



Certificate of  
Recognition (COR)

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# **Nanaimo Association for Community Living**

**CERTIFICATE OF RECOGNITION AUDIT REPORT**

**Occupational Health and Safety Program**

**Last Day on Site: January 30, 2020**



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### Company Details

Legal Name: Nanaimo Association for Community Living

City: Nanaimo

Trade Name: NACL

Province: British Columbia

Address: Suite 201 - 96 Cavan Street

Postal Code: V9R 2V1

### Contact Details

First Name: Peter

Phone #: (250) 713-8713

Last Name: Letts

Fax #: (250) 741-0227

Email: peter.letts@nanaimoacl.org

### Scope of Audit

Audit Protocol: BCMSA

Certificate of Recognition#:

Audit Purpose: Certification (COR)

C.O.R. Expiry:

Auditor Role: External

Total Employees: 167

Audit Scope: Full

Employees Interviewed: 23

Qualification / Student Audit: No

Operations Audited: All Operations

Organizations Audited: Single Company

Total Facilities: 2

Facilities Audited: 2

#### WorksafeBC Account Information:

Account Number	Classification Unit	Work Description
364107	766017	Residential Social Service Facility
	764103	Day Care Center

First Day on Site: January 27, 2020

Last Day on Site: January 30, 2020

Submission Date: February 3, 2020

Include Certificate of Recognition (COR)? Yes

Include Stay at work / Return to Work? No



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## Auditor Information

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**First Name:** David

**Company:** Jewesson Consulting Ltd.

**Last Name:** Jewesson

**Phone Number:** (604) 910-8806

**Address:** 7 - 6100 Woodward's Road

**Fax Number:** na

**City/Town:** Richmond

**Email:** david.jewesson@gmail.com

**Province:** British Columbia

**Certification Number:** 001

**Postal Code:** V7E 6G5

**Team Audit?:** No

**Audit Team Details:**

**Comments:**



## Justification Information

### Department Summary

Site -Operations	Visited	Managers	Supervisors	Workers	New/Young employee	JHSC member	Emergency
ADMINISTRATIO N -Finance, QA, home share, Deputy Executive, Director, PCP, Employment Services	Yes	11	2	18	1	1	2
PROGRAMS / RESIDENCES -Programs, residences	Yes	4	8	124	3	2	5
<b>Total</b>		<b>15</b>	<b>10</b>	<b>142</b>	<b>4</b>	<b>3</b>	<b>7</b>

Total Employees	167	Total Interviewed	23
		Minimum Required Interviews	20



### Interview Summary

Site	Managers	Supervisors	Workers	New/Young employee	JHSC member	Emergency
ADMINISTRATIO N	3	1	5	1	1	2
PROGRAMS / RESIDENCES	2	3	9	3	2	5
<b>Total:</b>	<b>5</b>	<b>4</b>	<b>14</b>	<b>4</b>	<b>3</b>	<b>7</b>
<b>Total(%):</b>	<b>33</b>	<b>40</b>	<b>10</b>	<b>100</b>	<b>100</b>	<b>100</b>

Does the company run multiple shifts?

Yes

Are all shifts represented in the interview sampling?

Yes

Is interview sampling representative of all departments?

Yes

### Representative Sampling Justification

All shifts are reflected in the interviews selected for this audit.

The number of new workers and emergency responders interviewed meet or exceed the requirement of this audit standard.



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## Executive Summary

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Executive Report: Occupational Health and Safety COR Audit:

### Audit Achievement:

1. Occupational Health and Safety Program - 93% (see audit score sheet), minimum score of 80% required.

The Nanaimo Association for Community Living has achieved the COR audit requirements for Elements 1 - 8 of the COR Audit

### Audit Methodology:

The audit was conducted using the following verification processes:

1. - Document Review - all relevant documents are reviewed to identify standards (objective, task, scope, responsibility, frequency and process) and records (proof of compliance with standards, names, events, places, checklists, etc.).
2. - Observations - are made of general and active work sites, work activities, postings and general housekeeping to see if they are consistent with the findings of the documentation and interview processes.
3. - Interviews - are conducted one-on-one with employees and in a confidential manner.
4. - Recommendations - are provided when an audit score of 100% has not been achieved for each audit standard. Recommendations are intended to assist in achieving a full score (100%) for each audit standard.
5. - Suggestions - are provided where opportunities for improvement may exist throughout the audit regardless of the audit score.

### Strengths found by this Audit (sample only):

1. Documentation control:
  - effective and user friendly online database program (Share Vision).
2. Emergency response procedures:
  - consistent documentation found in all site visited.
3. First aid:
  - all assessments were completed and adequate first aid supplies / attendants on site (1 first aid kit missing).
4. Risk assessments:
  - be conducted at workplaces and work practices in a consistent manner.
5. Orientations:
  - good orientation program and orientation being conducted at the start of work.
6. Inspections:
  - good adherence to the inspection schedule.

### Areas for Improvement found by this Audit (sample only):

1. Meetings:
  - ensure all meetings are held on a regular basis and documented.
2. Preventative Maintenance:
  - ensure the program includes an inventory of equipment, a schedule for preventative maintenance and documentation of completed preventative maintenance.
  - ensure the program is used to manage mobile equipment and equipment (buildings).
3. Contractor Program:



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- suggest a contractor coordination program is developed, documented and implemented to clearly establish the Prime Contractor in multiple employer work areas and clearly establish the responsibilities of the Owner and the Prime Contractor.

### 4. Training:

- ensure all employees receive regular training including training in those activities listed in question 4.4.
- ensure JOHSC members receive annual training in those duties related to the JOHSC members (inspections, investigation, hazard identification, JOHSC due diligence, etc.)

### 5. Investigations:

- ensure each investigation is conducted by an employer representative with investigation training and an employee with investigation training.

### 6. Statistics:

### 7. Goals / Objectives:

- suggest outcomes and means to achieve the outcomes are well communicated to all employees (posted on bulletin boards, front page of share vision, etc.).
- suggest outcomes and means to achieve the outcomes are included in a corrective action log to measure their achievements.



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## Company Profile

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Nanaimo Association for Community Living (NACL) began in 1986. It is CARF accredited.

They currently operate the following programs:

### Residential Program:

NACL operates several residences in the Nanaimo community, providing a wide range of services to a diverse group of individuals. Each residence is home to two to six people. All the homes are tastefully decorated, and each resident has his/her own private living area.

Each NACL resident has a Person Centered Plan, which incorporates a community integration component to ensure they are involved in their community on a regular basis. Family and friends are encouraged to be a part of the residents' lives.

All NACL residents are currently referred to us by Community Living British Columbia.

### Home Sharing Program:

In 2009, NACL launched its exciting Home Share Program, where we match persons served with the right caregiver, in order to promote independence in a family setting.

Anyone interested in potentially becoming a Home Share Provider should pick up an information package from our Administration Office. We'll then interview you so that we can match you with someone who will become part of your family.

The role of a Home Share Provider is to offer care and support for persons served, providing an accepting and inclusive environment. They are responsible for the safety, health, and well-being of the person in care, 24 hours a day. They ensure that the person in care has opportunities for personal and social development within the household, with their families, and in the broader community while focusing on optimizing independence, self-determination, and choice.

### Actions Day Program:

NACL is committed to supporting adults with developmental disabilities in the community. Our goal is to provide equal opportunities to each person with respect for human dignity and cultural diversity. We empower the people we serve to make informed choices and decisions that build on self-determination.

Actions Day Program is a comprehensive, community-based day program. Services are offered on a part-time or full-time basis, and persons served are supported in group or independent settings. Individuals are encouraged to participate in a variety of activities related to their goals, interests, needs, skills, and choices.

### Actions Long Life Learning Program:

ACTIONS Life Long Learning Program (LLL) is a dynamic program that introduces participants to new experiences with food, home independence, other cultures, and their rights and privileges as Canadian citizens. It will also provide career-building skills, all the while reinforcing academic and employment skills/goals. The overall intent is to stimulate personal growth and exploration, to lead participants to greater levels of independence in their daily lives, to promote positive and build on habits of life long learning.

### NACLWorks Program:

NACLWorks! is committed to the person-centered ideas and methods of Supported and Customized Employment. This means allowing the person's interests, talents, and skills to direct the job search, and working with employers to secure positions that meet both the person's abilities and the needs of the business.

Once our job seekers are hired, we are committed to supporting them and the business through exceptional job coaching and good communication.

Their current programs/initiatives/facilities are:

Actions Day Program

Actions Expansion (Life Long Learning) Program



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Caspers Way Home  
Hammond Bay Home  
Hecate Street Home  
Jingle Pot Home and Carriage House  
Kennedy Home  
Maxey Road Home  
Portsmouth Road Home  
Turner Connection Home  
Uplands Drive Housing Project  
Home Sharing Program  
NACLWorks! Employment Services  
Snoezelen Room

Contact information:  
Nanaimo Association for Community Living  
#201 - 96 Cavan Street  
Nanaimo, BC V9R 2V1  
Tel: (250) 741-0224  
Fax: (250) 741-0227  
E-mail: [info@nanaimoacl.com](mailto:info@nanaimoacl.com)  
Web: <http://www.nanaimoacl.com>

ADMIN OFFICE HOURS OF OPERATION: Monday to Friday, 0830-1600



## Element 1. Organizational Commitment [150]

### 1.1 Written Policy [8]

#### Question 1.1

Is there a written health and safety policy that is signed or otherwise endorsed by the current CAO, City Manager, or Mayor? (corporate) (8 points)

#### Guidelines / References

Review Health and Safety Policy. Look for three items: does it exist, is it signed/endorsed, and is it current? Award 100% if all are true, deduct 33% for each aspect missing.

% Achieved

Points Awarded

D	I	O
100%	-	-
8	-	-

Score: 8/8

#### Findings / Notes

##### Documentation Comments:

The organization has a written health and safety policy that is signed by the current Executive Director:

1. Policy - Health and Safety Policy
2. Dated - January 10 2020.
3. Signed by - Executive Director (Graham Morry, Executive Director, Randy Humchitt, Deputy Executive Director)

100%

### 1.2 Responsibilities [8]

#### Question 1.2

Does the policy include health and safety responsibilities for managers, supervisors and workers? (corporate) (8 points)

#### Guidelines / References

Review Health and Safety Policy to see if it addresses the responsibilities of managers, supervisors and workers. Award 100% if all are present, deduct 33% for each level not identified.

% Achieved

Points Awarded

D	I	O
100%	-	-
8	-	-

Score: 8/8

#### Findings / Notes

##### Documentation Comments:

The policy includes responsibilities of:

Health and Safety Policy Statement:

Employee Responsibilities:

1. Managers - list of responsibilities confirmed.
2. Supervisors - list of responsibilities confirmed.
3. Employees (Workers) - list of responsibilities confirmed.

3/3= 100%



## Element 1. Organizational Commitment [150]

### 1.3 Posted [8]

#### Question 1.3

Is the current safety policy posted at the worksites or made available to workers? (all departments) (0-8 points)

#### Guidelines / References

Observe locations where the safety policy is in evidence during observational tour. It should be available at all permanent worksites. You may find the policy on bulletin boards, in the employee handbook, posted on the internal website or in the safety manual.

Percentage is awarded based on the number of locations it is posted versus the number of locations observed where it was not posted (percent of positive findings) .

	D	I	O
% Achieved	-	-	100%
Points Awarded	-	-	8

Score: 8/8

#### Findings / Notes

##### Observation Comments:

Posting of current safety policy:

Share Vision - Internet website is provided on all computers for employees to access all OH&S program policies / procedures, online inspection forms, investigation forms, meeting forms, etc. All employees have computer access.

OH&S Binders - maintained at all work sites, includes policies and procedures for the organization.

Safety Bulletin Boards - include posting of the safety policy (and framed copies on walls).

Access / posting of the safety policy was confirmed for the following departments:

##### 1. Administration:

Head Office - confirmed.

Actions / Employment services - confirmed.

100%

##### 2. Programs / Residences:

Jingle Pot home - confirmed.

Kennedy home - confirmed.

Turner Connection home - confirmed.

100%

### 1.4 Available [8]

#### Question 1.4

Do all staff know where to find a copy of the Safety Policy? (all departments) (0-8 points)

#### Guidelines / References

Interview Managers, Supervisors and Workers to find out if they know where the Safety Policy is located.

	D	I	O
% Achieved	-	100%	-
Points Awarded	-	8	-

Score: 8/8

#### Findings / Notes

##### Interview Comments:

Positive responses from managers included posted on our safety bulletin board, located on share point, in my office, posted in



## Element 1. Organizational Commitment [150]

frames on the walls,

Positive responses from supervisors included posted on our wall, in my OH&S binder, office wall,

Positive responses from workers included posted by our front door, posted on our wall, in our safety policy book, found on share vision,

### 1.5 Content [14]

#### Question 1.5

#### Guidelines / References

Can workers describe their health and safety responsibilities? (all departments) (0-14 points)

Interview workers to determine their understanding of their safety responsibilities. Workers should be able to describe their responsibilities as noted in the organization's safety policy.

	D	I	O
% Achieved	-	100%	-
Points Awarded	-	14	-

Score: 14 / 14

#### Findings / Notes

##### Interview Comments:

Positive responses from workers included conduct site inspections, follow safety procedures, conduct drills, attend committee meetings, good communications, do my work in a safe manner, assess hazards in the room, carefully give medications, look for unsafe work practises, where my PPE, wash my hands, keep good housekeeping, report hazards to my SRW, follow universal precautions, keep the workplace hazard free, isolate the hazard, read the communication log for new information, hand washing, erect signage, wear my PPE, ensure our doors are locked, wash my hands, wipe down, follow safety driving rules, use the lifts instead of lifting by myself, assess my safety in our parking lot, maintain good housekeeping, conduct vehicle pre-trip inspections, keep aware, conduct inspections and have hazards corrected, keep a sharps container on site, use my SIVA training when around aggressive persons, wear my PPE, maintain proper body posture, eliminate hazards, employee safety zones when needed,

### 1.6 Supervisors [16]

#### Question 1.6

#### Guidelines / References

Can supervisors describe their health and safety responsibilities? (all departments) (0-16 points)

Interview supervisors to determine their understanding of their safety responsibilities. Supervisors should be able to describe their responsibilities as noted in the organization's safety policy.

	D	I	O
% Achieved	-	100%	-
Points Awarded	-	16	-

Score: 16 / 16

#### Findings / Notes

##### Interview Comments:

Positive responses from supervisors included weary my PPE, be aware of risk assessments, be aware of my surroundings, communicate hazards to my manager, follow universal precautions, report hazards to my manager, lock doors, keep chemicals locked away, wear my PPE, lock away sharp tools,



## Element 1. Organizational Commitment [150]

### 1.7 Managers [19]

#### Question 1.7

Can managers describe their health and safety responsibilities? (all departments) (0-19 points)

#### Guidelines / References

Interview managers to determine their understanding of their safety responsibilities. Managers should be able to describe their responsibilities as noted in the organization's safety policy.

% Achieved

Points Awarded

D	I	O
-	100%	-
-	19	-

Score: 19/19

#### Findings / Notes

##### Interview Comments:

Positive responses from managers included ensuring staff are aware of the safety program, ensure we are complying with regulations, be aware of your surroundings, ensure risk assessments are being done, attend staff meetings, wear gloves and masks when needed, maintain good housekeeping, participate in fire drills, remove sharps from office, report hazards, record hazards in share vision, follow safe driving,

### 1.8 Leading [16]

#### Question 1.8

Are managers and supervisors leading by example (wearing of Personal Protective Equipment, seatbelts, etc.)? (all departments) (0-16 points)

#### Guidelines / References

During observational tour, observe managers and supervisors to see if they are following safety rules and regulations. Points are awarded based on the percent of positive findings.

% Achieved

Points Awarded

D	I	O
-	100%	90%
-	8	7

Score: 15/16

Interview workers to see if they believe supervisors lead by example.

#### Findings / Notes

##### Observation Comments:

Managers and supervisors were found to be leading by example as per the following observations:

##### 1. Administration:

1. Not smoking in no smoking areas - confirmed.
2. Conducting tour with auditor, showing office layout and exit doors - confirmed.
3. Onsite orientation provided to auditor at head office (including sign in / sign out requirement) - confirmed.
4. Appropriate clothing and footwear was worn (no open toed shoes) - confirmed.

4/4= 100%

##### 2. Programs / Residences:

1. Not smoking in no smoking areas - confirmed.
2. Conducting tour with auditor, following safe driving rules - confirmed.
3. Onsite orientation provided to auditor - not confirmed.



## Element 1. Organizational Commitment [150]

- 4. Appropriate clothing and footwear was worn (no open toed shoes) - confirmed.
- 5. Greeting and treating clients with respect and care.

4/5= 80%

### Interview Comments:

Positive responses from workers included yes, open door communications, action are being completed in a timely manner, attend JOHSC meetings, all paper work is on share point, ensuring our workplace is safe, always communicating safety, always keeping us informed, wearing their PPE, washing their hands, ensuring proper hygiene in the workplace, they are wonderful, stressed safety during my orientation, correcting me if I am not following procedures properly, following lifting procedures, preparing food properly, operating a vehicle properly, identifying dangers, ensuring we have a safe workplace (salting icy sidewalks), they help to keep me in line (politically correct), conducting inspections, ensure chemicals are locked up, corrected me when I was not following safety rules, maintaining a respectful workplace, always fixing things that are broken,

### Suggestions For Improvement

Recommend managers and supervisors are leading by example. Ensuring supervisors are conducting and documenting contractor orientations would assist in achieving this recommendation.

## 1.9 Regulations [22]

### Question 1.9

Are applicable health and safety regulations and other relevant resources available to supervisors and workers? (all departments) (0-22 points)

### Guidelines / References

Observe the worksite to determine if WorksafeBC OH&S Regulation and other relevant resources are available, in paper, CD or electronic format, etc. Points are awarded based on the percentage of positive findings in each department.

Interview supervisors and workers to see if they believe they have access to appropriate safety resources.

	D	I	O
<b>% Achieved</b>	-	83%	100%
<b>Points Awarded</b>	-	12	8

**Score:** 20 / 22

### Findings / Notes

#### Observation Comments:

Availability of applicable health and safety regulations:

Share Vision - Internet website is provided on all computers for employees to access all OH&S program policies / procedures, online inspection forms, investigation forms, meeting forms, etc. All employees have computer access.

OH&S Binders - maintained at all work sites, includes policies and procedures for the organization.

Safety Bulletin Boards - include posting of WSBC website link (some locations).

Access / posting of applicable health and safety regulations was confirmed for the following departments:

- Administration:  
Head Office - confirmed.  
Actions / Employment services - confirmed.

100%

- Programs / Residences:  
Jingle Pot home - confirmed.



## Element 1. Organizational Commitment [150]

Kennedy home - confirmed.  
Turner Connection home - confirmed.

100%

### Interview Comments:

Positive responses from supervisors included WSBC website, on our share vision,  
Positive responses from workers included I go online, their website, link on share vision,  
Negatives responses indicated a lack of awareness of where to find WSBC regulations.

### Suggestions For Improvement

Recommend applicable health and safety regulations and other relevant resources are available to supervisors and workers. Ensuring supervisors and workers are made aware of the availability of WorkSafeBC regulations, BC fire code, Food safe requirements, etc. on the intranet and links provided in Share Vision, would assist in achieving this recommendation.

Suggest the location of health and safety regulations in included in orientations for new workers..

### 1.10 Review [12]

#### Question 1.10

#### Guidelines / References

Do managers of the organization discuss health and safety issues with workers at least once each quarter? (all departments) (0-12 points)

Interview managers to determine if they discuss health and safety issues with workers.

Interview workers to determine if managers have discussed health and safety issues within the past 3 months. This may occur through staff meetings, crew meetings, memos, etc.

	D	I	O
% Achieved	-	100%	-
Points Awarded	-	12	-

Score: 12 / 12

### Findings / Notes

#### Interview Comments:

Positive responses from managers included I meet with staff every month or two, make entries into the communication log book, we have 4 hour staff meetings, meeting every week, at least quarterly,

Positive responses from workers included yes at our home at every meeting, always, always, at every meeting,

### 1.11 Sharing [11]

#### Question 1.11

#### Guidelines / References

Do supervisors regularly share health and safety information relevant to their operation with their workers? (all departments) (0-11 points)

Sharing of information could be daily, in the office, on the jobsite, or in safety meetings. Interview supervisors and workers to determine if supervisors share health and safety information.

	D	I	O
% Achieved	-	100%	-
Points Awarded	-	11	-

Score: 11 / 11

### Findings / Notes



## Element 1. Organizational Commitment [150]

### Interview Comments:

Positive responses from supervisors included yes every second month or as needed, about every 2 months, they are 4 hours long, every 6 weeks, once a week and they are documented,

Positive responses from workers included every couple of months, handover meetings, we have a communication log book on site, home page on share vision, monthly staff meetings, big meetings every 3 month, once a month, once a week,

### 1.12 Management Involvement [8]

#### Question 1.12

#### Guidelines / References

Is safety a standing agenda item on management meeting agendas? (Corporate) (0-8 points)

Review agenda from Senior Management Team meeting to determine if safety is a standing agenda item, with at least the following information reviewed: safety statistics and any incidents. If "safety" is noted as an agenda item, award 34%. Award an additional 33% for reference to safety statistics and an additional 33% for review of any incidents.

Interview managers and supervisors to see if they have attended meetings in the past year where safety was a standing agenda item.

	D	I	O
% Achieved	50%	100%	-
Points Awarded	2	5	-

Score: 7/8

#### Findings / Notes

##### Documentation Comments:

Senior Managers in the organization have attended meetings where safety was a standing agenda item as evidenced by:

Senior Management Team Meetings:  
- held every week.

January 9, 2020

1. Health and Safety - section 6, agenda item confirmed.
  2. Safety Statistics reviewed - claim costs, medical attention, included in incident review, confirmed.
  3. Incidents reviewed - 99 incidents reviewed from 2019, confirmed.
- 3/3

October 30, 2020:

1. Health and Safety - agenda item not confirmed.
  2. Safety Statistics reviewed - not confirmed.
  3. Incidents reviewed - not confirmed.
- 0/3

3/6= 50%

##### Interview Comments:

Positive responses from managers included yes at our management team meetings, yes, quarterly meetings, yes every week and safety is on the agenda, every 6 weeks and safety is always on the agenda,

Positive responses from supervisors included yes safety is on the agenda of our management meeting, every month, always have safety as an agenda item,



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## Element 1. Organizational Commitment [150]

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### Suggestions For Improvement

Recommend senior manager meetings have safety as a standing agenda item. Ensuring senior management meetings are preceded with a standard agenda that includes SAFETY as one of the standing agenda items will assist in achieving this suggestion. Ensuring a review of safety statistics and any incidents are included in the meeting minutes would assist in achieving this recommendation. Ensuring at least 2 or more meetings meets this audit standard would assist in achieving this recommendation.

### Element: 1. Organizational Commitment [150]

### Scoring Summary

Total Points Awarded:	146
Total Points Available:	150
Overall % Awarded:	97 %



## Element 2. Program and Procedures [140]

### 2.1 Documented [5]

#### Question 2.1

#### Guidelines / References

Is there a documented health and safety management system? (corporate) (0-5 points)

Look for a document describing all elements of the organization's Health and Safety management system. At a minimum, it should include statements about safety responsibilities, written procedures, training and instruction of workers, hazard identification and control, workplace inspections, investigation of incidents and accidents, responsibilities of the Joint Health and Safety Committee, and program administration. Points are awarded based on the percentage of elements included in the document.

% Achieved

Points Awarded

D	I	O
88%	-	-
4	-	-

Score: 4/5

#### Findings / Notes

##### Documentation Comments:

Documented health and safety program:

Health and Safety Policy and Procedure Manual, January 2020:

The program includes:

##### 1. Safety responsibilities:

- section HS001-P, Roles and responsibilities, managers, executive directors, deputy executive directors, supervisors, employees, etc.
- section HS054-P, Roles and responsibilities in emergency situations.

##### 2. Safe work procedures:

- included in Manual, section HS003-P, 26 procedures listed.
- includes safety plans, support planning, restricted and prohibited practices, dangerous person, hand washing, vehicle use, etc.

##### 3. Training requirements:

- Section HS005-P, health and safety training,
- Policy and procedure manual, January 2020, Employee orientation.

##### 4. Hazard identification / control:

- Health and Safety manual power point, hazard identification and control.
- H&S manual, section HS003-P, risk management, hazard identification and control, 3 pages.
- H&S site inspection checklist, includes, issue, hazard rating, action required, target date, completion date,

##### 5. Workplace inspections:

- section HS015, internal site inspections.
- section HS016, external site inspections.

##### 6. Incident investigations:

- section HS042-P, Incidents, incident reporting and incident investigations:
- section HS043-P, Staff incident reporting.
- section HS44-P, Staff incident investigations.

##### 7. JOHSC responsibilities:

- section HS002-P, Occupational Health Safety committee, 2 pages.
- NACL JOHSC, rules of procedure, October 2017.

##### 8. Program administration:

- documentation not confirmed.

7/8= 80%



## Element 2. Program and Procedures [140]

### Suggestions For Improvement

Recommend there is a documented health and safety management system. Ensuring program administration requirements such as who is organizing / coordinating the safety program, document retention time lines, document review time lines (safe work procedures), standard formatting requirements, document dating requirements, etc. would assist in achieving this recommendation.

### 2.2 Non-Conformance [7]

Question 2.2	Guidelines / References		D	I	O
Is there a process to address safety violations? (all departments) (0-7 points)	Interview managers, supervisors and workers to determine if they are aware of the procedure for dealing with safety violations.	% Achieved	-	57%	-
		Points Awarded	-	4	-

Score: 4/7

### Findings / Notes

Interview Comments:

Positive responses from managers included we have a corrective action policy that includes verbal, one on one conversation, written warning, letter of expectation, senior manager involved, shop steward is involved, coaching, training, re-training, last chance agreement, suspension and termination,

Positive responses from supervisors included verbal discussion, a talking too, formal meeting, written warning, record on their file, have a meeting, we get the union involved, additional training, change jobs, suspension, termination, 3 step process, depends on the severity of the infraction,

Positive responses from workers included our corrective action policy, verbal warning, discussion, program manger is involved, possible suspension, fired, depends on the severity of the incident,

Negative responses indicated a lack or awareness of a process to address safety violations.

### Suggestions For Improvement

Recommend there is a process to address safety violations. Ensuring the corrective action process or program is communicated to all employees at orientations, share vision, employee training, etc. will assist in achieving this recommendation.

### 2.3 Enforcement [14]

Question 2.3	Guidelines / References		D	I	O
Are safety rules and regulations enforced? (Documentation: corporate, Interviews: all departments) (0-14 points)	Review documentation which indicates safety rules and regulations are enforced where violations occur. The Policy may be found in the Corporate Discipline Policy or Labour Relations process which addresses more than safety violations. Compare policy to actual enforcement records. If there is proof that safety rules and regulations are enforced, award 100%. If they are not enforced, award 0%. If the organization identifies no safety violations have occurred, and this is supported by interview results, mark as n/a.	% Achieved	100%	100%	-
		Points Awarded	7	7	-

Score: 14/14

Interview managers, supervisors and workers to determine if safety rules and regulations are enforced.

### Findings / Notes



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## Element 2. Program and Procedures [140]

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Documentation Comments:

-----  
Safety rules and regulations enforcement:

1. Policy:

- section P037-P, Corrective Action, includes verbal warning, written warning, suspension, dismissal.
- section HS-014-P, Safety violations.

2. While confidentiality of disciplinary files was maintained for the organization, active files were noted for:

- Suspension without pay letter, August 29, 2019, potential violence in the workplace.
- Suspension without pay letter, September 27, 2019, failure to follow code of ethics.

2/2= 100%

Interview Comments:

-----  
Positive responses from managers included yes they are, I am involved in their enforcement,

Positive responses from supervisors included always, I am enforcing the safety procedures,

Positive responses from workers included yes all the time, usually doesn't get past a verbal warning,



## Element 2. Program and Procedures [140]

### 2.4 Safe Work Procedures [20]

**Question 2.4**

**Guidelines / References**

Are safe work procedures written for identified hazards? (Corporate) (0-20 points)

The organization should be able to produce written documentation for the following (this is not an exhaustive list):

1. Confined Space Entry
2. Excavation
3. Lockout and tagout
4. Working in proximity to overhead power lines
5. WHMIS / WHMIS 2015
6. Asbestos management
7. Musculoskeletal Injury Prevention/Ergonomics
8. Toxic Process Gases (ammonia, chlorine, ozone)
9. Biohazard protection
10. Fall protection
11. Working Alone or in Isolation
12. Violence in the Workplace
13. Vehicle & Mobile Equipment use (including roll over) \*
14. Respiratory Protection
15. Weather Temperature Protection
16. Hearing Conservation
17. Respectful Workplace/Bullying

Determine which of these hazards are present in the organization, by department. Auditors should look for a document that includes a policy or program intent statement, assignment of responsibilities, and safety instruction. Items with an asterisk will require a policy directive or other written instructions. In some instances, the auditor may determine an item is not required. Points are awarded based on the percent of positive findings in each department, compared to the written documentation that should exist in that department.

	D	I	O
<b>% Achieved</b>	100%	-	-
<b>Points Awarded</b>	20	-	-

**Score:** 20 / 20

**Findings / Notes**

Documentation Comments:

Written safe work procedures for identified hazards:

H&S Manual, January 2020:

1. Confined Space Entry:

- na.

2. Excavation:

- na.

3. Lockout and tag out:

- na.

4. Working in proximity to overhead power lines:

- na.

5. WHMIS:

- section HS032-P, WHMIS, 2 pages.

- includes purpose (intent), procedures and assignment of responsibilities (all employees) and classification of products.

- H&S WHMIS power point, 23 slides.

6. Asbestos management:

- section HS033-P, Asbestos, 1 page, includes purpose, procedures, responsibilities (???)

- Asbestos inventory, Multiple sites with Asbestos containing materials inventory report, December 2017.



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## Element 2. Program and Procedures [140]

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7. MSI:

- HS-031-P, Ergonomics and MSI prevention, 2 pages, include purpose procedures, administrative controls, PPE,
- HS-034-P, Lifts and transfers, 2 pages, includes purpose, procedures,

8. Toxic Process Gases (ammonia, chlorine, ozone):

- na.

9. Biohazard protection:

- section HS-027-P, Universal precautions, 2 pages, includes purpose, procedures,
- section HS-028-P, Communicable diseases, 2 pages, includes purpose, procedures,
- section HS-029-P, Pandemic event, 2 pages, includes purpose, procedures,
- section HS-035-P, Disinfection of equipment, 1 page, includes purpose, procedures,

10. Fall Protection:

- na.

11. Working Alone or in Isolation:

- section HS-019-P, Working alone in the community, 3 pages, includes purpose, procedures,
- section HS-020-P, Working alone shift check in, 1 page, includes purpose, procedures,

12. Violence in the Workplace:

- section HS003-P, Preventing violence in the workplace, Risk Management, Violence in the workplace, 2 pages, includes purpose, procedures,

13. Vehicle & Mobile Equipment use:

- section HS-036-P, Use and maintenance of vehicles, 1 page, includes purpose, procedures,
- section HS-037-P, Vehicle pre-trip inspections and maintenance, 2 pages, includes purpose, procedures,
- section HS-038-P, Private vehicles for service delivery, 1 page, includes purpose, procedures,
- section HS-039-P, Reporting motor vehicle accidents, 2 page, includes purpose, procedures,

14. Respiratory Protection:

- na.

15. Weather Temperature Protection:

- na.

16. Hearing Conservation:

- na.

17. Respectful Workplace / Bullying:

- P-016-P, Respectful workplace, reporting of abuse, bullying and harassment, 7 pages, includes purpose, background, definitions, types of disrespectful conduct, sexual harassment, personal harassment, etc.

8/8= 100%



## Element 2. Program and Procedures [140]

### 2.5 Availability [14]

#### Question 2.5

#### Guidelines / References

Are written safe work procedures readily available to workers? (all departments) (0-14 points)

Look for Safe Work Procedures during observational tours. They may be at individual worksites in paper format, in staff rooms, offices, posted on bulletin boards, or on an internal websites. If written procedures are found and available to workers, award 100%. If not, award 0%.

Interview workers to determine if they are aware of the existence and location of written safe work procedures.

**% Achieved**  
**Points Awarded**

D	I	O
-	100%	100%
-	7	7

**Score:** 14 / 14

#### Findings / Notes

##### Observation Comments:

Posting of safe work procedures:

Share Vision - Internet website is provided on all computers for employees to access all OH&S program policies / procedures, online inspection forms, investigation forms, meeting forms, etc. All employees have computer access.

OH&S Binders - maintained at all work sites, includes policies and procedures for the organization.

Access / posting of safe work procedures was confirmed for the following departments:

##### 1. Administration:

Head Office - confirmed.

Actions / Employment services - confirmed.

100%

##### 2. Programs / Residences:

Jingle Pot home - confirmed.

Kennedy home - confirmed.

Turner Connection home - confirmed.

100%

##### Interview Comments:

Positive responses from workers included included in our red binder, our health and safety binder, in our office binder, on share vision, we have hard copies in our office, we have binders on site, personal binders,



## Element 2. Program and Procedures [140]

### 2.6 Compliance [7]

#### Question 2.6

#### Guidelines / References

Are workers following written safe work procedures? (all departments) (0-7 points)

Observe workers performing their work. Compare the procedures they are following to programs and procedures outlined in 2.4 The intent is that workers can demonstrate knowledge and safe procedures, or describe the process if they are not actively involved in the work.

If they are demonstrating safe procedures, award 100%. If not, award 0%.

	D	I	O
% Achieved	-	-	100%
Points Awarded	-	-	7

Score: 7/7

#### Findings / Notes

##### Observation Comments:

Observations of workers following written safe work procedures:

##### 1. Administration; Respectful Workplace

- employees were observed to be following office protocols and working in a manner that was respectful of their fellow workers. Observed actions included wearing appropriate attire, adequate housekeeping, positive and supportive interpersonal interactions and overall positive attitudes.

100%

##### 2. Programs / Residences: MSI

- a lift of a person-served from a bed to a wheelchair using a hammock sling and a ceiling lift was observed by this auditor, January 28, 2020.

The following was observed by this auditor:

- 1.Ensure lift is in working order - confirmed.
2. Adjust bed to waist level - confirmed.
3. Explain the procedure to the person served (PS) - confirmed.
4. Gently roll the PS onto their side - confirmed.
5. Place the hammock sling under the PS - confirmed.
6. Roll the PS back onto the hammock - confirmed.
7. Attached the hammock to the ceiling lift - confirmed.
8. Ensure the neck of the PS is made comfortable - confirmed.
8. Set the brakes for the wheelchair - confirmed.
9. Activate the lift, move the PS to over the wheelchair and lower onto the wheelchair - confirmed.
10. Hold feet of the PS during the lift - confirmed.
11. Unhook the hammock sling from the ceiling lift - confirmed.
- 12 Unlock wheelchair brakes - confirmed.

12/12= 100%



## Element 2. Program and Procedures [140]

### 2.7 Cooperation [7]

#### Question 2.7

Have supervisors and JOHSC members had the opportunity to consult in the development or review of these procedures? (Documentation: corporate; Interviews: all departments) (0-7 points)

#### Guidelines / References

Review safety meeting minutes or safe work procedures. If there is documented proof that consultation has occurred, award 100%. If no, award 0%.

Interview all supervisors, and all workers and managers who are part of the OH&S Committee.

	D	I	O
% Achieved	100%	100%	-
Points Awarded	1	6	-

Score: 7/7

#### Findings / Notes

##### Documentation Comments:

Evidence supervisors and JOHSC members had the opportunity to consult in the development and review of safe work procedures (SWP):

1. Section HS002-P Health and Safety Committee - requires the review of emergency response plans.

2. JOHSC meeting minutes:

March 28, 2019:

- safe work procedure review - safety manual and procedures update.
- hazard reviews - emergency response procedures reviewed.

January 23, 2020:

- safe work procedure review - mobile equipment review and update.
- hazard reviews - mobile equipment hazard reviewed.

3. Safety bulletin boards:

- hazards are posted for employees to read.

4. JOHSC meeting minutes:

- hazards and SWP reviews are posted for employees to read.

4/4= 100%

##### Interview Comments:

Positive responses from managers included yes every month, documented in their minutes,

Positive responses from supervisors included yes in our communication log, on our learning log on share vision, I would bring it up with my OH&S representative, yes they would listen to me, at our managers meetings, by email,

Positive responses from workers included we review SWP's at our JOHSC on a regular basis,



## Element 2. Program and Procedures [140]

### 2.8 WHMIS Responsibility [3]

**Question 2.8**

Is there evidence that a WHMIS/WHMIS 2015 program is in place? (all departments) (3 points)

**Guidelines / References**

Interview Safety Committee members to determine if they are aware of the existence of a WHMIS (WHMIS 2015) program.

This is an all or nothing question, less than 100% positive responses will result in no score.

	D	I	O
<b>% Achieved</b>	-	100%	-
<b>Points Awarded</b>	-	3	-

**Score:** 3/3

**Findings / Notes**

**Interview Comments:**

Positive responses from managers included WHMIS 2015.

Positive responses from supervisors included

Positive responses from workers included WHMIS 2015,

### 2.9 WHMIS Program [6]

**Question 2.9**

Is there evidence that a WHMIS/WHMIS 2015 program is in place? (all departments) (6 points)

**Guidelines / References**

During observational tours, look for Supplier and Workplace Labels and other means of identification, and Material Safety Data sheets, for controlled products. If all elements of a WHMIS program is evident, award 100%. If not, award 0%.

	D	I	O
<b>% Achieved</b>	-	-	50%
<b>Points Awarded</b>	-	-	0

**Score:** 0/6

**Findings / Notes**

**Observation Comments:**

Evidence of a WHIMS program:

Share Vision - Internet website is provided on all computers for employees to access all OH&S program policies / procedures, online inspection forms, investigation forms, meeting forms, etc. All employees have computer access.

OH&S Binders - maintained at all work sites, includes policies and procedures for the organization. SDS are posted by all cleaning cabinets (contain cleaning chemicals) for access by cleaning staff.

Evidence of a WHMIS program, SDS and proper labelling was confirmed for the following departments:

1. Administration:

Head Office - 4 unlabelled containers found, not confirmed.  
 Actions / Employment services - confirmed.

0%

2. Programs / Residences:

Jingle Pot home - confirmed.  
 Kennedy home - confirmed.  
 Turner Connection home - confirmed.



## Element 2. Program and Procedures [140]

100%

### Suggestions For Improvement

Recommend there is evidence of a WHMIS 2015 program in place. Ensuring all bottles containing chemicals are properly labeled will assist in achieving this recommendation.

### 2.10 Site Specific ERP [6]

#### Question 2.10

Have site-specific emergency response procedures - that address health and safety emergencies for staff - been developed? (all departments) (0-6 points)

#### Guidelines / References

Procedures need to be site-specific and address: possible emergencies; individual responsibilities; evacuation and rescue procedures; emergency contacts; communication; and transportation of an injured worker. Potential emergencies include: Fire, earthquake, highway accident emergency (if nearby), chemical release or spill, bomb threat, robbery.

Points are awarded based on the percentage of procedures developed when compared to the number that should be in place. If procedures are developed but do not include all the above information, award 0.

	D	I	O
<b>% Achieved</b>	100%	-	-
<b>Points Awarded</b>	6	-	-

**Score:** 6/6

### Findings / Notes

#### Documentation Comments:

Site-specific emergency response procedures:

H&S Manual, January, 2020:  
- sections HS051 - 060P.

Emergency Response Binder (Red Binder)  
- contains standard emergency response procedures used by all facilities including:

#### 1. POSSIBLE EMERGENCIES:

- Bomb Threat
- Dangerous person
- Earthquakes
- Fire
- Flood
- Gas Leak
- Hazardous Material
- Power failure
- Severe storm
- Snow storm
- Tsunami
- Confirmed.

#### 2. INDIVIDUAL RESPONSIBILITIES:

- roles and responsibilities in emergency situations:
- PC1 / SRW when on shift at each home.
- executive assistant / administrative assistant at head office.

#### 3. EVACUATION PROCEDURES:

- evacuation procedures, 4 pages,



## Element 2. Program and Procedures [140]

### 4. EMERGENCY CONTACTS:

- emergency contacts, confirmed.

### 5. COMMUNICATION:

- includes in each emergency for employees to follow, confirmed.

### 6. TRANSPORTATION OF AN INJURED WORKER:

- Medical emergency, procedures, includes process for transporting someone to a hospital  
6/6

#### Departments:

##### 1. Administration:

- Head Office - confirmed.  
100%

##### 2. Programs / Residences:

- Jingle Pot Home - confirmed.  
- Kennedy Home - confirmed.  
- Turner Connection Home - confirmed.  
100%

## 2.11 Posting of ERP [13]

### Question 2.11

Have emergency procedures been posted in appropriate locations throughout the workplace? (all departments) (0-13 points)

### Guidelines / References

During observational tours, look for emergency procedures in appropriate locations (evacuation procedures in hallways, chlorine release emergency procedures outside chlorine room, etc.)

Award points based on the number of procedures posted compared to the number required.

% Achieved

Points Awarded

D	I	O
-	-	100%
-	-	13

Score: 13 / 13

### Findings / Notes

#### Observation Comments:

#### Posted emergency procedures:

Access / posting of emergency procedures (map of facility, exit locations, meeting areas, etc.) in hallways and by exit doors was confirmed for the following departments:

##### 1. Administration:

Head Office - confirmed.  
Actions / Employment services - confirmed.

100%

##### 2. Programs / Residences:

Jingle Pot home - confirmed.  
Kennedy home - confirmed.  
Turner Connection home - confirmed.

100%



## Element 2. Program and Procedures [140]

### 2.12 ERP Lead [3]

#### Question 2.12

Have responsibilities been assigned to staff in the event of a health and safety emergency? (all departments) (3 points)

#### Guidelines / References

Examples of these roles are first aid attendants, floor wardens for evacuation, or those responsible to contact external resources.

If staff have been assigned responsibilities, award 100%. If not, award 0%.

	D	I	O
% Achieved	75%	-	-
Points Awarded	0	-	-

**Score:** 0/3

#### Findings / Notes

##### Documentation Comments:

Assignment of responsibilities in the event of a health and safety emergency for all departments:

- section HS054-P, roles and responsibilities in emergency situations.

##### Emergency Response Binder (Red Binder)

- contains standard emergency response procedures used by all facilities including emergency contact numbers, assigns responsibilities for building emergencies and other emergencies, identified by employee job positions, confirmed.

##### INDIVIDUAL RESPONSIBILITIES:

- roles and responsibilities in emergency situations:
- Emergency Response Team (posted)
- includes list of names of those individuals with assigned roles in the event of an emergency.

##### Departments:

###### 1. Administration:

- Head Office - confirmed.
- Actions / Employment Services - not confirmed.

1/2= 50%

###### 2. Programs / Residences:

- Jingle Pot Home - confirmed.
- Kennedy Home - confirmed.
- Turner Connection Home - confirmed.

100%

#### Suggestions For Improvement

Recommend responsibilities have been assigned to staff in the event of a health and safety emergency. Ensuring lead roles are assigned and documented (posted) to specific staff during an emergency would assist in achieving this recommendation.

Suggest names and contact information is updated to establish currency.

## Element 2. Program and Procedures [140]

### 2.13 ERP Lead Training [4]

**Question 2.13**

Has training been given to employees who have a lead role in an emergency? (all departments) (0-4 points)

**Guidelines / References**

Interview staff with assigned emergency responsibilities to determine if they have been trained.

	D	I	O
<b>% Achieved</b>	-	29%	-
<b>Points Awarded</b>	-	1	-

**Score:** 1 / 4

**Findings / Notes**

Interview Comments:

Positive responses from managers included we have competency training on share vision involving using a fire extinguisher, fire extinguisher training with the fire department,

Positive responses from supervisors included share vision competency training regarding emergency awareness,

Positive responses from workers included

Negative responses indicated a lack of emergency response training.

**Suggestions For Improvement**

Recommend training is given to employees who have a lead role in an emergency. Ensuring persons with a lead role in an emergency receive emergency response training (other than conducting drills) would assist in achieving this recommendation.

### 2.14 Corrective Action [6]

**Question 2.14**

Have the emergency response plans/evacuation procedures been tested for deficiencies and corrective action taken? (all departments) (0-6 points)

**Guidelines / References**

Review records of an evacuation drill or other tests of emergency procedures, one per department. Ensure that any deficiencies have been noted and corrective action taken. Drills must be held at all permanent sites at least every 12 months, and records kept. If there is documentation of an actual emergency at a site in which the emergency response procedures were used, a drill is not necessary at that particular site.

	D	I	O
<b>% Achieved</b>	100%	-	-
<b>Points Awarded</b>	6	-	-

**Score:** 6 / 6

Points are awarded based on the percentage of positive findings.

**Findings / Notes**

Documentation Comments:

Testing of emergency response plans in the last 12 months:

Note, emergency drills are tested on a monthly basis and test fire, violence, evacuation, flood, earthquake and other emergencies throughout the year.

1. Administration:

Head Office

- December 17, 2019, fire / evacuation drill.

- obstructions in back stairwell, need to remove.

- action completed as observed by auditor.

2/2= 100%



## Element 2. Program and Procedures [140]

### 2. Programs / Residences:

#### Jingle Pot Home:

- November 29, 2019, fire drill.
  - no deficiencies identified.
- 2/2

#### Kennedy Home:

- February 28, 2019, fire drill,
  - no deficiencies identified.
- 2/2

#### Turner Connection Home:

- October 2, 2019, fire drill,
  - no deficiencies identified.
- 2/2

6/6= 100%

### 2.15 First Aid Program [6]

#### Question 2.15

Is there a written first aid program? (corporate) (6 points)

#### Guidelines / References

There should be documentation which directs first aid services, supplies and equipment to be provided, and procedures for rendering and reporting first aid.

If there is a written program containing all of these items, 100% is awarded. Deduct 25% for each aspect not included.

	D	I	O
% Achieved	100%	-	-
Points Awarded	6	-	-

**Score:** 6/6

#### Findings / Notes

##### Documentation Comments:

Written first aid program (corporate):

##### 1. Directs first aid services:

- HS054-P, Roles and responsibilities in emergency situations.
- includes purpose, procedures, directing general first aid services.

##### 2. Supplies and equipment:

- HA025-P, First Aid assessments, requirement to conduct a WSBC first aid assessment form to ensure proper supplies and equipment are maintained at each site.

##### 3. Procedures for rendering first aid:

- HS043-P, Staff incident reporting, includes "steps for employee to take if incident occurs and medial treatment is required".
- Medical emergency (emergencies), procedures for rendering first aid and calling 911.

##### 4. Procedures for reporting first aid:

- HS043-P, Staff incident reporting, includes "steps for employee to take if incident occurs and medial treatment is required", reporting procedures.

4/4= 100%



## Element 2. Program and Procedures [140]

### 2.16 First Aid Assessment [7]

#### Question 2.16

Has a first aid assessment been completed for each workplace? (all departments) (7 points)

#### Guidelines / References

A first aid assessment must be completed or reviewed at least annually, for each permanent worksite, including fire halls, and specific work processes (i.e., utilities construction sites). Note: the auditor is not to determine if the assessment reaches the appropriate conclusion, just that it has been completed.

If the organization has completed or reviewed first aid assessments for each permanent worksite and any specific work processes within the last 12 months, award 100%. If not, award 0%.

	D	I	O
% Achieved	100%	-	-
Points Awarded	7	-	-

Score: 7/7

#### Findings / Notes

##### Documentation Comments:

First aid assessments were confirmed for the following departments:

##### 1. Administration:

###### Head Office:

- December 18, 2019
- low hazard, <20 minutes, 21 employees
- OFA level 1, level 1 first aid kit.

1/1

###### Actions day program:

- December 18, 2019.
- low hazard, <20 minutes, 15 employees
- OFA level 1, level 1 first aid kit.

1/1

2/2= 100%

##### 2. Programs / Residences:

###### Jingle Pot Home:

- December 18, 2019.
- low hazard, <20 minutes, 4 employees
- basic first aid kit.

1/1

###### Kennedy Home:

- December 18, 2019.
- low hazard, <20 minutes, 4 employees
- basic first aid kit.

1/1

###### Turner Connection Home:

- December 18, 2019.
- low hazard, <20 minutes, 4 employees
- basic first aid kit.

1/1



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3/3= 100%

### 2.17 First Aid Resources [8]

#### Question 2.17

Are there adequate first aid attendants, supplies and facilities? (all departments) (0-8 points)

#### Guidelines / References

Determine through a review of the first aid assessment if the organization has the correct number and level of first aid attendants at various worksites. If first aid attendant requirements are met, award 100% for that department. If not, award 0%.

During the observational tour, examine the first aid supplies and facilities and ensure that they meet the standard required, based on the assessment. A percentage of points is awarded based on the number of sites with adequate supplies and facilities.

	D	I	O
<b>% Achieved</b>	100%	-	75%
<b>Points Awarded</b>	4	-	3

**Score:** 7/8

#### Findings / Notes

##### Observation Comments:

Adequate first aid attendants, supplies were observed for the following departments:

Note: All first aid certificates are Emergency First Aid Certificates (equivalent to OFA level 1).

##### 1. Administration:

###### Head Office:

- December 18, 2019
  - low hazard, <20 minutes, 21 employees
  - OFA level 1, level 1 first aid kit.
  - confirmed as observed by this auditor.
- 1/1

###### Actions day program:

- December 18, 2019.
  - low hazard, <20 minutes, 15 employees
  - OFA level 1 confirmed, level 1 first aid kit was not confirmed.
  - confirmed as observed by this auditor.
- 0/1

1/2= 50%

##### 2. Programs / Residences:

###### Jingle Pot Home:

- December 18, 2019.
  - low hazard, <20 minutes, 4 employees
  - basic first aid kit.
  - confirmed as observed by this auditor.
- 1/1

###### Kennedy Home:

- December 18, 2019.
- low hazard, <20 minutes, 4 employees
- basic first aid kit.
- confirmed as observed by this auditor.



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1/1

Turner Connection Home:

- December 18, 2019.
- low hazard, <20 minutes, 4 employees
- basic first aid kit.
- confirmed as observed by this auditor.

1/1

3/3= 100%

Documentation Comments:

-----  
Adequate first aid attendants, supplies and facilities:

1. Administration:

Head Office:

- December 18, 2019
- low hazard, <20 minutes, 21 employees
- OFA level 1, level 1 first aid kit.

1/1

Actions day program:

- December 18, 2019.
- low hazard, <20 minutes, 15 employees
- OFA level 1, level 1 first aid kit.

1/1

2/2= 100%

2. Programs / Residences:

Jingle Pot Home:

- December 18, 2019.
- low hazard, <20 minutes, 4 employees
- basic first aid kit.

1/1

Kennedy Home:

- December 18, 2019.
- low hazard, <20 minutes, 4 employees
- basic first aid kit.

1/1

Turner Connection Home:

- December 18, 2019.
- low hazard, <20 minutes, 4 employees
- basic first aid kit.

1/1

3/3= 100%

### Suggestions For Improvement

Recommend there are adequate first aid attendants, supplies and facilities. Ensuring first aid assessments are properly



## Element 2. Program and Procedures [140]

completed and indicate the correct number of first aid attendants, supplies and facilities that are required would assist in achieving this recommendation. Ensuring adequate first aid attendants, supplies and facilities are maintained at each facility as determined by the first aid assessment would assist in achieving this recommendation.

Suggest the first aid assessment forms are completed and clearly indicate the minimum (not what is on site) number of first aid attendants, supplies and facilities as indicated in schedule 3 (minimum level of first aid).

### 2.18 First Aid Contacts [4]

#### Question 2.18

#### Guidelines / References

Do workers know how to contact first aid? (all departments) (0-4 points)

During observational tours, look for signs or other ways that identify how to contact first aid.

If there is direction to workers on how to contact first aid, award 100% for that department. If not, award 0%.

Interview workers to determine if they know how to contact first aid.

**% Achieved**  
**Points Awarded**

D	I	O
-	100%	100%
-	3	1

**Score:** 4 / 4

#### Findings / Notes

##### Observation Comments:

How to contact first aid.

Share Vision - Internet website is provided on all computers for employees to access all OH&S program policies / procedures, online inspection forms, investigation forms, meeting forms, etc. All employees have computer access.

OH&S Binders - maintained at all work sites, includes policies and procedures first aid reporting and injuries to be reported.

All employees have received level 1 first aid training (equivalent).

Access / posting of first aid contacts was confirmed for the following departments:

##### 1. Administration:

Head Office - confirmed.

Actions / Employment services - confirmed.

100%

##### 2. Programs / Residences:

Jingle Pot home - confirmed.

Kennedy home - confirmed.

Turner Connection home - confirmed.

100%

##### Interview Comments:

Positive responses from workers included we are first aid trained, somebody in the house, we all are first aiders,

## Element: 2. Program and Procedures [140]



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## Element 2. Program and Procedures [140]

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### Scoring Summary

Total Points Awarded:	123
Total Points Available:	140
Overall % Awarded:	88 %

## Element 3. Hazard Identification and Control [140]

### 3.1 Process [7]

#### Question 3.1

#### Guidelines / References

Have processes been developed for identifying hazards and assessing risks? (corporate) (7 points)

The documentation must include a form that is used to identify the hazards and assess the risks, as well as written procedures (instructions) on how to carry out the process.

Note: Auditors are not looking for completed hazard identification forms, just ensuring that the framework has been established.

If there is documented evidence of a hazard identification and risk assessment process, award 100%. If not, award 0%.

	D	I	O
% Achieved	100%	-	-
Points Awarded	7	-	-

Score: 7/7

#### Findings / Notes

##### Documentation Comments:

Process(s) developed for identifying hazards and assessing risks: Hazard Identification processes:

##### Written procedures:

HS003-P, Risk Management, Hazard Identification and control.

- includes purpose and procedures, list of risk management orientated programs

HS003a-P, Risk Management, Hazard Identification and control for contractors.

- includes purpose and procedures, list of risk management orientated programs

HS004-P, Risk management plan, includes purpose and procedures

Risk Management Plan, 2019 - 2020:

- includes introduction, purpose, NACL approach to risk management, definitions, methods and strategies.

##### Form(s):

- NACL H&S site inspection checklist, includes issue, hazard rating, required action, assignment, target date and completion date.

- Risk Management Plan includes tables to address risk management.

- tables include area of risk, description, risk level, mitigation strategy, status, person responsible date.

##### Person Centred Planning:

- worker job is support person served.

- identifies hazards, assess risks to worker and safe work procedures to address identified hazards

- plan is developed and implemented.

2/2= 100%



## Element 3. Hazard Identification and Control [140]

### 3.2 Training [7]

#### Question 3.2

Have the individuals who take lead roles in identifying hazards and assessing risks received training? (all departments) (0-7 points)

#### Guidelines / References

Training could be formal (through courses) or informal (hands-on training from other staff members)

Interview supervisors to determine if staff who are leading the hazard identification and risk assessment process, have received training.

	D	I	O
% Achieved	-	100%	-
Points Awarded	-	7	-

Score: 7/7

#### Findings / Notes

##### Interview Comments:

Positive responses from supervisors included I had a share vision training session on identify hazards,

### 3.3 Communication [15]

#### Question 3.3

Are hazards documented and communicated to workers as they become identified during operations? (all departments) (0-15 points)

#### Guidelines / References

Review minutes of safety meetings, supervisor notes, bulletin boards, internal websites, etc.

If documentation proves that hazards are communicated to workers as they become identified, award 100%. If not, award 0%.

During observational tours, look for communication of documented hazards on bulletin boards or available in some other format.

Points are awarded based on the percentage of positive findings.

Interview supervisors and workers to determine if hazards are communicated.

	D	I	O
% Achieved	100%	100%	100%
Points Awarded	3	6	6

Score: 15/15

#### Findings / Notes

##### Observation Comments:

Hazard documentation and communication:

Share Vision - Internet website is provided on all computers for employees to access all OH&S program policies / procedures, online inspection forms, investigation forms, meeting forms, hazards, etc. All employees have computer access.

OH&S Binders - maintained at all work sites, includes policies and procedures first aid reporting and injuries to be reported.

Safety bulletin boards - contained communication of hazards.

Access / posting of hazards was confirmed for the following departments:

##### 1. Administration:

Head Office - RtW, confirmed.

Actions / Employment services - confirmed.

100%



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## Element 3. Hazard Identification and Control [140]

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### 2. Programs / Residences:

Jingle Pot home - transfers, refusing unsafe work, confirmed.  
Kennedy home - SWP's, WHMIS, body posture, universal precautions, confirmed.  
Turner Connection home - WHMIS, universal precautions, confirmed.

100%

### Documentation Comments:

-----  
Documenting and communicating hazards to workers as they become identified during operations (all departments):

#### GENERAL COMMUNICATIONS (confirmed for all departments):

##### 1. JOHSC meeting minutes:

March 28, 2019:

- safe work procedure review - safety manual and procedures update.
- hazard reviews - emergency response procedures reviewed.

January 23, 2020:

- safe work procedure review - mobile equipment review and update.
- hazard reviews - mobile equipment hazard reviewed.

##### 2. Home page of employee website (share vision):

- employee portal, announcement, health and safety alerts are posted.

##### 3. Quarterly Newsletter:

- The "What's Happening" Bulletin, November 2019, June 2019, confirmed
- CARF accreditation,

##### 4. Safety bulletin boards - at all work sites.

##### 5. Staff meetings:

- monthly safety topics send to all staff for discussions at meetings.

5/5= 100%

### Interview Comments:

-----  
Positive responses from supervisors included entered into the communication log book, put in our house learning logs, isolate the hazard with tape, entered into share vision, send out an email,

Positive responses from workers included we have a communication log book on site to communicate hazards, leaning logs on share vision,



## Element 3. Hazard Identification and Control [140]

### 3.4 Controls [20]

#### Question 3.4

Are controls developed for identified hazards and are they implemented? (all departments) (0-20 points)

#### Guidelines / References

Look for a risk assessment from each department. Risk assessments must have been created or reviewed within the past twelve months on any of the procedures listed in 2.4. Review hazards identified through the formal process. In some cases, the organization may have sufficient controls already in place, so there won't be a risk assessment done in the past 12 months. However, there should be a process in place to review the assessment periodically to ensure the controls are still sufficient. Provide examples of at least one control identified from each department.

Percentage is awarded for each completed risk assessment which has controls identified.

During observational tours, see whether or not identified controls have been implemented.

Points are awarded based on the percentage of positive findings.

% Achieved  
Points Awarded

D	I	O
100%	-	100%
13	-	7

Score: 20/20

#### Findings / Notes

Observation Comments:

Implementation of Controls:

Departments:

1. Administration: Violence in the Workplace

- Risk management plan (2019/2020).
- potential violence again staff by individuals, moderate hazard rating.
- existing controls include following WSBC regulations, maintain a JOHSC committee, recommendations from injury reports, etc.
- proposed controls include recommendation for COR certification.
- recommendation confirmed as observed by auditor.

100%

2. Programs / Residences: Mobile Equipment

- Risk management plan (2019/2020).
- potential accidents, moderate hazard rating.
- existing controls include existing procedures (pre-trips, reporting, etc.)
- potential for lack of driver training, class 4 licences currently required.
- no further recommendation required at this time.
- recommendation confirmed as observed by auditor.

100%

Documentation Comments:

Assessment of risks in the workplace:

Departments:

1. Administration: Violence in the Workplace

- Risk management plan (2019/2020).
- potential violence again staff by individuals, moderate hazard rating.
- existing controls include following WSBC regulations, maintain a JOHSC committee, recommendations from injury reports, etc.



### Element 3. Hazard Identification and Control [140]

- proposed controls include recommendation for COR certification.
- recommendation confirmed as observed by auditor.

100%

2. Programs / Residences: Mobile Equipment Risk management plan (2019/2020).

- potential accidents, moderate hazard rating.
- existing controls include existing procedures (pre-trips, reporting, etc.)
- potential for lack of driver training, class 4 licences currently required.
- no further recommendation required at this time.
- recommendation confirmed as observed by auditor.

100%

#### 3.5 PPE Awareness [7]

##### Question 3.5

Are workers made aware of the requirements for PPE? (all departments) (0-7 points)

##### Guidelines / References

During observational tours, look for evidence of PPE communication (e.g. signs posted where hearing or eye protection would be required). Points are awarded based on the percentage of positive observations.

Interview supervisors to determine how PPE requirements are communicated.

	D	I	O
<b>% Achieved</b>	-	100%	100%
<b>Points Awarded</b>	-	3	4

**Score:** 7/7

##### Findings / Notes

###### Observation Comments:

Posting of PPE requirements:

Share Vision - Internet website is provided on all computers for employees to access all OH&S program policies / procedures, online inspection forms, investigation forms, meeting forms, etc. All employees have computer access.

OH&S Binders - maintained at all work sites, includes policies and procedures and PPE requirements for the organization.

Safety Bulletin Boards - include posting of universal precautions and PPE requirements.

Access / posting of PPE requirements was confirmed for the following departments:

###### 1. Administration:

Head Office - confirmed.

Actions / Employment services - confirmed.

100%

###### 2. Programs / Residences:

Jingle Pot home - posting of universal precautions and PPE requirements, confirmed.

Kennedy home - posting of universal precautions and PPE requirements, confirmed.

Turner Connection home - posting of universal precautions and PPE requirements, confirmed.

100%



## Element 3. Hazard Identification and Control [140]

### Interview Comments:

Positive responses from supervisors included care plans include required PPE for workers, through orientations, by signage on site, posting universal precaution signage in the workplace, medication sign in sheets, competency training on share vision, included in the SDS sheets,

### 3.6 PPE Availability [7]

#### Question 3.6 a)

#### Guidelines / References

Is PPE made available to workers in accordance with the Regulation or the Organizations' policy? (all departments) (4 points)

Interview workers to determine if workers have access to, and know how to get, the necessary PPE.

	D	I	O
% Achieved	-	100%	-
Points Awarded	-	4	-

Score: 4/4

#### Findings / Notes

### Interview Comments:

Positive responses from workers included we have glasses, gloves, masks, gowns, all we need, yes,

#### Question 3.6 b)

#### Guidelines / References

Is PPE made available to workers in accordance with the Regulation or the Organizations' policy? (all departments) (3 points)

Interview supervisors to determine if workers have access to, and know how to get, the necessary PPE.

	D	I	O
% Achieved	-	100%	-
Points Awarded	-	3	-

Score: 3/3

#### Findings / Notes

### Interview Comments:

Positive responses from supervisors included they have lots of PPE available, we keep lots on site,



### Element 3. Hazard Identification and Control [140]

#### 3.7 Appropriate PPE [14]

**Question 3.7**

Is the correct PPE used by employees when required? (all departments) (14 points)

**Guidelines / References**

During observational tours, observe the use of PPE.

If all staff are found to be wearing appropriate PPE, award 100%. If it is determined that no staff in that department require PPE, record n/a.

	D	I	O
<b>% Achieved</b>	-	-	100%
<b>Points Awarded</b>	-	-	14

**Score:** 14 / 14

**Findings / Notes**

Observation Comments:

Observation of correct PPE use by employees were confirmed for the following departments:

1. Administration:

Head Office - na.

Actions / Employment centre - gloves and masks were available as needed, confirmed.

100%

2. Programs / Residences:

Jingle Pot home - gloves and masks were available and worn as needed, confirmed.

Kennedy home - gloves and masks were available and worn as needed, confirmed.

Turner Connection home - gloves and masks were available and worn as needed, confirmed.

100%

#### 3.8 Specialized PPE [7]

**Question 3.8**

Is specialized PPE available to workers when required? (all departments) (0-7 points)

**Guidelines / References**

Interview Managers to determine if they provide sufficient resources for the purchase of specialized PPE during the budgetary process.

	D	I	O
<b>% Achieved</b>	-	0%	-
<b>Points Awarded</b>	-	-	-

**Score:** N/A / 0

**Findings / Notes**

Interview Comments:

na



### Element 3. Hazard Identification and Control [140]

#### 3.9 Respirators [7]

**Question 3.9**

Are fit tests performed at least annually? (all departments) (0-7 points)

**Guidelines / References**

Review ten fit test records from across all departments who would need respirators to ensure fit tests have been completed within the past 12 months.

Score based on the percent of positive findings, by department.

	D	I	O
<b>% Achieved</b>	0%	-	-
<b>Points Awarded</b>	-	-	-

**Score:** N/A/0

**Findings / Notes**

Documentation Comments:

Fit testing within the past 12 months:

Respirators were not required (only paper masks) within the past 12 months.

Na.

#### 3.10 PPE Training [7]

**Question 3.10**

When workers are required to use PPE, have they been trained in the use, maintenance and limitations of it? (all departments) (0-7 points)

**Guidelines / References**

Workers must be able to describe the following: When PPE should be used, how it is to be used, how to inspect the equipment, when and how it should be replaced. Note that if a worker is not required to use PPE, this question will not apply to that worker (leave as "not asked").

	D	I	O
<b>% Achieved</b>	-	100%	-
<b>Points Awarded</b>	-	7	-

**Score:** 7/7

**Findings / Notes**

Interview Comments:

Positive responses from workers included during orientations at every new house we go to, there are competency courses on share vision for PPE, during staff meetings we have training, universal precaution training, we have workshops that conduct PPE training, SIVA training that includes PPE training, during my orientation, person centre training with PPE, every 2 years, training during staff meetings,



## Element 3. Hazard Identification and Control [140]

### 3.11 Hazard Reporting [14]

**Question 3.11**

**Guidelines / References**

Is there a system for workers to report unsafe/unhealthy conditions or practices? (documentation: corporate; interviews: all departments) (0-14 points)

Review documentation outlining a hazard reporting process.  
If there is a documented hazard reporting process, award 100%. If not, award 0%.  
Interview workers to see if they know how to report hazards.

	D	I	O
<b>% Achieved</b>	100%	100%	-
<b>Points Awarded</b>	7	7	-

**Score:** 14 / 14

**Findings / Notes**

Documentation Comments:

System for workers to report unsafe / unhealthy conditions or practices:

1. Communication book:  
- located at every work site.

Program / Resident learning logs;  
- located at every work site

Individual learning logs:  
- located at every work site

2. HS014-P, Safety violations:  
- requirement to report safety violations.

3. HS003-P, Risk Management, hazard identification and control:  
- requirement to provide "notes" in communication log book, and learning books.

3/3= 100%

Interview Comments:

Positive responses from workers included on share vision on the home page, communication log, I send an email, put an entry in our communication log book, learning logs on share vision,

### 3.12 Preventative Maintenance [7]

**Question 3.12**

**Guidelines / References**

Is there a preventative maintenance program in place for equipment and machinery? (corporate) (7 points)

The program must include an inventory of equipment, vehicles and tools requiring regular inspection and maintenance, and schedules for their routine maintenance.  
If there is a program as defined above, award 100%. If there is a program but no schedule, award 50%. If neither, award 0.

	D	I	O
<b>% Achieved</b>	100%	-	-
<b>Points Awarded</b>	7	-	-

**Score:** 7 / 7

**Findings / Notes**

Documentation Comments:

Preventative maintenance program for equipment and machinery for all departments:



### Element 3. Hazard Identification and Control [140]

Vehicle Preventative Maintenance Program (Maintenance / Inspection records):

- managed on Share Vision.
- 18 vans and 1 car,
- 1. Vehicle inventory (hard copy) - inventory lists all vehicles, description, licence number, etc. confirmed.
- 2. Maintenance Schedules (share point) - includes frequency of maintenance (determined for each vehicle), confirmed.

2/2

Equipment Preventative Maintenance Program (Facilities):

- managed on Share Vision.
- organized by facility.
- 1. documentation of inventory of equipment, listed in left column under maintenance, schedules, (vehicles, fire equipment, HVAC, gas appliances, Lifts, yard machines, confirmed.

2. documentation of schedule, maintenance / inspection frequency at top of page, confirmed.

2/2

4/4= 100%

#### 3.13 Compliance [7]

##### Question 3.13

Is there evidence that the preventative maintenance program is being followed? (all departments) (0-7 points)

##### Guidelines / References

In order to demonstrate the PM program is followed, maintenance records must be kept and be consistent with the schedules found when answering question 3.12.

Points are awarded based on the percentage of positive findings.

	D	I	O
% Achieved	90%	-	-
Points Awarded	6	-	-

**Score:** 6/7

##### Findings / Notes

Documentation Comments:

Evidence that the preventative maintenance program is being following:

Departments:

- 1. Administration: Head Office:

Vehicles:

- no assigned vehicles.

Facilities:

- 1. HVAC, inspected annually,
- one unit, replaced in 2018, confirmed.
- August 2019, confirmed.

1/1

- 2. Fire suppression, inspected annually,
- July 2019, confirmed.

1/1

2/2= 100%



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## Element 3. Hazard Identification and Control [140]

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### 2. Programs / Residences:

#### Vehicles:

Lic. #CV0608, oil change required every 6 months.

- January 15, 2020, June 21, 2019, documentation confirmed.

1/1

Lic. #CM3838, oil change required every 6 months.

- documentation not confirmed.

0/1

Lic. #1096HR, oil change required every 6 months.

- June 21, 2018, ???, documentation not confirmed.

0/1

Lic. #JPH201, oil change required every 6 months.

- September 12, 2019, May 27, 2019, September 20, 2018, documentation confirmed.

1/1

2/4

#### Facilities:

##### Jingle pot:

Lift Inspection, annual inspection:

- June 19, 2019, replaced 2018, November 15, 2017,

1/1

Fire Safety Equipment, annual inspection:

- March 12, 2018, February 13, 2019, confirmed.

1/1

##### Kennedy Home:

Lift Inspection, annual inspection:

- January 16, 2019, replaced 2018, November 16, 2017,

1/1

Heat pump, inspection every 6 month:

- April 30, 2019, December 4, 2019, confirmed.

1/1

##### Turner Connection Home:

Lift Inspection, annual inspection:

- June 12, 2019, confirmed

1/1

Fire Safety Equipment, annual inspection:

- June 3, 2019, confirmed.

1/1

6/6

8/10= 80%

### Suggestions For Improvement

Recommend the preventative maintenance program is being followed. Ensure the preventative maintenance program service



### Element 3. Hazard Identification and Control [140]

schedule is adhered to and documented for verification would assist in achieving this recommendation.

Suggest a tracking matrix is developed and maintained to verify the preventative maintenance program is being adhered to.

#### 3.14 Hazard Awareness [14]

##### Question 3.14

Do workers know what they are to do if they encounter broken or defective tools or equipment?(all departments) (0-14 points)

##### Guidelines / References

Workers should know the process. For example, they may be required to report the damage to someone on an Equipment Condition Report, and apply a ""do not use"" tag, or follow some other process that takes the equipment out of service.

% Achieved  
Points Awarded

D	I	O
-	100%	-
-	14	-

Score: 14/14

##### Findings / Notes

###### Interview Comments:

Positive responses from workers included recorded in the communication log book for communication to the servicing company, put a note in our communication log book, notify my SRW, isolate the broken equipment, leave a note on the broken equipment, have it towed, recorded in the pre-trip inspection, I can contact our IT guy,

### Element: 3. Hazard Identification and Control [140]

#### Scoring Summary

Total Points Awarded:	125
Total Points Available:	126
Overall % Awarded:	99 %

## Element 4. Training, Education and Certification [140]

### 4.1 Training Matrix [7]

#### Question 4.1

Has the organization determined what qualifications are required for different jobs? (all departments) (7 points)

#### Guidelines / References

Review documentation (1 per department) to determine if qualifications have been established relative to health and safety. The information could be in any of the following: hazard assessments, training needs assessments, job descriptions, job advertisements or similar documents. Look for an indication of required certifications or licenses as well as training. This documentation may be stored corporately, but score it for the appropriate department.

If there is evidence that qualifications have been established by the organization, award 100%. If not, award 0%

	D	I	O
<b>% Achieved</b>	100%	-	-
<b>Points Awarded</b>	7	-	-

**Score:** 7/7

#### Findings / Notes

##### Documentation Comments:

The following job descriptions were reviewed for evidence of safety qualifications:

##### 1. Administration:

##### Quality Assurance Manager:

- qualifications include educational level, computer skills, drivers licence, criminal record check, TB test, flu shot, CARF management skills, health and safety reporting requirements, confirmed.

100%

##### 2. Programs / Residences:

##### Community Support Worker:

- qualification include education level, work experience, drivers licence, criminal record check, TB test, flu shot, medical certificate, first aid training, CSW certificate (or equivalent), confirmed.

100%

### 4.2 Competency [7]

#### Question 4.2

How do supervisors determine if workers can do their jobs safely? (all departments) (0-7 points)

#### Guidelines / References

Interview supervisors, who should be able to describe the steps they take to ensure their workers are competent. At a minimum, supervisors should:

- review training and certification records
- conduct training
- observe worker performing the work
- correct unsafe acts
- reconfirm competency of worker

	D	I	O
<b>% Achieved</b>	-	100%	-
<b>Points Awarded</b>	-	7	-

**Score:** 7/7

#### Findings / Notes

##### Interview Comments:

Positive responses from supervisors included:

- (before they get hired), how the person responds to safety questions in the interview, ensure they know how find out



## Element 4. Training, Education and Certification [140]

answers, ensure they have the right mindset,  
- (after hiring), ensure they are certified, ask them scenarios and gage their knowledge, they get two 4 hour orientation before they start work, general orientation, program orientation, they receive SIVA training, PCT training, they are job shadowed during the orientations, all new employees get competency training on share vision, correct any actions that are not following procedures,

### 4.3 Training Tracking [14]

#### Question 4.3

#### Guidelines / References

Does the organization have a method of tracking education and training? (corporate) (14 points)

Review training and education records.

Documentation may be in electronic or written format, in simple format (class sign-in sheets, sorted by course), or complex (computerized data management programs).

If there is a tracking system, award 100%. If not, award 0%.

	D	I	O
% Achieved	100%	-	-
Points Awarded	14	-	-

Score: 14 / 14

#### Findings / Notes

##### Documentation Comments:

Tracking education and training is managed by:

Training Calendar:

ShareVision:

- lists all employees, lists all employee training,
- can search by employee and by type of training.
- lists certifications of employees (drivers licence certification, first aid, criminal record check, etc.).

ComVita (payroll):

- lists all employees, lists all employee training,
- can search by employee and by type of training.
- lists certifications of employees (drivers licence certification, first aid, criminal record check, etc.).

100%

### 4.4 On-Going Training [21]

#### Question 4.4

#### Guidelines / References

Is training being conducted with workers on an on-going and as-required basis? (all departments) (0-21 points)

Review training records to determine if the organization has identified worker training needs for high hazard tasks (see 2.4) and that those needs are being met. Interview supervisors and workers to determine what training is being given. Training can take place in a classroom setting, in crew meetings, or on-the-job site. Points are awarded based on the percentage of positive findings.

Interview supervisors and workers to determine that on-going training is occurring.

	D	I	O
% Achieved	44%	100%	-
Points Awarded	3	14	-

Score: 17 / 21

#### Findings / Notes



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## Element 4. Training, Education and Certification [140]

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### Findings / Notes

Documentation Comments:

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Training being conducted with workers:

Share Vision:

Confined Space Entry:

- n/a.

Excavation:

- n/a.

Lockout and tag out:

- n/a.

Working in proximity to overhead power lines:

- n/a.

WHIMS:

1. Administration:

- WHMIS, 2019, 117 participants across all departments.

2. Programs / Residences:

- WHMIS, 2019, 117 participants across all departments.

Asbestos management:

1. Administration:

- documentation not confirmed.

2. Programs / Residences:

- documentation not confirmed.

MSI Prevention / Ergonomics:

1. Administration:

- documentation not confirmed.

2. Programs / Residences:

- documentation not confirmed.

Toxic Process Gases:

- n/a.

Biohazard protection:

1. Administration:

Infection disease control (2 videos, 1 PowerPoint), 2018 / 2019, 136 participants.

- First aid training, includes biohazard protection / blood borne pathogens, certifications for the last three years, 150+ certified employees.

- New worker orientations (2019), includes handwashing, infection control, diseases, food safety, 29 participants across all departments.

2. Programs / Residences:

Infection disease control (2 videos, 1 PowerPoint), 2018 / 2019, 136 participants.

- First aid training, includes biohazard protection / blood borne pathogens, certifications for the last three years, 150+ certified employees.

- New worker orientations (2019), includes handwashing, infection control, diseases, food safety, 29 participants across all departments.

Fall protection:

- n/a.

Working Alone or in Isolation:

1. Administration:

- documentation of training not confirmed.



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## Element 4. Training, Education and Certification [140]

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2. Programs / Residences:  
- documentation of training not confirmed.

Violence in the Workplace:

1. Administration:

SIVA Training (non-violence intervention training).

- certification expires every 2 years, 96 certified participants across all departments.

2. Programs / Residences:

SIVA Training (non-violence intervention training).

- certification expires every 2 years, 96 certified participants across all departments.

Vehicle & Mobile Equipment use (work related driving):

1. Administration:

- documentation not confirmed.

2. Programs / Residences:

- documentation not confirmed.

Respiratory Protection:

- na.

Weather Temperature Protection:

1. Administration:

- Memo, Working during Inclement Weather Conditions, November 27, 2019, all staff, all departments.

2. Programs / Residences:

- Memo, Working during Inclement Weather Conditions, November 27, 2019, all staff, all departments.

Hearing Conservation:

- na.

Respectful Workplace / Bullying:

1. Administration:

- documentation not confirmed.

2. Programs / Residences:

- documentation not confirmed.

Totals:

Departments:

1. Administration - 4/9= 44%

2. Day Programs - 4/9= 44%

Interview Comments:

---

Positive responses from supervisors included WHMIS, body mechanics, how to report injuries and near missed, proper protocols, lift training, moving person serviced, first aid, share vision competency training at least twice a year, food safe, person centered thinking, WHMIS training, SWP procedures, medication administration, SIVA training, PCT training, leadership training, annual competency training, first aid training, lift training, driving training, leadership training, workplace investigations,

Positive responses from workers included investigation training, JOHSC member training, level 1 and 2 OH&S, supervisory training level 1, first aid training, person centred thinking, SIVA, mini courses on share vision (WHMIS, food safe, fire extinguisher use, private information, etc.), SIVA, first aid, WHMIS, person centred planning, food safe, orientation, PCT training, adult responsibility, OH&S training, medication training,

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### Suggestions For Improvement



## Element 4. Training, Education and Certification [140]

Recommend training is being conducted with all workers on an on-going and as-required basis. Ensuring training as identified in this question (as a minimum) is provided to workers on an on-going basis would assist in achieving this recommendation.

Suggest a minimum level of required regular training is identified for each employee and tracked to ensure training has been received (minimum number of hours each year, specified courses to be taken every 3 years, etc.).

Suggest all employees receive a periodic refresher orientation (every 5 years?) to ensure all employees are updated on changes to the OH&S program.

Suggest all employee education and training be included in a central training database.

### 4.5 Training Verification [21]

#### Question 4.5

Is there a method within the organization to ensure that workers certifications are valid and up to date? (documentation: corporate; observation: single department) (21 points)

#### Guidelines / References

Review documentation to confirm that a person (manager/supervisor) in the organization is responsible for ensuring any required certification is valid and up-to-date. Examples: appropriate drivers license, First Aid, Crane Operator, Forklift Operator, TDG, TCP.

If someone is assigned the responsibility, either corporately or within the department, award 100%. If not, award 0%.

Observe the worker responsible for verifying certifications, actually performing the task.

Award 100% if you are able to observe this taking place, or 0% if not.

	D	I	O
<b>% Achieved</b>	100%	-	100%
<b>Points Awarded</b>	7	-	14

**Score:** 21 / 21

#### Findings / Notes

##### Observation Comments:

Observation of verifying certifications:

Managed by the Quality Assurance Manager:

- managed on share vision.
- first aid, confirmed.
- Medical certificates / registrations on share vision.
- Other certificates - CSW, first aid,
- Drivers abstracts - tracked by HR assistance.

The Quality Assurance Manager was observed accessing and managing worker certifications during this audit.

100%

##### Documentation Comments:

Method for tracking certifications:

Training Calendar:

ShareVision:

- lists all employees, lists all employee training,
- can search by employee and by type of training.
- lists certifications of employees (drivers licence certification, first aid, criminal record check, etc.).

ComVita (payroll):

- lists all employees, lists all employee training,
- can search by employee and by type of training.
- lists certifications of employees (drivers licence certification, first aid, criminal record check, etc.).



## Element 4. Training, Education and Certification [140]

100%

### 4.6 Tailgate Meetings [14]

#### Question 4.6

#### Guidelines / References

Are regular pre-job/pre-planning meetings held to discuss high risk safety issues and are they documented? (all departments)

Review minutes of on-the-job tailgate or pre-planning meetings where safety on the jobsite is discussed.

Points are awarded based on the percent of positive findings when compared to the number of documents reviewed. If a department does not have high risk issues, mark N/A

Interview workers and supervisors to determine if on-the-job tailgate or pre-planning takes place for high risk safety issues.

	D	I	O
<b>% Achieved</b>	100%	100%	-
<b>Points Awarded</b>	7	7	-

**Score:** 14 / 14

#### Findings / Notes

##### Documentation Comments:

Documentation of safety discussion with workers:

##### Departments:

##### 1. Administration:

##### Head Office:

Administration (every month, all office staff):

- na.

1/1

##### Actions Day Program:

- staff meeting, weekly - January 8, 2020, December 18, 11, November 27, 20, 13, 2019, confirmed.

- communications logbook, used daily, confirmed.

##### Employment Day Services Program:

- staff meetings, weekly - December 23, 16, 2, November 25, 18, 4, 2019, confirmed.

1/1

##### Home Share Program: (96 contractors)

Daily communications, notes are documented on a daily basis by home share managers (4), confirmed.

1/1

3/3= 100%

##### 2. Programs / Residences:

##### Jingle Pot Home:

Communication logs - paper based, completed daily or as needed and signed by employees.

1/1

##### Kennedy Home:

Communication logs - paper based, completed daily or as needed and signed by employees.

1/1

##### Turner Connection Home:

Communication logs - paper based, completed daily or as needed and signed by employees.

1/1



## Element 4. Training, Education and Certification [140]

3/3= 100%

### Interview Comments:

Positive responses from supervisors included we have daily log books on site for all employees to read,

Positive responses from workers included we have a communication log book that we use every day,

### 4.7 Orientation [6]

#### Question 4.7

#### Guidelines / References

Does the employer have a formal orientation program, including the requirement that an orientation be provided to all new or newly-transferred employees, as well as those returning after a lengthy absence? (documentation: corporate) (0-6 points)

The orientation must contain the following general safety information at a minimum:

- Corporate Safety Policy
- Supervisor contact
- general safety rules
- Possible hazards, including robbery, assault, confrontation or other Violence in the workplace
- Working alone or in Isolation
- PPE
- how to contact first aid
- location of first aid facilities
- emergency procedures
- right to refuse unsafe work
- how to report injuries and incidents
- instruction and demonstration of work tasks
- WHMIS/ WHMIS 2015
- Joint Occupational Health & Safety Committee

Review documentation to see if there is an orientation program containing these items.

If the orientation program contains all of these items, and a requirement that it be provided to all new or newly-transferred employees, as well as those returning after a lengthy absence, score 100%. If the program does not have all these elements, score 0. If the program has all the elements but no written requirement to provide to all new, newly transferred or newly returning employees, score 50%. This is an all or nothing question, less than full marks will produce no score.

	D	I	O
% Achieved	100%	-	-
Points Awarded	6	-	-

Score: 6/6

### Findings / Notes

#### Documentation Comments:

#### Formal Orientation Program:

P003-P, January 2020: Orientation Program:  
 - Required for new employees - confirmed.  
 - Required for newly transferred employees -confirmed.  
 - Required for those returning from a lengthy absence - confirmed.  
 3/3

Orientation program includes:  
 - PowerPoint presentation.



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## Element 4. Training, Education and Certification [140]

---

- includes general and site-specific orientations.
- orientation package.
- hire package.
- orientation checklist.

1. Corporate Safety Policy:  
- slide 5, confirmed.

2. Supervisor contact:  
- included in package (program directory), confirmed.

3. General safety rules:  
- appearance / dress, smoking, workplace impairment, standards of language, whistle blower, conflict of interest, emergency procedures, etc , confirmed.

4. Possible hazards:  
- safe work procedures, slide 15, confirmed.

5. Working alone:  
- Working Alone, slide 15, confirmed.

6. PPE:  
- PPE, slide 19, confirmed.

7. How to contact first aid:  
- first aid procedures, slide 18, confirmed.

8. Location of first aid facilities:  
- first aid procedures (location of first aid kits), slide 18, confirmed.

9. Emergency evacuation procedures:  
- emergency procedures, slide 17, confirmed.

10. Right to refuse unsafe work:  
- Right to refuse unsafe work, slide 20, confirmed.

11. How to report injuries and incidents:  
- staff incident reporting, slide 22, confirmed.

12. Instruction / demonstration of work tasks:  
- safe work procedures, slide 15, confirmed.

13. WHMIS 2015  
- WHMIS, slide 27 - 31, confirmed.

14. Joint Occupational Health & Safety Committee:  
- JOHSC, slide 32, confirmed.

14/14

17/17= 100%



## Element 4. Training, Education and Certification [140]

### 4.8 Orientation [28]

#### Question 4.8

Is the Orientation provided in a timely manner? (all departments) (0-28 points)

#### Guidelines / References

If there is an orientation program containing all the items in 4.7 documentation, points are awarded based on when it is provided to employees. Auditors are to ask the organization for a list of all new or newly transferred employees within the past 12 months. Choose 10 from various departments, review orientation records.

If initiated on the first day and completed within the first week of work, 100% is awarded. If completed within the first two weeks, 50% is awarded. If completed within the first month, 30% is awarded. If not completed or completed longer than within the first month, 0% is awarded.

Interview new or newly transferred employees to determine if they received an orientation before starting work.

	D	I	O
% Achieved	97%	100%	-
Points Awarded	14	14	-

Score: 28/28

#### Findings / Notes

##### Documentation Comments:

Timing of orientations provided:  
Departments:

##### Administration:

1. Assistant Accountant:  
- start of work - September 16, 2019.  
- date of orientation - June 18, 2019.  
- orientation provided within the first week confirmed.  
1/1= 100%

1/1= 100%

##### Programs / Residences:

2. CSW:  
- start of work - July 17, 2019  
- date of orientation - July 25, 2019  
- orientation provided within the two week confirmed.  
1/1

3. CSW:  
- start of work - October 27, 2019.  
- date of orientation - October 27, 2019.  
- orientation provided within the first week confirmed.  
1/1

4. CSW:  
- start of work - July 5, 2019.  
- date of orientation - July 15, 2019.  
- orientation provided within the first 2 weeks confirmed.  
0.5/1

5. CSW:  
- start of work - June 21, 2019.  
- date of orientation - June 21, 2019.  
- orientation provided within the first week confirmed.  
1/1



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## Element 4. Training, Education and Certification [140]

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6. CSW:

- start of work - June 4, 2019.
  - date of orientation - June 7, 2019.
  - orientation provided within the first week confirmed.
- 1/1

7. CSW:

- start of work - January 18, 2019.
  - date of orientation - January 22, 2019.
  - orientation provided within the first week confirmed.
- 1/1

8. CSW:

- start of work - June 4, 2019.
  - date of orientation - June 11, 2019.
  - orientation provided within the first week confirmed.
- 1/1

9. CSW:

- start of work - March 22, 2019.
  - date of orientation - March 27, 2019.
  - orientation provided within the first week confirmed.
- 1/1

10. CSW:

- start of work - November 21, 2019.
  - date of orientation - November 25, 2019.
  - orientation provided within the first week confirmed.
- 1/1

8.5/9= 94%

Interview Comments:

-----  
Positive responses from managers included

Positive responses from supervisors included I got my orientation at the start of my work,

Positive responses from workers included I had my orientation before starting my work,

### Suggestions For Improvement

Recommend orientations are provided in a timely manner. Ensuring requiring orientations are conducted before the start of work or on the first day of work and are documented will assist in achieving this recommendation.



## Element 4. Training, Education and Certification [140]

### 4.9 Orientation Checklist [7]

#### Question 4.9

Is there an orientation checklist form that provides an area for signatures of the person giving, and the person receiving, the orientation? (corporate) (7 points)

#### Guidelines / References

Review documentation.

The documentation may be circulated electronically; if there is an electronic trail to ensure all parties had access and accepted it, award points. Note to auditors: This review is to determine if there is a checklist, not to assess the contents.

If there is a checklist that can be acknowledged by signature or electronically, award 100%. If not, award 0.

	D	I	O
% Achieved	100%	-	-
Points Awarded	7	-	-

Score: 7/7

#### Findings / Notes

##### Documentation Comments:

##### Orientation Checklist:

- day program.
- NACL works
- residential

1. Area for signature of the person giving the orientation - space for supervisor signature, confirmed.
2. Area for the signature of the person receiving the orientation - space for worker signature, confirmed.

2/2= 100%

### 4.10 Contractors [6]

#### Question 4.10

Is health and safety information given to contractors (Prime and day-contractors) before they begin working for the organization? (corporate) (0-6 points)

#### Guidelines / References

Review RFP process, contracts or other information provided to contractors. Look for information on known or foreseeable hazards and safety rules which apply to the work the contractors are doing. Review at least four records. Points are awarded based on the percentage of positive findings.

	D	I	O
% Achieved	100%	-	-
Points Awarded	6	-	-

Score: 6/6

#### Findings / Notes

##### Documentation Comments:

Health and safety information provided to (non-prime) contractors:

##### Safety Guidelines for Contractor (form):

- 2 page agreement signed of by visiting contractors / consultants.
- includes site specific procedures, emergencies, etc.
- signature area for contractor and company.

Examples included:

Prime Contractor: (only one in 2019)

1. Uplands Housing Project:
  - signed November 25, 2019.
  - Phase 1 Environmental Report, includes hazards regarding asbestos, soil remediation requirements, PCB's, formaldehyde



## Element 4. Training, Education and Certification [140]

insulation, etc.

Non-Prime Contractor:

2. NRGWise Consulting  
- signed January 21, 2020.

3. Pat Bugera Communications Consulting  
- signed January 22, 2020.

4. Jewesson Consulting Ltd.  
- signed January 27, 2020.

4/4= 100%

### 4.11 Prime Contractor [3]

#### Question 4.11

#### Guidelines / References

Is there a process in place to identify Prime Contractors in multi-employer worksites? (corporate) (3 points)

Review documentation to determine if there is a process in place to identify Prime Contractors. Note: the process could include a statement that the organization will always maintain Owner Responsibilities and never designate a Prime.

% Achieved

Points Awarded

D	I	O
100%	-	-
3	-	-

Score: 3/3

If there is a process in place, award 100%. If not, award 0%.

#### Findings / Notes

##### Documentation Comments:

Process to identify the Prime Contractor:

Contract for Services, January 21, 2020 (contract form):

- section 5.4, WSBC.

- "The contractor agrees tha it is the 'prime contractor' for the Works / Services as defined in the WCB Act..."

100%

### 4.12 Multi-Employer Sites [1]

#### Question 4.12

#### Guidelines / References

If there should be a Contractor Coordination process in place, and there is a process, is it followed? (corporate) (1 point)

Review one contract to ensure the Prime Contractor is designated.

If there should be a process to identify Prime Contractor and there isn't, award 0. If there is a process and it includes identifying the Prime Contractor, award 100%.

% Achieved

Points Awarded

D	I	O
100%	-	-
1	-	-

Score: 1 / 1

#### Findings / Notes

##### Documentation Comments:



## Element 4. Training, Education and Certification [140]

Process to identify the Prime Contractor:

Contract: NACL Affordable Housing Project, 3425 Uplands Drive, Nanaimo, B.C.

- Prime Contractor designation - letter of January 28, 2020, contractor acknowledges being assigned Prime Contractor.

100%

### 4.13 Contractor Management [4]

#### Question 4.13

#### Guidelines / References

Is there a process in place to ensure contractors, not designated as Prime Contractors, are meeting their health & safety obligations? (all departments) (0-4 points)

Interview whomever is responsible in the organization for project management. This may include project managers, public works managers and supervisors.

% Achieved  
Points Awarded

D	I	O
-	67%	-
-	3	-

Score: 3/4

#### Findings / Notes

Interview Comments:

Positive responses from managers included provide a tour / orientation, show where the fire extinguishers are, muster location, escort the contractor, set acceptable hours for their arrival, conduct site tour, verify their credential, explain emergency procedures, let them know where not to go,

Positive responses from supervisors included make them aware of dangerous persons, communicate our emergency response procedures, documented in maintenance in share vision, documented in communication log book,

Positive responses from workers included

Negative responses included we have not been orientating our contractors until now,

#### Suggestions For Improvement

Recommend there is a process in place to ensure non-prime contractors are meeting their safety obligations. Ensuring non-prime contractors receive an orientation when enter the worksite would assist in achieving this recommendation.

Suggest the orientation includes (as a minimum) know hazards, emergency procedures, restricted areas, potential biohazards, PPE requirements, etc.



## Element 4. Training, Education and Certification [140]

### 4.14 Visitor Orientation [1]

**Question 4.14**

Does the organization have a written requirement to provide an orientation to visitors? (corporate) (1 points)

**Guidelines / References**

Customers and clients are excluded from the definition of "visitor" if they are restricted to those areas that are customarily used to conduct City business. For example: delivery personnel, attendees at Council or other meetings, taxpayers at the finance counter (among others) are excluded. Visitors that are entering working areas other than normal business areas, such as construction sites, should receive an orientation that identifies, at a minimum:

- Hazards or site specific safety procedures
- control measures or restricted areas
- procedures in the event of an emergency
- required PPE, provided by the visitor or by the organization

Review documentation to see if there is a visitor orientation containing these items. Provide 25% for each aspect found.

	D	I	O
<b>% Achieved</b>	100%	-	-
<b>Points Awarded</b>	1	-	-

**Score:** 1 / 1

#### Findings / Notes

Documentation Comments:

Written requirement for visitor orientation.

SD012-P, January 2020, Visitor at Sites:

Includes:

1. Hazards or site specific safety procedures:  
- "...site specific risks as identified within risk assessments...", confirmed.
2. Control measures or restricted areas:  
- "...restricted areas (i.e. bedrooms)...", confirmed.
3. Procedures in the event of an emergency:  
- "...identification of emergency exits, first aid kits...", confirmed.
4. Required PPE:  
- "...personal protective equipment (i.e. masks during flu season)...", confirmed.

4/4= 100%

## Element: 4. Training, Education and Certification [140]

### Scoring Summary

<b>Total Points Awarded:</b>	135
<b>Total Points Available:</b>	140
<b>Overall % Awarded:</b>	96 %



## Element 5. Inspections [130]

### 5.1 Program [25]

#### Question 5.1

Does the organization have a Workplace Inspections Program? (corporate) (25 points)

#### Guidelines / References

The written instruction should identify the intent of inspections, and who should inspect, including a member of the Joint Occupational Health & Safety Committee.

If there is written instruction identifying the intent of inspections, and who should inspect, including a member of the Joint Occupational Health and Safety Committee, award 100%. Deduct 33% for each aspect missing.

% Achieved

Points Awarded

D	I	O
100%	-	-
25	-	-

Score: 25 / 25

#### Findings / Notes

Documentation Comments:

Workplace Inspection Program:

- section HS015, October 2019, Internal site inspections.

1. Intent:

- program includes the purpose (intent) of the program which is to "...as a commitment to creating and maintaining a safe environment..."

2. Who should conduct the inspections:

- "management team and members of the OH&S committee"..."night staff".

3. JOHSC Inspections:

- "members of the OH&S committee"..."night staff".

3/3= 100%

### 5.2 Frequency [20]

#### Question 5.2

Does the inspection program outline what is to be inspected and the inspection frequency? (corporate) (20 points)

#### Guidelines / References

An inspection schedule should be developed for all facilities where the employer has workers. You are not assessing if the frequency of inspections is correct, just that the schedule has been developed.

If the inspection schedule has been developed and includes all facilities, award 100%. If not, award 0.

% Achieved

Points Awarded

D	I	O
100%	-	-
20	-	-

Score: 20 / 20

#### Findings / Notes

Documentation Comments:

Inspection Program schedule and what is to be inspected:

1. What is to be inspected:

- "...all unsafe practices and conditions..."  
- identified in the inspection checklist.

2. Inspection Schedule:

- "...are completed twice annually..."



## Element 5. Inspections [130]

2/2= 100%

### 5.3 Training [7]

#### Question 5.3

Have persons responsible for conducting inspections received training? (all departments) (0-7 points)

#### Guidelines / References

Supervisors are responsible for conducting inspections on a regular basis. Interview persons responsible for conducting inspections.

% Achieved

Points Awarded

D	I	O
-	67%	-
-	5	-

Score: 5/7

#### Findings / Notes

##### Interview Comments:

Positive responses from supervisors included I had hazard identification training on share vision,

Negative response included I conduct inspections but I have not had inspection training or hazard identification training.

#### Suggestions For Improvement

Recommend person responsible for conducting inspections receive training. Ensuring supervisors and JOHSC members received formal inspection training from a qualified trainer would assist in achieving this recommendation.

### 5.4 Compliance [20]

#### Question 5.4

Are inspections being carried out as defined in the program? (all departments) (0-20 points)

#### Guidelines / References

Compare documented inspections to the inspection program requirements.

Points are awarded based on the percentage of positive findings.

% Achieved

Points Awarded

D	I	O
100%	-	-
20	-	-

Score: 20/20

#### Findings / Notes

##### Documentation Comments:

##### Inspections being conducted:

- two inspections required each year.

##### Departments:

1. Administration:

##### Head Office:

- April 25, November 13, 2019, confirmed.

2/2

##### Actions, Employment Services:

- April 23, November 19, 2019, confirmed.

2/2= 100%



## Element 5. Inspections [130]

### 2. Programs / Residences:

#### Jingle Pot Home:

- April 18, October 9, 2019, confirmed.

2/2

#### Kennedy Home:

- April 16, October 3, 2019, confirmed.

2/2

#### Turner Connection Home:

- April 18, October 11, 2019, confirmed.

2/2

6/6= 100%

## 5.5 Checklists and Forms [13]

### Question 5.5

### Guidelines / References

Are inspection checklists or forms for workplace inspections being used? (all departments) (0-13 points)

There should be a pre-printed checklist that is used consistently, or at the very least, a form for use during inspections which identifies hazard levels and assigns responsibility for corrective action.

Scoring: Checklist used that identifies hazard levels and assigns responsibility: score 100%.

Checklist used that doesn't have all aspects: reduce by 33% for aspect missing.

No checklist used: score 0.

	D	I	O
<b>% Achieved</b>	100%	-	-
<b>Points Awarded</b>	13	-	-

**Score: 13/13**

### Findings / Notes

#### Documentation Comments:

Standard inspection checklists for forms used:

NACL Health and Safety Site Inspection Checklist:

#### 1. Hazard Levels:

- hazard level column (A, B, C), confirmed.

#### 2. Assigns Responsibilities:

- "action to be taken and by whom" column, confirmed.  
- identified on share vision, site inspection action items.

#### Departments:

##### 1. Administration:

Head Office - confirmed.

- Solutions Employment Centre - confirmed.

100%

##### 2. Programs / Residences:

- Jingle Pot Home - confirmed.



## Element 5. Inspections [130]

- Kennedy Home - confirmed.
  - Turner Connection Home - confirmed.
- 100%

### 5.6 Accountable Individual [19]

#### Question 5.6

Is there a process in place to ensure that someone is assigned responsibility to correct any deficiencies found during inspections? (all departments) (0-19 points)

#### Guidelines / References

Review documentation to determine if deficiencies found during inspections are brought to the attention of the people or departments who would be responsible for the correction of deficiencies.

Evidence may be found on the actual inspection forms, or in memos or other proof of communication to those responsible for correcting deficiencies.

If there is documented evidence, award 100% for the individual department. If not, award 0%.

Interview managers to determine who, if anyone, is assigned responsibility when deficiencies are found during inspections.

% Achieved

Points Awarded

D	I	O
100%	100%	-
13	6	-

Score: 19/19

#### Findings / Notes

##### Documentation Comments:

##### NACL Health and Safety Site Inspection Checklist:

- Hazard Levels:
  - hazard level column (A, B, C), confirmed.
- Assigns Responsibilities:
  - "action to be taken and by whom" column, confirmed.
  - identified on share vision, site inspection action items.

##### Departments:

- Administration:
  - Head Office - confirmed.
  - Solutions Employment Centre - confirmed.

100%

- Programs / Residences:
  - Jingle Pot Home - confirmed.
  - Kennedy Home - confirmed.
  - Turner Connection Home - confirmed.

100%

##### Interview Comments:

Positive responses from managers included yes they are assigned in the inspection form, yes, assignment found on share vision,



## Element 5. Inspections [130]

### 5.7 Corrective Action [26]

#### Question 5.7

Is there a system to ensure that any deficiencies are corrected in a timely manner? (all departments) (0-26 points)

#### Guidelines / References

Review several consecutive checklists or inspection reports within each department.

If a hazard rating system for prioritizing hazards is in use, and if identified hazards are rectified before the subsequent inspection, award 100% for that department. If not, award the percentage of positive findings. Auditors should go back as many months as necessary to ensure hazards are rectified, starting with high hazards. If there have been no high hazards, look for moderate hazards.

During observational tours, see if high hazard deficiencies have been corrected as shown during documentation review. If they are rectified, award 100%.

If any are found still requiring correction, award 0%.

Interview supervisors and safety committee members to see if high hazards are being rectified before the next inspection.

	D	I	O
<b>% Achieved</b>	100%	100%	100%
<b>Points Awarded</b>	7	12	7

**Score:** 26 / 26

#### Findings / Notes

##### Observation Comments:

##### Observation of implemented corrective actions:

##### 1. Administration:

##### Head Office:

April 25, 2019 inspection date:

- post universal precaution poster.
  - use of hazard rating confirmed.
  - action completed as observed by this auditor
- 1/1

- label cleaning bottles.
  - use of hazard rating confirmed.
  - action completed as observed by this auditor
- 1/1

- replace vent cover in ceiling.
  - use of hazard rating confirmed.
  - action completed as observed by this auditor
- 1/1

- secure shelving to wall.
  - use of hazard rating confirmed.
  - action completed as observed by this auditor
- 1/1

##### Actions / Employment Services:

April 23, 2019 inspection date:

- post universal precautions.
- use of hazard rating confirmed.



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## Element 5. Inspections [130]

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- action completed as observed by this auditor  
1/1

- post rules of procedures.  
- use of hazard rating confirmed.  
- action completed as observed by this auditor  
1/1

- secure shelves to wall.  
- use of hazard rating confirmed.  
- action completed as observed by this auditor  
1/1

- update safety manual.  
- use of hazard rating confirmed.  
- action completed as observed by this auditor  
1/1

8/8= 100%

### 2. Programs / Residences:

#### Jingle Pot Home:

April 18, 2019 inspection date:

- display lifting strategies in person served room.  
- use of hazard rating confirmed.  
- action completed as observed by this auditor  
1/1

- display universal precautions near sinks.  
- use of hazard rating confirmed.  
- action completed as observed by this auditor  
1/1

- replace MSDS in file with cleaning products.  
- use of hazard rating confirmed.  
- action completed as observed by this auditor  
1/1

- post evacuation maps near doors.  
- use of hazard rating confirmed.  
- action completed as observed by this auditor  
1/1

#### Kennedy Home:

April 16, 2019 inspection date:

- update safety manual  
- use of hazard rating confirmed.  
- action completed as observed by this auditor.  
1/1

- post evacuation plans.  
- use of hazard rating confirmed.  
- action completed as observed by this auditor.  
1/1

- attach inventory list to earthquake kit.  
- use of hazard rating confirmed.  
- action completed as observed by this auditor.  
1/1

#### Turner Connection Home:



---

## Element 5. Inspections [130]

---

April 18, 2019 inspection:

- post universal precaution poster by sink.
  - use of hazard rating confirmed.
  - action completed as observed by this auditor.
- 1/1

- post WHMIS procedures.
  - use of hazard rating confirmed.
  - action completed as observed by this auditor.
- 1/1

- update JOHSC meeting minutes.
  - use of hazard rating confirmed.
  - action completed as observed by this auditor.
- 1/1

- place emergency procedures by exits.
  - use of hazard rating confirmed.
  - action completed as observed by this auditor.
- 1/1

11/11= 100%

### Documentation Comments:

-----  
The following documentation for all departments was used to assess systems that ensure deficiencies are corrected in a timely manner:

#### 1. Administration:

Head Office:

April 25, 2019 inspection date:

- post universal precaution poster.
  - use of hazard rating confirmed.
  - action completed as observed by this auditor
- 1/1

- label cleaning bottles.
  - use of hazard rating confirmed.
  - action completed as observed by this auditor
- 1/1

- replace vent cover in ceiling.
  - use of hazard rating confirmed.
  - action completed as observed by this auditor
- 1/1

- secure shelving to wall.
  - use of hazard rating confirmed.
  - action completed as observed by this auditor
- 1/1

#### Actions / Employment Services:

April 23, 2019 inspection date:

- post universal precautions.
  - use of hazard rating confirmed.
  - action completed as observed by this auditor
- 1/1



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## Element 5. Inspections [130]

---

- post rules of procedures.
- use of hazard rating confirmed.
- action completed as observed by this auditor  
1/1

- secure shelves to wall.
- use of hazard rating confirmed.
- action completed as observed by this auditor  
1/1

- update safety manual.
- use of hazard rating confirmed.
- action completed as observed by this auditor  
1/1

8/8= 100% (use of hazard rating confirmed)

### 2. Programs / Residences:

#### Jingle Pot Home:

April 18, 2019 inspection date:

- display lifting strategies in person served room.
- use of hazard rating confirmed.
- action completed as observed by this auditor  
1/1

- display universal precautions near sinks.
- use of hazard rating confirmed.
- action completed as observed by this auditor  
1/1

- replace MSDS in file with cleaning products.
- use of hazard rating confirmed.
- action completed as observed by this auditor  
1/1

- post evacuation maps near doors.
- use of hazard rating confirmed.
- action completed as observed by this auditor  
1/1

#### Kennedy Home:

April 16, 2019 inspection date:

- update safety manual
- use of hazard rating confirmed.
- action completed as observed by this auditor.  
1/1

- post evacuation plans.
- use of hazard rating confirmed.
- action completed as observed by this auditor.  
1/1

- attach inventory list to earthquake kit.
- use of hazard rating confirmed.
- action completed as observed by this auditor.  
1/1

#### Turner Connection Home:

April 18, 2019 inspection:

- post universal precaution poster by sink.
- use of hazard rating confirmed.



## Element 5. Inspections [130]

- action completed as observed by this auditor.  
1/1

- post WHMIS procedures.  
- use of hazard rating confirmed.  
- action completed as observed by this auditor.  
1/1

- update JOHSC meeting minutes.  
- use of hazard rating confirmed.  
- action completed as observed by this auditor.  
1/1

- place emergency procedures by exits.  
- use of hazard rating confirmed.  
- action completed as observed by this auditor.  
1/1

11/11= 100% (use of hazard rating)

### Interview Comments:

-----  
Positive responses from managers included right away, always, yes,

Positive responses from supervisors included yes things are corrected right away, yes from my experience,

Positive responses from workers included immediately, yes we date them and make sure they are done,

## Element: 5. Inspections [130]

### Scoring Summary

<b>Total Points Awarded:</b>	128
<b>Total Points Available:</b>	130
<b>Overall % Awarded:</b>	98 %

## Element 6. Incident Investigation [130]

### 6.1 Policy [13]

#### Question 6.1

Is there a written policy or procedure for investigation of hazards, accidents and near-miss incidents? (corporate) (13 points)

#### Guidelines / References

This document may be in a formal written safety program document, or as a stand-alone document.

If it exists, award 100%. If not, award 0%.

	D	I	O
<b>% Achieved</b>	100%	-	-
<b>Points Awarded</b>	13	-	-

**Score:** 13/13

#### Findings / Notes

##### Documentation Comments:

The organization has written procedures for investigation of hazards, accidents and near-miss incidents as evidenced by:

HS044-P, January 2020, Staff Incident Investigations:

- includes purpose, procedures, preliminary report, full investigation, corrective action.
- requirement for the investigation team to be comprised of, at least, an employer representative (program supervisor) and an employee representative (senior residence worker / program coordinator / site H&S representative / OH&S committee member), confirmed.
- requirements for 48 hour initial investigation and submission of full investigation to WSBC within 30 days confirmed.

100%

### 6.2 Reporting [13]

#### Question 6.2

Does the written policy or procedure clearly direct what types of incidents are to be reported to WorkSafeBC? (corporate) (13 points)

#### Guidelines / References

Incidents which must be reported include:

- Any incident that kills or seriously injures a worker
- A major leak or release of a toxic substance
- A major structural failure or collapse of a building, bridge, tower, crane, hoist, temporary support system or excavation
- Any incident requiring medical aid or time loss from work; these must be reported within 3 days and include:
  - work-related injuries
  - every disabling occupational disease, or claim for occupational disease or allegation of an occupational disease

If the written instruction includes all of these, award 100%. If not, award 0%.

Deduct 20% for each aspect missing.

	D	I	O
<b>% Achieved</b>	100%	-	-
<b>Points Awarded</b>	13	-	-

**Score:** 13/13

#### Findings / Notes

##### Documentation Comments:

Incidents to be reported to WSBC:



## Element 6. Incident Investigation [130]

HS042-P, January 2020, Incidents, incident reporting and incident investigations.

Incident Reporting:

Report Immediately:

1. Any incident that kills or seriously injures a worker - confirmed.
2. A major leak or release of a toxic substance - confirmed.
3. A major structural failure or collapse of a building, bridge, tower, crane, hoist, temporary support system or excavation - confirmed.

Within 3 days:

4. an incident requiring medical aid or lost time including a work related injury, confirmed.
5. Every disabling occupational disease or claim for occupational disease or allegation of an occupational disease -confirmed.

5/5= 100%

### 6.3 Followed [7]

#### Question 6.3

Is the policy or procedure being followed? (all departments) (0-7 points)

#### Guidelines / References

Review ten reportable workplace injury claims from the past year to determine if the incidents were reported to WorkSafeBC within the 3 business days. If the organization has not had ten reportable incidents, review however many there have been in the past year.

Points are awarded based on the percentage of incidents that were reported as required, in the department in which the incident occurred. (In some cases this documentation may be filed corporately; score in the department in which the injury occurred)

	D	I	O
<b>% Achieved</b>	100%	-	-
<b>Points Awarded</b>	7	-	-

**Score:** 7/7

#### Findings / Notes

Documentation Comments:

-----  
Prompt reporting of incidents being reported.

There were 37 reportable incidents reported to WSBC in the past 12 months.

The following 10 reportable incidents (name, date of incidents) were used to determine if incidents are being promptly reported to WorkSafeBC:

Departments:

Administration:

- na.

Programs / Residences

#1. Sore Shoulder (medical aid): Kennedy

- date reported to NACL - July 16, 2019.

- date reported to WSBC - July 17, 2019.

- reporting within three days confirmed.

1/1

#2. Back strain (medical aid): Kennedy

- date reported to NACL - May 7, 2019.

- date reported to WSBC - May 8, 2019.



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## Element 6. Incident Investigation [130]

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- reporting within three days confirmed.  
1/1

#3. Face trauma (medical aid): Kennedy  
- date reported to NACL - August 22, 2019.  
- date reported to WSBC - August 22, 2019.  
- reporting within three days confirmed.  
1/1

#4. Abdominal strain (medical aid): Maxey road  
- date reported to NACL - October 28, 2019.  
- date reported to WSBC - October 28, 2019.  
- reporting within three days confirmed.  
1/1

5. Impact to right side (medical aid): Maxey road  
- date reported to NACL - October 1, 2019.  
- date reported to WSBC - October 4, 2019.  
- reporting within three days confirmed.  
1/1

6. Neck strain (medical aid): Jingle Pot road  
- date reported to NACL - December 8, 2019.  
- date reported to WSBC - December 10, 2019.  
- reporting within three days confirmed.  
1/1

7. Ankle injury (medical aid): store  
- date reported to NACL - December 6, 2019.  
- date reported to WSBC - December 10, 2019.  
- reporting within three days confirmed.  
1/1

8. Neck shoulder injury (medical aid): Casper road  
- date reported to NACL - July 11, 2019.  
- date reported to WSBC - July 12, 2019.  
- reporting within three days confirmed.  
1/1

9. Neck injury (medical aid): Jingle pot  
- date reported to NACL - November 14, 2019.  
- date reported to WSBC - November 18, 2019.  
- reporting within three days confirmed.  
1/1

10. Lower back strain (medical aid): Maxy road  
- date reported to NACL - March 9, 2019.  
- date reported to WSBC - December 12, 2019.  
- reporting within three days confirmed.  
1/1

10/10= 100%



## Element 6. Incident Investigation [130]

### 6.4 Forms Availability [13]

#### Question 6.4

Are standardized incident investigation forms readily available and used? (all departments) (13 points)

#### Guidelines / References

During observational tours, ensure they are used throughout the organization.

If there is a standardized form, award 100% in each department used. If not, award 0%.

	D	I	O
% Achieved	-	-	100%
Points Awarded	-	-	13

Score: 13/13

#### Findings / Notes

##### Observation Comments:

Observed use of standardized incident investigation form:

Investigations are managed using a standard accident / investigation form (WSBC format). The following departments were reviewed to confirm use of the online forms:

##### 1. Administration:

- na

##### 2. Programs / Residences:

Jingle Pot home - confirmed.

Kennedy home - confirmed.

Turner Connection home - confirmed.

100%

### 6.5 Awareness [13]

#### Question 6.5

Are workers aware of the incident/accident reporting process? (all departments) (0-13 points)

#### Guidelines / References

Interview workers to see if they are aware of the incident/accident reporting process.

	D	I	O
% Achieved	-	100%	-
Points Awarded	-	13	-

Score: 13/13

#### Findings / Notes

##### Interview Comments:

Positive responses from workers included offer first aid, ask if they are ok, attend to the injured worker, assess the site for hazard, contact the SRW, complete an incident report, complete a report in share vision, make sure the residents are ok as well, call the hospital if necessary, complete an incident report online, let my supervisor know, complete the critical incident report, call 911 if needed,



## Element 6. Incident Investigation [130]

### 6.6 Involvement [13]

#### Question 6.6

Are appropriate staff involved in investigations, and have they received training in investigation procedures, and in the organizations policy/procedure for investigations?  
(documentation: corporate. Interviews: all depts) (0-13 points)

#### Guidelines / References

Review the incidents identified for question 6.3, assess whether appropriate employees are participating in the investigation. The investigation should be done by persons knowledgeable in the work, and should include an employer and a worker representative.

Points are awarded based on the percentage of positive findings.

Interview staff responsible for conducting investigations.

	D	I	O
% Achieved	63%	100%	-
Points Awarded	4	6	-

Score: 10 / 13

#### Findings / Notes

##### Documentation Comments:

Appropriate staff conducting the investigation:

10 reportable incidents were reviewed:

##### Departments:

Administration:

- na.

##### Programs / Residences

#1. Sore Shoulder (medical aid):

Employer Representative:

- SP Manager, confirmed.
- investigation training not confirmed.

Employee Representative:

- CSW, OH&S member,
- investigation training not confirmed.

2/4

#2. Back strain (medical aid): Kennedy

Employer Representative:

- SP Manager, confirmed.
- investigation training not confirmed.

Employee Representative:

- CSW, OH&S member,
- investigation training not confirmed.

2/4

#3. Face trauma (medical aid): Kennedy

Employer Representative:

- SP Manager, confirmed.
- investigation training not confirmed.

Employee Representative:

- CSW, OH&S member,
- investigation training confirmed (October 2017).

3/4

#4. Abdominal strain (medical aid): Maxey road

Employer Representative:

- Program Manager, confirmed,
- investigation training (October 2017) confirmed.

Employee Representative:

- Senior resident worker,
- investigation training not confirmed.



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## Element 6. Incident Investigation [130]

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3/4

5. Impact to right side (medical aid): Maxey road

Employer Representative:

- Program Manager, confirmed,
- investigation training (October 2017) confirmed.

Employee Representative:

- Senior resident worker,
- investigation training not confirmed.

3/4

6. Neck strain (medical aid): Jingle Pot road

Employer Representative:

- Program Manager, confirmed,
- investigation training (October 2017) confirmed.

Employee Representative:

- Senior resident worker,
- investigation training not confirmed.

3/4

7. Neck strain (medical aid): Jingle Pot road

Employer Representative:

- Quality assurance Manager, confirmed,
- investigation training not confirmed.

Employee Representative:

- CSW, confirmed.
- investigation training not confirmed.

2/4

8. Neck shoulder injury (medical aid): Casper road

Employer Representative:

- Program Manager, confirmed,
- investigation training not confirmed.

Employee Representative:

- Senior resident worker, confirmed.
- investigation training confirmed (August 28, 2019)

3/4

9. Neck strain (medical aid): Jingle Pot road

Employer Representative:

- Program Manager, confirmed,
- investigation training not confirmed.

Employee Representative:

- not confirmed.
- investigation training not confirmed

1/4

10. Lower back strain (medical aid): Maxy road

Employer Representative:

- Program Manager, confirmed,
- investigation training (October 2017) confirmed.

Employee Representative:

- Senior resident worker,
- investigation training not confirmed.

3/4

25/40= 63%

Interview Comments:

## Element 6. Incident Investigation [130]

Positive responses from managers included yes I conduct investigation and I have had investigation training,

Positive responses from supervisors included

Positive responses from workers included yes I conduct investigation and I have had investigation training,

### Suggestions For Improvement

Recommend appropriate staff are involved in investigations and that they have received investigation training. Ensuring the investigation team includes, at a minimum, an employer representative and an employee representative would assist in achieving this recommendation. Ensuring staff involved in conducting investigations receive formal training from a qualified individual on a regular basis would assist in achieving this recommendation.

Suggest appropriate staff receive regular training in conducting investigations. This should include managers, supervisors and JOHSC members who are conducting investigations.

### 6.7 Near Miss [13]

#### Question 6.7

Are "near miss" incidents being reported? (all departments) (0-13 points)

#### Guidelines / References

Near miss incidents are those which could have resulted in serious injury or death, but did not result in any injury or damage to equipment or facilities. Interview Supervisors and Workers to discover if they are aware of the need to report these incidents, and if they are being reported.

**% Achieved**  
**Points Awarded**

D	I	O
-	100%	-
-	13	-

**Score:** 13 / 13

### Findings / Notes

#### Interview Comments:

Positive responses from supervisors included yes they report near misses to me, I get reports of close calls, recorded in our log book, yes and they are recorded in the staff injury report form,

Positive responses from workers included I had a close call and I reported it, yes I reported it,

### 6.8 Preventative Action [18]

#### Question 6.8

Are recommendations for prevention or remedial action assigned and are the recommendations implemented? (all departments) (0-18 points)

#### Guidelines / References

Review the incidents identified in question 6.3, determine if recommendation for prevention or remedial action is assigned. Points are awarded based on the percentage of positive findings.

During observational tours, determine if recommendations found in selected incident investigations have been implemented. This may require some informal discussions with workers in the field. Points are awarded based on the percentage of positive findings.

**% Achieved**  
**Points Awarded**

D	I	O
100%	-	90%
12	-	5

**Score:** 17 / 18

### Findings / Notes

#### Observation Comments:



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## Element 6. Incident Investigation [130]

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Observation of implementation of recommendations:

10 reportable incidents were reviewed:

Departments:

Administration:

- na.

Programs / Residences

#1. Sore Shoulder (medical aid):

- recommendation to make staff aware of procedures in dealing with a person service who is not in a good mood (Person centered plan, Res. Learning log)
- assignment confirmed.

- implementation of recommendation confirmed (residence leaning log, August 13, 2019)

1/1

#2. Back strain (medical aid): Kennedy

- recommendation to keep bin on side of road.
- assignment confirmed.
- implementation of recommendation confirmed by auditor (observed on site).

1/1

#3. Face trauma (medical aid): Kennedy

- recommendation for staff to purchase a cart.
- assignment confirmed.
- implementation of recommendation confirmed by auditor (a cart is now used for transporting groceries).

1/1

#4. Abdominal strain (medical aid): Maxey road

- recommendation to have safety committee educate staff on H&S systems.
- assignment confirmed.
- implementation of recommendation confirmed by auditor (OH&S meeting, December 3, 2019).

1/1

5. Impact to right side (medical aid): Maxey road

- recommendation to investigate switching the door to open in the opposite direction
- assignment confirmed.
- implementation of recommendation confirmed by auditor (October 10, 2019, corrective action records).

1/1

6. Neck strain (medical aid): Jingle Pot road

- recommendation to have staff review protocol for safe body mechanics.
- assignment confirmed.
- implementation of recommendation not confirmed by auditor.

0/1

7. Neck strain (medical aid): store

- recommendation to advise employees to avoid areas in stores where display merchandise is being assembled.
- assignment confirmed.
- implementation of recommendation confirmed by auditor (email of December 16, 2019).

1/1

8. Neck shoulder injury (medical aid): Casper road

- recommendation to assign "touch chat" to specific staff.
- assignment confirmed.
- implementation of recommendation confirmed by auditor (September 11, 2019 corrective action log).

1/1

9. Neck strain (medical aid): Jingle Pot road

- recommendation to create specific risk assessment to address safety issue.



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## Element 6. Incident Investigation [130]

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- assignment confirmed.
- implementation of recommendation confirmed by auditor (risk assessment, December 31, 2019).

10. Lower back strain (medical aid): Maxy road
- recommendation to have staff re-trained for when person served fall.
  - assignment confirmed. OT
  - implementation of recommendation confirmed by auditor (in progress).

9/10= 90%

### Documentation Comments:

-----  
Assignment / Implementation of Recommendations:

10 reportable incidents were reviewed:

Departments:  
Administration:  
- na.

### Programs / Residences

- #1. Sore Shoulder (medical aid):
- recommendation to make staff aware of procedures in dealing with a person service who is not in a good mood (Person centered plan, Res. Learning log)
  - assignment confirmed.
  - implementation of recommendation confirmed (residence leaning log, August 13, 2019)
- 1/1

- #2. Back strain (medical aid): Kennedy
- recommendation to keep bin on side of road.
  - assignment confirmed.
  - implementation of recommendation confirmed by auditor (observed on site).
- 1/1

- #3. Face trauma (medical aid): Kennedy
- recommendation for staff to purchase a cart.
  - assignment confirmed.
  - implementation of recommendation confirmed by auditor (a cart is now used for transporting groceries).
- 1/1

- #4. Abdominal strain (medical aid): Maxey road
- recommendation to have safety committee educate staff on H&S systems.
  - assignment confirmed.
  - implementation of recommendation confirmed by auditor (OH&S meeting, December 3, 2019).
- 1/1

5. Impact to right side (medical aid): Maxey road
- recommendation to investigate switching the door to open in the opposite direction
  - assignment confirmed.
  - implementation of recommendation confirmed by auditor (October 10, 2019, corrective action records).
- 1/1

6. Neck strain (medical aid): Jingle Pot road
- recommendation to have staff review protocol for safe body mechanics.
  - assignment confirmed.
  - implementation of recommendation not confirmed by auditor.
- 1/1

7. Neck strain (medical aid): store



## Element 6. Incident Investigation [130]

- recommendation to advise employees to avoid areas in stores where display merchandise is being assembled.
  - assignment confirmed.
  - implementation of recommendation confirmed by auditor (email of December 16, 2019).
- 1/1

8. Neck shoulder injury (medical aid): Casper road
- recommendation to assign "touch chat" to specific staff.
  - assignment confirmed.
  - implementation of recommendation confirmed by auditor (September 11, 2019 corrective action log).
- 1/1

9. Neck strain (medical aid): Jingle Pot road
- recommendation to create specific risk assessment to address safety issue.
  - assignment confirmed.
  - implementation of recommendation confirmed by auditor (risk assessment, December 31, 2019).

10. Lower back strain (medical aid): Maxy road
- recommendation to have staff re-trained for when person served fall.
  - assignment confirmed. OT
  - implementation of recommendation confirmed by auditor (in progress).

10/10= 100% (assignment confirmed)

### Suggestions For Improvement

Recommend assigned remedial actions are implemented as required. Ensuring all remedial actions include clear and verifiable corrective actions to address incident particulars (fixing, attend to injury, return to work program, reporting, documentation, etc.) and clear and verifiable preventative actions to ensure the incident will not happen again (re-orientation, re-training, improved hazard awareness, MSI communications, fatigue factors, communication factors, etc.) will assist in achieving this recommendation.

Suggest documenting instructions regarding remedial actions given to workers in staff talks and/or read and sign meetings to ensure implementation of remedial actions can be verified by others (examples, safe lifting techniques, avoiding repetitive motions, stretching / exercising, etc.).

Suggest use of a corrective action log (CAL) to document and track all remedial actions from investigations to ensure assigned actions are being implemented and completed when required. Completion of all actions should be documented.

Suggest recommendations made at the conclusion of investigations to prevent the re-occurrence of an incident are SMART (specific, measurable, achievable, realistic, time based) to facilitate verification by a third party.

### 6.9 Communication [13]

#### Question 6.9

Are corrective actions communicated to workers? (all departments) (0-13 points)

#### Guidelines / References

Interview workers to determine if corrective actions are communicated. Results can be communicated through safety meetings, posted on bulletin boards, distributed to workers involved in the incident, or any other appropriate means.

	D	I	O
<b>% Achieved</b>	-	71%	-
<b>Points Awarded</b>	-	9	-

**Score:** 9 / 13

### Findings / Notes

#### Interview Comments:

Positive responses from workers included yes at our JOHSC meetings, yes at our monthly staff meeting, documented in share vision, yes they are posted online,



## Element 6. Incident Investigation [130]

Negative responses indicated a lack of awareness of corrective actions from investigations.

### Suggestions For Improvement

Recommend investigation corrective actions are communicated to workers. Communicating the results of incident investigations (using generalized wording) at staff / crew meetings, postings on the intranet and safety boards and included in monthly new letters would assist in achieving this recommendation.

Suggest corrective actions recorded in JOHSC meeting minutes are reviewed with workers at staff meetings.

### 6.10 Management Review [14]

#### Question 6.10

Are investigation reports reviewed by management? (all departments) (0-14 points)

#### Guidelines / References

An indication that management is reviewing investigations may be evidenced by signatures on the investigation reports or by minutes of meetings where incidents are reviewed.

Points are awarded based on the percentage of positive findings.

Interview Managers to determine if they are reviewing investigations of incidents within their departments.

% Achieved

Points Awarded

D	I	O
100%	100%	-
7	7	-

Score: 14 / 14

### Findings / Notes

Documentation Comments:

Management review of investigation reports:

Departments:  
Administration:  
- na.

Programs / Residences

#1. Sore Shoulder (medical aid):

- investigation report reviewed by management (senior program manager) as verified by signature on report.  
1/1

#2. Back strain (medical aid): Kennedy

- investigation report reviewed by management as verified by signature on report.  
1/1

#3. Face trauma (medical aid): Kennedy

- investigation report reviewed by management as verified by signature on report.  
1/1

#4. Abdominal strain (medical aid): Maxey road

- investigation report reviewed by management as verified by signature on report.  
1/1

5. Impact to right side (medical aid): Maxey road

- investigation report reviewed by management (program manager) as verified by signature on report.  
1/1

6. Neck strain (medical aid): Jingle Pot road

- investigation report reviewed by management (program manager) as verified by signature on report.  
1/1

7. Neck strain (medical aid): Jingle Pot road

- investigation report reviewed by management (program manager) as verified by signature on report.  
1/1



## Element 6. Incident Investigation [130]

8. Neck shoulder injury (medical aid): Casper road  
- investigation report reviewed by management (program manager) as verified by signature on report.  
1/1

9. Neck strain (medical aid): Jingle Pot road  
- investigation report reviewed by management (program manager) as verified by signature on report.  
1/1

10. Lower back strain (medical aid): Maxy road  
- investigation report reviewed by management (program manager) as verified by signature on report.  
1/1

10/10= 100%

Interview Comments:

.....  
Positive responses from managers included yes I review the more serious incident investigations, yes I do, I would if they happened in my department,

## Element: 6. Incident Investigation [130]

### Scoring Summary

<b>Total Points Awarded:</b>	122
<b>Total Points Available:</b>	130
<b>Overall % Awarded:</b>	94 %



## Element 7. Program Administration [100]

### 7.1 Communication [20]

#### Question 7.1

Are workers given an opportunity to discuss current and on-going health and safety issues? (all departments) (0-20 points)

#### Guidelines / References

These could be regular safety meetings, tailgate/toolbox meetings, or on-the job discussions. Ensure that as a minimum, a record is reviewed for each department/combined department.

Points are awarded based on the percentage of positive findings.

Interview supervisors and workers.

	D	I	O
% Achieved	84%	100%	-
Points Awarded	4	15	-

**Score:** 19/20

#### Findings / Notes

##### Documentation Comments:

Documentation of safety discussion with workers:

##### Departments:

1. Administration:

Head Office:

Administration (every month, all office staff):

- January 7, 2020, December 10, November 26, October 15, September 3, 2019, confirmed.

1/1

##### Actions Day Program:

- staff meeting, weekly - January 8, 2020, December 18, 11, November 27, 20, 13, 2019, confirmed.

- communications logbook, used daily, confirmed.

##### Employment Day Services Program:

- staff meetings, weekly - December 23, 16, 2, November 25, 18, 4, 2019, confirmed.

1/1

##### Home Share Program: (96 contractors)

One on one meetings, held annually, 3 contractor records reviewed:

- #1, August 2, 2018, September 3, 2019,

- #2, January 23, 2019, January 28, 2020,

- #3, October 17, 2018, October 16, 2019,

Monthly communication records, report in to share vision on past month activities, confirmed.

Daily communications, notes are documented on a daily basis by home share managers (4), confirmed.

3/3

5/5= 100%

##### 2. Programs / Residences:

###### Jingle Pot Home:

Staff meeting (every 6 weeks) - November 8, August 13, 23, July 22, May 27, April 24, February 6, January 28, 2019, confirmed.

Communication logs - paper based, completed daily or as needed and signed by employees.

2/2

###### Kennedy Home:

Staff meeting (every 6 weeks) - documentation not confirmed.

Communication logs - paper based, completed daily or as needed and signed by employees.

1/2

###### Turner Connection Home:



## Element 7. Program Administration [100]

Staff meeting (every 6 weeks) - November 6, October 30, ???, March 26, 2019, not confirmed.  
Communication logs - paper based, completed daily or as needed and signed by employees.

1/2

4/6= 67%

### Interview Comments:

Positive responses from supervisors included yes we have weekly meetings, every 6 months, daily communication log books,

Positive responses from workers included our daily communication log books, our staff meeting every 2 months, every couple of months, handover meetings, we have a communication log book on site, home page on share vision, monthly staff meetings,

### Suggestions For Improvement

Recommend workers are given an opportunity to discuss current and on-going health and safety issues. Scheduling and documenting meetings at which safety can be discussed will assist in achieving this recommendation.

Suggest adhering to a meeting schedule and documenting each meeting.

## 7.2 Document Management [10]

### Question 7.2

Is there a process to organize and manage safety management system documentation? (documentation: corporate; observation: all departments) (0-10 points)

### Guidelines / References

Documentation includes: safety minutes, inspections, investigations, safe work procedures, risk assessments, training records.

If there is a process in place, award 100%. Deduct 17% for each aspect missing from the above list.

Observe someone in the organization accessing safety management system documentation.

If someone can demonstrate how documentation is accessed, award 100%. If no one can demonstrate, award 0.

**% Achieved**  
**Points Awarded**

	D	I	O
% Achieved	100%	-	100%
Points Awarded	5	-	5

**Score: 10 / 10**

### Findings / Notes

#### Observation Comments:

Observation of access safety management system:

Managers, supervisors and workers were observed access OH&S policy and procedure binders, meeting records, inspection records, etc. on Share Vision.

#### 1. Administration:

Head Office - confirmed.

Actions / Employment services - confirmed.

100%

#### 2. Programs / Residences:

Jingle Pot home - confirmed.

Kennedy home - confirmed.

Turner Connection home - confirmed.



## Element 7. Program Administration [100]

100%

### Documentation Comments:

Program documentation is managed by:

#### Share Vison Intranet Website:

- use to document and manage all policies, procedures and documentation related to the OH&S program.
- documentation is maintained by each department.

#### Documentation includes:

1. Safety minutes:
  - electronic and hard copies, managed by head office, confirmed.
  - maintained by each department.
2. Inspections:
  - hard copies are maintained by head office.
  - recorded on Share Vison.
3. Investigations:
  - electronic and hard copy format, maintained by HR at head office,
4. Safe work procedures:
  - electronic copies on the intranet and hard copies.
5. Risk Assessments:
  - electronic and hard copies maintained by head office.
6. Training records:
  - electronic and hard copies maintained by HR at head office.

6/6= 100%

## 7.3 Goal and Objectives [15]

### Question 7.3 A

### Guidelines / References

Are health and safety goals and objectives identified on an annual basis? (Documentation: corporate; Interview: all departments) (0-10 points)

Review minutes of management meetings, safety meetings, etc. for an indication of goal and objective setting.

If goals and objectives are identified on an annual basis, award 100%. If not, award 0.

Interview Managers to determine if Corporate and departmental safety goals and objectives are identified on an annual basis.

	D	I	O
<b>% Achieved</b>	100%	40%	-
<b>Points Awarded</b>	5	2	-

	D	I	O
<b>% Achieved</b>	100%	40%	-
<b>Points Awarded</b>	5	2	-

**Score:** 7 / 10

### Findings / Notes

#### Documentation Comments:

Annual health and safety goals and objectives:

Governance Plans and Reports:



## Element 7. Program Administration [100]

- generated annually

2019:

Goals (outcomes):

- 9 outcomes identified.

Objectives (to achieve outcome)

- 1 per outcome.

2018:

Goals (outcomes):

- 7 outcomes identified.

Objectives (to achieve outcome)

- 1 - 2 per outcome.

100%

Interview Comments:

Positive responses from managers included we have annual outcomes and means to achieve those goals, done annually and posted on share vision,

Negative responses included no, we don't identify health and safety goals,

### Suggestions For Improvement

Recommend health and safety goals and objectives are identified on an annual basis. Communicating identified annual health and safety goals (outcomes / measure to achieve outcomes) to all employees at JOHSC meetings, staff talks, staff meetings and on the intranet, would assist in achieving this recommendation.

Suggest including safety goals and objectives in a corrective action log to measure and assess their achievement at the end of each year.

### Question 7.3 B

If this is a Maintenance or Re-Certification Audit: Is there evidence that effort was made to address previous action plans? (Corporate) (5 points)

### Guidelines / References

Review action plan from previous year. Did the organization complete the action items, or provide acceptable information as to why they weren't completed?

Award a percent of positive findings (i.e. if they had 10 action items and completed 5, award 50%). If the organization identified why priorities shifted, the auditor must take that into account.

If this is not a maintenance or re-certification audit, identify this question as n/a.

% Achieved

Points Awarded

D	I	O
0%	-	-
-	-	-

Score: 0/0

### Findings / Notes

Documentation Comments:

Completion of COR Maintenance Audit Action Plan:

- COR Certification Audit = na.

## Element 7. Program Administration [100]

### 7.4 Record Keeping [10]

#### Question 7.4

Are records kept of lost time, medical aid, first aid and near miss incidents? (corporate) (10 points)

#### Guidelines / References

These records may be kept in a central location or on individual personnel files.

If records of all of these are kept, award 100%. If not, deduct 25% for each missing category.

**% Achieved**  
**Points Awarded**

D	I	O
75%	-	-
0	-	-

**Score:** 0 / 10

#### Findings / Notes

Documentation Comments:

Records of lost time, medical aid, first aid and near miss incidents:

Documentation:

1. Work Safe BC Employer Report for NACL.
2. Staff Incident Data - excel spread sheet tracking all employee injures and absences.
3. NACL Health and Safety Report (annual)

Records include:

1. Lost time:
  - Work Safe BC Employer Report for NACL, claims summary, documentation confirmed.
2. Medical aid:
  - "sought medical attention", staff incident data, confirmed.
  - Work Safe BC Employer Report for NACL, Summary of Injuries report, WCB, documentation confirmed.
3. First Aid:
  - not confirmed.
4. Near misses:
  - H&S report, close calls, confirmed.

3/4= 75%

#### Suggestions For Improvement

Recommend records are kept of lost time, medical aid, first aid and lost time. Ensuring records are maintained for each of these, as a minimum, would assist in achieving this recommendation.

### 7.5 Statistics [20]

#### Question 7.5

Are health and safety statistical reports generated and shared on an ongoing basis? ?

(Documentation: corporate; Interview: all departments) (0-20 points)

#### Guidelines / References

"Ongoing" could be monthly, quarterly or semi-annually, but should be more frequently than once per year.

If they are generated and shared semi-annually or more often, award 100%. If they are generated and shared annually, award 50%. If generated less than annually or not shared, award 0.

Interview managers and safety committee members to determine if statistical reports are shared.

**% Achieved**  
**Points Awarded**

D	I	O
0%	100%	-
0	10	-

**Score:** 10 / 20

#### Findings / Notes



## Element 7. Program Administration [100]

### Documentation Comments:

#### Health and Safety Statistical Reports:

- WSBC portal is only shared with management.
- NACL H&S annual report is only shared with management.
- Share Vision staff incident data is only shared with management.
- ongoing statistical report (at least twice a year), not confirmed.
- sharing of health and safety statistical information (question 7.4 as a minimum) with all employees is not confirmed.

0/2= 0%

### Interview Comments:

Positive responses from managers included yes statistical reports are produced by our quality assurance manager, shared annually and monthly, posted on share vision,

Positive responses from supervisors included

Positive responses from workers included we review number and type of incidents each month, we review these at every meeting,

### Suggestions For Improvement

Recommend health and safety statistics are generated and shared on an ongoing basis. Ensuring health and safety statistics are generated at least twice a year and shared with all employees would assist in achieving this recommendation.

Suggest health and safety statistics are shared in JOHSC meeting minutes, posted on safety bulletin boards, posted in share vision, etc;

## 7.6 Performance Review [10]

### Question 7.6

Does the organization compare health and safety performance from year to year?  
(Documentation: corporate; interview: all departments) (0-10 points)

### Guidelines / References

Look for proof of this occurring, in management or safety committee meeting minutes.

If there is documented proof that this is occurring, award 100%.If not, award 0%.

Interview Managers to determine if safety performance is compared from year to year.

	D	I	O
<b>% Achieved</b>	100%	60%	-
<b>Points Awarded</b>	5	3	-

**Score: 8 / 10**

### Findings / Notes

#### Documentation Comments:

#### Safety performance comparison from year to year:

- WSBC Employer Report for NACL,
  - compares safety performance from 2014 to 2019, confirmed.
  - includes time loss, RtW, serious injuries, sprains/ strains, various accident types, confirmed.

- NACL Health and Safety Report
  - compares safety performance from year to year.

100%



## Element 7. Program Administration [100]

### Interview Comments:

Positive responses from managers included they are compared year to year, yes, year to year,

Negative responses indicated a lack of awareness of safety performance comparison.

### Suggestions For Improvement

Recommend the organization compares health and safety performance from year to year. Ensuring the process of tracking safety performance from year to year is well communicated to employees at staff meetings, JOHSC meetings, staff meetings, etc. would assist in achieving this recommendation.

### 7.7 Analysis [15]

#### Question 7.7

Are annual statistics analyzed and needs or trends identified? (Documentation: corporate; interview: all departments) (0-15 points)

#### Guidelines / References

Look for evidence in minutes of Safety Meetings, posted on bulletin boards or communicated in some other fashion.

If there is evidence that an analysis takes place, award 100%. If not, award 0%.

Interview members of the Safety Committee to determine if annual statistical analysis occurs.

**% Achieved**  
**Points Awarded**

D	I	O
100%	100%	-
5	10	-

**Score: 15 / 15**

### Findings / Notes

#### Documentation Comments:

#### Analysis of annual statistics:

NACL Health and Safety Report 2018 / 2019:  
- includes 6 recommendations for subsequent goals and objectives.

100%

### Interview Comments:

Positive responses from managers included yes in the health and safety report as recommendations

Positive responses from supervisors included

Positive responses from workers included yes we look for trends during our annual review of our statistics,

## Element: 7. Program Administration [100]

### Scoring Summary

<b>Total Points Awarded:</b>	69
<b>Total Points Available:</b>	95
<b>Overall % Awarded:</b>	73 %



## Element 8. Joint Health and Safety Committee [70]

### 8.1 Committee [9]

#### Question 8.1

Has a Joint Health and Safety Committee been established? (documentation: corporate; Observation: all departments) (0-9 points)

#### Guidelines / References

Determine through documentation if there is a Joint Health and Committee with either equal representation from workers and management, or at the very least, no more management representatives than worker representatives, and that the JOHSC has been in place for at least one year. Further, if the organization has a Fire Department, determine if there is a separate committee for the Fire Department.

If the organization has a fire department and has at least one JOHSC for the organization and one for the fire department (minimum 2 committees), 100% is awarded. If the organization does not have a separate JOHSC for the fire department, 70% is awarded. If the organization does not have a fire department and has at least one JOHSC, 100% is awarded.

During observational tours, look for committee members' names posted on bulletin boards or made available to workers in some other way.

If they are communicated, award 100% in each department that safety committee names are posted, otherwise award 0%

	D	I	O
% Achieved	100%	-	100%
Points Awarded	6	-	3

Score: 9/9

#### Findings / Notes

##### Observation Comments:

##### Posting of JOHSC members:

Share Vision - Internet website is provided on all computers for employees to access all OH&S program policies / procedures, online inspection forms, investigation forms, meeting forms, JOHSC meeting minutes, etc. All employees have computer access.

Safety Bulletin Boards - include posting of the latest JOHSC meeting minutes and JOHSC members and Rules of procedures.

Access / posting of the JOHSC membership was confirmed for the following departments:

##### 1. Administration:

Head Office - confirmed.

Actions / Employment services - confirmed.

100%

##### 2. Programs / Residences:

Jingle Pot home - confirmed.

Kennedy home - confirmed.

Turner Connection home - confirmed.

100%

##### Documentation Comments:

##### Health and Safety Committee (JOHSC):



## Element 8. Joint Health and Safety Committee [70]

Note: while there is no single workplace with 20 or more employees which requires a JOHSC, NACL has organized and maintained a safety committee with representatives from all workplaces and followed the JOHSC requirements as set out by WSBC.

- employer representatives = 2
- employee representatives = 2
- employee representation equals / exceeds employer representation, confirmed.
- JOHSC has been in place for more than year.

100%

### 8.2 Function [8]

#### Question 8.2

Is the function of the Joint H&S Committee clearly defined in the Health and Safety Management System? (Documentation: corporate; Observation: all departments) (0-8 points)

#### Guidelines / References

Review safety management system documentation, the function may be listed there or in a Terms of Reference document. If the function is clearly defined, award 100%. If not, award 0.

During observational tours, look for posted communication regarding the Joint OH&S Committee function, terms of reference, etc. If there is evidence of communication regarding the safety committee purpose, terms of reference, etc., award 100% in that department. If not, award 0%.

	D	I	O
<b>% Achieved</b>	100%	-	100%
<b>Points Awarded</b>	4	-	4

**Score:** 8 / 8

#### Findings / Notes

##### Observation Comments:

##### Posting of JOHSC ToR:

Rules of Procedure (JOHSC),

- includes purpose, policy, duties and functions, meetings, quorum, minutes, membership, etc.

Share Vision - Internet website is provided on all computers for employees to access all OH&S program policies / procedures, online inspection forms, investigation forms, meeting forms, JOHSC meeting minutes, etc. All employees have computer access.

Safety Bulletin Boards - include posting of the "Rules of Procedure" (ToR).

Access / posting of the Rules of Procedure was confirmed for the following departments:

##### 1. Administration:

Head Office - confirmed.

Actions / Employment services - confirmed.

100%

##### 2. Programs / Residences:

Jingle Pot home - confirmed.

Kennedy home - confirmed.

Turner Connection home - confirmed.

100%



## Element 8. Joint Health and Safety Committee [70]

Documentation Comments:

Function of the JOHSC:

NACL Joint Occupational Health and Safety Committee, Rule of Procedure, October 2017:

- duties and functions include identify situations and hazards that may be unhealthy for unsafe for workers, deal with complaints form workers, consult with workers on safety issues, make recommendations to the employer, participate in investigations and inspections, etc.

100%

### 8.3 Involvement [8]

#### Question 8.3

Are members of the Joint H&S Committee actively involved in health and safety program activities? (documentation: corporate; interviews: all departments) (0-8 points)

#### Guidelines / References

Review minutes of the Joint OH&S Committee meetings to see if the Committee is actively included in safety activities as noted in the Terms of Reference for that Committee.

If the minutes indicate active involvement, award 100%. If not, award 0.

Interview Safety Committee members to determine if they are actively involved in program activities as outlined in the Terms of Reference for that Committee.

% Achieved  
Points Awarded

	D	I	O
% Achieved	100%	33%	-
Points Awarded	4	1	-

Score: 5/8

#### Findings / Notes

Documentation Comments:

The JOHSC meeting minutes demonstrate an active role by members in program development and safety program improvements as evidenced by:

- Regular meeting attendance:
  - August 2019, JOHSC meeting minutes.
  - September 2019, JOHSC meeting minutes.
  - October 2019, JOHSC meeting minutes.
  - November 2019, JOHSC meeting minutes.
  - reviewed for attendance and confirmed.
- Workplace inspection reports (include JOHSC member participation):
  - inspection are conducted by JOHSC members on a monthly basis as confirmed by this audit. (question 5.1).
- Accident investigations / reviews (JOHSC participation):
  - involvement in all investigations was confirmed (participation and/or review). (question 6.6).
- Hazard identification:
  - JOHSC minutes document the review of hazards in the workplace as confirmed in question 3.3.
- Review of SWP's:
  - JOHSC minutes document the review of safe work procedures as confirmed in question 2.7.
- JOHSC Related Training:
  - see question 8.7, confirmed.



## Element 8. Joint Health and Safety Committee [70]

7. TEAMS training (creating physiologically healthy and safe workplaces):  
- JOHSC instrumental in assisting in the development of this program.

7/7= 100%

For Consideration:

1. BCMSA Annual Conference
2. Pacific Western Safety conference
3. NAOSH

Interview Comments:

Positive responses from managers included presentation of the health and safety manual to employees, ensure training of employees, advising on the community social services project,

Positive responses from supervisors included

Positive responses from workers included

Negative responses indicate a lack of involvement in safety program activities.

### Suggestions For Improvement

Recommend member of the JOHSC are actively involved in health and safety program activities. Ensuring JOHSC members are involved in participating / conducting inspections, participating / conducting in investigations, produce safety topics for employee meetings, organize safety events (NAOSH), organize a safety expo, promoting safety in their workplaces, etc. would assist in achieving this recommendation.

Suggest the JOHSC ToR is reviewed annually by each JOHSC as a refresher for all members.

### 8.4 Improvement [9]

#### Question 8.4

If the Joint H&S Committee has made recommendations for improvement, have they been acted upon? (documentation: corporate; interviews: all departments) (0-9 points)

#### Guidelines / References

Recommendations may have come directly from the Committee, or the Committee may have adopted recommendations from another source such as the Safety Advisor/Manager. If the Committee makes a formal recommendation, it must receive a written response from Management. If there is documented evidence that the JOHSC has made recommendations (formal or informal) and they have been acted upon, award 100%.

If they have made recommendations that haven't been acted upon, award 50%. If they haven't made any recommendations, award 0.

Interview Safety Committee members to determine if they either make recommendations or adopt recommendations from others. This may include BCMSA, managers, etc.

	D	I	O
% Achieved	100%	100%	-
Points Awarded	3	6	-

Score: 9/9

### Findings / Notes

Documentation Comments:

The JOHSC has made recommendations for improvement in the OH&S program and these recommendations are being acted upon as evidenced by:

JOHSC recommendations made to management for improvements:



## Element 8. Joint Health and Safety Committee [70]

The joint OH&S committee have made recommendations for improvements to the health and safety program and they have been accepted by management. Since managers sit as committee members, acceptance of recommendations by the committee are considered acceptance by management. Safety committee minutes provided evidence of documented written response/approval by management. There was no documented evidence that recommendations had not been acted upon by management.

There were no recommendations made to management outside of the JOHSC in the past 12 months.

1. Approval within the JOHSC (JOHSC meeting minutes reviewed):

- JOHSC meeting minutes - January, February, March, 2019 minutes reviewed and confirmed.
- corrective actions are being tracked and completed as required.

100%

### Interview Comments:

Positive responses from managers included yes they are almost always approved in the JOHSC, documented in our minutes,

Positive responses from supervisors included all recommendations made are approved by management

Positive responses from workers included all recommendations made are approved by management

## 8.5 Minutes [7]

### Question 8.5

Are the last three safety committee meeting minutes posted or made readily available to all employees? (all departments) (7 points)

### Guidelines / References

Minutes may be posted on bulletin boards, on the organization's internal website, or other means. If they are posted and readily available, award 100%, in each department they are observed. If not, awarded 0%.

% Achieved  
Points Awarded

D	I	O
-	-	100%
-	-	7

Score: 7/7

### Findings / Notes

#### Observation Comments:

Posting of JOHSC meeting minutes (last three months):

Share Vision - Internet website is provided on all computers for employees to access all OH&S program policies / procedures, online inspection forms, investigation forms, meeting forms, JOHSC meeting minutes (several years), etc. All employees have computer access.

OH&S Binders - maintained at all work sites, includes JOHSC meeting minutes, rules of procedures (ToR) and JOHSC members for the past year.

Safety Bulletin Boards - include posting of the latest JOHSC meeting minutes.

Access / posting of the JOHSC meeting minutes was confirmed for the following departments:

1. Administration:

Head Office - confirmed.

Actions / Employment services - confirmed.

100%



## Element 8. Joint Health and Safety Committee [70]

2. Programs / Residences:  
Jingle Pot home - confirmed.  
Kennedy home - confirmed.  
Turner Connection home - confirmed.

100%

### 8.6 Duties and Functions [7]

#### Question 8.6

#### Guidelines / References

Are committee members familiar with their duties and functions? (all departments) (0-7 points)

Interview Safety Committee members, who should be able to describe their responsibilities as listed in their Terms of Reference or Program document.

	D	I	O
<b>% Achieved</b>	-	67%	-
<b>Points Awarded</b>	-	5	-

**Score:** 5/7

#### Findings / Notes

Interview Comments:

Positive responses from managers included attend meetings, review safety information, review incidents, make recommendations, conduct inspections, forward safety concerns from staff,

Positive responses from supervisors included

Positive responses from workers included attend the meetings, identify hazards, deal with complaints, consult with workers on safety, make recommendations, ensure compliance with regulations, promote education of safety, conduct investigation, conduct inspections,

Negative responses indicated a lack of awareness of their JOHSC duties and functions.

#### Suggestions For Improvement

Recommend JOHSC members are familiar with their duties and functions. Reviewing the terms of reference (which includes duties and functions) with JOHSC members at JOHSC meetings on a regular basis (annually, semi-annually, ?) would assist in achieving this recommendation.

Recommend all JOHSC members receive regular training in how to carry out their duties. Establishing minimum annual required training (inspection training, investigation training, surge learning, etc.) for all JOHSC members would assist in achieving this recommendation.

Suggest JOHSC training is tracked in a matrix to ensure minimum annual training requirements are being met.

Suggest training is related to JOHSC duties and functions as a minimum (inspections, investigations, duties and functions, etc.).



## Element 8. Joint Health and Safety Committee [70]

### 8.7 Training [8]

#### Question 8.7

Have committee members been offered and/or received any training in how to carry out their duties, within the past year? (Documentation: corporate. Interviews: all departments) (0-8 points)

#### Guidelines / References

Committee members should be knowledgeable in the committee responsibilities they carry out. Review training records to see how many members have been offered and/or received any safety training in courses which would apply to their role on the safety committee

Points are awarded based on the percent of positive findings.

Interview Safety Committee members to determine if they have been offered and/or received training in how to carry out their responsibilities

	<b>D</b>	<b>I</b>	<b>O</b>
<b>% Achieved</b>	0%	100%	-
<b>Points Awarded</b>	0	4	-

**Score:** 4 / 8

#### Findings / Notes

##### Documentation Comments:

##### JOHSC Training:

##### Training offered:

- documentation not confirmed.

##### Training received:

- documentation not confirmed.

0/2= 0%

##### Interview Comments:

Positive responses from managers included I was offered training in the past 12 months but it got cancelled,

Positive responses from workers included I was offered training in the past 12 months but it got cancelled,

#### Suggestions For Improvement

Recommend all JOHSC members receive regular training in how to carry out their duties. Establishing minimum annual required training (inspection training, investigation training, surge learning, etc.) for all JOHSC members would assist in achieving this recommendation.

Suggest JOHSC training is tracked in a matrix to ensure minimum annual training requirements are being met.

Suggest training is related to JOHSC duties and functions as a minimum (inspections, investigations, duties and functions, etc.).



## Element 8. Joint Health and Safety Committee [70]

### 8.8 Incident investigation [10]

#### Question 8.8

Are committee members performing or reviewing incident/accident investigations and workplace inspections? (documentation: corporate; interviews: all departments) (0-10 points)

#### Guidelines / References

Committee members should be conducting or reviewing workplace inspections, and should be conducting or reviewing incident and accident investigations. Review documentation.

If members are fulfilling these responsibilities, award 100%. Deduct 50% for whichever aspect they are not fulfilling.

Interview Safety Committee members to determine if they have conducted or reviewed investigations and workplace inspections.

	D	I	O
% Achieved	100%	100%	-
Points Awarded	3	7	-

Score: 10/10

#### Findings / Notes

##### Documentation Comments:

##### Investigations / Inspections involving JOHSC members:

##### 1. Inspections involving JOHSC members:

- as per question 5.1, inspection form signatures and JOHSC meeting minutes, all monthly workplace inspections are conducted by JOHSC members.

##### 2. Investigations involving JOHSC members:

- as per question 6.6 and investigation forms signatures and JOHSC meeting minutes, JOHSC members are performing and reviewing investigations.

2/2= 100%

##### Interview Comments:

Positive responses from managers included I am participating in investigation and inspections for our sites,

Positive responses from workers included I am participating in investigation and inspections for our sites,

### 8.9 Resources [4]

#### Question 8.9

Are adequate resources provided to the Safety Committee for them to adequately fulfill their responsibilities? (all departments) (0-4 points)

#### Guidelines / References

Resources include time to perform their tasks, as well as resources such as copies of the OH&S Regulation, Workers Compensation Act, safety publications, etc.

Interview safety committee members to determine if they believe they have sufficient resources.

	D	I	O
% Achieved	-	100%	-
Points Awarded	-	4	-

Score: 4/4

#### Findings / Notes

##### Interview Comments:

Positive responses from managers included I think so, we cover it all,

Positive responses from workers included we get everything we need right away, we go a good job, I think we have all we



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## Element 8. Joint Health and Safety Committee [70]

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need.

### Element: 8. Joint Health and Safety Committee [70]

#### Scoring Summary

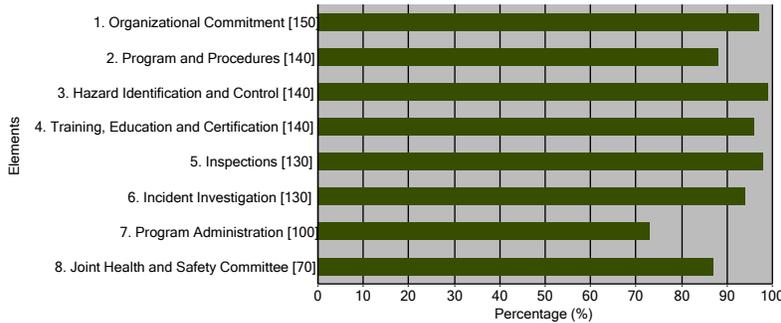
Total Points Awarded:	61
Total Points Available:	70
Overall % Awarded:	87 %



## Certificate of Recognition (COR) Scoring Summary Summary

Element	Total Points	Not Applicable	Points Available	Points Awarded	Final Score %
1. Organizational Commitment [150]	150	0	150	146	97
2. Program and Procedures [140]	140	0	140	123	88
3. Hazard Identification and Control [140]	140	14	126	125	99
4. Training, Education and Certification [140]	140	0	140	135	96
5. Inspections [130]	130	0	130	128	98
6. Incident Investigation [130]	130	0	130	122	94
7. Program Administration [100]	100	5	95	69	73
8. Joint Health and Safety Committee [70]	70	0	70	61	87
<b>Total:</b>	<b>1000</b>	<b>19</b>	<b>981</b>	<b>909</b>	<b>93 %</b>

Audit Scoring Graph





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## Pre Audit Meeting Notes

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Location: Main Office  
Date: January 27, 2020  
Time: 8:30 - 9:00 am  
Attendees: See attached Attendance Record.

### Agenda and Meeting Notes:

Purpose - to inform the company of what the auditor will be examining, to answer client questions and to reduce overall apprehension about the audit by explaining the audit process. This is an audit of the health and safety management system, not an inspection.

Audit Objectives - to confirm the establishment and ongoing implementation of the certification standards established by the B.C. Municipal Safety Association and your health and safety program by means of an auditing process involving document review, personal interviews and observations of work sites and activities.

Audit Scope - audit is confined to the health and safety program activities of your organization and your employees.

Audit Schedule - approximately 5 days in length.

### Audit Process:

1. When an organization registers in the BCMSA COR Audit Program, they must complete and submit a COR Certification audit in year 0.
2. A Maintenance audit is conducted annually in year 1 and 2 and a Re-Qualification audit is conducted every 3 years in year 3. Maintenance audits conducted by an external auditor are considered recertification audits.
3. There are 8 elements in your OH&S program that are being audited. The organization must achieve a minimum score of 50% in each element and a minimum score of 80% overall.

Audit Methodology: The audit was conducted using the following verification processes:

- 1 - Document Review - all relevant documents are reviewed (see list) to identify standards (objective, task, scope, responsibility, frequency and process) and records (proof of compliance with standards, names, events, places, checklists, etc.).
- 2 - Interviews - are conducted one-on-one and are considered confidential.
- 3 - Observations - are made of the general and active work sites, work activities and general housekeeping to see if they are consistent with the findings of the documentation and interview stages.
- 4 - Recommendations - are provided when an audit score of 100% has not been achieved for an audit standard. Recommendations are intended to assist in achieving a full score (100%) for each audit standard.
- 5 - Suggestions - are provided where opportunities for improvement may exist throughout the audit regardless of the audit score.

Audit Confidentiality - all discussions and interviews are kept confidential. Once I create the audit report, it is only shared between the certifying partner and the organization.

### Questions:

Post-Audit Meeting date and time: January 31, 2020.

Close of Meeting.



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## Organizational Chart

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[See attachment.](#)



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## Facility Tour Notes

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[See attachment.](#)



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## Post Audit Meeting Notes

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Location: Main Office  
Date: January 30, 2020  
Time: 1:30 - 2:00 pm  
Attendees: See attached Attendance Record.

I want to thank everyone for taking the time to meet with me and accommodate my audit requirements in the midst of their busy schedules. The positive involvement and support for this audit was much appreciated.

A good safety program requires commitment and demonstration of commitment from all level of the organization, including senior management. And it starts with the signed health and safety policy. The policy is the pinnacle document of your OH&S program and your first step in demonstrating your commitment to your safety program.

Verification of this demonstrated commitment is achieved by means of the COR Audit process. This process is not an inspection but rather an assessment of your health and safety program and systems.

This COR audit is a constructive and relatively internal process. It strives for continual improvement in your OH&S program. We want to identifies any deficiencies, develop corrective action plans and implemented to correct that deficiency before it results in an incident. We don't want to identify deficiencies through accidents or injuries or WSBC inspections.

### Audit Methodology:

The audit was conducted using the following verification processes:

1. - Document Review - all relevant documents are reviewed to identify standards (objective, task, scope, responsibility, frequency and process) and records (proof of compliance with standards, names, events, places, checklists, etc.).
2. - Observations - are made of general and active work sites, work activities, postings and general housekeeping to see if they are consistent with the findings of the documentation and interview processes.
3. - Interviews - are conducted one-on-one with employees and in a confidential manner.
4. - Recommendations - are provided when an audit score of 100% has not been achieved for each audit standard. Recommendations are intended to assist in achieving a full score (100%) for each audit standard.
5. - Suggestions - are provided where opportunities for improvement may exist throughout the audit regardless of the audit score.

### Strengths found by this Audit (sample only):

1. Documentation control:
  - effective and user friendly online database program (Share Vision).
2. Emergency response procedures:
  - consistent documentation found in all site visited.
3. First aid:
  - all assessments were completed and adequate first aid supplies / attendants on site (1 first aid kit missing).
4. Risk assessments:
  - be conducted at workplaces and work practices in a consistent manner.
5. Orientations:
  - good orientation program and orientation being conducted at the start of work.



## Certificate of Recognition (COR)

### 6. Inspections:

- good adherence to the inspection schedule.

### Areas for Improvement found by this Audit (sample only):

#### 1. Meetings:

- ensure all meetings are held on a regular basis and documented.

#### 2. Preventative Maintenance:

- ensure the program includes an inventory of equipment, a schedule for preventative maintenance and documentation of completed preventative maintenance.
- ensure the program is used to manage mobile equipment and equipment (buildings).

#### 3. Contractor Program:

- suggest a contractor coordination program is developed, documented and implemented to clearly establish the Prime Contractor in multiple employer work areas and clearly establish the responsibilities of the Owner and the Prime Contractor.

#### 4. Training:

- ensure all employees receive regular training including training in those activities listed in question 4.4.
- ensure JOHSC members receive annual training in those duties related to the JOHSC members (inspections, investigation, hazard identification, JOHSC due diligence, etc.)

#### 5. Investigations:

- ensure each investigation is conducted by an employer representative with investigation training and an employee with investigation training.

#### 6. Statistics:

#### 7. Goals / Objectives:

- suggest outcomes and means to achieve the outcomes are well communicated to all employees (posted on bulletin boards, front page of share vision, etc.).
- suggest outcomes and means to achieve the outcomes are included in a corrective action log to measure their achievements.

### Next Steps:

1. Completion of the Audit Report by this auditor (approx. 1 week from end of onsite portion of audit).
2. Submission of Audit Report by Auditor to the BCMSA for a quality review (1 - 2 week process).
3. Receipt of the final audit report by the auditor from BCMSA.
4. Auditor will hold a final meeting with senior management to deliver final audit report.
5. Auditee develops an action plan based on the audit findings and recommendations.
6. Auditee submits action plan and signed copy of the audit summary score sheet to BCMSA within 30 days.
7. BCMSA submits passing score information to WorkSafeBC for processing of premium rebate.

Close.



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## Conclusion

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The Nanaimo Association for Community Living has successfully qualified for COR Re-Certification for their:

1. Occupational Health and Safety Program - 93% (minimum of 80% required).

The Nanaimo Association for Community Living has achieved the COR audit requirements for Elements 1 - 8 of the COR Audit and qualifies for the Certificate of Recognition Certification issued by the BC Municipal Safety Association.

Implementation of the recommendations and suggestions for improvement identified in this report will assist the organization in effecting continual improvement for these elements.

Please contact this auditor if you require more information or have any questions regarding the contents of this audit report.

Respectfully yours;  
David F. Jewesson, External Auditor,

Jewesson Consulting Ltd.