe job procedures?	✓		
5.3	How are company safety rules provided to your employees?	✓		
5.6	Explain the disciplinary process that is used when employees are not following company rules.	✓		
6.1	What criteria is used to select appropriate PPE for company specific tasks?	✓		
6.3	What type of training is provided to your employees to help them understand the proper fitting, care, and use of PPE?		✓	
6.4	How do your employees have access to appropriate PPE when needed?		✓	
7.4	How are the individuals that perform maintenance on equipment or tools deemed competent to do so?	✓		
7.5	What is your company's system to remove defective tools or equipment from service?	✓		
8.1	What is your company's method for the selection of safety and health training of employees?	✓		



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.



## Page 2 - Manager/Supervisor Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
8.2	What is your company's method for evaluating and monitoring the knowledge, competency, and effectiveness regarding the safety and health training provided to employees?	✓		
8.3	What training have you received in your legislated requirements?	✓		
8.5	How do you verify mandatory training requirements for employees are completed prior to starting work?		✓	
8.6	How do you verify the training provided is conducted by a qualified/competent person?	✓		
8.8	What types of orientation are provided and when?	✓		
8.10	When did you last attend a safety and health meeting? How often do you actively participate in them?	✓		
8.13	How does your company ensure safety and health meetings are scheduled to meet legislation, company, or project requirements?	✓		
9.2	What specific method, form or checklist is used for workplace inspections?	✓		
9.3	How are identified deficiencies assigned to individuals and corrected as required?		✓	
9.4	What specific method, form, or checklist is used for pre-use inspections?		✓	
9.7	What is your role in the formal or informal inspection process?		✓	
9.8	How are the inspection reports posted and/or communicated to you?		✓	
10.1	What is the process for reporting an incident? What are your responsibilities?		✓	
10.3	What training have you received to conduct investigations? Did that training include both legislative and company-specific reporting and investigation procedures?	✓		
10.4	Once an incident investigation has been completed, how are corrective actions implemented and followed up for effectiveness?	✓		
10.6	Following an incident, are the investigation reports completed as per company policy/procedure that includes incidents, near misses, and investigation reports? Can you give an example?	✓		
11.4	How do you communicate who is a qualified first aid personnel on this site? How do you verify the number of qualified first aid personnel meets legislative requirements?	✓		
11.5	How do you alert everyone onsite in the event of an emergency? How do you contact appropriate personnel/agencies for emergency assistance?		✓	
11.6	If someone gets injured, how would they be transported to a medical facility?	✓		

### Page 3 - Manager/Supervisor Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
11.12	How do you communicate site-specific emergency response plans to your employees?	✓		
12.7	Can you give me an example of corrective actions or improvements that have been made to your safety and health program from your most recent audit/statistics review?	✓		
13.1	Where are copies of relevant legislation on this site? <i>NOTE for AHJs – insert the name of required legislation.</i>	✓		
13.2	Do you regularly refer to relevant legislation and regulations during job planning to ensure compliance? Can you give an example?	✓		
13.3	What are your legislated rights? Do you know how to exercise those rights?	✓		
14.2	How does the evaluation, selection, and monitoring of contractors take into consideration their ability and competency to identify, communicate, and control hazards that may impact all workers on site?	✓		
14.3	How do you ensure your criteria for selection/evaluation and monitoring contractors is being followed?	✓		
14.6	How do you ensure your criteria for selection and evaluation of procured products is being followed?		✓	
15.13	Give an example of a controlled product used on this site and the procedures required for safe use.	✓		
15.16	What is the procedure for checking operator training and certification?	✓		

**Highlighted boxes are required for SECOR®. COR® requires all questions.**



# Management/Supervisor Interview Questionnaire

Management 3



Reference #	Questions	P	N	Interview Comments
1.3	What are your safety and health responsibilities? How are you held accountable for them?		✓	
1.6	In your own words, what does the safety and health policy say?		✓	
2.1	Describe the process your company uses to conduct formal hazard assessments. What type of tasks are included in the formal hazard assessment process?	✓		
2.4	How are hazards reassessed as the job progresses or changes occur?	✓		
2.6	How are you involved in the hazard assessment process?		✓	
2.7	How do you verify employees are competent to participate in hazard assessments?	✓		
2.10	Who is responsible for implementation of controls?	✓		
3.3	How do your employees have access to safe work practices when on site(s)?	✓		
3.5	What is your formal process to develop or review safe work practices?		✓	
4.3	How do your employees have access to safe job procedures when on site(s)?	✓		
4.5	What is your formal process to develop or review safe job procedures?	✓		
5.3	How are company safety rules provided to your employees?	✓		
5.6	Explain the disciplinary process that is used when employees are not following company rules.	✓		
6.1	What criteria is used to select appropriate PPE for company specific tasks?	✓		
6.3	What type of training is provided to your employees to help them understand the proper fitting, care, and use of PPE?	✓		
6.4	How do your employees have access to appropriate PPE when needed?		✓	
7.4	How are the individuals that perform maintenance on equipment or tools deemed competent to do so?	✓		
7.5	What is your company's system to remove defective tools or equipment from service?	✓		
8.1	What is your company's method for the selection of safety and health training of employees?		✓	



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.



Reference #	Questions	P	N	Interview Comments
8.2	What is your company's method for evaluating and monitoring the knowledge, competency, and effectiveness regarding the safety and health training provided to employees?		✓	
8.3	What training have you received in your legislated requirements?	✓		
8.5	How do you verify mandatory training requirements for employees are completed prior to starting work?	✓		
8.6	How do you verify the training provided is conducted by a qualified/competent person?	✓		
8.8	What types of orientation are provided and when?	✓		
8.10	When did you last attend a safety and health meeting? How often do you actively participate in them?	✓		
8.13	How does your company ensure safety and health meetings are scheduled to meet legislation, company, or project requirements?		✓	
9.2	What specific method, form or checklist is used for workplace inspections?	✓		
9.3	How are identified deficiencies assigned to individuals and corrected as required?	✓		
9.4	What specific method, form, or checklist is used for pre-use inspections?		✓	
9.7	What is your role in the formal or informal inspection process?	✓		
9.8	How are the inspection reports posted and/or communicated to you?	✓		
10.1	What is the process for reporting an incident? What are your responsibilities?	✓		
10.3	What training have you received to conduct investigations? Did that training include both legislative and company-specific reporting and investigation procedures?	✓		
10.4	Once an incident investigation has been completed, how are corrective actions implemented and followed up for effectiveness?	✓		
10.6	Following an incident, are the investigation reports completed as per company policy/procedure that includes incidents, near misses, and investigation reports? Can you give an example?		✓	
11.4	How do you communicate who is a qualified first aid personnel on this site? How do you verify the number of qualified first aid personnel meets legislative requirements?	✓		
11.5	How do you alert everyone onsite in the event of an emergency? How do you contact appropriate personnel/agencies for emergency assistance?		✓	
11.6	If someone gets injured, how would they be transported to a medical facility?	✓		

### Page 3 - Manager/Supervisor Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
11.12	How do you communicate site-specific emergency response plans to your employees?	✓		
12.7	Can you give me an example of corrective actions or improvements that have been made to your safety and health program from your most recent audit/statistics review?	✓		
13.1	Where are copies of relevant legislation on this site? <i>NOTE for AHJs – insert the name of required legislation.</i>	✓		
13.2	Do you regularly refer to relevant legislation and regulations during job planning to ensure compliance? Can you give an example?	✓		
13.3	What are your legislated rights? Do you know how to exercise those rights?	✓		
14.2	How does the evaluation, selection, and monitoring of contractors take into consideration their ability and competency to identify, communicate, and control hazards that may impact all workers on site?	✓		
14.3	How do you ensure your criteria for selection/evaluation and monitoring contractors is being followed?	✓		
14.6	How do you ensure your criteria for selection and evaluation of procured products is being followed?	✓		
15.13	Give an example of a controlled product used on this site and the procedures required for safe use.	✓		
15.16	What is the procedure for checking operator training and certification?	✓		

**Highlighted boxes are required for SECOR®. COR® requires all questions.**



# Worker Safety Representative/Safety Committee Member Interview Questionnaire

Safety Rep 1



Reference #	Questions	P	N	Interview Comments
1.5	Where would you find a copy of the safety and health policy?	✓		
1.6	In your own words, what does the safety and health policy say?	✓		
2.4	How are hazards reassessed as the job progresses or changes occur?	✓		
2.6	How are you involved in the hazard assessment process?		✓	
2.7	How have you been trained to identify and control hazards?	✓		
4.5	Have you or the safety and health committee ever been consulted concerning the development or review of safe job procedures?	✓		
5.4	Can you give me an example of a few company and/or site specific rules you need to follow?	✓		
6.3	What type of training did you receive to understand the proper fitting, care, and use of your PPE?	✓		
7.5	What is your company's system to remove defective tools or equipment from service?	✓		
8.13	How often does your company hold scheduled safety meetings?		✓	
9.2	What specific method, form, or checklist is used for workplace inspections?	✓		
9.3	How are identified deficiencies assigned to individuals and corrected as required?		✓	
9.4	What specific method, form, or checklist is used for pre-use inspections?		✓	
9.7	What is your role in the formal or informal inspection process?	✓		
9.8	How are the inspection reports posted and/or communicated to you?	✓		
10.1	What is the process for reporting an incident? What are your responsibilities?	✓		
10.4	After an incident occurs and an investigation takes place, what generally happens with the recommendations that are made?	✓		
10.6	What incidents do you report? Do you report near misses? Please give an example of a near miss?	✓		
13.1	Where are copies of relevant legislation on this site?	✓		
15.2	How are you involved in hazard identification, communication, and control?	✓		



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.

# Page 2 - Worker Safety Representative/Safety Committee Member Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
15.3	Tell me briefly what your legal duties and responsibilities are.	✓		
15.4	Are you involved in the review of safety concerns and developing or implementing corrective actions? Give an example.	✓		
15.9	Have employees received hearing protection training?	✓		
15.11	What is the procedure for working alone? Is it followed?	✓		



**Highlighted boxes are required for SECOR®. COR® requires all questions.**

# Worker Safety Representative/Safety Committee Member Interview Questionnaire



*Safety Rep 2*

Reference #	Questions	P	N	Interview Comments
1.5	Where would you find a copy of the safety and health policy?		✓	
1.6	In your own words, what does the safety and health policy say?		✓	
2.4	How are hazards reassessed as the job progresses or changes occur?	✓		
2.6	How are you involved in the hazard assessment process?	✓		
2.7	How have you been trained to identify and control hazards?	✓		
4.5	Have you or the safety and health committee ever been consulted concerning the development or review of safe job procedures?		✓	
5.4	Can you give me an example of a few company and/or site specific rules you need to follow?		✓	
6.3	What type of training did you receive to understand the proper fitting, care, and use of your PPE?	✓		
7.5	What is your company's system to remove defective tools or equipment from service?	✓		
8.13	How often does your company hold scheduled safety meetings?	✓		
9.2	What specific method, form, or checklist is used for workplace inspections?		✓	
9.3	How are identified deficiencies assigned to individuals and corrected as required?	✓		
9.4	What specific method, form, or checklist is used for pre-use inspections?		✓	
9.7	What is your role in the formal or informal inspection process?	✓		
9.8	How are the inspection reports posted and/or communicated to you?	✓		
10.1	What is the process for reporting an incident? What are your responsibilities?	✓		
10.4	After an incident occurs and an investigation takes place, what generally happens with the recommendations that are made?	✓		
10.6	What incidents do you report? Do you report near misses? Please give an example of a near miss?	✓		
13.1	Where are copies of relevant legislation on this site?	✓		
15.2	How are you involved in hazard identification, communication, and control?		✓	



This audit instrument aligns with the CFSCA-endorsed harmonized audit instrument.

Page 2 - Worker Safety Representative/Safety Committee Member Interview Questionnaire

Reference #	Questions	P	N	Interview Comments
15.3	Tell me briefly what your legal duties and responsibilities are.	✓		
15.4	Are you involved in the review of safety concerns and developing or implementing corrective actions? Give an example.		✓	
15.9	Have employees received hearing protection training?	✓		
15.11	What is the procedure for working alone? Is it followed?		✓	

Highlighted boxes are required for SECOR®. COR® requires all questions.

## Sub-Contractor Interview Questionnaire



Contractor 1

Reference #	Questions	P	N	Interview Comments
1.5	Where would you find a copy of the prime contractor's safety and health policy?		✓	
2.1	Describe the process the prime contractor uses to conduct formal hazard assessments?		✓	
4.2	Describe the step-by-step process of a safe job procedure.		✓	
4.3	How do you have access to safe job procedures when on site?		✓	
5.3	How are company safety rules provided or made available to you?		✓	
5.4	Can you give me an example of a few company and/or site specific rules you need to follow?	✓		
6.3	What are the PPE requirements for this site? How were you informed?		✓	
7.5	What is the system to remove defective tools or equipment from service?		✓	
8.8	Did you have a safety orientation for this specific site? If so, when was it?	✓		
10.1	What is the process for reporting an incident? What are your responsibilities?	✓		
11.4	How do you know who is a qualified to administer first aid on this site?		✓	
11.12	How have site specific emergency plans been communicated to you?		✓	
13.1	Where are copies of relevant legislation on this site?	✓		
15.11	What is the procedure for working alone? Is it followed?	✓		
15.13	Give an example of a controlled product used on this site and the procedures required for safe use.		✓	
15.16	Are you required to supply operator training verification to the prime contractor?		✓	

**Highlighted boxes are required for SECOR®. COR® requires all questions.**



This audit instrument aligns with the CFCSA-endorsed harmonized audit instrument.





# CSAM

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